ABSTRACT

Title of dissertation: MULTICULTURAL EVENTS IN SUPERVISION AND

COUNSELING AND COUNSELING TRAINEE

MULTICULTURAL COMPETENCE

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The current study qualitatively examined the moments when multicultural issues were discussed explicitly in two supervision dyads and two counseling dyads, and explored these events in relation to trainees' multicultural competence. Therapy outcome, satisfaction with counseling and supervision, and other variables were explored. There were few multicultural events in all the dyads except the second supervisory dyad. Multicultural events in supervision were generally brief and shallow, had no noticeable effect on the session, and more frequently involved discussion of culture, as opposed to gender, race/ethnicity, or other multicultural issues. Generally, multicultural events in counseling were moderately deep and lengthy, had a positive effect on the session, and most often involved discussion of gender as a multicultural issue. The client's interpersonal relationships were a consistent theme among the multicultural events. Limitations of this study as well as implications for practice and research are discussed.

Multicultural Events in Supervision and Counseling and Trainee Multicultural

Competence

by

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Chapter 1. Introduction

Supervision is one of the most common activities among counseling psychologists and professional psychologists in general (Goodyear & Guzzardo, 2000), perhaps because supervision serves as a bridge between the knowledge of the classroom (theory) and direct service practice for counseling trainees (Bernard & Goodyear, 1998). In other words, it is generally recognized that counseling skills can be taught to students, with supervision being thought to constitute the next step to helping therapists-in-training generalize their knowledge of counseling skills to the "real world" practice of counseling (Goodyear & Guzzardo, 2000). Most counseling psychologists would agree that students need supervision to acquire the necessary practice and conceptualization skills (Bernard & Goodyear, 1998).

Another important issue in the counseling and psychology literature historically, but especially in recent times, is the issue of multiculturalism and multicultural competence. The demographic composition of the United States is rapidly changing and it is estimated that by the year 2050 racial/ethnic minorities will constitute over 50% of the population (Hansen et al., 2000; Tummala-Narra, 2004), which will result in the increased need for mental health services for diverse populations (Tummala-Narra, 2004). However, past research has characterized mental health services for racial minorities as inadequate and shown high premature termination rates for racial minorities (Tummala-Narra, 2004). These are just a few of the reasons that multiculturalism and multicultural competence are seen as important, especially because the underlying assumption is that multicultural competence has some relation to counseling outcome for racial minority clients.

In the last 20 years, the literature on cross-cultural issues in counseling psychology has increased drastically (Leong & Wagner, 1994), as has literature on other "multicultural" dimensions besides race and ethnicity (e.g., gender, etc.). Counseling and psychotherapy organizations have even codified their commitment to multiculturalism in practice guidelines (APA, 2003). Yet, there are still many questions about the ways in which therapists, particularly therapists-in-training acquire multicultural competence.

Supervision would appear to be a primary mechanism for development of multicultural competence given its role as a primary mechanism for overall counselor development. Yet, a consistent finding in the literature is that cultural issues are infrequently discussed in supervision, even when there is a racial/cultural difference between supervisor and supervisee (Burkard et al., 2006; Gatmon et al., 2001; Leong & Wagner, 1994). Also, much of the attention in the literature to the combination of supervision and multicultural issues is theoretical, with a relative absence of empirical research on racial-ethnic, gender, sexual orientation or other multicultural variables in supervision (Gatmon et al., 2001; Goodyear & Guzzardo, 2000). What little of the literature that is empirical in nature tends to involve cross-cultural supervision relationships (supervisor and trainee from different racial groups) (Leong & Wagner, 1994), which is somewhat limiting when considering that the vast majority of supervisory dyads involve two Caucasian individuals (Constantine et al., 2005). There is a need for more attention regarding supervision and multicultural issues, especially the role of supervision in trainees' development of multicultural competence.

Supervisees have reported developing higher multicultural competence when multicultural issues were addressed, as opposed to when they were not addressed (Burkard et al., 2006). Ladany et al. (1997) found that supervisor instructions to focus on multicultural issues was significantly related to supervisees' multicultural case conceptualization ability. Toporek et al. (2004) found that multicultural incidents in supervision influence the supervision process and the multicultural competence of both supervisors and supervisees.

Prior research on cross-cultural supervision, multicultural issues in supervision, and multicultural competence has largely relied on survey methods, self-report, and retrospective accounts (Burkard et al., 2006; Pope-Davis et al., 2001b). Even when these studies focused on more specific events or used qualitative methods, such as Toporek et al.'s (2004) examination of critical incidents in multicultural supervision and Burkard et al. (2006) examination of cultural responsiveness and unresponsiveness in cross-cultural supervision, they were still retrospective in nature and relied on participants' reports. As a result it is still unclear how graduate trainees manifest competence in their clinical work (Neufeldt et al., 2006).

The current study utilized a two-subject (case study) design. Throughout history, single-subject designs have played a crucial role in psychotherapy research (Heppner et al., 1999). Scholars like Gelso (1979) have suggested that considering additional research methods, such as the single-case design, is important because it provides us with different ways of observing reality. The purpose of the current study was to examine the moments in supervision and counseling when multicultural issues are discussed explicitly, and subsequently, attempt to explore these events in relation

to the development of multicultural competence in counseling trainees. Additionally, therapy outcome, satisfaction with counseling and supervision, and other variables were explored. Another important aspect of this study was to look at multicultural events in supervision and counseling, multicultural competence, and other variables with respect to both counseling and supervision trainees. Given that, at least anecdotally, many counseling trainees will have their first or even later supervision experiences with fellow students who are more advanced counselors-in-training, it seems important to examine the ways in which multicultural events play out when trainees in supervision oversee the clinical work of less experienced counselors-in-training.

Chapter 2. Review of the Literature

In this section, I first provide a brief general overview of supervision, including its importance, and discuss the relationship of supervision to counselor development and client outcome. Second, I give a general overview of multiculturalism and its importance in the mental health professions. Third, I discuss the literature related to multicultural competence. Fourth, I review literature linking or involving supervision and multiculturalism. Fifth, I provide an overview of single-subject research designs.   As part of this overview, I review and critique supervision studies that utilized a case study or single-subject methodology.

Overview of Supervision

Supervision has been defined as:

An intervention provided by a more senior member of a profession to a more junior member or members of that same profession. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s), monitoring the quality of professional services offered to the client(s) she, he, or they see(s), and serving as a gatekeeper of those who are to enter the particular profession (Bernard & Goodyear, 1998).

Supervision is one of the most common activities among not only counseling psychologists but among professional psychologists in general (Goodyear & Guzzardo, 2000). It is quite normative for psychotherapists to assume the role of supervisor at some point in their professional development (Goodyear & Guzzardo, 2000). Supervision functions as a self-regulation process for the field(s) of psychology and psychotherapy, playing a critical role in maintaining the standards of the profession (Goodyear & Guzzardo, 2000). Indeed, despite some between discipline differences in its manifestation, supervision is essentially the same across the numerous mental health professions (Goodyear & Guzzardo, 2000). Supervision also serves as a bridge between the knowledge of the classroom (theory) and direct service practice (Bernard & Goodyear, 1998). There is little argument that in order for students to acquire the necessary practice and conceptualization skills supervision must accompany client contact experiences (Bernard & Goodyear, 1998).

Despite its importance and relatively long history, dating back to 19th century social work and the beginning of the 20th century with Freud (Goodyear & Guzzardo, 2000), research into the process and outcome of supervision is only a few decades old (Goodyear & Guzzardo, 2000). That said, the wealth of research that has been conducted in a short period of time suggests a high interest in the area of psychotherapy supervision (Goodyear & Guzzardo, 2000). Counseling psychology, especially, has been central in the growth of the supervision literature. Counseling psychology's interest in supervision is best illustrated by the importance the field places on preparing supervisors, with counseling psychology programs significantly

more likely than clinical or school psychology programs to offer a course in supervision (Goodyear & Guzzardo, 2000).

Counselor development

Supervision has long been recognized as a primary mechanism for counselor development (Holloway, 1987; Pierce & Schauble, 1970). It is generally recognized that counseling skills can be taught to students, with supervision being thought to constitute the next step after basic skills training to helping therapists-in-training generalize their knowledge of counseling skills to the "real world" practice of counseling (Goodyear & Guzzardo, 2000). Most supervision research has focused on the impact of supervision on trainee attitudes, skills, and behaviors (Freitas, 2002; Goodyear & Guzzardo, 2000). Despite the wealth of attention paid to counselor development, past research efforts have yet to uncover the components of effective supervision, and more specifically, the nature of interactions between the supervisor and supervisee that eventually enhance counselor competence (Bernard & Goodyear, 1998). Reviews of this literature have produced disheartening results, with numerous methodological flaws resulting in a largely uninterpretable literature, making it impossible to draw decisive conclusions about supervision's role in fostering counselor development (Goodyear & Guzzardo, 2000).

Supervision and Client Outcome

Additionally, there is some controversy in the literature about what the "ultimate goal" of supervision even is. Some say that the ultimate goal of supervision is counselor competence and development. Others argue that the real acid test of supervision is client change and outcome of therapy (Goodyear & Guzzardo, 2000).

While there are numerous criteria, according to some, that could reasonably be used to judge the first assertion, the research into supervision's impact on client outcome remains unclear and scant (Goodyear & Guzzardo, 2000). Part of the reason for this lack of empirical knowledge (or unclear findings) in the area of client outcome related to supervision is the difficulty inherent in studying the topic. A prime example of this difficulty are the ethical considerations related to having a "no supervision" condition in research studies (in other words, the inclusion of such a condition would be highly unethical) (Goodyear & Guzzardo, 2000). Despite difficulties in studying this topic, Freitas (2002), after conducting an exhaustive examination of the literature, still found 10 studies to review where client outcome was linked to supervision. However, it is very difficult to draw conclusive ideas from this review, given some of the methodological issues of the studies, and lack of uniformity in research methods and constructs of interest across the studies (Freitas, 2002).

Despite this paucity of supervision research related to client outcome and the difficulty in conducting such research, other types of research and literature related to supervision do exist. Goodyear and Guzzardo (2000) highlighted some of the important aspects of the supervisory relationship that have been written on and investigated, namely parallel process, working alliance, and social influence. Goodyear and Guzzardo (2000) also acknowledged that much of the supervision literature has been more concerned with supervisee acquisition of skill and experience than client outcome related to supervision. Despite the greater attention paid to supervisee development (as facilitated by supervision), because of flaws in

methodology and other considerations very little solid information is known about this area (Goodyear & Guzzardo, 2000).

Evaluation is one aspect of supervision where there does seem to be solid empirical information. Evaluation is seen as hugely important to the process of supervision and the main feature that distinguishes supervision from psychotherapy. In other words, the element of an instructor type holding evaluative power over a student, which could affect future supervision, academic standing, and employment, is present in supervision, while this type of evaluative power is generally absent from therapy. However, there seems to be error in evaluating supervisees due to poor and mostly qualitative measurement.

> The criteria for evaluating students' performances tend to be subjective and ambiguous, in large part because the skills being evaluated are highly complex, intensely personal, and difficult to measure. Students know that their psychological health, interpersonal skills, and therapeutic competence are being judged against unclear standards…. Supervisors are thus not only admired teachers but feared judges who have real power (Doehrman, 1976, pp. 10-11).

There is also evidence that supervisors inflate evaluations due to personal like (or dislike) for supervisees, evaluation has been linked to ruptures in working alliance, and shown or theorized to have effects on other aspects of the supervision process (Goodyear & Guzzardo, 2000). For example, Ladany et al. (1996) examined supervisee disclosure in supervision. These researchers theorized that due to the evaluative component and involuntary nature of supervision supervisees would

withhold information to protect themselves from a negative evaluation and gain some sense of control in the supervision relationship. The researchers found that negative reactions to the supervisor were the most frequent type of nondisclosure. Perceived unimportance, information characterized as too personal, negative feelings, and a poor alliance were the most frequent reasons given for nondisclosures. Overall, nondisclosing for supervisees was related to impression management. In other words, it is highly suggested that the evaluation component of supervision leads supervisees to stifle themselves in some instances (expression of negative feelings toward supervisor, etc.), most likely out of fear of receiving a poor evaluation (Ladany et al., 1996). This is potentially important to the present study due to the politically (socially, etc.) sensitive nature of multiculturalism and diversity.

<div align="center">The Importance of Multiculturalism</div>

The United States of America has and continues to become more and more linguistically, ethnically, and culturally diverse over time, which has had a significant impact on the enterprise of counseling and psychotherapy (Holcomb-McCoy & Myers, 1999). By the year 2050, racial and ethnic minorities will become a numerical majority in the United States (Hansen et al., 2000). Nearly 75% of those entering the labor force are women and/or racial minorities, and when considering a more broad definition of diversity (including sexual orientation, socioeconomic status, etc.), at least 50% of all clients will identify with one or more disenfranchised groups in the near future (Hansen et al., 2000).

Multicultural counseling has come to be considered by some to be the "4th Force" in counseling and psychotherapy (Diaz-Lazaro, 2001). Numerous authors and

professionals have argued that traditional psychology approaches and techniques may be inadequate without proper consideration of multicultural issues (Hansen et al., 2000). For example, racial minorities tend to underutilize counseling services and have high rates of premature termination, most likely because mental health services are biased or perceived as having a lack of understanding for the life experiences of racial minorities (Tummala-Narra, 2004). Many believe the social, economic, and political systems of the U.S. are inadequate and unprepared to deal with the challenges posed by racial and ethnic minority groups and communities, and traditional psychological concepts and theories developed largely in a European-American context may be limited in their applicability for racially and culturally diverse groups (Sue et al., 1999). Therefore, many professionals and scholars have advocated for training of multiculturally competent counselors and more attention to multicultural issues, which seems to be taking place to some degree. Counseling and psychology graduate programs and internship sites have increasingly included multicultural issues in course work, practica, and research (Diaz-Lazaro, 2001). Pope-Davis et al. (2001) reported previous scholars had found that 12% of articles in the Journal of Counseling Psychology (JCP) between 1988 and 1997 were focused on racial or ethnic minority variables, an increase from the 6% found for the journal between 1976 and 1986.

One constant difficulty in the whole area of multiculturalism is terminology and definition. "It would be easier to navigate through the sociocultural complexities of the world if people fell into neatly defined categories. Unfortunately, cultures are subjective, have fuzzy boundaries, change constantly, and are highly heterogeneous"

(Stuart, 2004, p. 4). Does the term multiculturalism refer to racial and ethnic minority issues only, or to the broader range of diverse groups and areas, including sexual orientation, socioeconomic status, disability, and a host of other difference groupings? What does "culture" mean? What is the difference between race and ethnicity? This difficulty in terminology is illustrated is by use of the term Asian-American. This term implies commonalities among the few billions of people on the Asian continent in countries like China, Japan, India, and Afghanistan, and thus those of Asian decent who come to the United States. However, these Asian-Americans have pure or mixed backgrounds, are recent immigrants or have lived in the U.S. for generations, live in large ethnic communities (where tradition and language are maintained) or are a diffused minority group among a larger community, and have different religious beliefs, which suggests a great deal of within group difference (Stuart, 2004).

Probably the most important debate has been over the definition of the term multiculturalism. In the literature, the term multiculturalism is most often associated with research and conceptions related to racial minorities (Diaz-Lazaro, 2001; Hansen et al., 2000; Tummala-Narra, 2004). Indeed, over the 15-year history of the Journal of Multicultural Counseling and Development, about 70% of articles targeted racial minorities, whereas only 3% of articles were focused on sexual orientation, religion, and disability combined. Gender and age were also addressed at minimal levels (Pope-Davis et al., 2001a).

Some multicultural experts have expressed fear that a broad definition of multiculturalism beyond race and ethnicity dilutes the term to the point of uselessness

and confusion. A broad definition can divert attention away from racism and other specific issues, and allow people to avoid dealing with their own biases and stereotypes, as evidenced by the common occurrence of people changing the discussion from race to socioeconomic status because of discomfort with the topic of race (Sue et al., 1999). There are also tensions among "multicultural" groups which makes inclusion of "all" difficult, such as the fact that many racial or ethnic minority group members may hold negative views of sexual minorities because of religious beliefs and values (Sue et al., 1999).

Despite clear issues with the broadening of the term multiculturalism, there is still a compelling argument for utilizing the broad definition. Sue et al. (1999) state, "… the term *multiculturalism* must include the broad range of significant differences (race, gender, sexual orientation, ability and disability, religion, class, etc.) that so often hinder communication and understanding among people. Otherwise, groups feel excluded from the multicultural debate, find themselves in opposition to one another, and engage in a 'who's more oppressed' game" (p. 1063). Ultimately, "Multiculturalism is not only about understanding different perspectives and worldviews but also about social justice. As such it is not value neutral: Multiculturalism stands against beliefs and behaviors that oppress other groups and deny them equal access and opportunity" (Sue et al., 1999, p. 1064).

Multicultural Competence

Overview

Multicultural competence has long been characterized as being composed of the components of knowledge (of the worldviews of different clients), awareness (of

one's own worldviews and how one is a product of cultural conditioning), and skills (necessary to work with racially/culturally different clients) (Constantine, 2002; Holcomb-McCoy & Myers, 1999). Counselors who acquire competence in those three areas are presumed to possess the necessary characteristics and tools to effectively counsel racial and ethnic minority clients (Holcomb-McCoy & Myers, 1999). The APA, through its Ethics code and other sets of "Guidelines" has recommended and required that psychologists develop cultural (multicultural) competence (Hansen et al., 2000). Hansen et al. (2000) suggested 12 areas of multicultural competency for practice, including awareness of how one's own cultural heritage, gender, class, etc. shapes personal values and biases, and knowledge of the history and manifestations of oppression in the United States.

Developing multicultural competence

Various methods and models of multicultural training have been developed, some emphasizing the skill development of counseling trainees, some emphasizing actual experiences with racial minority clients, and others emphasizing a host of other aspects (Holcomb-McCoy & Myers, 1999). Regardless of the specific model, the primary mechanism for developing multicultural competence in counseling trainees is and has been the classroom (or other didactic medium). Multicultural counseling courses have been the most frequently added new courses among counselor preparation programs in previous years and 87% of APA accredited counseling psychology programs were found to offer at least one course on multicultural issues (Holcomb-McCoy & Myers, 1999). Multicultural courses have been found to relate to increased multicultural competence in students, at least in terms of self-reported

multicultural competence (Diaz-Lazaro, 2001). One of the more important aspects of these courses seems to be cross-cultural contact. Some studies have found that guest speakers from minority backgrounds were considered the most important component of the course by students (Diaz-Lazaro, 2001). Diaz-Lazaro (2001) had similar findings, with one-fourth of students indicating that the most important thing that happened in the multicultural course was cross-cultural contact (guest speakers, interaction with minority group members, etc.).

The incorporation of multiculturalism into educational systems has been a challenge though. Multicultural topics (race, sexual orientation, etc.) may evoke strong emotions like anger and defensiveness, instructors and students operate within academic and politeness protocols that leave them unprepared to facilitate difficult discussions involving strong emotions, instructors and supervisors may feel they lack expertise on the subject matter, the decision of which groups and how many to address is a difficult one, and inclusion of diversity involves using new paradigms that may challenge traditional Euro-American assumptions (Sue et al., 1999). Much of the curriculum of psychology is still inadequate in addressing areas of multiculturalism (e.g., racial minorities), which possesses the danger of causing culturally different students to feel oppressed and alienated (Sue et al., 1999).

Sue et al. (1999) identified four major approaches to incorporate multicultural content into the psychology classroom: (a) the separate course model (add a single course), (b) area of concentration model (adds core courses), (c) interdisciplinary model (taking courses in other disciplines like anthropology), and (d) integration model (infuse multicultural content into all courses and training experiences).

Numerous scholars and professionals have suggested the integration model is the most desirable model (Holcomb-McCoy, 1999). Even with an integration model, there is still some question as to whether training programs can produce multiculturally competent counselors. First, the faculty expected to deliver competency training often have little or no multicultural counseling training or clinical experience to make them a credible trainer. Second, programs often address cognitive and affective aspects relative to multiculturalism at the exclusion of behavioral type learning (Toporek, 2001). Learning must take place cognitively, behaviorally, and affectively for substantial change in multicultural competence to occur (Toporek, 2001). Third, multicultural competence is mostly focused on counselors in their professional roles and not on multiculturalism within counselor's personal lives or counselors as social change agents. Lastly, MC training tends to rely on one or two workshops or courses, reinforcing the idea that MC competence is static and finite (Toporek, 2001).

Empirical findings on multicultural competence

Clearly, there has been a call for increased attention to multicultural competence in the counseling professions. However, it is still not a very well operationalized construct and there is little agreement as to what constitutes multicultural competence (Constantine, 2002; Hansen et al., 2000). Despite this assertion, there is still a wealth of empirical findings relative to MC competence. One survey of counseling and clinical psychologists found that 70% had attended postdoctoral seminars on diversity issues. Alarmingly, this study found that over 50% of respondents felt extremely or very competent with only 3 of the 13 cultural

groups listed (European-American, women, and economically disadvantaged). Only 25% of respondents had taken a multicultural counseling graduate course, 50% said supervision of their therapy cases "never" or "infrequently" addressed diversity issues, and many respondents were serving substantial numbers of diverse clients but felt generally low in their level of MC competence (Hansen et al., 2000).

Diaz-Lazaro (2001) found that contact with culturally different individuals was related to greater (self-reported) multicultural competence. A sample of 15 (10 female, 5 male; 12 Caucasian, 3 racial minority) graduate students from a variety of counseling related disciplines (counseling psychology, school psychology, etc.) taking a multicultural counseling course were assessed in this study. Greater prior cross cultural life experience was related to higher scores on a self-report multicultural competence measure (Multicultural Awareness, Knowledge, and Skills Survey - MAKSS) at the start of the multicultural counseling course (therefore, higher multicultural competence). Multicultural counseling competence increased significantly for the overall sample between the start and end of the course. Analysis of students' weekly journal entries revealed that cross-cultural contact was a major component of the learning experience in this course. In response to the question, "What was the most important thing that happened in the class this week," twenty-seven percent (27%) of the 194 units of response dealt with cross-cultural contact. Much of this cross-cultural contact involved guest speakers in the class. There was also evidence among journal entries that interactions with cultural different group members aided students in changing with respect to multicultural competence over the life of the course, and lack of cross-cultural contact was indicated among some

students as being a concern in their ability to change with respect to multicultural competence (Diaz-Lazaro, 2001).

Holcomb-McCoy and Myers (1999) identified previous studies where gender, education level, and age were found to be related to MC competence but their own study failed to find a relationship between those variables and MC competence in practicing counselors. Three additional variables were included in that study (for a total of 6), with only ethnicity found to be significantly related to MC competence, meaning ethnic minority counselors had higher self-perceived MC competence (Holcomb-McCoy & Myers, 1999). The participants in the Holcomb-McCoy and Myers (1999) study perceived themselves as most competent on the awareness (e.g., "I am able to discuss how my culture has influenced the way I think"), skills (e.g., "I verbally communicate my acceptance of culturally different clients"), and definitions (e.g., "I can define prejudice) areas of competence, and as less competent on the knowledge (e.g., "I can discuss family therapy from a cultural/ethnic perspective") and racial identity (e.g., "I can discuss the counseling implications for at least two models of minority identity development") dimensions. However, those participants who had taken a MC counseling course had significantly greater self-perceived MC competence on the knowledge and racial identity dimensions assessed in the study (Holcomb-McCoy & Myers, 1999).

Constantine (2002) hypothesized that racial minority clients' perceived satisfaction with counseling would be related to their appraisals of their counselors' multicultural competence. One hundred twelve racial minority clients (52 African-American, 29 Latino, 25 Asian-American, 3 Native American, 3 biracial) at college

and university counseling centers, and 37 counselors (28 Caucasian, 3 African-American, 2 Asian-American, 2 Latino, 2 biracial) participated in this study. The Cross-Cultural Counseling Inventory – Revised (CCCI-R), a third party assessment of counselors' cross-cultural counseling competence, was modified slightly (e.g., change from "counselor demonstrates knowledge about client's culture" to "my counselor demonstrates knowledge of my culture") for administration with clients. The Attitudes Toward Seeking Professional Psychological Help Scale – Short Form (ATSPPHS-S), Counselor Rating Form – Short (CRF-S), used to assess counselors' general competence, and the Client Satisfaction Questionnaire – 8 (CSQ-8) were used in conjunction with the CCCI-R. Constantine (2002) found that for racial minority clients, attitudes toward counseling accounted for significant variance in counseling satisfaction ratings (better attitude = higher satisfaction), rating of counselor general competence accounted for significant variance in counseling satisfaction rating beyond attitudes toward counseling, and rating of MC competence accounted for significant variance in counseling satisfaction beyond counselor general competence. These findings suggest the usefulness of examining client perceptions of counselor multicultural competence, as opposed to only measuring self-reported or supervisor reported counselor multicultural competence.

Multiculturalism and Supervision

Much of the empirical work linking the concepts of multiculturalism and supervision has focused on cross-racial supervision (supervisor and supervisee of different race) (Duan & Roehlke, 2001; Hilton et al., 1995; Leong and Wagner, 1994; Toporek et al., 2004) or cross-cultural supervision (supervisor and supervisee differ

on some dimension such as gender, sexual orientation, etc.) (Toporek et al., 2004). There is virtually no empirical literature examining the specific role of supervision in fostering multicultural competence, though there is an abundance of theoretical writing (Ancis & Ladany, 2001; Constantine, 1997).

There are a number of studies that have dealt with cross-racial supervision. One study found that African-American students expected their supervisors to be less empathic, respectful, and congruent than did European-American students (Leong and Wagner, 1994). Another study surveyed racial minority supervisees about their perceptions of cross-racial supervision and found that among five factors, the factor of perceived supervisor liking (trainees felt their supervisors liked them) accounted for 70% of the variance in satisfaction with supervision. African-American, Latino, and Native American supervisees perceived lower levels of supervisor liking compared to Asian-American supervisees (Leong & Wagner, 1994). Hilton et al. (1995) examined the effects of supervisor's race and level of support on perceptions of supervision. There was a significant main effect for level of support but no main effect was found for race. High levels of support were related to more positive ratings of supervision effectiveness and the supervisory relationship. Again, race was not related to either ratings of supervision effectiveness or the supervisory relationship.

Duan and Roehlke (2001) examined cross-racial supervision dyads at university counseling centers. Of the 60 dyads surveyed, 43 involved a Caucasian supervisor and racial minority supervisee and 17 involved a racial minority supervisor and Caucasian supervisee. The researchers combined all supervisors into one group

and all supervisees into one group after no significant differences were found for race or sex's effect on perceptions of the supervisory relationship. Results indicated that supervisees were more sensitive to cultural/racial issues than supervisors, supervisors reported making more efforts to address cultural issues in supervision than supervisees perceived, and supervisees' comfort with self-disclosure and dyad members' perceived positive attitudes toward each other were related to satisfaction with supervision (Duan & Roehlke, 2001).

Other studies have found that for racial minority supervisees openness and support, culturally relevant supervision, and opportunities to work with multicultural activities were identified as positive critical incidents in supervision, while lack of cultural awareness by supervisors and supervisors who questioned the ability of supervisees were identified as negative critical incidents in supervision (Toporek et al., 2004). Among predoctoral psychology interns, discussions of cultural variables was said to occur infrequently in supervision, although those that had engaged in cultural discussions said such discussions contributed to personal growth, validation, and increased safety and trust (Toporek et al., 2004).

The empirical literature directly tying supervision to development of multicultural competence is sparse. Ladany, Brittan-Powell, & Pannu (1997) found that racial identity interaction predicted aspects of the supervisory alliance. Dyad partners sharing high racial identity statuses and attitudes (parallel-high) were more likely to agree on the goals and tasks of supervision. Progressive dyads (supervisor at higher racial identity status than supervisee) were next highest on agreement on the goals and tasks of supervision. The researchers speculate that supervisors at higher

racial identity levels are able to empathize with students at lower levels and exhibit sensitivity to the student's racial identity level, which allows communication of acceptance that fosters the supervisory alliance. Regressive dyads (supervisee at higher racial identity status than supervisor) predicted the weakest supervisory alliance. In this type of dyad, supervisees may want to bring racial issues in supervision, but supervisors are likely to disregard racial issues, thus leaving supervisees feeling less comfortable and trusting in supervision (Ladany, Brittan-Powell, & Pannu, 1997). Parallel-high and progressive dyads were better able to facilitate the development of supervisee multicultural competence than parallel-low (both supervisor and supervisee at low racial identity statuses) and regressive dyads. Racial minority supervisors were perceived as having more of an impact on supervisees' multicultural competence, both for racial minority supervisees and Caucasian supervisees, than their Caucasian counterparts. This finding may be due to the fact that racial minority supervisors act as a multicultural model for supervisees, wherein just interacting with the racial minority supervisor provides a multicultural experience, particularly for Caucasian supervisees. Also, racial minority supervisors may be perceived by supervisees as more understanding of the importance of racial and cultural issues in counseling and supervision, which may in subtle ways facilitate supervisee multicultural competence (Ladany, Brittan-Powell, & Pannu, 1997).

Another study that directly ties supervision to the development of multicultural competence is Ladany et al. (1997). This study found that for 116 supervisees (75 Caucasian, 41 racial minority) racial identity was significantly related to self-reported multicultural competence. In other words, higher racial identity

levels were related to higher self-reported multicultural competence. Racial identity was not significantly related to multicultural case conceptualization ability, nor was self-reported multicultural competence related to multicultural case conceptualization ability. Supervisor instructions to focus on multicultural issues was significantly related to supervisees' conceptualizations of a multicultural treatment strategy (multicultural case conceptualization ability) (Ladany et al., 1997).

Toporek et al. (2004) conducted a qualitative investigation of critical incidents in multicultural supervision. Seventeen supervisees and 11 supervisors from one university participated. Multicultural incidents in supervision were found to influence the supervision process and the multicultural competence of both supervisors and supervisees. Depending on the quality of the supervision relationship and the manner in which cultural issues were addressed (i.e., was there defensiveness and hostility or openness and receptivity when cultural issues were discussed), the influence of the multicultural incidents may have been positive or negative (Toporek et al., 2004). Actually, the suggestion that the supervision relationship is pivotal in how multicultural incidents are perceived was thought by the researchers to be particularly noteworthy. Supervisors in the study recommended that the supervisor's willingness to discuss and consider cultural factors in the counseling and supervision relationships be stated in the initial or early sessions with supervisees. Furthermore, several supervisors suggested that supervisors need to address cultural issues in the supervisory relationship as well as educate supervisees about multicultural issues. Supervisors recommended that multicultural issues be more fully addressed in the

classroom in order to allow supervisors the opportunity to discuss multicultural skills and competence in their evaluations (Toporek et al., 2004).

The vast majority of the literature on supervision and multicultural competence is theoretical. Bernard and Goodyear (1992) developed a five stage model, consisting of unawareness, beginning awareness, conscious awareness, consolidated awareness, and transcendent awareness, through which the supervisor aids the supervisee in moving (Leong & Wagner, 1994). Basically, the supervisee moves from a place of never having considered racial, ethnic, or cultural issues to a place of cross-cultural awareness as a way of life. The supervisor fosters this movement by assuming pluralistic philosophies and sharing cultural knowledge with the supervisee, plus development can also take place through contact with racial minorities, practica or internship experiences with racial minorities, or other training and personal experiences. Overall, this framework is an interesting one conceptually, but lacks empirical validation and personality dynamics are not considered (Leong & Wagner, 1994).

There are a number of additional models of multicultural training and supervision (see Ancis & Ladany, 2001 or Holcomb-McCoy & Myers, 1999 for a review of these models). Some of these models, like Bernard and Goodyear's (1992), are development models, while others are worldview models, addressing the congruence of the worldviews of the client, counselor/supervisee, and supervisor (Ancis & Ladany, 2001). Ancis and Ladany (2001) propose a stage model, whereby supervisors or supervisees can be classified as being in the stage of adaptation (apathy and complacency toward social oppression and diversity), incongruence (question

worldview), exploration (active exploration of personal identity with respect to diversity), and integration (recognition of oppression and proficiency in associating with multiple diverse or oppressed groups).

Overall, most scholars or models of multicultural development seem to have the supervisor as most responsible for bringing MC issues up (Chen, 2001; Leong & Wagner, 1994; Toporek et al., 2004). In line with this view, Constantine (1997) puts forth a framework, basically consisting of a set of questions for both members of the dyad (e.g., 1a. What are the main demographic variables – race/ethnicity, gender, sexual orientation, age, socioeconomic status, etc. - that make up my cultural identities?), to facilitate discussion of multicultural issues early on in supervision. The responsibility of the supervisor for introducing multicultural issues in much of the literature is most likely due to recognition of the power differential inherent in supervision. Supervisors need to serve as the catalyst for discussions of multicultural issues, creating an atmosphere that feels safe and open for the potentially difficult discussion of racial and diversity issues (Constantine, 1997). Indeed, in response to a question about the ways their supervision relationship could have been enhanced, 12 of 30 interns surveyed in one study indicated that their supervisor seemed reluctant to bring up and discuss multicultural issues (Constantine, 1997). Supervisors may ignore, skirt, or undermine racial or cultural issues for fear of being perceived as bigoted, particularly majority group supervisors with minority group supervisees (Tummala-Narra, 2004). This can lead to reenactment of discriminatory experiences in the larger society, created by the misuse of the supervisor's power by ignoring or denying racial material in counseling and supervision Tummala-Narra, 2004).

Single-Subject Research Designs

Single-subject designs have long played an important role in psychological and psychotherapy research despite criticisms that single-subject methodology is weak and non-rigorous (Heppner et al., 1999). In this section, I review the literature on single-subject research designs, including the various types of single-subject research, advantages and disadvantages of the methodology, and suggestions for ways to address the weaknesses of the methodology. Then, I review nine studies that utilized a single-subject or case study methodology to examine various aspects of supervision.

Types of Single-Subject (Single-Case) Research

Hilliard (1993) outlined three primary types of single-case research: 1) single-case experiments, 2) single-case quantitative analysis, and 3) case studies. Single-case experiments utilize quantitative data and involve direct manipulation of an independent variable(s). Single-case quantitative designs involve passive observation of a phenomenon and include an analysis of the unfolding of variables over time. These designs involve quantitative data, can be classified as either confirmatory (hypothesis testing) or exploratory (hypothesis generating), and exhibit no direct manipulation of variables. Hilliard (1993) contends confirmatory single-subject studies are not impossible, citing examples of this type of study from other fields and suggested that such confirmatory case study designs do not exist in psychotherapy research because researcher's hypotheses are not specified with enough precision to allow for the identification of disconfirming cases. The third type of design identified

by Hilliard (1993), the case study, includes some sort of qualitative analysis, as well as passive observation.

Advantages and Limitations

Heppner et al. (1999) identified five advantages of single-subject designs. Their focus was single-subject designs applied to psychotherapy but their contentions seem applicable to supervision as well. Therefore, I slightly alter their contentions to apply to supervision (i.e., replacing references to "psychotherapy" with "supervision"). First, this design is useful as a means of collecting information and ideas, and generating hypotheses about the supervisory process. Second, this design is useful as a means of testing supervisory techniques. Because there is only one or a few cases involved, this type of design provides an opportunity for in-depth analysis of use of a specific technique over time. For example and with regards to the current study, very little is known about what supervisory techniques foster development of multicultural competence. In a single-subject design, there is ample opportunity to explore a technique like supervisor self-disclosure (e.g., "I had prejudices I needed to look at") in-depth and over time. Third, this design is useful as a means of testing new methodologies. The investigator is given the opportunity to "experiment" with a new methodology or procedure, wherein the investigator can determine whether a new procedure or methodology provides new or more useful information, or whether some aspect of supervision is better understood in some way. For the current study, perhaps it will be shown that the typical fashion in which supervision is conducted must be drastically altered in order for multicultural competence to be addressed and developed. Dealing with only two cases will allow for a better view of what is

happening in supervision, whereas group data on the process might obscure certain techniques or procedures that are useful for aiding supervisees' multicultural development. Fourth, this design is useful as a means of examining individuals and rare phenomena. A difficulty noted by many applied researchers and practitioners is obscuring of individual variations and outcomes in large sample research (Heppner et al., 1999). Fifth, this design is useful as a means of providing exemplars and counterinstances.

Single-subject research has historically been characterized as unscientifically rigorous, mainly related to criticisms of the methodology as lacking internal and external validity (Gelso, 1979; Hersen & Barlow, 1981; Hilliard, 1993; Jones, 1993). Acknowledging that threats to internal validity cannot be ruled out in the same ways in single-case research as they can in experimental group designs, Kazdin (1981) noted several ways to address the threats to internal validity in single-case research. Specifically, systematic quantitative data collected over time from a variety of perspectives (e.g., therapist, client, and observer) and the utilization of a variety of methods (e.g., self-report, judge-rated, qualitative) in single cases allows researchers to draw more valid inferences (Kazdin, 1981; Yin, 1994).

Another limitation or criticism of single-subject designs is the issue of generalizability (Heppner et al., 1999; Jones, 1993). According to Hilliard (1993), the generalizability of findings from single-case research is not accomplished by aggregation of single-case data but rather by replication of individual cases. He identified two types of replication, direct and systematic. Direct replication refers to replicating findings in participants with similarities in individual differences variables

(i.e., gender, race/ethnicity) perceived to influence the phenomenon under examination. Systematic replication refers to the attempt to show that findings differ in predictable ways when participants differ along the individual-difference variables of interest. Hilliard (1993) states that the lack of both types of replication is one of the greatest weaknesses of the use of single-subject research.

Single-Subject (Case) Studies in Supervision

In this section I summarize, evaluate, and critique nine studies (the entirety of the literature as far as I can tell) that utilized a single-subject methodology to examine the process and outcome of psychotherapy supervision. The term *case study* is often applied to single-case methodology as well, though the term itself is somewhat misleading in the larger psychotherapy literature. The term is widely used but many times refers to narrative case examples, either fictional or actual, that are related to pre-existing data or conceptions, and not to an actual "study" of a phenomenon or area (e.g., to illustrate interpersonal theory in an article, would present narrative transcript of a client session that evidences features of interpersonal theory). This facilitated careful review of the literature and narrowing down to nine studies that actually involved use of case studies in some systematic and empirical way. I first summarize and critique these nine studies on an individual basis in chronological order. Second, I discuss certain aspects and features (strengths/limitations, types, etc.) of single-subject or case study methodology as they relate to these studies. Third, I discuss these studies in a more integrated fashion, with particular attention paid to the strengths and limitations of this literature as a whole.

Holohan and Galassi (1986) set out to explore the potential for demonstrating supervisor accountability through the use of a single-case research design. The lead author, a 3rd year doctoral student, served as the supervisor for a male counselor in a high school field placement. The supervisor collected baseline data for counselor behaviors (frequency of questions, reflections, and total statements) and client behaviors (frequency of feeling statements and overall total statements) from three randomly selected 4-minute samples of counseling sessions. After reviewing these taped samples together, the supervisor and counselor agreed on the goal of modifying the counselor's basic responding skills, namely to have more reflections and fewer questions. Self-monitoring and supervisor reinforcement were chosen as the intervention in this supervision dyad that would aid the counselor in achieving the agreed upon goal. It was also decided that this intervention would take up no more than 10 minutes of any supervision session. The counselor/supervisee saw 5 clients over the course of the study.

The intervention was effective as measured in this study. By the end of session 6, the counselor's proportion of questions had decreased from 61% pre-intervention (baseline) to 16% at the conclusion of the intervention. The counselor maintained this reduced rate of questioning during the follow-up period. Additionally, the proportion of reflections increased from 2% at baseline to 26% during the intervention. Clients were also seen as more active following the intervention, with a sizable increase in feeling oriented statements and overall number (mean) of statements. The researchers concluded that single-case designs do serve as

a powerful accountability tool for supervision, being able to track the effects of a supervisor's interventions on both counselor and client.

The researchers contended that the most important aspect of supervisor accountability is change in the supervisee's counseling behavior, which is disputable. There has long been controversy in the literature about the "ultimate goal" of supervision. Some say that the ultimate goal of supervision is counselor competence and development, while others argue that the real acid test of supervision is client change and outcome of therapy (Goodyear & Guzzardo, 2000). To their credit, Holohan and Galassi (1986) did account for some of this client change piece, which I will discuss later, though this aspect of the study is not set-up or discussed in the introduction.

One key issue not addressed by the researchers is that the supervisor in this study was one of the researchers. Use of an independent rater to tally intervention frequencies at follow-up was a good step, but there was still always a situation in place where the supervisor had ample impact over obtaining the desired results for this study. The agreed upon goal of supervision was for the supervisee to reduce frequency of questions and increase frequency of reflections. It would have been interesting to see if an independent supervisor would have identified the same goal. The researcher/supervisor could have selected a goal that seemed more easily attainable. Simply put, not including the researcher as one of the participants lowers the chances of experimenter bias. Another issue not addressed by the researchers is the idea of quantity versus quality. First, the baseline data on the counselor (supervisee) was collected in sessions 1-3. It is quite conceivable that the first few

"feel each other out" sessions would be characterized by more questions than reflections. Second, there is no real measure of the effectiveness of the supervisee's questions and/or reflections. The documented increase in client feeling statements is taken as a positive, helpful thing for the client. However, there is no other evidence provided of the positive aspects of increased feeling statements. Perhaps, simply the quality of questions (as defined by the researchers) could have been tracked and improved, without any change in frequency, leading to similar feeling statement increases (e.g., supervisee asks, "How did that make you feel?") and other benefits for the client.

The way in which the researchers laid out the results was also somewhat confusing, in that the figures provided did not exactly match their words. The figures were clearly divided into baseline, intervention, and follow-up sections, but the reporting of this data was much less clear. For example, the researchers reported an increase in proportion of reflections from 2% at baseline to 26% during intervention. However, the figure corresponding to this assertion showed the 26% proportion occurring in the follow-up stage (sessions 7-9). This is strange considering that the researchers state, "Unfortunately, the end of the semester prevented the collection of follow-up data for the counselor's use of reflections of feeling" (Holahan & Galassi, 1986, p. 170). Therefore, how was there data available to even construct a figure showing a 26% proportion for reflections at follow-up?

Lastly, nowhere in the article do the authors discuss limitations of their research, which was striking. Furthermore, there is no demographic data provided on the participants, except that the supervisee is identified as male, and the supervisor is

easily identifiable as male from his name (which is identified because he was one of the researchers).

Martin et al. (1987) tracked one supervisory dyad over the course of a semester. The purpose was to describe the events of supervision, to show change in supervisee within-session behavior, to link process to outcome, and to generate hypotheses for future research. The supervisee was a 33-year old female doctoral student in counseling psychology, with a Master's degree and 7 years of counseling experience. The supervisor was a 41 year-old male counseling psychologist with 12 years of supervision experience.

A number of measures were used in this study, including the Session Evaluation Questionnaire (SEQ), Supervisory Styles Inventory (SSI), Impact Message Inventory (IMI), Critical Incidents Questionnaire (CIQ), and Penman Observational Coding System. Additionally, activity level of the supervisory dyad was assessed by examining the ratio of number of words spoken by the supervisee to total words spoken by both supervisee and supervisor, and the Myers-Briggs Type Indicator (MBTI) was used to provide descriptive information about the supervisor and supervisee. Supervision occurred once a week for 11 weeks, and the supervisee participated in a weekly practicum seminar with 3 other students run by the supervisor. Prior to supervision the supervisee conducted a 20-min session with a coached client, and then again at the conclusion of supervision with the same client, in order to collect pre and post-supervision work samples to assess outcome. Over the course of supervision both participants recorded post-session thoughts and reactions in a log, were asked to indicate the single best and worst sessions. Both

suggested the second session as best, the supervisor suggested the 7th and the supervisee the 6th as the worst. Due to the 6th session tape being too unclear to transcribe, the supervisee selected the 10th session as next worse. Transcripts of seven sessions, pre and post - supervision sessions (the 20 min counseling session samples), first and last supervision sessions, the mutually agreed best session (2nd), and the worst sessions (7th & 10th), were created. The Penman coding system was then used to assess each message unit (complete utterance of one person).

The results of the study indicated that the "best" session focused largely on supervisee personal issues, and was the point at which the supervisory relationship coalesced, which was consistent with previous research. Supervisor and supervisee had similar cognitive styles (MBTI scores), which seemed consistent with their demonstrated styles and work together. Supervisee activity level was lower in the worst session as compared to the best session, which was consistent with previous research. There were a relatively small number of support statements made by the supervisor and a relative absence of conflict in the dyad.

Perhaps the strongest aspect of this study is the fact that both qualitative and quantitative data were utilized. Examples of log entries that corresponded with quantitative data were very powerful. The authors justified their approach well in the introduction, especially the importance of achieving "triangulation" of results through a variety of measures.

The measures were well explained, but reliability data was absent. Fortunately, the measures utilized have generally shown good reliability or been widely utilized throughout empirical literature (e.g., Friedlander et al., 1989; Martin

et al., 1987; Strozier et al., 1993). The authors even point out the in using the Penman coding system they avoided adopting previously used counselor intentions coding, and therefore did not have to be concerned with the appropriateness of applying a counseling/therapy coding system to supervision. In previous research a relation was found between supervisees' MBTI scores and supervisors' perceptions of them, which is why Martin et al. (1987) utilized the MBTI.

One criticism the authors mentioned but did not respond to was the use of an advanced student, where change would likely be more subtle, versus using a beginning student. There is no rationale provided for why they chose this particular supervisee, and the results might have differed significantly had a less experienced supervisee been used. For instance, the "best" session in this study was characterized as focusing largely on supervisee personal issues. Less experienced therapists likely would want more direct guidance about what to do in session (i.e., more direct feedback on skills) and might not tolerate exploration of personal issues as well or find such exploration as valuable.

Surprisingly, the authors did not address the fact that the supervisee also participated in a practicum seminar run by the supervisor. The supervisor had evaluative power in another arena, which could distort supervisee behavior in individual supervision. Furthermore, it is difficult to know how well the data reflects those aspects of their dyadic relationship, process, and outcome or are the result of their cumulative contact.

Lastly, the supervisee conducted a 20-min session with a coached client prior to the start of supervision, and then again at the conclusion of supervision with the

same client in order for the researchers to collect pre and post-supervision work samples to assess outcome. The use of 20-minute pre and post - supervision sessions to assess outcome seems questionable. Indeed, the authors acknowledge that it was difficult to infer much from this data, and question the reliability of such a measure, mostly due to its brevity. In other words, one session, particularly only a 20-minute session, is inadequate as a measure of counseling skill.

Friedlander et al. (1989) examined parallel processes in counseling and supervision. They investigated (a) the extent of similarity in trainees reactions to both self-presentation strategies (e.g., critical) and relational communication (i.e., who controls the relationship and how), (b) session evaluations of the two dyads (counselor-client, supervisee-supervisor), (c) similarity in client's perceptions of the counselor and supervisee's perceptions of the supervisor, and (d) sought to identify aspects of the supervisory style.

The supervisor was a 32 year-old white counseling psychologist with 9 years of supervision experience. The supervisee was a 24 year-old white 3rd year counseling psychology student. The client was a 31 year-old woman seeking help for stress related to a recent marital breakup. Supervisory style, theoretical orientation of supervisee and supervisor, session evaluation data (both counseling and supervision), supervisory feedback, counselor verbal response, relational and interpersonal communication, client perceptions of counselor and counseling, and supervisee perceptions of supervision were assessed. Additionally, the client completed a battery of instruments (including the MMPI) at the beginning of counseling. The majority of measures seemed to have adequate reliability and validity. All sessions

(supervision and counseling) were audiotaped, with each participant completing the appropriate measures afterward. A total of eight counseling sessions and nine supervision sessions took place.

Overall, the supervisee found the supervision sessions deeper and more valuable than did her supervisor. The same pattern was found in the counseling relationship, with the client reporting higher scores than the counselor (supervisee) on depth and value. Changes in client and counselor depth and value ratings mirrored each other (particularly a sharp decline between session 4 and 6). In supervision, the supervisee reported consistently deep and valuable sessions, but fluctuated on ease of sessions. The supervisor's ratings mirrored this, with greater variability in ease than depth. Supervisee perceptions of supervision remained favorable even when the counseling sessions became less favorable. In terms of relational patterns, both dyads exhibited complementary behavior. More specifically, the supervision relationship was characterized by the supervisor leading/controlling the interaction and the supervisee following, and the counseling relationship was characterized by the counselor leading/controlling the interaction and the client following. Neither dyad used many critical (criticizing) communications, very few supervisor comments contained feedback, and the counselor relied primarily on reflection/restatement and information seeking responses. Both supervisor and supervisee rated supervision favorably, and the counselor perceived moderate client change. Unfortunately, the researchers were not able to collect outcome data from the client due to an abrupt termination and subsequent inability to get the client to complete outcome measures.

However, in phone contact the client did indicate having enjoyed her counseling experience and feeling better.

The introduction to this article does an excellent job of spelling out the limitations in the supervision literature to that point (models of supervision adapted from conceptualizations of psychotherapy, little literature to suggest what effective supervision looks like, models of supervision failed to take into account client factors) and how the authors intended to address those limitations. Very little is said about the case study methodology employed, except that it can stimulate more extensive research in the area of study. As conceptualized, it is very difficult to see an alternative avenue of inquiry for these particular variables, making justification of the case study methodology less crucial.

The strongest aspect of the study was its method section. First, the researchers carefully considered the characteristics of their participants. All participants were women, the supervisee possessed some but not extensive experience, the supervisee was not seeing many clients at the time (only one), and the supervisee had never received supervision from this particular supervisor. The client was carefully screened and selected because she had no prior history of counseling, was mostly dealing with adjustment issues, and did not exhibit suicidal ideation, substance abuse, or a number of other researcher defined exclusion criteria. It was strange that race was reported for both the supervisor and supervisee and not for the client. Also, the supervisee working with another client at the time could have been problematic in that this indicates the supervisee was engaged in another supervision relationship during this study (if everyone was being ethical). However, this is not a

concern due to the fact that the researchers did not attempt to assess supervisee

change or improvement as a function of supervision, which is the variable most likely

to be confounded by an additional supervision relationship.

The procedure was well thought out, with the principal author conducting the

intake/screening interview to minimize contamination of the counseling relationship.

One problem with the intake was that the client was allowed to complete most of the

screening assessments at home. There is no way to know what conditions she took

the instruments under or how attentive she was to the task. Researcher control is

compromised some by this, however, this allowance was probably more practical

than having the client spend three hours (or more) with an intake interview and

completion of four measures (one of which was the MMPI). It was also problematic

that the client's premature termination deprived the researchers of outcome data from

the client's perspective. Despite the phone remarks of the client on follow-up,

premature termination brings into question the client's satisfaction with counseling

and overall improvement. That said, the researchers should be commended for their

repeated and persistent attempts to acquire outcome data from this client.

One of the interesting results in this study was that both the supervisory and

counseling relationships were characterized as complementary. However, these

findings seemed foreseeable, and therefore it is interesting the authors did not put

forth any hypotheses about what they would find. Perhaps there was no research

available to support hypotheses with regards to complementary relationships. Still, as

a somewhat experienced supervisor and clinician I could formulate certain

hypotheses. A supervisory relationship being mostly directed or controlled (more

control statements) by the supervisor seems a reasonable hypothesis, as does the counselor mostly controlling the counseling interaction, with the supervisee and client taking up submissive or following patterns (complimenting the control pattern of the other party). The degree of symmetry (both parties seeking control) increased over time in the counseling relationship, which also corresponds to my personal experiences.

Alpher (1991) also looked at parallel process in psychotherapy and supervision, this time involving short-term dynamic therapy. As in previous studies (Friedlander et al., 1989; Martin et al., 1987), Alpher (1991) discussed the lack of supervision research and the need to develop or enhance models of supervision. Parallel processes, as in Friedlander et al. (1989), were seen as a way to approach these issues.

Three participants were selected. The therapist was a beginning third-year psychiatry resident, who expressed interest in receiving intensive psychotherapy supervision. The supervisor was a clinical psychologist with three years postdoctoral experience, including experience supervising psychiatry residents. The client was a twenty-six year-old, single, Caucasian female. Structural Analysis of Social Behavior (SASB) was the used to assess the interpersonal relationships in this study. SASB consists of three dimensions: (1) Focus – self, other, introject, (2) Affiliation – 18 point scale from hostile to friendly, and (3) Interdependence – three 18 point scales – give autonomy to control, be separate to submit, and let self "be" to self-control. The long form of the SASB-INTREX questionnaire was used to assess these dimensions. This questionnaire consists of items rated on an 11-point scale ranging from 0 ("not at

all") to 11 ("always, perfectly"). Examples of rated items include: (a) *Focus on other* - "provides for, nurtures, takes care of me" or "butts in and takes over, blocks and restricts me;" (b) *Focus on self* - "I speak up, clearly and firmly state my own separate position" or "I express myself clearly in a warm and friendly way;" (c) *Introjection* – "I tear away at and empty myself by greatly overburdening myself" or "I gently and warmly stroke and appreciate myself for just being me." Through this questionnaire, each participant within a dyad (therapist-client, supervisee-supervisor) rates her or his *Focus on other* and the other person's perceived reaction (*Focus on self*), and the rater rates the other's *Focus on other* (focus on the rater) and her or his *Focus on self* (reaction). Basically, both participants are rating their actions and reactions to each other. A participant (i.e., client) is therefore rating what the other person (therapist) is doing, the participant's (client's) reaction to that, what the other person's (therapist's) perception of what the participant (client) is doing, and the other person's (therapist's) reaction to that. These four ratings are generated to classify the "at best" and "at worst" for the relationship. The items on the SASB questionnaire cluster into a model where, for example, on one end you can have a person's *Focus on self* characterized as disclosing and expressing or on the opposite end characterized as walling off and distancing. *Introjection* (action directed at the self) ratings were also obtained. These ratings were then correlated with patterns indicating amount of affiliation, autonomy (control), and conflict. Lastly, client outcome status was assessed. Twenty-five sessions in short-term dynamic therapy were conducted following an intake screening, with the SASB assessment (questionnaire) applied at the 3rd, 8th, 16th, 22nd, and 25th sessions.

The client showed improvement from intake to termination on severity of distress, distress on reported symptoms, and the Histrionic and Passive-Aggressive personality disorder scales ("most prominent" to nonsignificant levels). Her ratings of two target problems, relationship with mother and relationship with boyfriend, also declined (improved) from intake to termination. Interestingly, the therapist saw no overall improvement in client functioning, although the supervisor did see improvement. As for the SASB results, the author chose to concentrate on the Control dimension or coefficient. No rationale was given for this except the large number of ratings and coefficients generated in the SASB system. As the therapist's focus was seen as more controlling, the client's *Introject* became more self-restraining. "In other words, shortly after she began to perceive greater control by the therapist, she began to experience herself as using greater restraint and self-control, and less spontaneity" (Alpher, 1991, p. 225). This was consistent with the SASB theory of introjection "that one learns to act toward the self as significant others act toward the individual" (Alpher, 1991, p. 225). Control ratings indicated that the therapist (supervisee) generally saw himself as controlled by the supervisor and controlling the client.

This study was often times very difficult to follow. The big take home message seemed to be that parallel processes do exist between therapy and supervision. For example, when the therapist responded to the supervisor with high interdependence, he then treated the client that way, which led to her treating herself that way. However, this finding was muted by having to wade through the SASB results. The difference between the dimensions of *Focus* was not well defined until

the end of the article. Very little rationale is given for why the author only focused on the Control coefficient, excluding mention of the Attack (affiliation) and Conflict coefficients. Perhaps the results of these coefficients did not support the parallel process concept. It is difficult to know what to make of their exclusion.

Another fuzzy area involved the finding that the therapist saw no overall improvement in client functioning, whereas the supervisor did see improvement (ratings at intake – therapist, 80, supervisor, 61; termination – therapist, 81, supervisor, 85). A closer examination suggests that the therapist did not perceive the client to be as impaired at intake as the supervisor. Therefore, it may be that the therapist generally perceived the client as well functioning, and his rating of the client did not have much room for improvement. Also, the way the data and measure are reported, it is difficult to tell what would constitute "improvement" as rated by the therapist (i.e., Would increase from 81 to 85 be significant improvement or would it have to be 81 to 90?).

The author acknowledges that a study of events in supervision of short-term dynamic therapy might not apply to other forms of therapy. Interestingly, no rationale is provided for why short-term dynamic therapy was utilized. My guess is that this is the type of therapy practiced at the site where this study was conducted, and therefore convenient. Identifying short-term dynamic therapy so prominently in the title of the paper suggests to the reader that this theoretical approach to therapy will be tackled in some way by the study. Indeed, the SASB and parallel process as a concept seem to have definite connections to psychodynamic/psychoanalytic theory. The connection between theory and the results of the study are never explored, a real

omission considering that one of the major criticisms of case study research is their atheoretical nature (Strozier et al., 1993).

The author also acknowledges that no attempt was made to assess or control for therapist and supervisor personality characteristics, or to assess supervisee growth and learning. However, screening issues were well handled (excluded for ongoing substance abuse, need for medication, etc.) and selection made largely based on a history of interpersonal impairment, which the author describes as making someone a perfect candidate for arousing, intensive work of short duration. Descriptive information for the client in this study reported race and age, yet no race or age was reported for the therapist/supervisee and supervisor (gender was not reported either but could be inferred from identifying pronouns – him, he, etc.). Reliability information was not reported for the SASB system either.

Borders (1991) sought to assess supervisors' thought processes in supervision. Based on literature suggesting theoretical orientation, experience, and preferred approach to supervision as three factors that could influence supervision, two novice and two experienced supervisors in a counselor education program with various theoretical orientations and supervision approaches were selected. Each asked a current, regularly assigned supervisee of her or his choice to participate. The supervisees were 2nd year master's level counseling students placed in community agency settings as part of an internship. E-1 (experienced supervisor) was a 35 year-old male with 4 years of supervision experience, a cognitive-behavioral orientation, and a case management approach to supervision (developing student competence in treatment planning). His intern was a 37 year-old female with 10 years drug and

alcohol treatment experience. E-2 was a 38 year-old female with 4 years of supervision experience, a relationship based and integrative orientation, and a developmental approach to supervision. Her intern was a 27 year-old female with little counseling experience. N-1 (novice supervisor) was a 40 year-old male advanced doctoral student in counselor education who was enrolled in a supervision practicum at the time of the study and reported a person-centered approach to supervision. His intern was a 33 year-old female with no prior counseling experience. N-2 was a 30 year-old male advanced doctoral student in counselor education who was enrolled in a supervision practicum at the time of the study and reported a cognitive-behavioral approach to both counseling and supervision. His intern was a 52 year-old female with little formal counseling experience.

Supervisor verbal behaviors, supervisor activity level, supervisor cognitions, and supervisory style were all assessed. Reliability data was not reported explicitly, but the author did state that previous studies had shown the measures used to have good reliability. Each supervisor videotaped and audiotaped a mid-semester session of their choice. The mid-semester was preferred so supervision would be in the working stage rather than the initial or termination stage. After the session, each supervisor reviewed the session following a standardized recall procedure that asked them to relive the session while watching the videotape and to "think aloud" to describe their thoughts and feelings as they supervised. They stopped the videotape whenever they wanted to record their recollections via an audiorecorder. Supervisors completed additional measures the following day, including watching the videotape a second time and completing an intentions measure. Audiotapes of the supervision

sessions were transcribed and analyzed by three trained raters, and audiotapes of the recall sessions were transcribed and collated with the supervision session transcripts, meaning each retrospection was paired with the corresponding supervisor-supervisee dialogue. This data was then analyzed by two experienced raters who classified each retrospection unit into one of six dimensions (time, place, focus, locus, orientation, mode).

Generally, all four supervisors were task oriented and provided information, though there was some variation (e.g., E-1 was the most verbally active and offered the most direct guidance and interpretations while N-2 was the least verbally active). In-session cognitions were on-task (professional), stated in the present tense, concerned out of session events, considered internal dynamics, and focused on the members of the dyad separately rather than on the supervisory dyad (relationship/interaction) itself. There was also variation here as well (e.g., E-1 had the fewest intentions and in-session thoughts while E-2 had the most intentions and in-session thoughts). Three of four supervisors and their interns described the supervisors' styles as more collegial and relationship/process oriented. E-1 described himself as attractive and interpersonally sensitive while his intern saw him as task oriented. Overall, variations in the supervisor selection criteria (theoretical orientation, supervision approach, and experience) explained some individual patterns found in this study. For example, E-1's cognitive-behavioral orientation was displayed in interventions he suggested and his explanations of client behavior. His case management approach to supervision was illustrated in the supervision session, where he asked the intern (supervisee) to present a case, asked questions about the

client's history, generated diagnoses or hypotheses about the client, and then made specific suggestions for the next session. Both novice supervisors used more approval statements and expressed more affectively based thoughts, which was consistent with previous research on novice supervisors (Borders, 1991). Ratings of supervisory style did not seem to match actual behaviors in that the majority of supervisors were characterized as relationship oriented and collegial but demonstrated directive and didactic behaviors.

This study had several limitations, many of which the author acknowledges. First, four diverse supervisors saw four different interns. This makes comparisons between groups questionable. However, the researcher selected the supervisors based on their differences in theoretical orientation, etc. and therefore the comparisons made along these dimensions seemed warranted. Given the authors attention to having diverse supervision dyads it was interesting that no attention was paid to the gender, race, age, or other demographic features of the participants. Previous researchers have seen gender as important enough to match on that characteristic (Friedlander et al., 1989).

Second, the characteristics and impact of the interns (supervisees) on supervision was not well accounted for or even addressed. Supervisee characteristics may impact supervisory style and in-session cognitions and behaviors. Given that these dyads were assessed in the middle of supervision there is no way to know if the supervisors' altered their styles, behavior, etc. in any way over the course of supervision in response to the supervisee. In addition, asking current supervisees about their willingness to participate may have been problematic. Given the

evaluative nature and power differential inherent in supervision (Goodyear & Guzzardo, 2000), supervisees may have felt pressure to participate, especially if they were already engaged in the supervision relationship (as opposed to beginning the supervision relationship).

Third, this study did not investigate client impact on aspects of supervision. There is no way to know if the supervisors' altered their styles, behavior, etc. in any way over the course of supervision in response to the client. This is even more of issue when considering that the clients were seen in different field settings, and no client data (symptoms, severity, etc.) was reported. Additionally, if the supervisee did change over time in response to the client this could necessitate a change in the supervisor and supervision.

Fourth, only one session was analyzed. This did seem particularly problematic, for many of the reasons previously mentioned (i.e., inability to track changes in supervision, etc.). It is also made more problematic when considering that this is a case study. With only 4 single dyads to discuss implications from, data obtained over a number of sessions would seem much more powerful.

Fifth, the study applied counseling based measures to describe aspects of supervision. Both supervisors and raters had difficulty applying some measures (list of intentions and response categories) to supervision, and other supervision researchers have seen application of counseling measures and conceptualizations to supervision as problematic (Friedlander et al., 1989).

Strozier at al. (1993) examined the cognitive aspects of supervision utilizing an intentions and reactions paradigm, in which the researchers proposed to examine

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the supervisor's intentions with regards to techniques/interventions in supervision, subsequent reactions of the supervisee, and then the reactions or actions of the supervisor based on those supervisee reactions. Given that previous researchers had used intentions and reactions to examine supervisor and supervisee in-session cognitions, the researchers decided to use intentions and reactions to look at in-session cognitions. Furthermore, in response to the criticism of case study research as atheoretical, they decided to describe the case through the lens of interpersonal theory.

A 30 year-old female intern at the university counseling center served as the supervisee and a 36 year-old male assistant professor in a counseling psychology program (and second author) served as the supervisor. The supervisor described his theoretical orientation as psychodynamic and interpersonal, and the supervisee described her theoretical orientation as interpersonal.

Four measures with good reliability were used to assess the smoothness and depth of the session (Session Evaluation Questionnaire – SEQ), therapist intentions (modified from a measure of therapist intentions), supervisee reactions (modified from a measure of client reactions), and the helpfulness of supervisor interventions. The participants met for 1hr of supervision for 14 weeks. In between sessions the supervisor reviewed audiotapes of the supervisees sessions. Each supervision session was videotaped. Following the session, both filled out the SEQ, then proceeded to watch the videotape of the just completed session, stopping the tape after each supervisor intervention. They independently completed measures at each stoppage,

with the supervisor indicating his intentions, the supervisee indicating her reactions, and both completing the Helpfulness Rating Scale for each intervention.

Frequency distributions of the listed intentions, reactions, and helpfulness ratings were constructed, and scores from the SEQ were calculated. Clusters of intentions and reactions were used in the analysis, with the only addition from previous intentions and reactions studies being the inclusion of a Relationship category. An analysis of the frequency of intention clusters found no significant difference from previous studies utilizing intentions and reactions clusters. A significant sequential relationship was found between both supervisor intention clusters and supervisee reaction clusters and supervisee reaction clusers and supervisor intentions clusters, though the supervisee's reactions to supervisor intentions were more predictable than vice versa. For example, the supervisor's use of the Assessment intention cluster significantly reduced the likelihood that the supervisee would feel supported. Also, the Relationship intention cluster resulted in a high likelihood that the supervisee would feel supported. Supervisor's Explore, Restructure, Assessment, and Change intentions were significantly related to the supervisee's Therapeutic Work reactions. Lastly, both participants viewed the supervisor's interventions as generally helpful, and their ratings of most and least helpful intention clusters matched exactly.

The supervisor was also second author on the study, which set up potential issues. Because of dual roles the supervisee could have been negatively impacted, and the supervisor's familiarity with the intentions/reactions system meant he generally knew which categories their responses were falling into. However,

precautions like the supervisor not seeing any of data until after formal evaluations of the supervisee were complete were enacted. Strozier et al. (1993) also used preliminary analyses to examine potential bias, given that the supervisee may have consciously or unconsciously altered her responses to please the supervisor (researcher).

It was good that both participants responded separately to the video so they did not have a negotiated score, but little attention was paid to impact of both being in the same physical space and responding to questions about the other person. Another positive aspect of the study was the inclusion of an excerpt from a supervision session, which clearly illustrated the interpersonal nature of the supervision. Interestingly, the researchers stated that interpersonal theory was used to answer the atheoretical charge labeled against case studies, but there was inadequate attention to it throughout the study. The creation of the Relationship intention cluster is the only evidence of the interpersonal theory throughout the paper. Indeed, much of the last part of the discussion is focused on interpersonal theory, and how the study's findings fit with this (e.g., maybe interpersonal approaches are best used with advanced trainees). Yet, the theory piece felt tacked on, without real thought or attention to its importance, and it was difficult to see where a theoretical perspective really impacted the researchers' views of the data.

Burke et al. (1998) examined weakenings and repairs in the working alliances of 10 supervisory dyads. There were various gender configurations of the dyad participants, all supervisors had experience supervising (mean = 9.3), and all trainees were experienced (predoctoral interns and pre-licensure; mean counseling experience

= 2.7 years). Supervisors' mean age was 41.8 and trainees mean age was 30.3. Two female graduate students served as raters for supervision session audiotapes.

Working alliance, session evaluation, and outcome of supervision were all assessed. The study included 10 consecutive weekly supervision sessions. Prior to each session, participants were given a packet with a blank audiotape and asked to complete session-relevant measures. Once completed, the entire contents of the packet were mailed to the researchers. Tapes were analyzed by raters for instances of weakening events and dyad participants reactions, etc. to these weakening events. There was high agreement between raters on identifying weakening and repair events, and any disputes were debated until consensus was reached.

Overall, supervisees' experience level affected weakening and repair events. Supervisees with less than a year of clinical experience had weakenings related to professional skills, such as difficulty with basic clinical terminology and techniques. Supervisors in these dyads "repaired" the working alliance by adjusting their comments to match the skill level of the supervisee. Experience also impacted the agenda and prioritization of supervision sessions. Inexperienced trainees devoted a large amount of time to a single client and failed to meet previously established supervision session goals, while more experienced trainees took a stronger role in prioritizing session material and took supervisor comments as suggestions more than mandates. Among more experienced trainees, theoretical orientation, presentation style, and treatment planning strategies were commonly associated with weakening events. Those trainees struggling to define their theoretical orientation and presentation style disagreed with supervisor interpretations of client behavior,

weakening the alliance. Supervisors often reflected on and encouraged the disagreement in order to repair the alliance.

Evaluation also seemed to impact the working alliance, primarily in a negative way. The evaluative power of the supervisor was directly related to alliance weakenings in a number of dyads. Some trainees were discouraged from discussing problems for fear of poor evaluations and supervisor's seemed to experience discomfort when discussing evaluation. Yet, dyads with high amounts of unresolved weakenings still rated the sessions and overall outcome positively, and client-problem severity was related to frequency of alliance weakenings (higher severity – more weakenings).

The session evaluation measure was given following sessions 2-9. No rationale was provided for why this measure was not given at session 1 and 10 as well. The outcome measure utilized lacked any validity and reliability data, and seemed to have been created for this study. Lack of an explanation for why this measure was used is problematic, especially since other researchers have assessed supervision outcome with more established measures (Strozier et al., 1993).

The main issue in this study is the application of a largely counseling conception to supervision, which other researchers have considered potentially flawed (Friedlander et al., 1989). However, the exploratory nature of this research makes application of the working alliance concept to supervision more acceptable. That said, it was also interesting how working alliance weakenings and repairs were presented. Supervisees always seemed to be the "cause" of alliance weakenings and supervisors also seemed responsible for repairing the alliance in these instances. No

attention was paid to whether supervisees demonstrate repair behavior while supervisors "cause" alliance weakenings, though the data and measures may not have allowed for such an examination.

Daniels et al. (1999) examined conflicts and communication problems that arise in cross-cultural (racially different) supervisory relationships, especially when cultural issues are not addressed. A European-American supervisor and an Aisan-American supervisee participated. The supervisee was a first-semester internship graduate student in school counseling, assigned to a culturally diverse local high school. He had lived in the U.S. for 20 years and described himself as assimilated. The supervisor had 10 years experience as a school counselor but little formal training in multicultural counseling and supervision. No other information was provided about the supervisor.

The principal researcher served in a number of capacities. She was the internship instructor for a required course, which the supervisee attended. She participated in several meetings involving the supervisory dyad and took notes to document various issues and problems that might arise. She met with the 2 other researchers to analyze the notes (issues/problems) from these sessions. From these meetings 3 major areas were identified to explain the cross-cultural conflicts that occurred in the supervisory dyad. First, differences in interpersonal style. The supervisee was passive and the supervisor more confrontational. This pattern was related to cultural values differences, namely that the direct, confrontation approach conflicts with the most indirect, less confrontation style Asian-Americans tend to adopt in interactions. Second, differences in counseling goals. The supervisee was

greatly concerned with building a good rapport with clients while the supervisor felt he needed to be more solution focused and get students/clients out of counseling as quickly as possible (especially given large numbers of students seen). Third, perceptions of supervisor and supervisee roles was a source of conflict. The supervisee expected the supervisory relationship to mirror a student-teacher relationship. The supervisor wanted him to interact in supervision as though they were colleagues.

This study had a number of limitations, many of which stem from the fact that this is probably the least empirically rigorous study reviewed in this paper. It was exclusively narrative, without any quantitative data or formal measures of any kind. It was also not rigorously qualitative either, as there did not seem to be any of the coding or categorization that typically is a part of qualitative research. That said, the nature in which "findings" were presented made for an extremely interesting and easy read. Aspects of the supervisory dyad did seem to clearly illustrate cross-cultural issues that have been identified in the literature.

There is some concern about researcher bias. The principal author took notes of the sessions, so her initial focus may have largely determined what even got discussed in the larger research team meeting. The principal author also was an instructor for the supervisee at the time of the study. No attention is paid to the impact of this. She may have sympathized with or been more attached to the supervisee before supervision even began. In addition, no explanation is given for why this supervisory dyad was selected. It is conceivable that the dyad was selected because the researchers knew the individuals beforehand and had great confidence in

what the results would be. Also, there was a sense that the researchers began from a basis of looking for problems rather than examining the features of a cross-racial supervision dyad. In this instance, they were bound to find difficulties in the relationship, without any attention paid to the positive aspects that may have been present. Lastly, the authors state that the supervisee was able to better understand how cultural differences contributed to his problems in supervision and relate more effectively with his supervisor, despite the supervisors lack of awareness and attention to cultural dynamics. This finding seemed to surprise them, as it contrasted with literature emphasizing the supervisor's responsibility in initiating discussions of cultural issues. However, the principal author met with the supervisee following supervision and discussed the cultural differences that may have played a part in his supervisory conflicts. The luxury of an outside authority or adjunct teacher/supervisor is rarely present in real world supervision, calling into question the applicability of these results even more.

Chen and Bernstein (2000) examined the effects of complementary communications and supervisory issues on formation of the working alliance over the initial 3 weeks of supervision. Ten supervision dyads participated in the study. Supervisors were all doctoral students in counseling psychology enrolled in a supervision course, providing supervision to masters-level counselor trainees. All participants were White, mostly female, and averaged age 34. All trainees, except one, had counseling experience and supervisor experience averaged 4 supervisees worked with previously. The counseling approaches of all participants represented all

major theoretical approaches. The two supervisory dyads with the highest and lowest ratings of working alliance were examined further.

Supervisory issues, supervisory styles, session evaluation, and complementarity were assessed. Complementarity is a concept of control in relationships, indicating who is leading the interaction and whether the other person is complementing this by following, or instead competing for control, or neutral to the control. All measures seemed to have adequate reliability and validity. The high working alliance (WA) dyad consisted of a 30 year-old female supervisor with previous supervision experience and a 25 year-old female supervisee with no prior counseling experience. Both endorsed mostly interpersonal approaches to counseling. The low WA dyad consisted of a 29 year-old female supervisor with no previous supervision experience and a 39 year-old female supervisee with no previous counseling experience. Both adopted primarily cognitive-behavioral approaches to counseling. Sessions were transcribed by two professional transcribers and two male graduate students not involved with the study assigned codes to the complementarity measures.

Both dyad members generally agreed on supervisory style, with the high WA supervisor seen as highly attractive, sensitive, and moderately task oriented and the low WA supervisor seen as moderate on all three dimensions. In the low WA dyads the only difference was the supervisee saw the supervisor as less task-oriented than the supervisor perceived herself. The high WA dyads had higher session evaluation ratings with fewer discrepancies. Issues of competence, emotional awareness, supervisory relationship, and purpose and direction were identified more frequently

than other supervisory issues by both dyads. However, the personal issues theme was more critical for the low WA dyad. In terms of complementarity, the high WA dyad evidenced more complementary interactions and there was a relation between complementarity and session evaluation. Namely, there was better session evaluation when dyad members complemented each other (e.g., supervisor leads, supervisee accepts and follows).

A fair amount of data was lost in only analyzing the high and low WA dyads. It would have been interesting to see if the results found across 2 cases would hold up when analyzed across 10 cases. Also, the researchers decision to only assess the first 3 supervisory sessions was interesting given that other researchers (Burke et al., 1998) have shown that supervisory working alliance is largely a continuing process, with frequent ruptures and repairs. Assessed over a longer period of time, the low WA dyad may have improved or changed in a number of areas. Considering that both participants lacked experience in their particular roles (supervisor had not supervised, supervisee had not counseled), tracking them over time may have indicated a better WA or improvement in aspects of supervision as they grew more comfortable with their individual roles. The authors also acknowledge that for all ten dyads, attributes of the dyad participants (gender, sexual orientation, cognitive styles, theoretical orientation, etc.) were not accounted for, which may have impacted the results. Additionally, as other researchers have discussed (Friedlander et al., 1989), they acknowledge the potential limitations of applying established therapy measures to supervision, especially given the lack of evidence supporting the validity of these measures use in supervision.

Summary. From the nine studies reviewed, the concept of a parallel process taking place between supervision and counseling had good support. Friedlander et al. (1989) found that the client tended to rate the counseling sessions more favorably than the counselor, and the counselor (supervisee) tended to rate the supervision sessions more favorably than the supervisor. The client rated the counselor as somewhat more attractive and trustworthy than expert, and the counselor (supervisee) viewed the supervisor as more attractive and interpersonally sensitive than task-oriented. In other words, the counselor and supervisor were rated higher on relational type dimensions than skill or expertise type dimensions. In terms of relational patterns, both dyads exhibited complementary behavior. More specifically, the supervision relationship was characterized by the supervisor leading/controlling the interaction and the supervisee following, and the counseling relationship was characterized by the counselor leading/controlling the interaction and the client following. Both dyads were characterized as mainly supportive and friendly, with relatively little conflict, as neither dyad used many critical (criticizing) communications. Very few supervisor comments contained feedback, and tended to be global and positive. The counselor relied primarily on reflection, restatement, and encouragement, using almost no confrontation or challenge.

Alpher's (1991) study also dealt with parallel process. Control ratings indicated that the therapist (supervisee) generally saw himself as controlled by the supervisor and controlling the client. For example, when the therapist responded to the supervisor with high interdependence, he then treated the client that way, which led to her treating herself that way. In other words, the supervisor treated the

therapist in a certain manner, the therapist treated the client in a similar fashion, and the client internalized this treatment and treated herself that way.

The concept of parallel process is an important one because it suggests somewhat the mechanism that supervision works by. Namely, supervision models a "helping" relationship, which the counselor (supervisee) then takes into counseling with a client and reenacts (Goodyear & Guzzardo, 2000). This is important for the current study because it suggested that supervision sets the tone for multicultural issues being brought up in counseling. More specifically, if multicultural issues and material are attended to in supervision, this can model for the supervisee how to address these issues in their work with clients. Also, supervision creates an atmosphere where addressing multicultural issues is valued and therefore, the counselor will carry this into their work with clients as a valuable area of attention. Simply put, addressing multicultural issues in supervision keeps them from being ignored, and in line with the parallel process notion, multicultural issues will not be ignored in the counseling interaction either. Daniels et al. (1998) case study suggested that there will be conflict and poorer supervision when multicultural issues are not addressed, at least when working with a racial minority or racial/culturally different supervisee.

A concept closely related to parallel process is the importance of the relational or interpersonal process to counseling and supervision. Previous research has found that the therapeutic relationship is a key component in psychotherapy and a good predictor of therapy outcome (Hill, 2004). Some of the nine studies reviewed suggest that the relationship is also crucial in supervision. Martin et al.'s (1987) found that

the "best" supervision session focused on supervisee personal issues and the supervision relationship. This was the second supervision session, and previous research has found that the supervision relationship is particularly important at the beginning of supervision (Martin et al., 1987).

Chen and Bernstein (2000) found that working alliance was related to session evaluation, namely that a supervisory dyad with high working alliance had higher evaluations of sessions than did a supervisory dyad with low working alliance. Theorists have long considered working alliance to be an important component of the therapy relationship (Gelso & Fretz, 2000), and the strength of supervisory alliances has been found to predict the strength of the working alliance between supervisees' and their clients (Patton & Kivlighan, 1997). The high working alliance supervisory dyad had more complementary interactions than the low working alliance dyad, and higher complementarity was related to greater satisfaction with supervision (Chen & Bernstein, 2000)

Burke et al. (1998) found that supervisees' experience level affected weakening and repair events. For example, supervisees with less than a year of clinical experience had weakenings related to professional skills, such as difficulty with basic clinical terminology and techniques. Supervisors in these dyads "repaired" the working alliance by adjusting their comments to match the skill level of the supervisee. Evaluation also impacted the working alliance, primarily in a negative way (Chen & Bernstein, 2000). The evaluative power of the supervisor was directly related to alliance weakenings in a number of dyads. Some trainees were discouraged

from discussing problems for fear of poor evaluations and supervisor's seemed to experience discomfort when discussing evaluation.

Overall, Burke et al. (1998) represents the working alliance as an evolving process, consisting of a series of ruptures and repairs. Chen and Bernstein (2000) illustrated that working alliance is related to evaluation of supervision sessions. Working alliance was also related to complementarity, which in turn was related to satisfaction with supervision. Complimentarity was one of the key components and indicators in Friedlander et al.'s (1989) study of parallel process. This further illustrates that the supervisory and therapy relationship, working alliance, and parallel process are interwoven and closely related concepts. Daniels et al. (1998) finding of cultural differences between the participants in a supervisory dyad resulting in the participants having different counseling goals and expectations for supervision is important to note for the current study. Agreement on goals and tasks of supervision is a key component of working alliance (Gelso & Fretz, 2000) and working alliance is related to evaluation of and satisfaction with supervision (Chen & Bernstein, 2000). The participants in the current study will be from different racial backgrounds, so working alliance will be an important component to watch over the course of their work together, particularly agreement on multicultural content and training as a goal of supervision.

The body of literature involving case study methodology to supervision also suggests that supervision does foster counselor development. Holohan and Galassi (1986) found supervision does have an impact on counselor (supervisee) behavior, with the identified goal of the supervisee using more reflections and fewer questions

being achieved. Ladany et al. (1997) found that supervisor instructions to focus on multicultural issues was significantly related to supervisees' conceptualizations of a multicultural treatment strategy (multicultural case conceptualization ability). These two studies taken together suggest that a supervisee will grow and develop in multicultural competence if this is stated as a goal of supervision or made explicit within the supervision (i.e., supervisor says they think it would be good for the supervisee to focus on multicultural issues).

The case study literature also suggests that aspects of supervision as practiced may be quite predictable and only vary slightly across cases. Strozier et al. (1993) found that supervisor intentions generally resulted in predictable and desired reactions. For example, the Relationship intention cluster resulted in a high likelihood that the supervisee would feel supported. Borders (1991) found supervision was generally similar across different theoretical orientations, supervisor experience levels, and approaches to supervision, with only slight variations. Basically, all four supervisors were task oriented and provided information. In-session cognitions were on-task (professional), stated in the present tense, concerned out of session events, considered internal dynamics, and focused on the members of the dyad separately rather than on the supervisory dyad (relationship/interaction) itself. Three of four supervisors and their interns described the supervisors' styles as more collegial and relationship/process oriented than task oriented, even though this study and others have generally found or characterized supervision as more task oriented (Borders, 1991). Interestingly, Friedlander et al. (1989) found the supervisor characterized as more relationship oriented than task oriented also.

Overall, variations in the supervisor selection criteria (theoretical orientation,

supervision approach, and experience) explained some individual patterns found in

this study, but there was also still a good bit of similarity across supervisors (Borders,

1991).

Chapter 3. Statement of the Problem

Part of the reason for supervision's importance is that many believe "Skill development is best learned in some sort of apprentice model, such as formal supervision or informal case consultation" (Hansen et al., 2000, p. 658). Given this belief it seems strange that very little attention has been paid to supervision in relation to multicultural issues (Constantine & Ladany, 2000; Hilton et al., 1995). What work has been done seems to have been focused on cross-cultural supervision (where the supervisor and counselor are from different cultural groups) (Leong & Wagner, 1994). But how does supervision aid therapist trainees in becoming more competent in their understanding and application of multicultural material? The literature has only minimally addressed, if at all, how supervision fosters multicultural competence in trainees.

Prior research on multicultural competence, as well as, on multicultural issues in supervision and therapy have largely relied on survey methods, self-report, and retrospective accounts (Burkard et al., 2006; Pope-Davis et al., 2001b). There are also a number of good retrospective illustrations of specific multicultural events represented in the literature (see Burkard et al., 2006; Toporek et al., 2004; Tummala-Narra, 2004). However, these still relied on participants' self-reports. The issues with self-report have been well-documented, including participants wanting to present a good image and other selective distortions (Guglielmi, 1999). Given this issue, examination of multicultural events through direct observation could be quite useful, especially since such examination in the literature is sparse. Furthermore, reliance on self-report is also one of the major limitations of the multicultural competency

literature (Pope-Davis et al., 2001b). Self-reported competence is often not related to others reports of multicultural competence or case conceptualization in therapy, which means it is still unclear how graduate trainees manifest competence in their clinical work (Neufeldt et al., 2006). Pope-Davis et al.'s (2001b) recommendations for future research in multicultural competence included use of real clients and real counseling situations, use of qualitative methods, and examination of the counseling, client, and supervisor in multicultural training.

The present study utilized a case study methodology. More specifically, the present study qualitatively examined the moments in two supervision and counseling dyads when multicultural issues were discussed explicitly, and subsequently, attempted to explore these events in relation to the development of multicultural competence in counseling trainees. To accomplish this the present study utilized counseling trainees who were learning to become clinical supervisors to oversee the counselor work of less experienced trainees with their clients. While this sort of sample may limit the study's applicability for more experienced supervisors, there is still a wealth of information that could be learned about how more advanced counseling students approach multicultural issues when they are learning to become supervisors, and the developmental issues that may exist for both inexperienced supervisors and inexperienced therapists with regards to multicultural issues in supervision and counseling.

The first set of questions were preliminary and descriptive in nature.

Explicit MC Events

Research Question 1: What was the antecedent for explicit discussion of multicultural material in supervision sessions? In counseling sessions?

Research Question 2: What happened when multicultural material was discussed explicitly in supervision sessions? In counseling sessions (who raised the material; what aspect of diversity – race, gender, etc. – was discussed; depth and length of the exchange; etc.)?

Research Question 3: What were the consequences of discussing multicultural material explicitly in supervision sessions (positive, no noticeable effect, negative)? In counseling sessions?

Research Question 4: What could have occurred that did not in the explicit discussion of multicultural material in supervision sessions? In counseling sessions?

Research Question 5: What prevented these possibilities from being carried out? In other words, why did the explicit events go as they did?

Research Question 6: When MC content is dealt with in supervision, does it find its way into the therapy session(s)? If yes, how does this play out (supervisee parrots supervisor's words, suggestions, etc., supervisee goes step further than supervision content, etc.)

Descriptive Questions

Research Question 7: Does counseling self-efficacy increase pre and post supervision?

Research Question 8: Does supervisee multicultural competence increase pre and post supervision?

Research Question 9: What were participants' evaluations of the depth and

smoothness of therapy sessions? Supervision sessions?

Research Question 10: How satisfied were the clients with therapy? How satisfied

were the supervisees with supervision?

Research Question 11: Was there a change in client symptoms over time?

Research Question 12: What type of multicultural material was present in trainee

case notes of the therapy sessions?

Research Question 13: What multicultural content was present in things left unsaid in

therapy sessions and supervision sessions?

Research Question 14: What of the most and least helpful incidents was multicultural

in nature?

Chapter 4. Method

Design

The present study utilized a single-subject, naturalistic, case-study design of two individual counseling relationships and the corresponding individual supervision. The counseling included a total of 5 weekly sessions for each counseling dyad. The first supervisory dyad included one pre-therapy meeting (before the supervisee began working with the client) and 5 subsequent supervision meetings for a total of 6 meetings. Due to a scheduling conflict the second supervisory dyad did not meet for their second session until after the supervisee's 2nd therapy session. Therefore, there were only 5 supervision meetings.

Participants

Supervisors. Supervisor 1 was a 30-year old, bisexual Caucasian female advanced doctoral student in counseling psychology. She had supervised a total of seven trainees in her one year of experience providing supervision to counseling trainees and was participating in a supervision practicum course at the time of this study. She identified most strongly with a psychodynamic/humanistic theoretical orientation. Supervisor 2 was a 28-year old, heterosexual, African-American male advanced doctoral student in rehabilitation counseling. He had no previous experience with supervising trainees. He identified most strongly with a humanistic/cognitive-behavioral theoretical orientation. Both supervisors took part in group supervision meetings with an experienced professional to monitor their work with their trainees, though specific data for these supervision of supervision meetings was not obtained for this study.

Therapists (Supervisees). Therapist 1 was a 25-year old, heterosexual Caucasian female. She was a first year graduate student in the college student personnel program in the College of Education. Her only previous counseling experience was a basic counseling skills course. She identified most strongly with a humanistic/cognitive-behavioral theoretical orientation. Therapist 2 was a 29-year old, heterosexual Caucasian female. She was a first year graduate student in rehabilitation counseling. Her only previous counseling experience was a basic counseling skills course. She identified most strongly with a humanistic/cognitive-behavioral theoretical orientation.

Clients. Client 1 was a 21-year old, heterosexual Asian female. She did not indicate a specific presenting concern at the outset of counseling. Her only previous counseling experience was as a volunteer client as part of a class. Client 2 was a 21-year old, heterosexual Asian female. Her presenting concern was stress, but another motivation she stated for participating was to see what counseling sessions were like. She had no previous counseling experience.

Judges. Two doctoral students in a counseling psychology program at a large, diverse southwestern university served as judges. One judge was a 23-year old, Latino female in her second year of graduate school. The second judge was a 26-year old, Asian male with a Masters degree in counseling and considerable research experience. Judges were recruited by personal contact with the principal investigator and through an e-mail message to their graduate program. Judges were selected on the basis of their interest in conducting psychotherapy research and their broad understanding of psychotherapy and multiculturalism. Judges were informed of the

purpose of the study. In addition, the principal investigator, a 28-year old African-American male with a Masters degree in counseling, from a large, diverse mid-eastern university, also served as a judge. The principal investigator's graduate advisor, Clara Hill, served as the auditor for the study.

Measures

Note that internal consistency was not assessed for any of the measures for this study given the small sample size.

Demographics. The supervisors were asked to indicate gender, age, race/ethnicity, sexual orientation, years supervising, number of trainees supervised, and theoretical orientation. The therapists (supervisees) were asked to indicate gender, age, race/ethnicity, sexual orientation, type of graduate program, year in program, past counseling experience, and theoretical orientation/counseling approach. The clients were asked to indicate gender, age, race/ethnicity, sexual orientation, presenting concern, and previous counseling experience.

Session Evaluation Questionnaire. The Depth (session effectiveness) and Smoothness (perceived comfort of session) Scales of the Session Evaluation Questionnaire (SEQ; Stiles & Snow, 1984) was used to evaluate both the supervision and therapy sessions. Each scale has six bipolar adjectives presented in 7-point semantic differential formats. Respondents are instructed to "please circle the appropriate number to show how you feel about this session." An example of an adjective set from the Depth scale is "shallow" versus "deep" and an adjective set from the Smoothness scale is "relaxed" versus "tense." Depth is the extent to which a session is perceived as deep and valuable. Smoothness refers to the emotional

climate of a session; whether the session is perceived to be comfortable and pleasant.

The scales have good internal consistency, with .91 for counselors and .87 for clients

for Depth, and .93 for clients and .89 for counselors for Smoothness (Stiles & Snow,

1984). Stiles et al. (1994) reported correlations between the SEQ Depth and

Smoothness Scales and the Understanding, Problem Solving, and Relationship

subscales of the Session Impacts Scale (Elliot & Wexler, 1994), providing evidence

of the concurrent validity.

Counselor Activity Self-Efficacy Scales. The Counselor Activity Self-Efficacy

Scales (CASES) assess self-efficacy for performing helping skills, managing the

counseling process, and handling challenging counseling situations. Lent et al.

(2003) reported adequate internal reliability estimates for each of the subscales. The

Exploration Skills ($\alpha = .79$), Insight Skills ($\alpha = .85$), Action Skills ($\alpha = .83$), and

Session Management ($\alpha = .94$) subscales were used in the present study. An example

of an item that composes the Session Management subscale asks the respondent how

confident they are that they could "help your client to set realistic counseling goals"

over the next week (Lent et al., 2003). The CASES total score was correlated .76

with the overall COSE score, the CASES Session Management and COSE Process

scales were highly correlated, and the CASES correlations with Social Desirability

ranged from -.02 to .22 providing adequate convergent and discriminate validity for

the CASES.

Supervisory (and Client) Satisfaction Questionnaire. The Supervisory

Satisfaction Questionnaire (SSQ, Ladany, Hill, Corbett, & Nutt, 1996) is a modified

version of the Client Satisfaction Questionnaire (CSQ, Larsen, Attkisson, Hargreaves,

& Nyguyen, 1979). The terms "counseling" and "services" are replaced with the term "supervision." The SSQ and CSQ are 8-item instruments that ask participants to rate their satisfaction with various aspects of supervision or counseling on a 4-point scale ranging from *low* (1) to *high* (4). Higher scores reflect greater satisfaction, with scores ranging from 8 to 32. An example item would be, "How would you rate the quality of supervision (counseling) you have received?" The CSQ has consistently demonstrated adequate internal consistency (between .84 and .93) and the SSQ has an internal consistency of .96 (Ladany et al., 1996). Larsen et al. (1979) demonstrated adequate discriminate validity for the CSQ when compared to the Symptom Checklist (SCL-90) and Brief Psychiatric Rating Scale (BPRS).

Cross-Cultural Counseling Inventory – Revised. CCCI-R is a 20-item, 6 point Likert scale (1=strongly disagree to 6=strongly agree) designed for supervisors to assess trainees' cross-cultural counseling competence. An example of an item on the CCCI-R would ask the respondent to indicate how much they agree with the statement "the trainee values and respects cultural differences." Cross-cultural counseling skill, sociopolitical awareness, and cultural sensitivity are the 3 areas assessed by the CCCI-R. Internal consistency for the instrument has been reported at .95 (LaFromboise et al., 1991). Content validity was established by use of expert raters who classified CCCI-R items into one of three multicultural competency areas (awareness, knowledge, and skills); criterion-related validity was evidenced by above average ratings of counselors who were perceived as possessing high levels of multicultural competence. The CCCI-R has demonstrated adequate internal consistency when modified into a self-report measure (.88, Constantine & Ladany,

2000) or client measure of counselor multicultural competence (.90, Constantine, 2002).

Outcome Questionnaire-45.2. The Outcome Questionnaire 45.2 (OQ 45.2, Lambert, Burlingame, Umphress, Hansen, Vermeersch, Clouse, & Yanchar, 1996) is a 45-item self-report outcome instrument designed for repeated measurement of client progress throughout the course of therapy and at termination. Items on the OQ 45.2 are scored on a 5-point Likert-type scale from never (4) to almost always (0). The internal consistency reported for the total OQ 45.2 was .93 and the test-retest reliability was .84 (Burlingame, Lambert, Reisinger, Neff, & Mosier, 1995). Burlingame et al. (1995) reported adequate criterion validity for the OQ 45.2, which was correlated .61 with the SCL-90, .63 with the Beck Depression Inventory, and .81 with the Zung Self-Rating Anxiety Scale. It also appears that the OQ 45.2 is sensitive to change in clinical settings within one-week of treatment (Vermeersch, Lambert, & Burlingame, 2000).

The instrument has three subscales: 1) symptomatic distress (i.e., intrapsychic discomfort, such as depression and anxiety), 2) interpersonal relationships, and 3) social role functioning (i.e., important life tasks such as work and school). Sample items from the measure include, "I feel lonely" and "I have trouble getting along with friends and close acquaintances". There is strong construct validity for the use of the global OQ score (Burlingame et al., 1995), however, some evidence suggests that there is not adequate construct validity for the use of the three subscales (Mueller, Lambert, & Burlingame, 1998; Umphress, Lambert, Smart, Barlow, & Clouse, 1997). Therefore, the overall scale was used for this study.

Helpful Incidents Questionnaire. This free response question asked the supervisor and supervisee, and counselor and client to indicate what they considered to be the most and least helpful aspects of each supervision/counseling session.

Things Left Unsaid Inventory. This is a paper and pencil, open-ended measure about what was experienced but not overtly stated during a session (Hill et al., 1993). The client was asked, "What, if any, thoughts or feelings did you have during the session that you did not share with your therapist?" and "Why didn't you tell your therapist?" The therapist was asked, "What, if any, thoughts or feelings do you think the client had but did not share with you?" The supervisee was asked, "What, if any, thoughts or feelings did you have during the session that you did not share with your supervisor?" and "Why didn't you tell your supervisor?" The supervisor was asked, "What, if any, thoughts or feelings do you think the supervisee had but did not share with you?"

Case notes. Therapists were asked to complete case notes after each session. The instructions stated, "At this point in your counseling with this particular client, please write notes addressing what you think the etiology of the client's concerns is (what are the client's problems and what do these problems stem from) and the course of treatment you intend to use to address these concerns (what you plan to do to help the client)."

Process notes. Therapists completed process notes as a regular part of their practicum training experience and supervision. In other words, they would have completed these process notes whether or not they were participating in the current study. The principle investigator had no knowledge that these notes existed until the

conclusion of data collection (the end of the practicum experience), at which point he requested these notes from the therapists. The notes were sent to the principle investigator over e-mail. No further face-to-face contact with participants took place. For session 1, this process note consisted of sections that addressed the client's presenting concern, current life situation, a description of the client, the therapeutic relationship, counseling plans, intervention strategies, and issues to discuss during supervision. For all other sessions, this note consisted of sections that addressed the client's behavior, the therapeutic relationship, counseling plans, intervention strategies, and issues to discuss during supervision.

Case summary. Therapist 1 also supplied a case summary along with her process notes. As with the process notes this case summary was not directly requested for the purposes of this study and would have been completed regardless of Therapist 1's participation in this study. This case summary consisted of a description of the client, history of the problem, course of therapy, therapeutic relationship, case conceptualization, and questions for class discussion. Therapist 2 did not provide a case summary along with her process notes.

Procedures

Initially, a licensed professional with considerable clinical experience and a solid reputation with respect to multicultural issues was approached to participate in this study. This individual agreed to participate at first but later had to withdraw from participation because of other professional obligations. At that point it was decided to recruit graduate student supervisors.

The supervisors that participated were recruited at a large mid-eastern public university to participate in this study. Their participation was requested based on recommendations from faculty with regard to their interest in and knowledge of multicultural issues. Supervisors were informed that the purpose of the study was to examine multicultural issues in supervision and counseling but were not asked to alter their approach to supervision or given specific directions. Therapists were recruited at a large mid-eastern public university. The therapists recruited were trainees who had already been assigned to the supervisors recruited for this study. The trainees had to agree to participate in the study in order for the supervisors to participate. Therefore, only two therapists were approached for participation in this study and both agreed. Therapists were told the purpose of the study was to explore supervision's impact on a therapist-in-training's counseling skills, and the subsequent process and outcome of the trainee's counseling sessions. There was no mention of the focus on multiculturalism in the study.

Clients for this study were recruited from a pool of clients that had been selected from undergraduate courses in the psychology and education departments. This pool of clients had been gathered for a pre-practicum course that was a typical part of the curriculum in the education department. Clients received course credit for participating. Given the inexperience of therapists at this level clients with more serious psychological problems (suicidal or homicidal ideation, depression, etc.) were referred to other mental health services and not included in the pool. Clients for this study were selected on the basis of being a racial minority. Also, an attempt was made to look for presenting concerns that might more readily pull for racial or other

multicultural content (isolation on campus, 1st generation college student, etc.). Anecdotally, the presenting concerns indicated on the study materials participants received at session 1 differed from those given when clients first volunteered for the pre-practicum pool (and were the basis on which clients were selected). Unfortunately, this information was not kept at the outset of the study (the assumption being that clients would indicate the same presenting concern on the study materials as had been indicated for the pre-practicum pool) and was not available at a later point to include in this manuscript.

After being selected from the pool, the two clients were contacted by the practicum coordinator to gauge their willingness to participate in this study. At that time clients were told that they would be asked to complete some brief paperwork before and after sessions, and that sessions would be taped and then analyzed. Clients were told the purpose of the study was to explore supervision's impact on a therapist-in-training's counseling skills, and the subsequent process and outcome of the trainee's counseling sessions. Both clients contacted agreed to participate and were then assigned to the therapists, who contacted the clients to set up a meeting time. Except for an extra tape recorder and paperwork, there were no procedural differences in this study than were present in the normal pre-practicum sessions. In fact, another study was being conducted using these pre-practicum sessions at the same time as the current study. The participants in the current study were exempted from participation in the other study. No compensation was offered to any participant (supervisor, therapist, client) in this study.

First session. All participants completed the consent and demographic forms prior to the start of the first meeting. The clients completed the OQ-45 prior to the start of the first counseling session. The supervisees completed the Counseling Activity Self-Efficacy Scales (CASES), and Cross-Cultural Counseling Inventory-Revised (CCCI-R) prior to the start of the first supervision session. Following the initial supervision session (before the trainee saw the client), the supervisor completed the CCCI-R in order to obtain the supervisor's initial perceptions of the trainee's multicultural competence. Participants brought their own audiotape equipment for this and subsequent sessions as part of their practicum requirements. The principal investigator provided all participants with audiotape equipment prior to this and subsequent sessions as well. Therefore, there were always two tape recorders activated for every session that was part of this study. The principal investigator remained to answer any questions participants had at the end of the first session. Participants did not indicate any difficulties with the study materials or procedures.

All sessions. Prior to each therapy session the clients completed the OQ-45. After each supervision and counseling session participants completed the SEQ, Helpfulness Questionnaire, and Things Left Unsaid Inventory. The counselors were also asked to complete case notes following each session.

Conclusion of counseling/supervision. The supervisors and trainees completed the CCCI-R at the conclusion of supervision. The supervisee also completed the Supervisory Satisfaction Questionnaire (SSQ), and CASES. The client completed the CCCI-R and Client Satisfaction Questionnaire (CSQ) at the conclusion of counseling.

Qualitative Analysis. The principal investigator and two judges listened to the audiotapes and read the transcripts to identify moments when multicultural material was discussed explicitly (to be called explicit events) and moments when multicultural material could have been discussed but was not (to be called possible events).

For the explicit events, all judges had to agree on the event as well as the beginning and ending points of the event for the event to be considered for further analysis. For possible events, judges attempted to identify only those moments where it seemed reasonable that multicultural issues could have been raised. In other words, judges looked for specific moments within sessions, based on the session material, where multicultural material could have reasonably been raised by one of the parties involved.

The principal investigator almost always solicited the thoughts of the other judges about the sessions before offering his thoughts so as not to bias the results. Also, judges frequently disagreed with the principal investigator and the research team functioned in an egalitarian manner, rather than things being dictated by the principal investigator.

Next, the principal investigator compiled the research team thoughts into a systematic form. Explicit events were categorized according to the antecedent (what led to the MC event), what happened, the consequences (positive, no noticeable effect, negative), what could have happened (e.g., supervisor could have said more about X and this might be the result of saying more about X), and the reasons these possibilities did not occur. Possible events were categorized according to the

antecedent (what in the session could have led to an MC event), what could have happened, and reasons these possibilities did not occur.

Next, the principal investigator sent the compiled data to the two judges for review. The comments and suggestions of the judges were incorporated into the compiled data. Judges only expressed minor adjustments to the compiled data and not large omissions, additions, or disagreements. The data were then sent to Clara Hill for auditing. Based on her auditing, some material was adjusted or better clarified by the judges using consensus.

Coding process notes. Judges analyzed the trainee's process notes for the presence of multicultural material. Discrepancies between judges were discussed until consensus was reached. The data were then sent for auditing, and revisions made by the team using consensus.

Coding things left unsaid. Judges examined the responses to the things left unsaid for multicultural material. Discrepancies between judges were discussed until consensus was reached. The reasons for things being left unsaid were also examined for multicultural content and consensus reached between judges. The data were then sent for auditing, and revisions made by the team using consensus.

Coding helpful incidents. Judges examined participant's responses about the aspects of therapy and supervision sessions that were helpful or unhelpful for multicultural material. Responses were discussed until consensus was reached. The data were then sent for auditing, and revisions made by the team using consensus.

Chapter 5. Results

Qualitative Analyses of Session Data

Overall, there were four events where multicultural material appeared explicitly in Supervisory Dyad 1. There were eight events where multicultural material appeared explicitly in Supervisory Dyad 2. There were three events in Counseling Dyad 1 and two events in Counseling Dyad 2 where multicultural material appeared explicitly. An explicit event could contain more than one multicultural issue.

Research Question 1: What was the antecedent for explicit discussion of multicultural material in supervision sessions? In counseling sessions?

Table 1 contains the antecedents for discussion material in both supervision and counseling and the number of times each antecedent was present among the multicultural events for that dyad.

Table 1

Antecedents for Multicultural Events

	Antecedent	# times
Sup. Dyad 1	Therapist CT	1
	Feedback from therapist's classmates	1
	Supervisor support of therapist	1
	Therapist self-doubt [concern about her effectiveness/competence]	1
Sup. Dyad 2	Supervisor asking directly about therapist goals for next counseling session	2

	Client's relationships	2
	Supervisor questions about therapist's perception of client	2
	Procedural concerns	1
	Therapist recapping past counseling session	1
C. Dyad 1	Client's relationships	3
C. Dyad 2	Client's relationships	2

Supervisory Dyad 1

Out of four explicit events, there was no consistent antecedent for discussion of multicultural material in the first supervisory dyad since none of the antecedents led to multicultural material being raised in session more than once.

Supervisory Dyad 2

Out of eight explicit events, there was no antecedent that led to a majority of the explicit multicultural events in this dyad. However, several antecedents did occur at least twice. One such antecedent was the supervisor asking the therapist directly about her goals for the next counseling session. For example,

S: So your goals for the next session with her would be?

T: I want to know how she's dealing with her ex-boyfriend, what emotional conflict she's going through. Whether or not she's right to break the ties and move on. I want to talk about her friends and her family, whether or not she's feeling comfortable, more so her friends

because I don't think she'll ever feel comfortable with her family

because I think that is more of a cultural thing, but her friends, seeing

if maybe that's gotten a bit stronger and if she's able to share with

them a little bit where she's at.   And then also talk about her direction

and her goals for school.

Discussion of the client's romantic relationship (referred to throughout this

manuscript under the term relationships, which includes non-family relations such as

romantic partners and friends) also led to the appearance of multicultural material in

session twice, as illustrated below.

S: And maybe seeing if choosing grad school is related to her

boyfriend, wanting to be close to her boyfriend. Do you think that's

it?

T: Yeah, I guess it's probably important to explore like how, you

know, whether or not she's still trying to keep ties with her boyfriend

or whether she's able to cut ties and move forward. She did kind of

talk a little bit about her boyfriend not being sensitive to the fact she

now has to drop this class because of the ultimatum that he gave. And

I said, "What do you think about that?" She said that, she almost said

she deserved it because she had treated him that way for a year and

now she got to taste her own medicine. So she's very (inaudible).

S: And as a female, how does that make you feel? Like you know

what I mean? Yes, you are her counselor and at the same time you are

a female. You know, you're hearing this and basically giving your

own opinion, giving you own feelings, sharing that with her, you

know, as a female point of view. Giving that to her, sharing that with

her I think would give her a better understanding of what, you know,

what it is because… And this is where it's like, sometimes it's O. K.

as a counselor to be at the same level as your client and you can share

certain bonds. Like you are a female and she's a female and you guys

will have feelings and you know…

The final two-time antecedent was supervisor questions about the therapist's

perceptions of the client (e.g., "Do you know anything about your client on

anything?"). All other antecedents occurred once, including procedural concerns

(e.g., supervisor and therapist/trainee introducing themselves to one another by

describing their previous experiences).

Counseling Dyad 1

Discussion of the client's relationships was the primary antecedent in this

counseling dyad, preceding all three explicit events. See Appendix A for an example.

Counseling Dyad 2

Discussion of the client's relationships was the only antecedent for the two

events in the second counseling dyad.

Summary

There was no clear or consistent antecedent for explicit events in either

supervisory dyad. Also, there was no clear antecedent across supervisory dyads,

since none of the antecedents in Supervisory Dyad 1 appeared as antecedents in

Supervisory Dyad 2. In both counseling dyads and across the counseling dyads, the

client's relationships were a clear antecedent for the appearance of multicultural material.

Research Question 2: What happened when multicultural material was discussed explicitly in supervision sessions? In counseling sessions (who raised the material; what aspects of diversity – race, gender, etc. were discussed; depth and length of the exchange; etc.)?

Table 2 contains the number of times each participant in a supervision or counseling dyad raised multicultural issues, and the frequency that certain multicultural issues appeared.

Table 2

Multicultural Issues and Who Raised Them

	Themes	# times
Sup. Dyad 1	Trainee raised MC	3
	Supervisor raised MC	2
	Gender	2
	Sexual orientation	2
	Race/ethnicity	1
	Age	1
	Culture	1
Sup. Dyad 2	Trainee raised MC	4
	Supervisor raised MC	4
	Culture	5

	Race/ethnicity	3
	Gender	2
	Disability	1
C. Dyad 1	Client raised MC	3
	Therapist raised MC	0
	Gender	3
	Age	1
C. Dyad 2	Client raised MC	1
	Therapist raised MC	1
	Gender	1
	Race/ethnicity	1
	Culture	1

Supervisory Dyad 1

Among four explicit events, the trainee was responsible for multicultural material being raised in-session more frequently than the supervisor. Notably, in one event the therapist mentioned age and then in the next speaking turn the supervisor mentioned wanting to address the issue of the therapist and client as "culture being(s)" at some point. Therefore, this exchange was classified as one event but each person was credited with raising a distinct multicultural issue.

The depth of these exchanges was generally brief and shallow, which was an interaction where multicultural material was mentioned but there was little or no exploration of this material. For example,

S: And, one of the pieces that hopefully will be woven throughout, I'm hoping that this is coming up in your class, but also sort of looking at who you are relative to who your client is, and being able to think about yourself as a sort of cultural being in the room and your client as a sort of cultural being in the room and me in this relationship as having all my stuff that I bring in, being able to maybe talk about, and think about that, how those dynamics kind of influence what is happening as well. That's certainly an area of particular interest for me and I feel pretty important and pretty consistent with what the departmental condition is in terms of providing culturally affirmative, having you know, I want to talk to you more about that but I'm also really aware of the time and feel like we have to, maybe we should kind of turn this into administrative stuff so that I can feel like you're set and then if we have more time at the end to talk about…

This example also contains the single mention of culture in this dyad and was initiated by the supervisor. See Appendix B for the one event that was moderate in depth and length, and contains several multicultural issues such as sexual orientation, race/ethnicity, and gender. No events were considered lengthy and deep.

The supervisor being supportive of the trainee was a consistent theme among the explicit events. See Appendix C for an example of an exchange

containing this theme. Several other content areas, such as similarity between the therapist and client, were only present once.

Supervisory Dyad 2

The trainee and supervisor were responsible for multicultural material being raised in-session an equal amount. The depth of these exchanges was generally brief and shallow, except for one that was moderate. Culture was the most frequently discussed multicultural issue. Family [the client's] emerged as the dominant theme among the multicultural events, appearing five times. The following example, which was brief and shallow, contains mention of both culture and the client's family.

> T: We talked a little bit about her parents and their expectations
>   and the fact that she does have this need to fulfill what they want. We
>   talked a little bit about the fact that, the need for prestige is kind of
>   related to the fact that she doesn't want to let her parents down. We
>   talked briefly about her friends and like their perceptions because our
>   conversation during the time was mores so about the fact that while
>   she was dating her boyfriend -- I think it was probably like a year
>   relationship – while she was dating him she kind of cut her ties with
>   her friends. She started spending less time with them, so she feels like
>   she doesn't have as strong of a support structure as she used to. She
>   can't talk to her family about it. And her friends, although they know
>   about it, she doesn't feel comfortable talking to them about it, partly
>   because she hasn't spent as much time with them, but also because of

her culture issues, comfort with showing emotions. She called it weakness.

S: So there is a cultural taste to this…

The supervisor asked the therapist to play the tape of the session following this exchange. They did not process cultural issues immediately following this exchange, though they did return to these issues later in the supervision session.

S: I think I already know what kind of person she is. What kind of person do you think she is?

T: I think she's someone who has set really high standards for herself, doesn't allow herself to fail and if she does, she berates herself for it. And that's why she's uncomfortable with her emotions 'cause to her, that's a sign of failure. It's part of the reason her support structures, she not able to communicate to them because she doesn't want them to see that she's failed in her eyes.

S: Did you get into her family as far as like their culture and relationships? Not only relationships but ask like what is failure to them? And maybe that why she has high standards for herself.

T: She said that her mom, like when she, not about failure but we're talking more so about support structure, she said that her mom, whenever she tries to talk to her mom about things that are going on, it's more of like a gossipy thing. Like her mom will ask the details but she's not really being supportive and she's not really concerned about

her feelings but more so like give me the details, give me the dirt. And her dad, like he doesn't talk so he's just useless anyways. And she mentioned it was like a cultural thing. Like her culture. She just said, "It's a cultural thing." And I said, "Well tell me about your culture." And she said that you know, it's a sign of weakness to show your emotions and it's not O. K. to fail. And you have high expectations.

S: She does appear like somebody who does set high standards for herself. And if she doesn't succeed to those standards, it's like she's lost, she's confused, she doesn't know what to do, and she is weak. She can't go back to her parents because her parents are going to think that she failed. What are some of the things – I know you told me some of the few things that you raised that you were going to do with her. What was the end result?

T: The end result, basically we had said it is still important for her to look into her options, getting her information about the careers, so it's still important for her to go to the Career Center. We also talked about the fact that she needs to try not be so hard on herself, for the fact that she's in the situation that she's in. That people are allowed – that life basically presents circumstances that are out of your control. And that she can't always control the things that come her way but what she can do is try to roll with it. And we talked a little bit about you know, that basically in the future continue to talk about her feelings with the relationship and where that's at, and kind of

rebuilding her support structures and feeling comfortable with her

emotions and with her outcomes.   I mean I guess a plan would be

to….

Other themes, like emotional expression [client], which was present in the

example above, and relationships appeared twice. Direct supervisor feedback

also appeared twice, as illustrated in the following exchange.

Therapist 12:   That's what we need to do, to clarify.

Supervisor 13: Not only that, but it's like her self-esteem is low and

confused and you have to bring that up somehow. I think it's kind of

fortunate that you're a female, a female counselor. I think that

relationship, instead of a male counselor [inaudible] [mutual laughter].

But I definitely think you should use that to your advantage as far as

the similar gender and using your experience of feeling like you could

go on.

Several other content areas, such as supervisor self-disclosure only appeared

once.

Counseling Dyad 1

In three explicit events, the client was responsible for multicultural material

being raised in-session all three times. Gender issues were present in all three events,

while age was present once. Two of these exchanges were of moderate length and

depth and one was brief and shallow. The client's relationships were the primary

theme among the explicit events. Family and career were present once. See

Appendix D for an exchange from this dyad that was of moderate depth and length,

and where gender issues and the theme of relationships (specifically the client's boyfriend) were present.

Counseling Dyad 2

In two events, the client and therapist were responsible an equal amount for multicultural material being raised. No dominant multicultural issue emerged. One exchange was brief and shallow and one exchange was moderate in depth and length. Relationships and family were present in both of these events. See Appendix E for an example of a moderately deep and lengthy exchange from this dyad, which contained mention of culture, race/ethnicity, and family.

Summary

There were more multicultural events in Supervisory Dyad 2 than in Supervisory Dyad 1. Across both supervisory dyads the supervisor and trainee were nearly equivalent in the number of times they raised multicultural issues. The majority of events were brief and shallow. Culture, gender, and race were the multicultural issues that appeared in both dyads. Culture was the multicultural issue that appeared most often when accounting for both dyads. Supervisor support of the therapist was the dominant theme that characterized the interaction in dyad 1. In other words, when multicultural material appeared in this dyad a characteristic frequently seen in those interactions was the supervisor supporting the therapist. Interestingly, this theme was not present, even once, in dyad 2. The client's family was the dominant theme in dyad 2. None of the most frequent themes in dyad 2 appeared in dyad 1.

There were very few explicit multicultural events in the counseling dyads. Across both counseling dyads the client raised multicultural issues more frequently than did the therapist, and the majority of events were moderate in depth and length. Gender was the multicultural issue that appeared most often when accounting for both dyads, and relationships and family were the most frequently observed themes.

Research Question 3: What were the consequences of discussing multicultural material explicitly in supervision sessions (positive, no noticeable effect, negative)? In counseling sessions?

Supervisory Dyad 1

There was no noticeable effect when multicultural material was raised in this dyad. For example,

> S: And, one of the pieces that hopefully will be woven throughout, I'm hoping that this is coming up in your class, but also sort of looking at who you are relative to who your client is, and being able think about yourself as a sort of cultural being in the room and your client as a sort of cultural being in the room and me in this relationship as having all my stuff that I bring in, being able to maybe talk about, and think about that, how those dynamics kind of influence what is happening as well. That's certainly an area of particular interest for me and I feel pretty important and pretty consistent with what the departmental condition is in terms of providing culturally affirmative, having you know, I want to talk to you more about that

but I'm also really aware of the time and feel like we have to, maybe

we should kind of turn this into administrative stuff so that I can feel

like you're set and then if we have more time at the end talk about…

(Inaudible). I don't want to have you leaving and feeling like you're

undone. First things first, you're client, there is a photocopy of this

sheet in your instructor's mailbox right now.

The supervisor shifted to procedural concerns and the trainee was never given

a chance to respond to the mention of culture. Out of the four events raising

multicultural issues appeared to have a positive effect once, which is

illustrated in Appendix F.

Supervisory Dyad 2

Of the eight times multicultural material was raised in this dyad, there was no

noticeable effect in four of the events.

S: Do you know if your client will be – Do you know anything

about your client on anything?

T: I know that she's a senior. I know her availability. I think she

said like three o'clock basically everyday during the week. And that's

all I know, except that she's a psychology student.

S: Ethnic background or anything like that? Or are you not sure?

T: I don't think so. That's about it.

There was a positive effect once. This event is illustrated in Appendix G. Even

though there was very little depth to the multicultural issues raised in the Appendix G

interaction, this was arguably the most relaxed and free flowing moment in any of

their supervision sessions. There was a negative effect in three of the events. For example,

> T: You know, basically I summarized what we talked about and I
> asked her if she went to the Career Center since we last spoke. And
> she kind of went into explaining that she didn't get a chance to go to
> the career center and that some things had happened and that she
> missed the mid-term and so that she had to drop the class and like all
> this other stuff, which all come from a relationship problem. And so I
> asked her if she wanted to talk about it. And she didn't, like she just
> like clammed up. And I said, "It's O. K. if you don't but is it fair to
> say that this is causing, you know, a lot of problems (all the time)?
> And she said, "Yeah." And then she ended up finally kind of talking
> about it. And so it was good. And I felt like – She did comment that
> her culture --- she can't talk to her parents because in her culture you
> just don't.
>
> S: Talk to her parents about the type of field that she wants to get
> into, right?
>
> T: No. Talk to her parents about her feelings of frustration due to
> her relationship. Because her parents feel... Basically, she and her
> boyfriend broke up. And….
>
> S: Hold on. The last session

Because of the supervisor's confusion, the therapist needed to clarify what was said and in so doing they never returned to actually processing the cultural material.

Frequently the supervisor and therapist did not seem to be on the same page during their sessions, which resulted in them spending time clarifying rather than exploring more deeply.

Counseling Dyad 1

All three multicultural events were judged to be positive in this dyad. For an example see Appendix H.

Counseling Dyad 2

Of the two explicit events, one was considered positive and the other negative. The negative event appears in Appendix I. In this event the client mentioned the cultural pressure she feels and the therapist seemed to mostly ignore it. The client continued to respond to the therapist's interventions but by the end of this segment it appears that the therapist was reenacting the pattern the client had with her mother, a pattern the client mentions during this exchange. Namely, the therapist seemed to give directives and did not reflect much of what the client was feeling, including not acknowledging the cultural pressure the client mentioned.

Summary

Raising multicultural issues tended have no noticeable effect in both supervisory dyads. Raising multicultural issues tended to have a positive effect in both counseling dyads. Interestingly, the only events with a negative effect occurred in the second triad (Supervisory Dyad 2 – Counseling Dyad 2; 1 negative event in counseling, 3 in supervision).

Research Question 4: What could have occurred that did not occur in the explicit discussion of multicultural material in supervision sessions? In counseling sessions?

Table 3

Possible Themes   # times

	Possible Themes	# times
Sup. Dyad 1	Trainee should raise MC	0
	Supervisor should raise MC	4
	Gender	3
	Race/ethnicity	2
	General MC	1
	Culture	1
Sup. Dyad 2	Trainee raised MC	4
	Supervisor raised MC	4
	Culture	5
	Race/ethnicity	3
	Gender	2
	Disability	1
C. Dyad 1	Client raised MC	3
	Therapist raised MC	0
	Gender	3
	Age	1
C. Dyad 2	Client raised MC	1
	Therapist raised MC	1
	Gender	1
	Race/ethnicity	1
	Culture	1

Supervisory Dyad 1

In examining what more could have occurred, but did not, in these four explicit events, judges generally felt the supervisor was the person in the dyad most responsible for raising additional multicultural material. In other words, in making suggestions of what could have occurred judges always said, "the supervisor could have done X," and never said the "trainee could have done X." Gender, race, and general MC, in that order, were the most frequent multicultural issues identified by the judges that could have been raised more. General MC was defined as those instances where multiculturalism or diversity could have been mentioned in non-specific terms. For example, the supervisor could have asked the trainee, "What have you discussed in terms of diversity in class? What is your view of the role diversity plays in counseling?"

Judges felt strongly that one of the primary tasks that could have taken place more frequently in the explicit events was further exploration of the multicultural issues raised. In other words, probing and exploring multicultural issues more extensively when these issues were raised explicitly in session. Instead, the sessions often seemed to shift to other topics when multicultural issues were raised without a lengthy or deep exploration. For example,

S: And, one of the pieces that hopefully will be woven

throughout, I'm hoping that this is coming up in your class, but also

sort of looking at who you are relative to who your client is, and being

able to think about yourself as a sort of cultural being in the room and

your client as a sort of cultural being in the room and me in this

relationship as having all my stuff that I bring in, being able to maybe

talk about, and think about that, how those dynamics kind of influence

what is happening as well. That's certainly an area of particular

interest for me and I feel pretty important and pretty consistent with

what the departmental condition is in terms of providing culturally

affirmative, having you know, I want to talk to you more about that

but I'm also really aware of the time and feel like we have to, maybe

we should kind of turn this into administrative stuff so that I can feel

like you're set and then if we have more time at the end to talk

about…

Instead of moving to administrative tasks, following up with the trainee about her

experiences with diversity and minority populations might have allowed the trainee to

explore her views of multiculturalism and therapy, and the supervisor would have

gotten a chance to assess the trainee's multicultural competence and openness to

multicultural issues. Another consequence might have been that it was made clear to

the trainee that multicultural issues were an acceptable and valued topic to be raised

in supervision.

As mentioned above, further exploration could have resulted in the therapist

gaining a better assessment of the trainee's multicultural competence. Assessing the

trainee's multicultural competence was another task the judges identified frequently

when examining what could have occurred. For instance, in one of the explicit

events for this dyad, the supervisor and trainee discussed the trainee's practicum

class. Specifically, they discussed the trainee's classmates speculating about the client struggling with sexual orientation. The supervisor said she didn't see sexual orientation as an issue for the client and then they didn't explore multicultural issues any further. This was a moment where the supervisor could have asked the trainee about other multicultural issues (race-ethnicity, etc.) that might be impacting the counseling relationship. Such an intervention might have allowed the supervisor to examine what consideration, if any, the trainee had given to multicultural issues in her work with her client. Indeed, the supervisor mentioned that "this could be contextualized in larger racial/ethnic dynamics" when discussing the client's issues, but there was no further exploration of this concept. Again, the supervisor could have used this comment to prompt the trainee to discuss the possible racial/ethnic dynamics for the client or therapy relationship.

Supervisory Dyad 2

As in the first dyad, judges felt the supervisor was most responsible for raising additional multicultural material. Among the eight events, culture was the most frequent multicultural issue identified by the judges that could have been raised more, followed, in order, by race-ethnicity and gender (equal frequency), general MC, and socioeconomic status. The following is an example of an event where culture could have been raised more.

S: So your goals for the next session with her would be?

T: I want to know how she's dealing with her ex-boyfriend, what emotional conflict she's going through. Whether or not she's right to break the ties and move on. I want to talk about her friends and her

family, whether or not she's feeling comfortable, more so her friends

because I don't think she'll ever feel comfortable with her family

because I think that is more of a cultural thing, but her friends, seeing

if maybe that's gotten a bit stronger and if she's able to share with

them a little bit where she's at. And then also talk about her direction

and her goals for school.

The supervisor could have asked the trainee to talk more about the client not

talking to her family being a "cultural thing." This intervention by the

supervisor could also have been important because the trainee seemed to have

given up on exploring the client's family.

As in Supervisory Dyad 1, the judges felt strongly that one of the primary

tasks that could have taken place more frequently in the explicit events for dyad 2

was further exploration of the multicultural issues raised. The example utilized above

to highlight the supervisor raising culture as an issue would also be an example of

further exploration. Also, as in dyad 1, assessing the trainee's multicultural

competence was the second most frequently identified task identified by judges as

something that could have occurred. Focus on the therapy relationship (focus on

impasses, trainee reactions to Ct, transference or CT, etc.), client's family, and

client's relationships were each identified twice by the judges as content areas that

could have been addressed.

Counseling Dyad 1

There was one explicit event where judges did not feel there was more that

could have occurred than what actually took place. For the remaining two events,

judges identified the therapist as the person most responsible for raising multicultural issues. Gender was identified in both events as a multicultural issue that could have been addressed, while race, age, and socioeconomic status were each identified once among the two events. Follow-up on a specific client statement and focus on the client's relationships were identified as possible occurrences in the two events, while focus on the client's family was a possible occurrence in one event. The following example illustrates an event where follow-up on a client statement could have occurred.

> C: We've been friends for you know, three years, and then we started dating and he lives maybe fifteen minutes from me, away from me at home in New Jersey, so I mean, as far as like when we're on break and during the summer and stuff we still see each other all the time and we have very similar backgrounds and upbringings and I just, the more I think about it the more I see it being like a really realistic thing that could work out beyond college.

For this segment, which was part of a larger explicit event, judges felt that the therapist could have asked directly what the client meant when she said that she and her boyfriend come from "similar backgrounds and upbringings" or restate those words back to the client. This could give the therapist information about race/ethnicity or other aspects pertaining to the client's boyfriend, as well as, why he is someone she is considering marrying. Also, this intervention could have provided insight into the client's background, beyond her visible racial-ethnic and gender characteristics, such

as the socioeconomic status of her family. In addition, it would have been interesting to see how the client responded to this intervention. If she discussed all sorts of similarities without mentioning race-ethnicity, this might be an indication that race was not salient for this client. At the very least, it could have served as an opening to ask about the race-ethnicity of the client's boyfriend. It is possible that the client's boyfriend was not from the same racial or ethnic group, which might have implications for her parents' acceptance of her considering marriage to this man. Overall, follow-up on a client's statement ("upbringing") could have led to discussion of race-ethnicity, SES, or other multicultural issues, and would have involved the client's boyfriend, which was coded as relationships.

Counseling Dyad 2

As in dyad 1, judges felt the therapist was the person in the dyad most responsible for additional inclusion of multicultural issues. Among the two events, gender, culture, race-ethnicity, and SES were each identified once as multicultural issues that could have been raised. Follow-up on a specific client statement was identified as a possible occurrence in both events. Assessment (which referred to going beyond what the client stated to gather more information about the client's issues and difficulties) was also identified as a possible occurrence in both events. Discussion of the client's relationships and family were also possible occurrences in both events. For example,

T: Tell me a little about your support structure outside of him.

C: Well I can't talk to my parents about it because they weren't very unsupportive of us, but they weren't very supportive either, because there's a cultural difference between he and I, like I'm their only daughter and they expect me to pass it on, you know…I don't know, but there's that cultural side. But um…but with my friends…um…like the mistake my boyfriend and I made when we got together was that we just spent all our time together so we both lost our support systems and I think that the major downfall of our relationship is that when we would have problems with each other instead of turning to someone else, and sort of telling them, we just end up telling each other, and we would tell each other how mad we were, and it just escalated and made things worse, but I sort of lost all that closeness. They will try to help me and try to be supportive and try to be there for me and stuff, but I know a lot of them, they can't really handle it because I'm not the one to usually cry. I'm the one that people come to to cry. So like I can't talk to them about it because I'm so embarrassed that I cry. Even with my advisor yesterday when I cried, even with you, it's not…it's not who I am. I don't show it, it's my weakness. And that's how I know that I'm in trouble.

T: So, I'm assuming that your feelings….that your discomfort with crying and trying to push these kind of cultural things and that may be a problem with your family…but yet you're comfortable when people cry around you. Is it possible that you can try and flip the page

a little bit in that you crying around me is pretty much the same thing

as if I were in your shoes.

In this example, judges felt the therapist could have reflected more on the client's feelings of loneliness and lack of support, especially from family (coded as follow-up). Part of this acknowledgment could have been to address what the client said about cultural differences (coded as culture). For example, the therapist could have asked, "What do you mean there are cultural differences between you and him (coded as client relationships)?" The therapist could then have moved to exploration of the client's family, the pressure on her as the only daughter, and her parents' general style of interacting with her (coded as focus on the client's family). Also, further therapist exploration of the cultural dimension could have led to greater understanding of the client's support system (the therapist asked about the support system but did not explore this area to any great degree), family, relationship dynamics, and current difficulties (i.e., why does she stay in a relationship that is apparently detrimental, etc.) (coded as assessment).

Summary

Gender, culture, race, and general MC were the multicultural issues that appeared in both cases. Accounting for both cases, culture appeared most frequently. Gender and race-ethnicity appeared an equal amount and slightly less frequently than culture. Exploration, assessing the trainee's multicultural competence, focus on the client's family, and focus on the client's family were the most frequently identified themes for what could have been addressed in the multicultural events during supervision. The supervisor was

identified as the person most responsible for what could have occurred in both supervision dyads.

Gender was the dominant multicultural issue that appeared, though SES did appear as an issue that could have occurred in both cases. Follow-up on a specific client statement was the primary intervention or theme that could have occurred across both cases. Focus on the client's family was also a theme that could have arisen in both cases. The therapist was identified as the person most responsible for what could have occurred in both counseling dyads.

Research Question 5: What prevented these possibilities from being carried out? In other words, why did the explicit events go as they did?

Supervisory Dyad 1

In four events, a frequently mentioned possible reason for why the multicultural events went as they did was the supervisor prioritizing other issues and material over multicultural issues. For instance, in this example, the supervisor appeared to prioritize procedural concerns over exploration of multicultural issues, specifically, the supervisor's mention of culture.

> S: And, one of the pieces that hopefully will be woven
>
> throughout, I'm hoping that this is coming up in your class, but also
>
> sort of looking at who you are relative to who your client is, and being
>
> able think about yourself as a sort of cultural being in the room and
>
> your client as a sort of cultural being in the room and me in this
>
> relationship as having all my stuff that I bring in, being able to maybe
>
> talk about, and think about that, how those dynamics kind of influence

what is happening as well. That's certainly an area of particular

interest for me and I feel pretty important and pretty consistent with

what the departmental condition is in terms of providing culturally

affirmative, having you know, I want to talk to you more about that

but I'm also really aware of the time and feel like we have to, maybe

we should kind of turn this into administrative stuff so that I can feel

like you're set and then if we have more time at the end talk about…

(Inaudible). I don't want to have you leaving and feeling like you're

undone. First things first, you're client, there is a photocopy of this

sheet in your instructor's mailbox right now.

Another possible reason frequently identified for why the explicit events went

as they did was the supervisor supporting the trainee. In one explicit event, the

therapist reported that her class wondered about her client's sexual orientation.

During this interaction, the supervisor appeared to be protecting the trainee from

worrying about having missed something big (messing up), and therefore decided to

support the therapist's thinking and approach rather than explore more deeply the

issues the class brought up. This interaction can be found in Appendix C.

Other possible reasons identified, though only once, for why the events went

as they did were supervisor competence, which could include lack of preparation,

minimal experience as a supervisor, or other issues, supervisor countertransference or

bias, and diversity not being valued.

Supervisory Dyad 2

Among the eight explicit events, supervisor competence was the most frequently identified possible reason for why a multicultural event went as it did. Supervisor competence included issues like interactions being disorganized and no depth or follow-up on discussions regarding multicultural issues. Also, supervisor competence involved moments where it appeared to judges that the supervisor was not adept at working with multicultural issues in supervision. The supervisor prioritizing other issues over multicultural issues was a close second in terms of frequency. Lack of tape review and the therapist providing an inaccurate account of the therapy session were also identified several times as possible reasons. An example of the therapist's inaccurate account occurred in session 2.

> S: Did you get into her family as far as like their culture and relationships? Not only relationships but ask like what is failure to them? And maybe that why she has high standards for herself.
>
> T: She said that her mom, like when she, not about failure but we're talking more so about support structure, she said that her mom, whenever she tries to talk to her mom about things that are going on, it's more of like a gossipy thing. Like her mom will ask the details but she's not really being supportive and she's not really concerned about her feelings but more so like give me the details, give me the dirt. And her dad, like he doesn't talk so he's just useless anyways. And she mentioned it was like a cultural thing. Like her culture. She just said, "It's a cultural thing." And I said, "Well tell me about your culture."

And she said that you know, it's a sign of weakness to show your

emotions and it's not okay to fail. And you have high expectations.

The interaction described by the therapist in the section above never took place. The

only explicit event during that counseling session appears in Appendix J. In the

example above the trainee appears to be assuming things about the client based on

culture (e.g., idea that Asians are less emotionally expressive) that were not explored

with the client. This might account for why the trainee believed she asked the client

about culture even though she did not.

Counseling Dyad 1

Therapist competence was the only possible reason identified for why the

explicit events went as they did. It was decided that nothing more could have

occurred in one of the events, therefore there was no reason identified for that

particular event. That event appears in Appendix K.

Counseling Dyad 2

In both events, therapist competence was a possible reason identified for why

the events went the way they did. Therapist style (directive) and therapist prioritizing

other issues over multicultural issues were each identified as a possible reason in one

event. Appendix J contains an example of an event where judges felt the therapist's

competence and directive style led the event to go as it did. In this example, the

therapist seems overly directive and does not focus on client feelings frequently. The

therapist is a beginning counselor and may not know how to deal with what the client

is discussing, including the cultural dimension. Later moments in the session (not

represented in Appendix J) suggested the therapist was following her own agenda,

namely to focus on career exploration. This included making suggestions that the client go to the Career Center, instead of focusing on the relationship, cultural, and family issues that the client has alluded to. The therapist had previous experience in vocational issues and probably felt more comfortable dealing with this area.

Summary

Across both supervision cases, the primary possible reason that the explicit events went as they did was the supervisor prioritizing other issues over multicultural issues. Supervisor competence was also a frequent possible reason, though more so in dyad 2. The supervisor supporting the therapist was a major reason in dyad 1, but did not appear in dyad 2. Lack of tape review and the therapist inaccurately recounting what occurred in counseling sessions were reasons in dyad 2 but did not appear in dyad 1.

As for the counseling dyads, across both cases therapist competence was the primary possible reason the explicit events went as they did. However, the therapist's directive style and the therapist prioritizing were identified as reasons in dyad 2.

Research Question 6: When MC content is dealt with in supervision, does it find its way into the therapy session(s)? If yes, how does this play out (supervisee parrots supervisor's words, suggestions, etc., supervisee goes step further than supervision content, etc.)

Across both cases, there was only 1 instance where multicultural content was dealt with explicitly in supervision and then carried over into the counseling session immediate after or other future sessions:

S: Not only that, but it's like her self-esteem is low and confused and you have to bring that up somehow. I think it's kind of fortunate that you're a female, a female counselor. I think that relationship, instead of a male counselor [inaudible] [mutual laughter] But I definitely think you should use that to your advantage as far as the similar gender and using your experience to of feeling like you could go on…

This statement followed a lengthy interaction where gender, culture, and race were all discussed, though the dominant theme appeared to be gender. The therapist did appear to act on the supervisor's suggestion, but not until the final counseling session. This interaction appears in Appendix L. In many ways, it could be argued that this single instance was as much about the appropriate use of self-disclosure as it was related to multicultural issues. The supervisor did not clearly discuss the rationale for his suggestion during the third session or delve very deeply into the multicultural aspects, if any, informing his suggestion. It is probable that self-disclosure about relationships from a male therapist could be just as effective as self-disclosure from a female therapist, so further rationale for the supervisor's suggestion might have been helpful.

Overview of Triad 1 (Supervisory Dyad 1 – Counseling Dyad 1)

Multicultural issues rarely arose in this triad and when they did gender was the most frequent issue. In supervision, discussion of multicultural issues tended to have no noticeable effect on the session. In those few instances where multicultural issues arose in supervision, the therapist did not appear to take any of what was

discussed regarding these multicultural issues into her counseling sessions. However, since multicultural events in supervision were generally shallow and brief, it would have been difficult for the trainee to glean much from these discussions to take into the counseling sessions. That said, the effect of raising multicultural issues in counseling sessions generally appeared to be positive.

The primary possible reason these discussions were shallow and brief in regard to multicultural issues was the supervisor's penchant for supporting the therapist. The supervisor's support of the therapist appeared to come at the expense of the supervisor challenging the therapist more. In other words, she prioritized supporting the therapist over exploration of multicultural issues. Given the pull to support the therapist that the supervisor seemed to feel, she may have felt that discussion of multicultural issues would be overwhelming for the trainee and therefore steered clear of these issues.

Compared to the supervisor in the 2nd dyad, the supervisor in this dyad more clearly stated multicultural issues as something she was interested in and hoped to explore with the trainee, making the infrequent discussion of multicultural issues and lack of depth in multicultural discussions more notable than they might otherwise have been. Also, given the supervisor's stated interest in multicultural issues it is notable that the trainee was responsible for multicultural issues being raised more often than the supervisor.

Overview of Triad 2 (Supervisory Dyad 2 – Counseling Dyad 2)

Multicultural issues arose twice as frequently in the supervisory dyad from this triad as opposed to the supervisory dyad in triad 1. In supervision, the effect of

discussing multicultural issues was generally either not noticeable or negative. Culture and race-ethnicity were the most prevalent multicultural issues that arose. The client's family emerged as a consistent theme among the majority of the multicultural events. Combined with the occasional discussion of the client's relationships, the client's interpersonal relations were quite prominent among the explicit events. However, despite the frequency with which multicultural issues arose in supervision, the therapist only managed to bring any of what was discussed regarding these issues into her counseling sessions once. As in dyad 1 though, since multicultural events in supervision were generally shallow and brief, it would have been difficult for the trainee to glean much from these discussions to take into the counseling sessions. However, whereas raising , multicultural issues generally had a positive effect in counseling dyad 1, the effect varied between positive and negative in counseling dyad 2.

The supervisor and trainee each raised multicultural issues an equal amount, so it is difficult to suggest that the interactions were shallow and brief because one person prioritized multicultural issues more than the other. Arriving at a reason for why the explicit events were shallow and brief is difficult overall given that there were several possible reasons that were identified. Chief among these was the supervisor's competence level. However, the supervisor also never appeared to prioritize multicultural issues. As well, lack of tape review was a possible reason. Lack of tape review referred, not only to not reviewing the tape of the trainee's therapy session within the supervision session, but as was frequently the case with the supervisor in this dyad, failing to review the trainee's session tapes prior to

supervision meeting. In fact, the supervisor in the 2nd dyad listened to the session tapes only about half the time, if that (the fact that he hadn't gotten a chance to listen to the trainee's tapes was mentioned during supervision sessions). Since the therapist's recollection of sessions was occasionally faulty, more diligent review of the trainee's session tapes probably would have revealed this issue to the supervisor and it could have been dealt with in supervision. As it was the supervisor was less able to form an opinion of the therapist's sessions and skills independent of the therapist's self-report and the therapist providing an inaccurate account of the therapy session also appeared to contribute greatly to the depth and length of multicultural events.

<div align="center">Descriptive Analyses</div>

Research Question 7: Does counseling self-efficacy increase pre and post supervision?

The Exploration Skills, Insight Skills, Action Skills, and Session Management subscales of the CASES were used for this question. These subscales indicate a therapist's confidence level (self-efficacy) at being able to employ specific counseling skills. Effect sizes for change across time were calculated based on Cohen (1988), such that the mean difference score (difference between the pre and post means) was calculated and divided by the standard deviation in the normative sample (Lent et al., 2003). An effect size (*d*) of .20-.49 is considered small, .50-.79 is considered medium, and .80+ is considered large. Note that this is probably a somewhat liberal estimate given that Cohen's cutoffs were based on between-subjects data rather than on within-subjects data.

Table 4 shows the data for both supervisees. Supervisee 1 showed small to large increases in her self-efficacy subscales. Supervisee 2 showed moderate to large increases in the self-efficacy subscales pre and post supervision. Therefore, counseling self-efficacy did increase over the course of supervision for both trainees.

Table 4

Trainee Self-efficacy

CASES - Supervisee 1

	Pre	Post	Comparative Data	Effect size
Exploration	7.2	7.8	M = 7.27 SD = 0.95	0.63
Insight	6.5	7.33	M = 6.02 SD = 1.40	0.59
Action	7.5	8	M = 6.13 SD = 1.46	0.34
Session Management	7	7.9	M = 6.39 SD = 1.20	0.75

CASES - Supervisee 2

	Pre	Post	Comparative Data	Effect size
Exploration	6.8	7.8	M=7.27 SD = 0.95	1.05
Insight	6.5	7.33	M = 6.02 SD = 1.40	0.59
Action	5.75	6.75	M = 6.13 SD = 1.46	0.68
Session Management	5.5	6.7	M = 6.39 SD = 1.20	1.0

Research Question 8: Does supervisee multicultural competence increase pre and post supervision?

The CCCI-R was used to assess the multicultural counseling competence of both trainees. Self-ratings, client ratings, and supervisor ratings were obtained (See Table 5). CCCI-R scores range from 20 to 120, with 120 being the highest possible score. LaFromboise et al. (1991) only reported the mean and standard deviation for individual CCCI-R items in the normative sample, not the full scale score. Therefore, comparison data from Constantine (2001) was used for the purpose of computing effect sizes for other (supervisor and client) ratings of the trainees (therapists). Constantine had 52 clients (41 women, 11 men) rate their therapists using the CCCI-R. As mentioned in the measures section, the CCCI-R was developed as an observer measure of multicultural competence. However, Ladany et al. (1997) modified it for use as a self-report measure. Therefore, data from Ladany et al. (1997) was utilized as comparison data for supervisee (therapist) self-ratings on the CCCI-R. Table 5 shows the results of the CCCI-R.

For the first triad, the supervisee's self-ratings showed a moderate increase, the supervisor's ratings showed a large decrease, and the client indicated a high score for Therapist 1 (Supervisee 1) on the CCCI-R at the conclusion of therapy. For the second triad, the supervisee self-ratings showed a large increase, the supervisor indicated a large decrease, and the client rated Therapist 2 (Supervisee 2) higher on multicultural competence than the comparative sample at the conclusion of therapy.

The results were thus equivocal for whether supervisee multicultural competence increased after supervision. Based on supervisee self-reports, both supervisees felt they increased in multicultural competence over the course of supervision. However, both supervisors indicated large decreases in the multicultural

competence of the supervisees from the beginning to end of supervision. It should be

noted that supervisors had more data on which to base their assessment at the

conclusion of supervision than they had available to them during the initial rating of

the supervisees, which may account for the significant decrease. In other words,

supervisors may not have been able to form as accurate a picture of the supervisee's

multicultural competence at the beginning of supervision and may have overestimated

their ratings.

Client 1 rated the Therapist 1 (Supervisee 1) as higher on multicultural

competence than the comparative sample at the conclusion of therapy. Client 2 also

rated her therapist higher than the comparative sample at the conclusion of therapy.

Since the clients' ratings were only obtained post-therapy it is not possible to

determine whether the client's perceptions of their counselors' multicultural

competence increased over the course of therapy.

Table 5

Trainee Multicultural Competence

Note: When there was pre and post data, effect size represents the change score from

pre to post. When there was only post data effect size represents the difference

between the post score and comparison data.

CCCI-R

	Pre	Post	Comparative Data	Effect size
Supervisee 1	99	104	M = 94.36 SD = 9.73	0.51
Supervisor 1	83	61	M = 82.85 SD = 18.73	-1.17
Client 1		106	M = 82.85 SD = 18.73	1.24

Supervisee 2	83	98	M = 94.36 SD = 9.73	1.54
Supervisor 2	72	43	M = 82.85 SD = 18.73	-1.55
Client 2		90	M = 82.85 SD = 18.73	0.38

Research Question 9: What were participants' evaluations of the depth and smoothness of therapy sessions? Supervision sessions?

The Depth and Smoothness scales of the SES were used for this study (See Table 6). Client 1 and Therapist 1, as well as Client 2 and Therapist 2, rated sessions higher on depth and smoothness than did the normative sample (Stiles & Snow, 1984). Though not ideal because the SEQ was normed on therapy sessions, Stiles and Snow's (1984) sample data was also used as comparison data for SEQ ratings of supervision sessions. Supervisee 1 rated the supervision sessions as higher on depth and smoothness than did Stiles and Snow's (1984) sample for therapy. Supervisor 1 rated the sessions lower on depth but higher on smoothness than the comparison sample for therapy. Supervisee 2 and Supervisor 2 rated the sessions as deeper and more valuable than did the comparison sample for therapy. In sum, all participants (except Supervisor 1 for Depth) involved in the therapy sessions rated the sessions highly on both depth and smoothness.

Table 6

Session Evaluation

SEQ Results

	Depth	Smoothness	Comparative Data	Effect size (*d*)

| | | | Depth | Smoothness | Depth | |
Smoothness						
Supervisee 1	M = 6.33	M = 6.1	M = 5.06 SD = 1.00	M = 4.21 SD = 1.43	1.27	1.32
Supervisor 1	M = 4.07	M = 4.37	M = 4.62 SD = 1.08	M = 4.01 SD = 1.12	-0.51	0.32
Client 1	M = 6.4	M = 5.6	M = 5.06 SD = 1.00	M = 4.21 SD = 1.43	1.34	0.97
Therapist 1	M = 6.6	M = 5.52	M = 4.62 SD = 1.08	M = 4.01 SD = 1.12	1.83	1.39
Supervisee 2	M = 6.05	M = 5.0	M = 5.06 SD = 1.00	M = 4.21 SD = 1.43	0.99	0.55
Supervisor 2	M = 5.28	M = 5.08	M = 4.62 SD = 1.08	M = 4.01 SD = 1.12	0.61	0.95
Client 2	M = 5.3	M = 5.56	M = 5.06 SD = 1.00	M = 4.21 SD = 1.43	0.24	0.94
Therapist 2	M = 6.05	M = 5.3	M = 4.62 SD = 1.08	M = 4.01 SD = 1.12	1.32	1.15

Research Question 10: How satisfied were the clients with therapy? How satisfied were the supervisees with supervision?

The highest score possible on the Client Satisfaction Questionnaire (CSQ) or Supervision Satisfaction Questionnaire (SSQ) is 32. Client 1 indicated an extremely high level of satisfaction with the counseling experience (CSQ = 31), which was significantly higher (d = 1.14) than data obtained by Ladany et al. (1996). Client 2 indicated a high level of satisfaction with counseling (CSQ = 29), which was also higher than Ladany's data, d = 0.83). Supervisee 1 indicated an extremely high level of satisfaction with supervision (SSQ = 32), which was higher than data reported by Ladany et al. (1996), d = 1.30. Supervisee 2 indicated a high level of satisfaction with supervision (SSQ = 29), which was higher than Ladany's data, d = 0.83.

Neither client wrote anything about their respective counseling experiences on the open-ended section of the CSQ that asked for any additional comments. On the open-ended section of the SSQ Supervisee 1 said, "This supervision provided a lot of insight and really helped me gain the confidence to meet my client's needs. Though both frustrated with some situations presented by my client at times, I feel like my supervisor and I were continuously on the same page and really worked well together. My supervision was the most valuable component of this pre-practicum;" Supervisee 2 said, "I might have enjoyed working with someone who is not a rehab counselor like me…I think it would allow me to view things a little differently (different perspective)."

In sum, both clients were highly satisfied with their experience in counseling and expressed no dissatisfaction. In addition, both supervisees gave high ratings of satisfaction with their supervision experience, although Supervisee 2 expressed some dissatisfaction with her supervisor.

Research Question 11: Was there a change in client symptoms over time?

A score of 63 or more on the OQ-45 is considered to be indicative of clinically significant symptoms. A change of 14 points or more in a client's score is considered to be clinically significant change (Lambert, Burlingame, Umphress, Hansen, Vermeersch, Clouse, & Yanchar, 1996). Client 1 had an extremely low average score on the OQ-45 ($M = 12.00$, $SD = 3.08$), with no significant change across sessions. Client 2 had a high average OQ score ($M = 72.3$, $SD = 6.85$), with no significant change across sessions (although there a drop from session 4 to 5). See

Table 7 for specific client scores from each session. In sum, neither client's

symptoms, as measured by the OQ-45, changed significantly across sessions.

Table 7

Client Symptoms

Client 1 – OQ 45 scores

Session 1	Session 2	Session 3	Session 4	Session 5
15	15	12	10	8

Client 2 – OQ 45 scores

Session 1	Session 2	Session 3	Session 4	Session 5
Data missing	75	70	80	64

Research Question 12: What amount of multicultural material was present in trainee

case notes of the therapy sessions?

Data for this question consisted of case notes completed by therapists for the

study. Additional data were taken from process notes, which therapists completed for

their practicum training. Therapist 1, as part of these process notes, also provided a

case summary of work with her client.

Case Notes

Therapist 1's case notes (five sessions) did not contain any multicultural

material. Therapist 2 had one instance in her session 3 case note where multicultural

material was mentioned: "Client's problems are due to confusion about relationship

and stems from family role modeling as well as culture." (Note that Therapist 2 failed

to complete the case note following session 1, so there were only four case notes available for analysis).

Process Notes

The process notes of both therapists contained a little more multicultural material. For instance, both therapists mentioned that their client was an Asian-American female in the section of the process notes asking for a description of the client . Therapist 1 wrote,

> C is an Asian American female in her senior year at Maryland. She was very personable and was able to talk for the entire session. She seemed very motivated to participate in this experience and easily found topics to discuss. She did not bring her racial or ethnic identity into the session; I am curious as to how this aspect of her identity will manifest itself in future sessions and its relevance to her relationships.

Therapist 2 wrote,

> My client is a female of Asian descent who is in her early 20's. Her parents are high school graduates who put a lot of emphasis in her attending post-secondary education. Although client is Asian, she seems to have assimilated into an American heritage. Her interpersonal style seems very "Americanized" due to overall mannerisms and hand gestures. Although my client seems frustrated and confused about her career direction, she seems very comfortable communicating her thoughts and emotions. Her personal expression is typical of other female college students who are in their early-twenties.

A cultural difference that may be present between my client and

myself is the familial relationships. She might consider her family's

input and objectives more seriously than I would. However, this has

not been determined yet.

This particular section not only contained multicultural material, but Therapist 2

appeared to exhibit a fair level of depth with respect to her integration and awareness

of multicultural issues.

In addition, under client behavior in the 2nd session note, Therapist 2 wrote,

"Client was 'embarrassed' when she began to cry and stated in her culture it

demonstrated a sign of weakness." Also in session 2, under therapy relationship,

Therapist 2 wrote, "My client has opened up with me about her relationship problems

and additionally has voiced that this is difficult to do because of her Asian culture,"

but did not examine this in any more depth. In session 3, under client behavior,

Therapist 2 wrote,

We discussed how culture played a part in their relationship roles. She

stated that 'the women tend to nag' but the men still maintain the final

say or control. She mentioned that her boyfriend does not play this

same role. Client claimed that she is unsure if she is comfortable with

these roles and wonders if she needs someone who is more controlling.

Case Summary

Therapist 1's case summary consisted of a description of the client, history of

the problem, course of therapy, therapeutic relationship, case conceptualization, and

questions for class discussion. The description of the client contained multicultural

material ("22-year-old Asian American female"). In addition, under case conceptualization, Therapist 1 wrote,

> Looking back, there are definitely some things that I may have done
> differently... Furthermore, I did not really guide my client to identify
> any cultural or familial influences on her presenting concerns. This is
> one area that I would have liked to explore further and will keep in
> mind with future clients.

Therapist 2 did not complete a case summary, or at least did not provide a case summary to the principal investigator.

In conclusion, there was only one instance of multicultural material among the combination of both therapists' case notes. There were four instances of multicultural material among the therapists' combined process notes, three of which were in Therapist 2's process notes. If Therapist 1's case summary is included in these process notes then there were five instances of multicultural material among the combined process notes of the two therapists. Overall, this suggests that the therapists were not giving a great deal of attention to multicultural issues in their conceptualization of client issues or in their treatment planning.

Research Question 13: How much of things left unsaid in therapy sessions and supervision sessions related to multicultural content?

Of the 19 things left unsaid in 40 questionnaires completed across all participants, there was only 1 instance of multicultural content. In Therapist 2's session 4 things left unsaid response, in response to the question, "What, if any, thoughts or feelings do you think the client had but did not share with you," Therapist

2 responded, "I wonder about whether or not she is comfortable completely opening up to me. Her culture (Asian) is not typical to share feelings so I am curious if she is completely open. However, she seems to be honest and open." Overall, multicultural content was almost completely absent from things left unsaid in supervision or therapy sessions.

Research Question 14: What of the most and least helpful incidents was multicultural in nature?

There was no multicultural material present in the responses to the most and least helpful incidents.

Chapter 6: Discussion

Multicultural issues in supervision and counseling have received notable attention, especially in recent times (Burkard et al., 2006; Ladany et al., 1997; Goodyear & Guzzardo, 2000). However, prior research on cross-cultural supervision, multicultural issues in supervision, and multicultural competence has largely relied on survey methods, self-report, and retrospective accounts (Burkard et al., 2006; Pope-Davis et al., 2001b). Given that much of this was self-reported competence, it remains unclear how graduate trainees manifest competence in their clinical work (Neufeldt et al., 2006). The present study sought to examine multicultural events in supervision and counseling without total reliance on self-report, with a major objective being to look at these events in relation to the multicultural competence of trainees. Also, this study sought to examine multicultural events in supervision and counseling with inexperienced supervisors and therapists.

This study examined 2 triadic cases (supervisor-trainee, therapist/trainee-client) for moments when multicultural issues and material appeared explicitly and where it could have occurred in supervision and counseling sessions. Judges analyzed session transcripts qualitatively for themes from these explicit events. Participants completed quantitative measures both prior to and following supervision and counseling sessions. Quantitative analyses were used to provide descriptive data for this study.

Descriptive Results

Both trainees' counseling self-efficacy increased over the course of supervision, which is consistent with previous studies (Lent et al., 2006). Supervisee

multicultural self-efficacy did not increase pre and post supervision. However, it should be noted that both supervisees' scores were quite high at the outset of supervision, leaving little room for an increase. Urbani et al. (2002) cited several studies that found counseling trainees tend to overestimate their abilities, perhaps because people who lack a specific skill do not have the cognitive framework to judge their competence accurately and thus give themselves credit for having good intentions but frequently do not live up to these intentions (Urbani et al., 2002).

Overestimation of ability is important when considering that the results were equivocal for whether supervisee multicultural competence increased after supervision. Based on supervisee self-reports, both supervisees felt their multicultural competence increased over the course of supervision. But both supervisors indicated significantly large decreases in the multicultural competence of the supervisees from the beginning to end of supervision. Ladany et al. (1997) found that supervisees believed they were multicultural competent, but showed marked variability in their multicultural case conceptualization scores, suggesting they may have been overestimating their multicultural competence. Supervisors should be aware of this tendency for trainees to overestimate their abilities and not rely solely on trainees' self-reports, as well as, assist trainees in recognizing misconceptions (Ladany et al., 1997). Given the tendency in this study for explicit multicultural events in supervision sessions to be brief and shallow, it is not surprising that trainees may have overestimated their multicultural competence. There were few, if any, instances where their multicultural competence was challenged or explored. Indeed,

it is noteworthy that multicultural material was minimally present in the case notes and process notes of the therapy sessions.

The findings that trainees rated themselves as multiculturally competent, and their clients also rated them highly on multicultural competence, seems inconsistent with the finding that most of the multicultural events in supervision were brief and shallow and that there were very few multicultural events in the counseling sessions. Previous research has failed to provide a clear picture of how multicultural competence actually manifests itself in trainees' clinical practice (Neufeldt et al., 2006). The present study shows an apparent disconnect between perceptions of trainees' multicultural competence and tangible, behavioral demonstrations of trainees' multicultural competence. For multicultural competence to be a truly meaningful concept, it seems imperative that any internal representations of competence be expressed outwardly in professional work. Otherwise, trainees or professionals could claim multicultural competence but never actually demonstrate this competence in their work.

Clients and supervisees expressed high levels of satisfaction with their experiences, although Supervisee 2's satisfaction ratings may not have accurately reflected her feelings about her supervision, given her statement on the SSQ about wanting a different kind of supervisor. Also, the judges expressed frustration when analyzing sessions from the 2nd supervisory dyad because the sessions appeared to be of such poor quality, including the supervisor's jarring and seemingly ineffective directive style. Frankly, it is difficult to imagine that the supervisee was highly satisfied with this supervision experience. The difficulties people experience with

evaluation is well documented. For example, Ladany et al. (1996) found supervisees would withhold information to protect themselves from a negative evaluation and gain some sense of control in the supervision relationship, and that negative reactions to the supervisor were the most frequent type of nondisclosure. Supervisee 2 may have feared that her supervisor would get access to her satisfaction ratings or just generally worried about the consequences of a poor satisfaction ratings for both parties (since she was aware that her supervisor was also in training and monitored for this study).

Qualitative Results

This study's findings were generally consistent with previous studies that found a lack of initiation of cultural discussions by *experienced* supervisors (Gatmon et al., 2001; Hansen et al., 2000). However, there was some inconsistency between the present study's findings and previous studies that reported low frequency of multicultural discussions in supervision (Gatmon et al., 2001; Hansen et al., 2000). There was a low frequency of multicultural events in Supervisory Dyad 1, but these events were quite frequent in dyad 2. That being said, judges often thought that both supervisors could have initiated more, and deeper, discussion and exploration of multicultural issues since the discussions that took place were usually brief and shallow.

Bernard and Goodyear (1992) asserted that supervisors are responsible for assuring multicultural issues are attended to in supervision. Supervisors are ultimately responsible for creating an environment that facilitates trainee

multicultural competence (Inman, 2006), could initiate discussion of multicultural

issues as a way to create norms regarding open and honest dialogue about cultural

similarities and differences (Constantine, 1997), and can help trainees determine how

multicultural issues are relevant when conceptualizing client issues (Ladany et al.,

1997). These things did not appear to occur in this study. Supervisors appeared to

frequently prioritize other issues over multicultural issues, rarely raised multicultural

issues, and when issues were raised they were generally addressed in a brief and

shallow manner. It is therefore not surprising that there were very few multicultural

events in the counseling sessions. Ladany et al. (1997) believe that a trainee's

inattention to multicultural issues may have less to do with their ability, and more to

do with a supervisor's lack of expectations. In other words, if a supervisor expresses

an expectation that trainees consider multicultural issues in their work with clients

then trainees will be more likely to demonstrate their potential in this area. As

Gatmon et al. (2001) point out,

> Considering the influence of cultural variables in the supervisory
>
> relationship and the positive influence of discussing such variables, it
>
> seems critical to investigate further why such a low percentage of
>
> these discussions are occurring. It is important to understand why, in
>
> such an important area of training as multicultural competency,
>
> supervisors are not modeling such communication and what can be
>
> done to increase supervisors' cultural competence (p. 110).

Interestingly, even though the supervisors in the study were inexperienced,

there was some consistency between findings in this study and previous studies with

experienced supervisors and multicultural issues. Though the results can speak most loudly to some possible explanations for inexperienced supervisors' lack of attending to multicultural issues, there may also be some preliminary questions about the ways in which experienced supervisors deal with multicultural issues that can be generated from examining the process of supervisors-in-training. First, as mentioned, the supervisors in this study were both inexperienced. Studies have found that experienced supervisors tend to be more active and use teaching and sharing behaviors, while novices tend to be more supportive, and less evaluative and confrontational (Borders, 1991). Indeed, the key theme that emerged among the multicultural events in the 1st supervisory dyad was the supervisor supporting the therapist. Judges felt the supervisor supporting the therapist often came at the expense of challenging the therapist or exploring more deeply.

Second, it is important to consider if there is a certain level of training that must be present in order for multicultural issues to even be considered in supervision. Inman (2006) posited that trainees early in their development may value supervision with more direct guidance and suggestions more than "working on gaining deeper insights that are typically involved in conceptualizations and enacting behavioral change" (p. 80). Multicultural issues likely fall under the conceptualization and deeper insights category, and may often not be concrete enough for beginning trainees. Also, supervisors-in-training may struggle with conceptualization and deeper insights in supervision as well because of their own developmental level and needs. Early trainees may value direct guidance because they are searching for concrete answers and approaches in what can feel like a sea of possibilities and

unknowns. Anecdotally, early trainees can also struggle with simply sitting in the room with clients for a full session. Early supervisors or supervisors-in-training may also experience some of these same performance anxieties or have an unclear vision of what supervision is or can be, or who they are as a supervisor.

Third, the supervisor prioritizing other issues over multicultural issues was one of the possible reasons identified in this study for why the multicultural events went as they did, which in the case of this study often refers to why the events were brief and shallow. At times this prioritizing might have been appropriate, if the supervisor felt that discussion of multicultural issues was somehow beyond the trainee or would increase the trainee's anxiety. However, if supervisors-in-training, or even experienced supervisors routinely prioritize other clinical issues over multicultural issues, such that it leads to an exclusion of multicultural issues, the psychological and empirical communities should begin to ask themselves why this is the case considering that psychology has expressed how important multiculturalism is (APA, 2003). Is it developmentally appropriate that supervisors-in-training don't discuss multicultural issues with therapists-in-training, and if so, does this have implications for how we should assign clients when both parties in a supervisory dyad are inexperienced? Does this mean that the supervision of supervision that typically serves to oversee the supervisory work of unlicensed counseling professionals should pay special attention to multicultural issues in these professionals' supervisory work given that they may be prone to ignore or barely address such issues?

Fourth, supervisor competence likely contributes to addressing of multicultural issues in supervision. Supervisor competence was another possible

reason frequently identified for why the explicit events went as they did in the present study. Studies have found that the majority of supervisees have completed more multicultural coursework and received more multicultural training than supervisors (Burkard et al., 2006; Toporek et al., 2004). One study found that 93% of supervisors had no experience supervising trainees who were racially or culturally different from themselves (Burkard et al., 2006). Results like these call into question the multicultural competence of psychotherapy supervisors. Indeed, previous studies have found low levels of multicultural competence reported among counseling psychologists regarding work with ethnic minority clients (Hansen et al., 2000; Holcomb-McCoy & Myers, 1999) and Holcomb-McCoy and Myers (1999) found that professional counselors perceived themselves to be most competent on the definitions and awareness factors of multicultural competence, but least competent on the racial identity and knowledge dimensions. Supervisors or therapists that do not feel confident about their level of competence in discussing multicultural issues would seem less likely to raise such issues. Also, mental health professionals with low levels of multicultural competence are probably not as aware of multicultural issues or may not value attention to multicultural issues as much as their colleagues with higher levels of multicultural competence. An inherent part of being a professional in training, be it supervisor or therapist, is the understanding that there is a lack of competence in various areas. If experienced professionals, who have completed their coursework and practiced for years still do not appear to evidence a high level of multicultural competence, is it fair to expect this competence in trainees? What level of multicultural competence should reasonably expected of supervisors or therapists

in training? What are the implications for clients being served by professionals in training. The issue of supervisor and therapist competence is discussed further in the limitations section.

Fifth, tape review may play a role in whether multicultural issues are addressed in supervision, and how these issues are addressed. Lack of tape review seemed to play a role in the multicultural events in the 2nd supervisory dyad because of the therapist's occasionally inaccurate recollection of counseling sessions. How prevalent this issue of not listening to trainees tapes is in the realm of supervision and training is unknown. However, anecdotally, we know that many supervisors have clinical and professional responsibilities, as well as personal ones, that can leave them feeling busy and overwhelmed. Listening to trainees' tapes is one of those things that often does not occur in the face of other pressures, as this investigator has seen on numerous occasions in various training settings. Also, in this investigator's experience, supervision in some settings relies completely on trainees' self-report of sessions. As human beings, even if no intent of deception is involved, we can still misremember facts and events. Given how threatening multicultural issues may feel to people, particularly because of the social and professional pressure to appear multiculturally sensitive and competent, and the probability that less multiculturally competent clinicians/trainees are not as aware of multicultural issues as their more multiculturally competent counterparts, there may be a greater likelihood that multicultural material will be misremembered or omitted from reports of therapy sessions in supervision. Perhaps, an important component of multicultural training is to have some sort of live representation of the trainee's work, be it audio or

videotape. Videotape, especially, seems even more useful when you consider that an important component of multiculturally competent practice is recognition of the importance of and differences in nonverbal (implicit) communication across cultures (for examples see Leong, 1993). It seems especially important to have tape review when the supervisors are less experienced because their lack of experience means that they may not be as adept as experienced supervisors at flushing out the events of trainees' counseling sessions without benefit of an independent report or tape. Tape review can also be a good way to prepare before supervision. Such preparation might be more crucial for inexperienced supervisors to conduct productive sessions that experienced professionals.

One of the major findings of this study is how integral the client's interpersonal relationships and functioning (family, friends, romantic, etc.) can be to the presence and revelation of multicultural issues. Interpersonal relationships seem to be an indirect way for multicultural issues to reveal themselves. A client's discussion of family can reveal multiculturally relevant areas such as acculturation, values, and dating beliefs. Judges frequently thought asking about family or other interpersonal relationships more in counseling and supervision could have led to more multicultural material being mentioned explicitly in sessions. Perhaps in this study the reason family and relationships were not discussed more with clients was that the therapists and supervisors were not experienced enough to have formed more solid theoretical groundings. For instance, psychodynamic professionals are probably unlikely to ignore attention to family or other interpersonal relationships in their conceptualizations and treatment of clients, or in their approach to supervision.

As desired, selection of racial minority clients appeared to result in cultural and racial-ethnic issues arising in counseling, and thus in supervision. However, gender issues also emerged quite frequently. Gender may have been salient in many instances because all the participants, except one, were women and may have been more aware of this multicultural issue, felt more comfortable with this issue, or elicited this more when interacting because both parties were female. That being said, even Supervisor 2, an African-American male, seemed to place more emphasis on gender (e.g., instructing the trainee to share her experience as a women, in romantic relationships, with the client) than he appeared to place on race-ethnicity or culture (as evidenced by more specific interventions and suggestions with regards to gender issues).

Gatmon et al. (2001) found that supervisors and supervisees were more likely to discuss ethnicity, gender, and sexual orientation issues when these differences existed in the supervisory dyad (e.g., supervisor and trainee are from different racial groups). However, in the present study, supervisors and supervisees did not engage in direct discussion of similarities and differences between themselves on racial, gender, or other dimensions even though there was a racial and gender difference in the 2nd supervisory dyad and a sexual orientation difference in the 1st supervisory dyad. Given this fact, it is not surprising that these discussions did not take place in the counseling dyads either.

When multicultural issues were raised in supervision these exchanges were usually brief and shallow. Burkard et al. (2006) explored culturally responsive and

unresponsive events in supervision. The following is an example of a culturally unresponsive event.

> In this example, the supervisee perceived that cultural issues (i.e., communication style of an African American client) were affecting her perceptions of diagnostic issues related to the client's concern. This supervisee wanted some feedback from her Asian American male supervisor, who had been in practice for 5 years, but each time the supervisee tried to address cultural issues with the supervisor, the supervisor would acknowledge her concern but would not help the supervisee explore or examine the effect of culture on this case. So, the supervisee grew to believe that she could raise cultural issues in supervision but that her supervisor of color would not help her to understand how culture may be affecting her cases (p. 296).

Based on examples like these, the vast majority of multicultural events in the present study would probably be characterized as culturally unresponsive. There was a consistent pattern of supervisors not following up on moments when trainees mentioned multicultural issues, and when the supervisors introduced multicultural issues, it often seemed perfunctory; supervisors did not follow-up on their own mention of these issues. Burkard et al. (2006) discussed instances where trainees raised multicultural issues only to have their supervisors directly tell them that multicultural issues were not relevant to the case. That sort of interaction did not occur in this study, but lack of supervisor follow-up may have constituted an indirect message to trainees that multicultural issues were not relevant. Also, trainees never

formulated questions like the ones in Burkard et al. (2006). Trainees in the present

study raised multicultural issues in the context of discussing their clients (e.g., client

said her family does not discuss emotions because of cultural norms), but never

actually made any conceptualizations out loud, such as "I wonder if culture is playing

a role in the therapy relationship."

Burkard et al. (2006) also reported that culturally unresponsive events usually

had a negative impact on trainee satisfaction with supervision. In the present study

however, despite what appeared to be mostly unresponsive events, the trainees

expressed high levels of satisfaction with supervision. Perhaps, trainees did not place

a great deal of value on multicultural issues, and therefore their satisfaction with

supervision was not impacted greatly by how well the multicultural events were

handled. Also, trainees may not have been very familiar with counseling supervision,

and therefore, had no point of comparison for judging their supervision more

thoroughly. Perhaps this is an example where asking participants about satisfaction at

the end of supervision is less precise than asking for ratings over time, after each

individual session. That type of data might allow observation of changes in

satisfaction from session to session, which could be useful if satisfaction patterns

seemed to correspond to multicultural events (e.g., less satisfaction in sessions where

there were several multicultural events that were brief and shallow/unresponsive).

Limitations

Exposure of the supervisee to the CCCI-R at the outset of this study may be a

threat to validity. This measure was face valid, and so participants may have

speculated about the study's interest in multicultural issues, and may have changed their behavior as a result.

Also, supervisors were informed that the study involved multiculturalism, though they were not provided with any specific directions or mandates. It is unknown if priming the supervisors resulted in them changing their behavior with regards to multicultural content. That being said, it seems logical to assume that after being primed supervisors would have overly addressed multicultural issues as opposed to ignoring them or addressing them minimally. Given that multicultural issues seem to have been addressed minimally in this study, it is less likely that priming had a significant impact on the course of supervision or the study. What is more certain is that informing supervisors about the study's purpose, even slightly, is likely not reflective of "real world" multicultural supervision.

Another limitation of the study is that the supervisors' multicultural competence was not assessed. Supervisors were selected for this study based on faculty recommendations regarding their interest in and competence with multicultural issues. However, these recommendations do not guarantee that the supervisors were actually comfortable and competent with multicultural issues in supervision. Research findings suggest counselors-in-training may be more prepared academically to work with culturally diverse clients that their supervisors (Constantine, 1997). These research findings highlight that just because the supervisor is more experienced as a therapist does not mean the supervisor is more skilled or competent than their trainee in every area. Supervisors could have been given the CCCI-R or another measure like the Supervisor Multicultural Competence

Inventory (Inman, 2006) to assess their multicultural competence. Supervisors could have been asked to complete process notes for supervision sessions. These process notes could have been analyzed to see if supervisors were considering multicultural issues as part of the supervision process, either within the supervision relationship or in reference to the trainee's therapy sessions.

The experience level of both the supervisors and therapists in the study is also a limitation, at least as far as applying the results to experienced supervisors and therapists. Incorporating multicultural issues into supervision or therapy in a constructive way can be challenging even for seasoned professionals. For less experienced professionals, like those in this study, just managing the basics of the session and being comfortable in the role of therapist or supervisor can be challenging. This likely leaves the person unable to address multicultural issues in a meaningful way even if that person is highly aware of and excited about multicultural issues. Therefore, the results of a study like this might be different with more experienced professionals.

The method of the study also had limitations, particularly, the lack of an exit interview or other indirect methods that rely less on judges inferences about what took place. As it is now, much is inferred about supervisor or therapist intentions, or trainee or client perceptions. Interviewing participants about their intentions or reactions in sessions, particularly at the conclusion of the study, could have provided more direct information from participants about their experiences as opposed to relying solely on judges' perceptions of what participants experienced or intended.

Clients were volunteers who received course credit for their participation, not clients in high distress seeking mental health services at a mental health agency. The ways and degree to which multicultural issues are dealt with may change when clients are in more distress and seeking service, rather than being recruited.

Implications for Practice

This study seems to lend support to the strong message in the literature that supervisors should initiate discussion of multicultural issues in supervision (Bernard & Goodyear, 1992; Constantine, 1997). For one thing, doing so can help model how to work with multicultural issues for trainees (Gatmon et al., 2001). Also, it establishes attention to multicultural issues as an expectation for supervisees, which is more likely to result in them demonstrating their ability in that area (Ladany et al., 1997). It is interesting that supervisors in this study rated supervisees' lower on multicultural competence at the conclusion of supervision than they had at the beginning. This is probably because that there was more evidence to draw on to make a more accurate estimation of trainees' competence at the end of supervision, however, supervisors did not raise multicultural issues frequently or give trainees many opportunities to demonstrate their competence (i.e., by asking questions about trainees' perspective of multicultural issues in the counseling or supervision relationship). Therefore, rating trainees low on multicultural competence appears unfair since supervisors did not do much to elicit information regarding trainees' competence. Also, from an evaluation perspective, it was probably unclear to trainees whether or not they were expected to demonstrate multicultural competence during this practicum experience. Supervisors taking more responsibility for raising

multicultural issues and establishing attention to multicultural competence as an expectation could have alleviated these issues.

Another implication for practice from this study is even simpler than the first. Frequently, when multicultural issues were raised in this study they received little or no follow-up or deeper exploration. This is perhaps even more disturbing than not having these issues raised at all. At least not raising the issues could be seen as an unintentional oversight. Not following up or exploring issues seems more actively dismissive. Trainees raising issues did not go anywhere, so trainees may have felt dejected and ceased mentioning multicultural issues. Supervisors did not follow-up on their own mention of multicultural issues, which made these occurrences seem unimportant and easily ignored. Burkard et al.'s (2006) examination of culturally unresponsive events found such events had a negative impact of trainee satisfaction with supervision and that such events discouraged trainees from raising multicultural issues. How can trainees be expected to incorporate multicultural issues into their counseling practice if their supervisors do not nourish curiosity about multicultural issues in supervision, do not assist trainee multicultural skill development, and actively discourage attention to multicultural issues by ignoring these issues when they are raised explicitly in sessions?

Another implication of this study is that it is not enough for supervisors to simply raise multicultural issues. They must do so in a way that challenges trainees' multicultural competence. Counseling trainees tend to overestimate their abilities, including their multicultural competence (Ladany et al., 1997; Urbani et al., 2002). Failure to push trainees when multicultural issues are discussed seems likely to result

in trainees never being provided with experiences that disconfirm their inflated notions of ability, leading them to maintain misconceptions about their multicultural competence rather than allowing them to actually grow in their understanding of multicultural issues. Furthermore, it seems important that trainees not only discuss multicultural issues, but also put these discussions to use in their practice. Behavioral demonstrations of multicultural competence should be the ultimate goal of multicultural training, particularly because despite the numerous studies on multicultural competence it is still unclear how this competence actually manifests in clinical work (Neufeldt et al., 2006).

The present study also suggests that an excellent way to have multicultural issues arise in supervision and counseling is to explore clients' interpersonal relationships, which seem to serve as a catalyst for appearance of multicultural related issues like acculturation, cultural conflict, and dating expectations. Though the goals and process of supervision are different from that of counseling (i.e., supervision is not therapy), attending to trainees' and supervisors' interpersonal relationships may also be a way to have multicultural issues arise (e.g., ask trainee about how their relationship history informs their work with clients).

Lastly, numerous counseling programs and training sites utilize unlicensed, advanced counseling students as supervisors for less experienced trainees. These counseling students may often be inexperienced as supervisors, meaning they may struggle to incorporate multicultural issues in supervision because of discomfort or unfamiliarity with their role, which then results in the trainee not being exposed to multicultural issues or not being challenged when these issues are raised. Attention to

multicultural issues in the supervision of supervision that occurs for these student supervisors is therefore quite crucial if both the counseling trainee and supervision trainee are to grow in their attention to and understanding of multicultural issues within their professional context. In other words, supervision trainees may have a commitment to multicultural issues, and may be somewhat multiculturally competent, but still struggle to incorporate multicultural issues into supervision because of their inexperience as supervisors. Also, given the literature on supervisors infrequent initiation of discussions about multicultural issues (Gatmon et al., 2001; Toporek et al., 2004), it is likely that supervision trainees did not witness modeling of ways to deal with multicultural issues in their own supervision experiences. Therefore, it is less likely these supervision trainees will raise multicultural issues with their counseling trainees, and if multicultural issues do arise, they will not know how to effectively deal with them in supervision.

Implications for Future Research

One of this study's more interesting findings would seem to be the apparent disconnect between self-rated multicultural competence, as well as, client rated multicultural competence and tangible demonstration of that multicultural competence. How did trainees acquire multicultural competence if attention to multicultural issues in supervision was generally unconstructive and uninformative? Perhaps, trainees acquire this competence in coursework, other work experiences, or life experiences. It would seem a weakness of the present study is that these areas were not accounted for. Also, how did clients perceive therapists as multiculturally competent if therapists rarely did anything overtly to demonstrate such competence?

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Further examination of the importance of multicultural issues to supervisors, trainees, and clients would seem to be warranted given these findings. Also, social desirability was not accounted for in this study. Given attention to the importance of diversity in U.S. society, and especially within counseling training programs, there is pressure for trainees to appear sensitive to and interested in diversity issues, and appear multiculturally competent. Previous studies in multicultural competence have examined social desirability and stressed the importance of evaluating this construct (Constantine, 2001; Constantine & Ladany, 2000). As well, it is well documented that people experience difficulties with evaluation (Ladany et al., 1996). Understanding more about these constructs in relation to multicultural events and multicultural competence appears important.

It would be interesting to conduct a study using more experienced supervisors and trainees and compare the results to those in the present study. Just using more experienced supervisors might lead to very different results. Specifically, studying supervisors with reputations for being skilled with respect to multicultural issues in supervision and therapy would probably lead to much more skillful handling of multicultural events. More experienced trainees might be more comfortable in their role as a therapist and more adept at basic counseling skills than the trainees in this study were. This might allow for greater exploration of multicultural issues, if there is credence to the idea presented in this study that dealing with multicultural issues in counseling and supervision is a higher level skill set that very beginning therapists are not ready to tackle, or at least that there are developmental tasks that must be addressed first with beginning therapists before multicultural issues are explored.

Also, more experienced trainees are probably less likely to desire as much structure and guidance in supervision as beginners often desire, which could result in more experienced trainees asserting goals for supervision more. Among these goals might be more attention to multicultural issues, especially if students in other counseling programs are exposed to multicultural coursework at a similar stage in their training to the principal investigator (whose multicultural coursework came in his second year, as well as subsequent years).

It would also be interesting to have more cases, to allow collection of even more data, and possibly result in greater attention to issues that only received minimal attention, if any, in this study, such as sexual orientation. Indeed, selecting participants to elicit a wider variety of multicultural issues, such as gay/lesbian clients, might yield interesting results. Also, even more attention might be paid to selecting participants that would result in as many differences across multicultural dimensions as possible within supervisory dyads and counseling dyads.

Supervisee racial identity has been found to be related to multicultural competence in previous studies (Ladany et al., 1997). Constantine (2005) found White supervisees had higher self-reported multicultural competence, multicultural case conceptualization etiology ratings, and multicultural case conceptualization treatment ratings when in progressive (supervisor is more highly developed in racial identity than trainee) and parallel-high (supervisor and trainee both with more highly developed racial identity) supervisory relationships as opposed to White trainees in parallel-low relationships (supervisor and trainee both low in racial identity). Examining racial identity in the context of case studies, utilizing qualitative and

quantitative analyses, might be useful in future research given the link between racial identity and multicultural competence found in past studies.

Lack of tape review and the therapist's inaccurate recollection of counseling sessions were among the reasons identified for why multicultural events proceeded as they did in the 2nd supervisory dyad. The issue of taping is not only important because of the possibility of inaccurate reports by trainees. Leong (1993) discusses the differences between high context and low context cultures in communication pattern. High context cultures, which he includes as Asian, Native American, Arab, Latino, and African American (basically any cultural group not from Europe), rely more on implicit, nonverbal communication. Given this assertion, it would seem that an important component of multicultural training is to have some sort of live representation of the trainee's work. Audiotape might serve some of this purpose, but even more so it seems there is a greater need for use of videotape in multicultural training and supervision. It would be interesting to conduct the present study using videotape instead of audiotape, and having judges examine videotapes for nonverbal, implicit communication that might be transmitted between therapist and client, or supervisor and trainee. It might also be useful to ask participants about nonverbal communication, its importance, their awareness of it, and what they believe was being conveyed.

Conclusions and Take Home Message

Inevitably, a study with this amount of data can make it difficult for a reader, or even an investigator, to figure out what the most important findings of the study

are and what to focus on amidst a flood of information and results. Much of what the principal investigator feels are the highlights of the study are illuminated throughout the discussion section, however, a shorter, more focused recap also seems warranted and useful.

First, this study is consistent with previous literature stating that supervisors should bring up multicultural issues in supervision, and that supervisors are more responsible than trainees for bringing multicultural issues into supervision. This view primarily comes from the idea that supervisors are in a position of power, no matter how egalitarian they attempt to be, and therefore bare responsibility for setting the agenda, focus, and priorities of supervision. Therapists are in a similar power position to supervisors, and thus, are also more responsible than clients for provided entrees to address multicultural issues.

Second, in this study the problem was not that multicultural issues never came up in supervision, but rather that multicultural issues came up several times in supervision and were routinely glossed over, not followed up on, or seemingly ignored when they were raised. Trainees may have been given an implicit message that multicultural issues were not valued or important, and should not be brought up. This point is why supervisors are seen as having responsibility for raising multicultural issues, because they can set the atmosphere of supervision and have the power to determine, either explicitly or implicitly, what is expected of trainees. Also, supervisors and therapists in training may raise multicultural issues, as well as other issues, but then do not explore these issues in a deep or meaningful way that promotes growth in either party. Working with supervisors-in-training to follow-up on material

in supervision and be purposeful about their interventions in supervision can model this behavior for the therapist-in-training. Also, it is not necessarily that every multicultural event needs to be long and deep, but rather that a few should be attended to and explored to set the stage for future events and serve as a catalyst for trainee exploration and reflection.

Third, there is some suggestion in this study that supervision and counseling trainees at this level may not be developmentally ready to handle multicultural issues. However, even if it is true that beginning supervisors and trainees are not equipped to handle multicultural issues in a very deep way, there is still probably a developmental appropriate level at which multicultural issues could be addressed that is beyond the extremely minimal attention during supervision in this study. In particular, growth for supervisors-in-training could simply be to follow-up on *one* multicultural event or issue among several by asking questions and demonstrating curiosity. Also, even if multicultural issues aren't addressed much, it is important to have that be a deliberate and conscious choice on the party of the supervisor and therapist rather than the seemingly more random process that took place in this study. Ultimately, many beginning or inexperienced therapists will have inexperienced supervisors-in-training, and it seems a disservice to these students, the field, and clients to not expect any attention to multicultural issues. Also, given that experienced supervisors evidence difficulties with addressing multicultural issues, letting inexperienced supervisors off the hook in expectation that therapists-in-training will have multicultural issues incorporated into future supervision experiences is faulty thinking and likely to result in counseling graduates who have not grown in their comfort with or understanding

of multicultural issues, particularly beyond the classroom (theoretical) learning they have likely been exposed to.

Lastly, the present study suggests strongly that multicultural issues are not most likely to arise through the supervisor or therapist making direct references to culture, race, gender, or other multicultural issues. Instead, multicultural issues can emerge through proximal issues. Specifically, in this study many multicultural events came as the result of discussing the client's interpersonal relationships, which included family, friends, and romantic relationships. While talking about interpersonal relationships, issues of acculturation, racial identity, gender expectations and models, and cultural conflicts can emerge. Recognizing how inquiring about parts of clients lives, like their interactions with others, can provide a gateway into discussion of multicultural issues that will perhaps feel more natural and comfortable than more direct interventions designed to elicit multicultural material, such as, "How will us being from different racial groups impact our work?"

T: So it's that you feel discouraged when they say these things. It makes you question what you're thinking.

C: Yeah, it makes me question it but it doesn't really change my mind per se. Because, I mean obviously since I've been feeling like this for about a year, if I was going to change my mind based on, you know people being confused or doubting my, you know what I am thinking, that I've already, that I've tried to change. Well I haven't, so what I say is, you know, I don't know, it's just what I want to do now. So, um…you know…I feel, like I feel a little bad that they don't necessarily understand where I'm coming from but at the same time it's what I want to do and it's what I feel is the most important thing to me right now. I just feel like, you know, as far as like my parents go, I think they just think like…I guess they were just never used to hearing me say, you know, talking about marriage because I'm so young, and I guess my dad paid all this money for me to go to college and he thought that it was, you know, that I was gonna go to grad school right after college and that you know, not get off that path. And when I told them that is not what I wanted to do, he was just really…not disappointed, but surprised. I think he feels like I've been given such a good opportunity he probably thinks that I've gone and wasted it. And um…as far as my friends go they probably think that, so…you know…it's just like so retro in my thinking, just like, being satisfied working on my relationship aspect of it. Like the marriage and family aspect of it rather than being this independent career woman that's been like you know, drilled into all of our heads.   That's like, in our generation now. And you know, I think that's really important too, like I'm, I'm so happy for my friends that are doing that, but it's just the more I think about it the more I think it's really not for me necessarily…right now.

Appendix B

S: I'm laughing because I really don't hear the sexual orientation piece. I am so guilty.
I project that onto just about everyone I possibly can. I'm always looking for that, so…

T: It's a little more questioning.

S: Oh yeah. Everyone's gay. That's how I talk about it. I'm making everyone, oh
clearly this is sexual orientation, and I don't hear that at all. So, I'm really laughing at that.

T: In our Monday night class that was where we did cognitive scripts. People who
identified as heterosexual in one room. People who identified as gay and lesbian in one room
and then there was the questioning group. I think it was that middle questioning group and
seeing the people who identified with that group. I mean I was crying and people were
crying, there were tears in class. So I think it was very emotional.

S: Sounds like you had some artifacts there.

T: Yeah. I think that was influencing her comment where she said maybe she's
questioning her sexual orientation.

S: And great, it's a broadening perspective. But I don't hear it. What I reacted to at
first, I guess if I was looking for, someone said give me the one liner for this client. What she
wants or what she was saying. She talked about a lot of school things. Sort of a cognitive
perspective of like being able to see both sides and see where people are coming from even if
they disagree with her. I think the piece that helped the most, at least for me, was when she
said, "I'm thinking I may want to pursue marriage and family and nobody says that's okay.
It's my feelings I've been bombarded with. My friends aren't doing it." They don't seem
stupid but I don't hear her saying their supportive either. The parents, they sound like they're
abusive. But the question is how does this work into your Ph.D. program? [inaudible] This
could be contextualized in family dynamics. This could be contextualized in larger
racial/ethnic dynamics.

T: Right.

S: We don't know enough yet to know. I reacted to the fact that she said Ph.D. I'm like
oh my gosh there's an assumption she's going to get a Ph.D. in this family. Where's that
coming from? In any case, she made this shift and she said, she noted it's been pretty
dramatic, she noted it's been pretty recent, and it doesn't sound like anybody is giving her
anything. Maybe that's the way that you get to use some of your feelings of protectiveness
toward her. And maybe in a way that will bring the session down a level. Get out of your

head a little bit and into some more feelings.   It's just to think about what is that like that she's made this huge shift. She's really considering something that feels different from what everyone around her is. I don't know even what the boyfriend…does he know? I have no clue what's going on there. Does she need him? Does she need him if it works out but ultimately the next person that comes along. I don't know. That's where I feel the pull. She's missing something right now. It's something you maybe get to give her which is, what's that feel like? How is that for you? It must be hard to not feel supported.

T: Right.

S: Because it must be.

T: I think as she was saying this I think of myself, why can you not have both. I see myself that way. Yes, I want to get married. Yes, I want to have a family. But yes I'm going to work. I'm going to have a career. I'm going to do both. Maybe it's because my mother is a college professor. I mean she worked from when I was 2 until now, so I grew up in that environment where both parents worked. I was trying to get her to talk about that a little bit because she was separating the marriage and the career and not thinking of them as coexisting. I think she was also struggling with her parents saying, or maybe she was interpreting this, that marriage would be for him or other people, whereas a career would be for herself. And they didn't see [inaudible] as being for herself. I would see marriage as being for herself to but it seemed that she was ready to go with this housewife mentality and not work and just raise the family.

S: What would it mean for you if she just wanted to be a housewife?

T: I respect that. It's not where I would come from and it's not where my family comes from. Even both of my grandmother's worked so my entire family comes from the women have worked and not just stayed at home. So, I think that's my own values and my own perceptions playing in there but I do respect that's what she would want. But I think it's that her family and friends are approaching it from that you can have both but they're not saying that to her and she's just stuck in this. I don't see why they're not supporting her.

T: Yeah, I think that was just my approach to it. Not to a therapeutic counseling approach. It was just, she's graduating, these are typical anxieties of someone who's graduating. What am I going to do? Am I going to lose my independence by not being with my friends and living at home with my parents? I lived at home for two years after graduating undergrad so I can definitely relate to those things. So, that was interesting how that profession fit in. And then Monday night in 618 we were going to talk about my client. I said pretty much the same things I said to you and different concerns came out of different people in that class, which was good because I hadn't really thought about any of those things. I was wondering where they were really stemming from. In talking, I think this relates to the earlier class that we had on my Monday for my program. It was our student development theory class. Through that class and all the different conversations that we've had, and talking about my client in 618 I realize that it's possible she's struggling with her own identity and who she is in a variety of aspects. She doesn't know what she wants to do. She's been a psych major. Her family figures she would go back to grad school after undergrad and she's in that, "who am I, what do I want to do, what do I want to be, who am I, what's my identity piece of things?" That was something that played in. One of my other classmates suggested, and this was based on our Monday conversation in class that was a very intense class that we were coming off of, so I think all of our minds, at least the 3 of us in that program, our minds were still focused on this. I don't know if that fit into her suggestion. She was wondering if maybe my client was struggling with her sexual identity and her gender identity and her sexual orientation. I was like what, I didn't think of these things. But from our conversation in class I was like maybe she's clinging onto this let's get married thing because she doesn't know what else to do. She's very close to her female friends and her female relationships and her roommates. That was something that caught me off guard in class. Okay, [inaudible]. Our instructor was asking about more of her physical characteristics and at first I didn't quite understand his questioning. I was like, she's really well composed, and he was like, no, what's does she physically look like. I'm like, why do you want to know this? In describing her she's a very petite person, talked very soft, and so maybe it's more of a maturity level. That she's still stuck in her friendships and difficult transitioning into the adult world of graduating and being a college graduate and what that entails. This was the end of class, he was wondering if maybe at some point in her life there

was some abuse that occurred because she was just very, she seemed more soft spoken, meek. I was like, so Monday night was…

S: This is interesting to me. What was your reaction to hearing these things bandied about. Certainly, any one of them is possible and plausible.

T: At first I was thinking why didn't I see these things. I just had attributed it to typical senior concerns and thinking that everything she was talking about seemed like it was just raising the surface and wasn't getting deeper and maybe there was something deeper there. This helps to identify what that deeper thing may be but to me they just seemed so extreme and I wasn't thinking that extreme. I was thinking more, okay maybe she's having issues with her parents, maybe there's something about how her parents perceive her or maybe she's struggling with how others perceive her. Even though she feels confident in what she's doing it's still that I need to do certain things so other people see me in a certain light was the perspective I was taking. These are all very extreme things. They're all possible, one of them may be possible.

S: Put yourself back in that class. What were you feeling in the class with all that?

T: Surprised. More concerned that I had practiced this whole description of my client. Compared to the other 3 members who were in that class I was like oh my client doesn't have any of these severe issues, or didn't present. The other 3 clients that my classmates are working with presented with clear big issues and came in and said I'm dealing with these big things. She didn't say I'm dealing with these big things. She just kind of talked around that. I think I just thought she doesn't have anything big to talk about. I didn't think through that. I think it was more of a, not a bruising of my ego, but in some ways yeah, like, huh I didn't see this. How come everyone else can see this and I can't? I think it goes to what everyone else was talking about, maybe it's easier to see when you take that step back and you're not in the room with the client and your not in that frame of mind and you don't have that relationship with the client. Granted, it was just one session but I felt I had more of a rapport with her than others. Just hearing what others were saying, it was like oh yeah I can see this about your client. I know it's hard for me to see that. I think I was stuck so much in the moment with her and in the room with her and going off of what she had said directly and not really feeling I needed to dig deeper for these bigger things. I was just staying on the surface and I felt, it was good to hear it but it's hard to hear it as well.

S: I think for two reasons [inaudible] anytime a classmate [inaudible] anytime someone shows us up or [inaudible] it reveals a blind spot. It can be diminishing. I've certainly had that experience. It's hard not to go to that fetal position internally. Also, you had a

relationship with her that they didn't have. I'm wondering if you felt protective of her or protective of your relationship with her?

T: Yeah. I think that's my feeling. One thing that we kept saying as we were telling the stories is that in the classroom we are just hearing the counselor's perception of the client which in many cases may not be accurate, may be more accurate. They were just going off of what I had said.   Maybe I didn't see things or I chose not to share. I can't thing of things I did not choose to share. Maybe subconsciously I chose not to share certain things or was scared of these things. Is this true? How can I best help her if any of these things are true? How do I approach these things? They're not things that you can just go and shoot a lot of questions – by the way I was wondering, blah, blah, blah. How to go about getting at these things and not be confrontational, but I'm not just pulling these things out of left field for her. Maybe they do, maybe they don't, but if they don't you don't want it to be, so I was just wondering. You're not going to ask these questions point blank. I think in hearing all these things that was another concern. How do I approach her and really ask these questions and get her to dig deeper. Is she going to walk in today and just be like, oh yeah here's a whole new story and completely change from where she was? Is there going to be a growing concern that happened in the last week that she wants to talk about?

T: And you're taking into account all of the feelings associated with this. It sounds like he's just, I dreamt this, I thought it, it's over, I'm moving on. And you're like, why was he thinking it, whatever it was, why was he thinking it and what did it really mean to him.

C: It's situations like these that just show, like we were just talking about, how different guys and girls are.

T: You think a lot of men just shut that door on feelings or expressing those feelings to someone they're in a relationship with.

C: Yeah, definitely. The most I can get out of him is, he doesn't get along with his roommates right now. The most I can get out of him is, "they piss me off or I'm so mad at them." That's the most feeling words I can ever get him to describe. It doesn't surprise me much that…he's perfect to be there for me. He's a really good listener. He'll do anything to make me happy. He's so good at that but when it comes to his own stuff. Unless you straight out ask him and even sometimes then it's not going to be as…I don't know. I wish he'd see things from my perspective.

T: How do you feel about that, sort of taking the more traditional gender roles thing and describing when he's not opening up to you. How does that make you feel?

C: I don't know. I never really met a guy who wasn't like that. I don't really have anything to compare it to. It doesn't bother me with other guys, but other guys aren't my boyfriend. This is my boyfriend. He's supposed to share thoughts and feelings with me.

T: Sounds like an expectation you have of being in a relationship is mutually sharing feelings.

C: I don't know necessarily about everything. I over share probably, but that's my choice and he's there and doesn't mind listening. Sometimes I just need him to listen but I expect, I don't expect him to share his feelings about all the things that I do but I do expect him when something really traumatic happens, where he's doing something completely out of character, and pushing me away and not wanting to talk about it and being all shut off from me, I expect there to be at least some explanation. If he's just moved on from it fine, but I need a little bit of piece of mind. It affected me too.

Appendix E

T: So one of two things has to happen. Either you have to find ways to be less nagging
and be more supportive, or you guys both need to realize that maybe um, your relationship
won't evolve because you'll continually take advantage of him. Does that make sense?

C: mmhmm

T: But at the same time you have questions about whether or not, you really do love
him. Or whether you just like him and love him as a friend and someone that you truly do
care about. Right?

C: mmhmm

T: What is, what is his ethnicity?

C: He's Asian. He's Asian too but he's Chinese so it's just a little bit of a problem for
my parents, so um…they kind of set him up for that too before he met my parents. For like a
couple of months I was telling him that, 'oh you know, my parents, you know, they're not
going to accept you, blah, blah, blah'. It just put a lot of pressure on him. But oddly enough
when he did meet my family they loved him and stuff so it was really weird. But yeah, like
even things like that I put pressure on him.

T: Um, do you think that his culture plays a part in the way that your relationship reacts?

C: I feel like it's the opposite of what it should be, especially because in our cultures the
male tends to be the dominant, um…so I feel like he breaks a lot of, what should be done I
guess.

T: A lot of the cultural rules

C: Yeah, I mean the women are usually nagging but in the end the men usually have the
power. They have the last say and everything, but like it's completely reversed around so I
feel like that's why I'm running with it because I don't see it. Um…yeah

T: So if you were to change your nagging, that would almost be going against what you
know as being a normal relationship.

C: Right, between a man and a woman…I feel like I got the nagging thing from my
mom which is different, same kind of thing I got from my mom I'm putting on him even
though, if I look at my parents it wouldn't be that way.

T: In your family, is your, does your mother nag your father kind of…

C: Um, sometimes yeah, but it's not to the extent of anywhere near what I do to my
boyfriend at all. So, I guess it's different too because they're married so it's like, 'oh we're
married' whereas this is like, you know, just like dating things

T: Right, you're not married so the things you say don't bounce off as easily or they bounce off very easily

C: Yeah, but I know a lot of things, like I know in the beginning it was very rocky for my mom, like I was there, so you know it's different when you're a kid and you know there's, there's like something connecting you together.

T: Are you an only child?

C: mmhmm

T: Um…do your father's responses with your mom in your parent's interaction, is that ultimately he still has more power, more control and that he still is the, the um, the primary decision maker and that kind of thing

C: Um, yeah. Now it's like my mom, now she just says anything, doesn't take it seriously. I guess with my boyfriend if he just sort of, kind of like, was like 'oh you're just being silly, c'mon stop,' you know, um…maybe that would work because that's kind of what my dad does. He just kind of like, you know, she'll just get over it, you know he's like 'just let her do her thing and she'll get over it,' and um…yeah, I guess.

Appendix F

S: I feel a little stuck because I certainly did have my own hypotheses, perceptions, reactions, and I did read your process notes, so I do have a little more information than your peers maybe. But mine are different. I don't want to sort of add the additional burden, here's more things to be thinking of but I really do feel pulled to say, I'm not getting what great hypotheses, I'm not getting it from the tape. I'm not getting it. That doesn't mean it isn't but I'm not getting it. I don't know if that's helpful to say.

T: Would you mind sharing yours? I know it would be helpful to hear.

S: Yeah. I think ideally this is a good place for us to do that. I guess I don't…yes, I will share. I don't want you to feel like now there are 7 people telling me what to do. I think that, um, that's funny. I'm laughing because I really don't hear the sexual orientation piece. I am so guilty. I project that onto just about everyone I possible can. I'm always looking for that, so…

T: It's a little more questioning.

S: Oh yeah. Everyone's gay. That's how I talk about it. I'm making everyone, oh clearly this is sexual orientation, and I don't hear that at all. So, I'm really laughing at that.

T: In our Monday night class that was where we did cognitive scripts. People who identified as heterosexual in one room. People who identified as gay and lesbian in one room and then there was the questioning group. I think it was that middle questioning group and seeing the people who identified with that group. I mean I was crying and people were crying, there were tears in class. So I think it was very emotional.

S: Sounds like you had some artifacts there.

T: Yeah. I think that was influencing her comment where she said maybe she's questioning her sexual orientation.

S: And great, it's a broadening perspective. But I don't hear it. What I reacted to at first, I guess if I was looking for, someone said give me the one liner for this client. What she wants or what she was saying. She talked about a lot of school things. Sort of a cognitive perspective of like being able to see both sides and see where people are coming from even if they disagree with her. I think the piece that helped the most, at least for me, was when she said, "I'm thinking I may want to pursue marriage and family and nobody says that's okay. It's my feelings I've been bombarded with. My friends aren't doing it." They don't seem stupid but I don't hear her saying their supportive either. The parents, they sound like they're abusive. But the question is how does this work into your Ph.D. program? [inaudible] This

could be contextualized in family dynamics. This could be contextualized in larger racial/ethnic dynamics.

T: Right.

S: We don't know enough yet to know. I reacted to the fact that she said Ph.D. I'm like oh my gosh there's an assumption she's going to get a Ph.D. in this family. Where's that coming from? In any case, she made this shift and she said, she noted it's been pretty dramatic, she noted it's been pretty recent, and it doesn't sound like anybody is giving her anything. Maybe that's the way that you get to use some of your feelings of protectiveness toward her. And maybe in a way that will bring the session down a level. Get out of your head a little bit and into some more feelings.   It's just to think about what is that like that she's made this huge shift. She's really considering something that feels different from what everyone around her is. I don't know even what the boyfriend…does he know? I have no clue what's going on there. Does she need him? Does she need him if it works out but ultimately the next person that comes along. I don't know. That's where I feel the pull. She's missing something right now. It's something you maybe get to give her which is, what's that feel like? How is that for you? It must be hard to not feel supported.

T: Right.

S: Because it must be.

T: I think as she was saying this I think of myself, why can you not have both. I see myself that way. Yes, I want to get married. Yes, I want to have a family. But yes I'm going to work. I'm going to have a career. I'm going to do both. Maybe it's because my mother is a college professor. I mean she worked from when I was 2 until now, so I grew up in that environment where both parents worked. I was trying to get her to talk about that a little bit because she was separating the marriage and the career and not thinking of them as coexisting. I think she was also struggling with her parents saying, or maybe she was interpreting this, that marriage would be for him or other people, whereas a career would be for herself. And they didn't see [inaudible] as being for herself. I would see marriage as being for herself to but it seemed that she was ready to go with this housewife mentality and not work and just raise the family.

S: What would it mean for you if she just wanted to be a housewife?

T: I respect that. It's not where I would come from and it's not where my family comes from. Even both of my grandmother's worked so my entire family comes from the women have worked and not just stayed at home. So, I think that's my own values and my own perceptions playing in there but I do respect that's what she would want. But I think it's that

her family and friends are approaching it from that you can have both but they're not saying that to her and she's just stuck in this. I don't see why they're not supporting her.

Appendix G

S: Basically, you're going to concentrate mainly on the relationship and the career you're just going to have back-up resources.

T: Right, because I feel like the career is more of her bigger concern but culturally it's not something she's used to vocalizing and saying I need to talk to you about this. Because she has mentioned that basically she's glad, she mentioned that she's glad that I pushed it a little bit more. Another time she mentioned that she can't talk to her friends about it and she doesn't feel comfortable talking to her family about it, or vice versa. Obviously, you get distracted with a relationship it's kind of hard to move forward with that next step. So, I feel that's kind of primary.

S: Okay. [long pause] When I was looking at your process notes you talk about the therapeutic relationship and you mention, "I also think it was effective for her to connect her current behavior with the roles her mother demonstrates.

T: Right, one of her common comments is that the relationship problems are her fault because she nags him, quote, unquote. She picks on him and is just very negative, always telling him to do things differently, to change things differently. I asked her where she thought that came from and she said her mom does to that to her. So then we talked a little bit about why that is and she spoke about the roles of the Asian woman and that's the typical role. She mentioned that the men, although they're put in that situation, they're the ones who make that ultimate decision, they're the ones in control, and her boyfriend's not. We talked a little bit about whether she's glad that's the case or whether or not she wants to change that. And we also talked about, as far as that's concerned, how she feels when her mother does that to her. She's been pretty clear about the fact that that's not something she likes about herself.

S: So, as a female, how do you feel about that, like as far as a female coming from a different culture. As far as…

T: I gave her an example. It reminded me of some experiences that I've had. I felt like she's given me the feeling that in her mind she's the dominant person in the relationship. In my past experiences when I've been in relationships where I feel like I'm the better catch and you feel like their not up to your standards, or vice versa, I notice I tend to treat them a little differently. I'm less patient. I kind of do the same things that she does. So I gave her the example of in my experience these are the things that I've done. Could there be any relationship with what you're doing? She said that she definitely doesn't see him as being her ideal partner. In her mind she's always envisioned something different and that there

definitely could be a connection to how she's treating him. But, she said this is her first serious relationship so she can't compare to any other relationship that she's been in.

S: So with that, using your experience, it's okay to give a past experience. I had the impression that you were giving the experience but you were afraid to use your past experiences to give her an example that it's okay. I didn't get to listen to your tape but from what you wrote down it's like you just gave her a few past experiences that you had.

T: Okay.

S: I think it's okay to give the experiences that you had before and go deep into it. Basically, it's okay to use your past experiences that you went through as far as relationships. Basically, you can relate to her and where she's coming from.

T: Right. I think in the past you had commented on that. I think that I was a little more aware of that this session. I think I tried to do that a little bit more. I'm not sure if you think I should go deeper then. I shared with her my experience of the past and how it seems to be mirroring what she's doing now.

S: Well, just as far as using your past experience and how it's mirroring and how you were able to go past that and continue on with your life. It seems like she's afraid she won't be able to continue without him there or whatever the case is. Usually, I don't know what happens in your experience, but you could say it was almost the same thing you are going through but I was able to go on and continue with my life.

T: Right. She kind of gives a little bit of contradicting information. Like any relationship your totally confused and not quire sure what you're thinking but she'll make a comment that she can't leave him because he basically needs her. He had a lot of issues when he was younger and if she leaves him she's afraid that he'll never be able to establish a relationship again, even to the terms of him referring to abandonment if she left him. But then she'll make a comment about how she doesn't know that she'll ever find someone who loves her so unconditionally and that kind of thing. So, we talked a little bit about, she kind of made me feel that time is a big issue for her. She felt like she'd invested a whole year of her life and therefore she needed to continue. I explained to her that a year seems like a really long time in a relationship, especially your first relationship, but…

S: She's young. So…go ahead.

T: But when you look at someone who's been married for 40 years the only way that 40 years works is if you're with someone who is truly compatible. 40 years compared to that one year is such a small sliver that it's not a large amount of time.

S: You know, I find that in my own experience talking to other females time is always an issue. Putting in so much time and I have investment. That's the key word, I've invested in him so much that I'm not letting him go that easily.

[mutual laughter]

T: That's kind of what she's made it seem like. That she needs to follow through because so much time is invested in him, but then she'll turn around and make comments about how she's worried about him if she leaves him. Not worried in the sense that anything detrimental, but put the blame on him not being able to handle it. But after they broke-up she was the one chasing him. So it's just…

S: She seemed very lost and stuff and that's where you need to…

T: That's what we need to do, to clarify.

S: Not only that, but it's like her self-esteem is low and confused and you have to bring that up somehow. I think it's kind of fortunate that you're a female, a female counselor. I think that relationship, instead of a male counselor [inaudible] [mutual laughter] But I definitely think you should use that to your advantage as far as the similar gender and using your experience to of feeling like you could go on. But it does seem like she's very contradic....

T: Contradictory. Is that a word? Contradictive? [laughs]

Appendix H

T: How do you feel when you find yourself in that trap, when you're like, 'oh this is my psych major attributing to this', how does that make you feel?

C: I kind of laugh because it's been like that for awhile. Like, I do that with other people too, if they come to me with a problem, basically I don't say it to them, but I'll think about it afterwards. I'll be like, 'hmm, I wonder if like, this is the problem or whatever', it's just something in my head, I don't know, I'm just overanalyzing again. Sometimes I don't know if that's like the psych major in me or the girl part of me because…

T: Interesting

C: I obviously have other girlfriends who are not psych majors, they can overanalyze jus as much as I can. Relationships, friendships, and what does 'this' mean, you know, stuff like that. And I feel like girls tend to do that more than guys. I admire a lot of guys for being able to…I feel like guys are able to really live in the moment and just not worry about everything else that's going on around them. Or if they do worry about it, the people I know have a really job of like, handling it, you know. Valid and realistic stuff, versus…the whole like, 'what if'…

T: Interesting….hmm….<about 6 seconds of silence>. So do you think that it's more of your gender playing a role in this? That is because you're the female in the relationship and your boyfriend is the male role and so you're taking on the role that you were just describing where…

C: Umm…I mean I don't think that I'm taking them on. I feel like more than males, females, based on just like myself and my own personal experiences and all my close friends, I just see a lot more of these types of behaviors in girls than I do in guys. Maybe, I'm not saying that guys don't have them, but they're not as either (a) aware of them, or (b) like, they don't like verbalize them as do girls. The reason why I know this happens to other people is because I talk to other girls about this, so I can't rule it out for guys, but like I said I just don't know for sure. That's the way it appears, that, you know, girls would look at situations in a certain way, or give certain things significance that guys might not…see, or verbalize.

Appendix I

T:	Tell me a little about your support structure outside of him.

C:	Well I can't talk to my parents about it because they weren't very unsupportive of us, but they weren't very supportive either, because there's a cultural difference between he and I, like I'm their only daughter and they expect me to pass it on, you know…I don't know, but there's that cultural side. But um…but with my friends…um…like the mistake my boyfriend and I made when we got together was that we just spent all our time together so we both lost our support systems and I think that the major downfall of our relationship is that when we would have problems with each other instead of turning to someone else, and sort of telling them, we just end up telling each other, and we would tell each other how mad we were, and it just escalated and made things worse, but I sort of lost all that closeness. They will try to help me and try to be supportive and try to be there for me and stuff, but I know a lot of them, they can't really handle it because I'm not the one to usually cry. I'm the one that people come to to cry. So like I can't talk to them about it because I'm so embarrassed that I cry. Even with my advisor yesterday when I cried, even with you, it's not…it's not who I am. I don't show it, it's my weakness. And that's how I know that I'm in trouble.

T:	So, I'm assuming that your feelings….that your discomfort with crying and trying to push these kind of cultural things and that may be a problem with your family…but yet you're comfortable when people cry around you. Is it possible that you can try and flip the page a little bit in that you crying around me is pretty much the same thing as if I were in your shoes.

C:	Well it's just…it's not…I don't know what it is. People just don't know me as the one to cry. You know that I'm the strong and independent one, and then my boyfriend…that I seem distant, and all I do is spend my time with him. And now I'm so emotional…it's not who I am. Like if I were to talk to my friends and they'd start talking about it and I completely change the subject…and like sometimes I wish they'd catch on but they don't. They just sort of go with it and I think it's that they feel uncomfortable too, so they don't want to…

T:	Maybe they don't feel uncomfortable, but maybe they sense that you feel uncomfortable…<4 seconds of silence> so if you can learn a little bit and try and work on being able to become comfortable with those persons maybe you would be able to talk about it…since they know you so well, that might be a great place for you to start, since your family's not available to talk with you about it. So…I'm understanding that you never really

had that kind of relationship with your parents, where you could show those kinds of emotions.

C: I mean, like…they always tell me that they're here to listen to me it's just…they're not cold people it's just…with my mom she just talks so much that if I feel like I say something she'll be more like a <inaudible mumble> more concerned with details, or be like, 'I know that you're really hurt', I mean they're good parents. And my dad, he's a man of very very few words so there's no point there…and…um…just, I don't want to let them know that I…especially schooling…unless, my relationship interferes with taking care of that, and my mom's constantly telling me like, 'the decisions you make now will last a lifetime because you're in that time right now where you're preparing for the future'. And I don't want them to be disappointed with me. They're usually not. They don't look at my transcripts, they don't look at my grades, they just assume that…they put that trust in me, but…they're interested about my future but they just assume, you know…they have faith that I'll make the right decisions

<5 seconds of silence>

T: So it's probably even more difficult that you feel like you're not making the right decisions right now. You feel like your parents have put that faith, that trust in you, and the fact that you're disappointing them probably makes the situation…more difficult than it would be without that factor. <3 seconds of silence> So let's talk about some options, and what you can do to try and resolve it. My first thought is that basically you're still dealing with the emotions of the relationship, and these feelings aren't going to just disappear, as much as you want them to. We've all been in relationships and we all know what that's like, and as black-and-white as it might seem to me or to somebody else, you can't turn those feelings off. You just need to know that it's normal for you to be feeling that. In the meantime you need to try and put more emphasis on school because that does seem to be a priority to you. Can you deal with school?

Appendix J

T: Tell me a little about your support structure outside of him.

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had that kind of relationship with your parents, where you could show those kinds of emotions.

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Appendix K

T: And you're taking into account all of the feelings associated with this. It sounds like he's just, I dreamt this, I thought it, it's over, I'm moving on. And you're like, why was he thinking it, whatever it was, why was he thinking it and what did it really mean to him.

C: It's situations like these that just show, like we were just talking about, how different guys and girls are.

T: You think a lot of men just shut that door on feelings or expressing those feelings to someone they're in a relationship with.

C: Yeah. Definitely. The most I can get out of him is, he doesn't get along with his roommates right now. The most I can get out of him is, "they piss me off or I'm so mad at them." That's the most feeling words I can ever get him to describe. It doesn't surprise me much that…he's perfect to be there for me. He's a really good listener. He'll do anything to make me happy. He's so good at that but when it comes to his own stuff. Unless you straight out ask him and even sometimes then it's not going to be as…I don't know. I wish he'd see things from my perspective.

T: How do you feel about that, sort of taking the more traditional gender roles thing and describing when he's not opening up to you. How does that make you feel?

C: I don't know. I never really met a guy who wasn't like that. I don't really have anything to compare it to. It doesn't bother me with other guys, but other guys aren't my boyfriend. This is my boyfriend. He's supposed to share thoughts and feelings with me.

T: Sounds like an expectation you have of being in a relationship is mutually sharing feelings.

C: I don't know necessarily about everything. I over share probably, but that's my choice and he's there and doesn't mind listening. Sometimes I just need him to listen but I expect, I don't expect him to share his feelings about all the things that I do but I do expect him when something really traumatic happens, where he's doing something completely out of character, and pushing me away and not wanting to talk about it and being all shut off from me, I expect there to be at least some explanation. If he's just moved on from it fine, but I need a little bit of piece of mind. It affected me too.

Appendix L

T: A lot of what you are saying reminds me of a relationship that I was in, so much so that it's a little scary. So it's really difficult for me to…in a way it's good because I understand what you are saying but in a way I'm trying not to think about that relationship because I don't want that to…you can't take my relationship and compare it to yours because they're not the same. At the same time they are very similar. So let me tell you a little about it and then I want to hear your reaction. When I was a senior in college I met somebody, dated him for two and a half years before I started to have doubts. Basically, I felt a lot of the same things you felt; that we were great friends, I wanted him in my life, our relationship was pretty strong, I could see us spending the rest of my life with him but I just don't know if I'm completely happy. There were little things. Then I started to tell myself it was just me. It was the fact that my childhood - I had problems with intimacy. I had problems letting him in. If I could just change those things, if I could just let him do those things then our relationship would be okay. Then I also had issues with time; we've been together two and a half years. How can I just walk away when I'm not sure. So I stayed in for another year and a half. Another year and a half went by and those problems didn't go away. Those problems didn't go away, to the point that I was more sure I wanted out. But at that point I had invested four years and it was even harder to walk away from four years. So even though the problems were worse it was harder after four years to walk away because we still had that bond and that bond was stronger. I just didn't know what my future was. I wished someone could tell me choose between this person and this person. This is what you have in your future, this is what you have now. Now can you make a decision. With time I finally got to the point where I was so unhappy that I knew and we went our separate ways. We are still great friends today and we are no longer dating. I wonder…it's just very similar to some of the things you are saying. Again it's not exactly the same situation so what I did is not what you should do but I'm just clarifying that you're not alone in what you are experiencing. A lot of women go

through the same exact thing where they are kind of following their instincts but they're denying their instincts at the same time. We kind of have a sixth sense where we're aware of what we should and shouldn't do. Sometimes we listen to it. Sometimes we don't. Down the road it will become more clear what your decision should be. For now you can't really beat yourself up about what you're doing wrong. The relationship is what it is. It has nothing to do with who's doing what but what you can do in the future. What is your reaction to my story?

Appendix M

Demographic Form – Client

Gender: Female ( )   Male( )   Age: _____years

Race: ___Black/African-American   ___Asian American/Pacific Islander
         ___White/Caucasian   ___Hispanic/Latino
         ___Native American   ___Middle Eastern
         ___Multiracial   ___Other

Sexual Orientation: ___Primarily Bisexual   ___Primarily Gay/Lesbian ___Primarily Heterosexual

Presenting concern: Please indicate what you hope to work on in counseling?

Past counseling experience: Please indicate what, if any, counseling experience you have had
previously (if none, please indicate that)?

Demographic Form – Supervisee/Therapist

Gender: Female ( )   Male( )   Age: _____years

Race: ___Black/African-American   ___Asian American/Pacific Islander
         ___White/Caucasian   ___Hispanic/Latino
         ___Native American   ___Middle Eastern
         ___Multiracial   ___Other

Graduate Program: _____

Year in program: _____

Previous counseling experience: ___ None   ___ Helping skills class
___ Supervised practica (how many clients have you seen? ___)

Sexual Orientation: ___Primarily Bisexual   ___Primarily Gay/Lesbian ___Primarily Heterosexual

How much do you believe in and adhere to the theory and techniques of:

	Not at all			Moderately		Strongly
Psychoanalytic/Psychodynamic	1	2	3	4	5	
Humanistic/Existential/Experiential	1	2	3	4	5	
Behavioral/Cognitive		1	2	3	4	5

Demographic Form - Supervisor

Gender: Female ( )   Male( )   Age: _____years

Race: ___Black/African-American   ___Asian American/Pacific Islander
        ___White/Caucasian   ___Hispanic/Latino
        ___Native American   ___Middle Eastern
        ___Multiracial   ___Other

Years Supervising Counseling trainees: _____

Number of trainees supervised: _____

Sexual Orientation: ___Primarily Bisexual ___Primarily Gay/Lesbian ___Primarily Heterosexual

How much do you believe in and adhere to the theory and techniques of:

	Not at all			Moderately		Strongly
Psychoanalytic/Psychodynamic	1	2	3	4	5	
Humanistic/Existential/Experiential	1	2	3	4	5	
Behavioral/Cognitive		1	2	3	4	5

Appendix N

Client Satisfaction Questionnaire (CSQ)

Please respond to these questions about the counseling services you have received.
We are interested in your honest opinions, whether they are positive or negative.
Please answer all of the questions. Thank you.

CIRCLE YOUR ANSWER:

1)   How would you rate the quality of the counseling you received?

1	2	3	4
Poor	Fair	Good	Excellent

2)   Did you get the kind of counseling you wanted?

1	2	3	4
No, definitely not definitely	No, not really	Yes, generally	Yes,

3)   To what extent has the counseling met your needs?

1	2	3	4
None of my needs of have been met have	Only a few of my needs have been met	Most of my needs	Almost all my needs been met

4)   If a friend were in need of help, would you recommend your counselor to her/him?

1	2	3	4
No, definitely not definitely	No, I don't think so	Yes, I think so	Yes,

5)   How satisfied are you with the amount of help you received from your
      counselor?

      1   2   3   4

Quite dissatisfied   Indifferent or   Mostly satisfied   Very
satisfied
                        mildly dissatisfied

6)   Has the counseling you received helped you to deal more effectively with you
      problems/concerns?

      1   2   3   4

No, it seemed to   No, it really   Yes, it helped   Yes, it
helped
make things worse   didn't help   somewhat   a great
deal

7)   In an overall, general sense, how satisfied are you with the counseling you
      received?

      1   2   3   4

Quite dissatisfied   Indifferent or   Mostly satisfied   Very
satisfied

                        mildly dissatisfied

8)   If you were to seek help again, would you come back to this counselor?

      1   2   3   4

No, definitely not   No, I don't   Yes, I think so   Yes,
definitely

                        think so

PLEASE WRITE ANY ADDITIONAL COMMENTS BELOW:

Note: Trainees were asked to complete a satisfaction measure for supervision. That

measure (SSQ) only differed from the CSQ in that the words counseling or counselor

were replaced with the words supervision or supervisor.

Appendix O

CCCI-R
Supervisor Version

Please indicate how much you agree with the following statements regarding you supervisee:

	1	2	3	4	5	6
	Strongly Disagree				Strongly Agree	
1) Aware of own cultural Heritage	1	2	3	4	5	6
2) Values and respects Cultural differences	1	2	3	4	5	6
3) Aware of how own values Might affect client	1	2	3	4	5	6
4) Comfortable with differences	1	2	3	4	5	6
5) Willing to suggest referral for extensive cultural differences	1	2	3	4	5	6
6) Understands the current sociopolitical system and its impact on the client	1	2	3	4	5	6
7) Demonstrates knowledge about client's culture	1	2	3	4	5	6
8) Understands counseling process	1	2	3	4	5	6
9) Aware of institutional barriers that affect the client	1	2	3	4	5	6
10) Elicits variety of verbal and nonverbal responses	1	2	3	4	5	6
11) Communicates variety of verbal and nonverbal	1	2	3	4	5	6

messages

	1	2	3	4	5	6
	Strongly Disagree				Strongly Agree	
12) Suggests institutional intervention skills	1	2	3	4	5	6
13) Communication is appropriate for client	1	2	3	4	5	6
14) Perceives problem within the client's cultural context	1	2	3	4	5	6
15) Presents own values to client	1	2	3	4	5	6
16) At ease talking with client	1	2	3	4	5	6
17) Recognizes limits placed by cultural differences on the counseling relationship	1	2	3	4	5	6
18) Appreciates social status of client as ethnic minority	1	2	3	4	5	6
19) Aware of professional responsibilities	1	2	3	4	5	6
20) Acknowledges and comfortable with cultural differences	1	2	3	4	5	6

Note: In the client version the directions for this measure read, "Please indicate how much you agree with the following statements regarding your therapist." In the trainee/therapist version the directions read, "Please indicate how much you agree with the following statements about yourself."

Appendix P

OQ-45

Please respond to all of the questions below based on the following 4-point scale.

0	1	2	3	4
Never	Rarely	Sometimes	Frequently	Almost
Always				

	0	1	2	3	4
1. I get along well with others	0	1	2	3	4
2. I tire quickly	0	1	2	3	4
3. I feel no interest in things	0	1	2	3	4
4. I feel stressed at work/school	0	1	2	3	4
5. I blame myself for things	0	1	2	3	4
6. I feel irritated	0	1	2	3	4
7. I feel unhappy in my marriage or significant relationship	0	1	2	3	4
8. I have thoughts of ending my life	0	1	2	3	4
9. I feel weak	0	1	2	3	4
10. I feel fearful	0	1	2	3	4
11. After heavy drinking, I need a drink the next morning to get going (If you do not drink, mark "never")	0	1	2	3	4
12. I find my work/school satisfying	0	1	2	3	4
13. I am a happy person	0	1	2	3	4
14. I work/study too much	0	1	2	3	4
15. I feel worthless	0	1	2	3	4
16. I am concerned about family troubles	0	1	2	3	4
17. I have an unfulfilling sex life	0	1	2	3	4
18. I feel lonely	0	1	2	3	4
19. I have frequent arguments	0	1	2	3	4
20. I feel loved and wanted	0	1	2	3	4

0	1	2	3	4
Never	Rarely	Sometimes	Frequently	Almost Always

	0	1	2	3	4
21. I enjoy my spare time	0	1	2	3	4
22. I have difficulty concentrating	0	1	2	3	4
23. I feel hopeless about the future	0	1	2	3	4
24. I like myself	0	1	2	3	4
25. Disturbing thoughts come into my mind that I cannot get rid of	0	1	2	3	4
26. I feel annoyed by people who criticize my drinking (or drug use). (If not applicable, mark "never")	0	1	2	3	4
27. I have an upset stomach	0	1	2	3	4
28. I am not working/studying as well as I used to	0	1	2	3	4
29. My heart pounds too much	0	1	2	3	4
30. I have trouble getting along with friends and close acquaintances	0	1	2	3	4
31. I am satisfied with my life	0	1	2	3	4
32. I have trouble at work/school because of drinking or drug use. (If not applicable, mark "never")	0	1	2	3	4
33. I feel that something bad is going to happen	0	1	2	3	4
34. I have sore muscles	0	1	2	3	4
35. I feel afraid of open spaces, of driving, or being on buses, subways, and so forth	0	1	2	3	4
36. I feel nervous	0	1	2	3	4
37. I feel my love relationships are full and complete	0	1	2	3	4

	0	1	2	3	4
	Never	Rarely	Sometimes	Frequently	Almost Always

38. I feel that I am not doing well at work/school	0	1	2	3	4
39. I have too many disagreements at work/school	0	1	2	3	4
40. I feel something is wrong with my mind	0	1	2	3	4
41. I have trouble falling asleep or staying asleep	0	1	2	3	4
42. I feel blue	0	1	2	3	4
43. I am satisfied with my relationships with others	0	1	2	3	4
44. I feel angry enough at work/school to do something I might regret	0	1	2	3	4
45. I have headaches	0	1	2	3	4

All the items are on a 0-4 scale (never, rarely, sometimes, frequently, almost always) and some are reversed scored.

Appendix Q

Session Evaluation Questionnaire (SEQ)

Please be as honest as possible in your answers. For each item, please circle the number that most closely indicates how you feel about the session you have just completed.

1.	bad	1	2	3	4	5	6	7	good
2.	safe	1	2	3	4	5	6	7	dangerous
3.	difficult	1	2	3	4	5	6	7	easy
4.	valuable	1	2	3	4	5	6	7	worthless
5.	shallow	1	2	3	4	5	6	7	deep
6.	relaxed	1	2	3	4	5	6	7	tense
7.	unpleasant	1	2	3	4	5	6	7	pleasant
8.	full	1	2	3	4	5	6	7	empty
9.	weak	1	2	3	4	5	6	7	powerful
10.	special	1	2	3	4	5	6	7	ordinary
11.	rough	1	2	3	4	5	6	7	smooth
12.	comfortable uncomfortable	1	2	3	4	5	6	7	

Appendix R

Things Left Unsaid – Client

1)   What, if any, thoughts or feelings did you have during the session that you did not share with your therapist?

2)   Why didn't you tell your therapist?

Things Left Unsaid – Therapist

1)   What, if any, thoughts or feelings do you think the client had but did not share with you?

Note: Supervisees completed a version of this questionnaire similar to clients, with the word "therapist" replaced by "supervisor". Supervisors completed a version similar to therapists, with the word "client" replaced by "supervisee"

Case Notes

At this point in your counseling with this particular client, please write notes addressing what you think the etiology of the client's concerns is (what are the client's problems and what do these problems stem from) and the course of treatment you intend to use to address these concerns (what you plan to do to help the client).

Helpfulness Questionnaire - Client

1)   What, in your opinion, were the most helpful aspects of this particular counseling session?

2)   What, in your opinion, were the least helpful aspects of this particular counseling session?

Note: The therapists were asked to respond to the same questions after counseling sessions. Supervisors and trainees also completed the helpfulness questionnaire following supervision sessions. The word counseling was replaced with supervision on those questionnaires.

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