WHITE COUNSELOR TRAINEES’ AND WHITE SUPERVISORS’ EXPERIENCES OF CROSS-RACIAL/ETHNIC COUNSELING SUPERVISION

A dissertation submitted to the Kent State University College of Education, Health, and Human Services in partial fulfillment of the requirements for the degree of Doctor of Philosophy

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The purpose of this phenomenological study was to examine the practicum supervision experiences of mono-racial supervision of cross-racial/ethnic counseling. The research questions were: (1) What are the perceptions and experiences of White Counselor Trainees (CTs) and White supervisors when the clients’ racial/ethnic identity differs? (2) How have the experiences of the supervision of cross-racial/ethnic counseling impacted the practice of counselors/trainees/supervisors? Eighteen participants (9 CTs and 9 supervisors) completed two semi-structured individual interviews. The interviews were transcribed by the researcher and then analyzed using Giorgi’s (2009) descriptive phenomenological method. Themes derived from data analysis suggest common experiences during the supervision of cross-racial/ethnic counseling, grouped into five major categories. The themes are: (1) When discussions of race/ethnicity occur in mono-racial supervision, awareness of cultural influence is raised and needs are identified, (2) When race/ethnicity is not made a priority in mono-racial supervision, needs of CTs are not met and other cultural influences appear more important, (3) CTs participating in mono-racial supervision have concerns about (a) their ability to address differences with clients, (b) client perceptions of working with a White
CT, and (c) the supervisor’s response, (4) Supervisors conducting mono-racial supervision focus on (a) observing CTs, (b) the feedback and (c) directives he or she provides CTs, (5) Supervisors and CTs engaged in mono-racial supervision have experiences that affect their practice either positively or negatively. Findings have implications for the practice and research of multicultural counseling, counselor supervision and counselor education.
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*It always seems impossible until it’s done!*  
-Nelson Mandela

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# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACKNOWLEDGMENTS</td>
<td>iv</td>
</tr>
<tr>
<td>LIST OF TABLES</td>
<td>xi</td>
</tr>
<tr>
<td><strong>CHAPTER</strong></td>
<td></td>
</tr>
<tr>
<td>I. INTRODUCTION TO THE STUDY AND REVIEW OF LITERATURE</td>
<td>1</td>
</tr>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Likelihood of a White Supervisor and White Trainee</td>
<td>1</td>
</tr>
<tr>
<td>Race and Ethnicity in Supervision</td>
<td>3</td>
</tr>
<tr>
<td>Culturally Responsive and Culturally Unresponsive Supervision</td>
<td>4</td>
</tr>
<tr>
<td>Purpose of the Study</td>
<td>7</td>
</tr>
<tr>
<td>Research Questions</td>
<td>8</td>
</tr>
<tr>
<td>Review of Literature</td>
<td>9</td>
</tr>
<tr>
<td>Counseling Practicum</td>
<td>9</td>
</tr>
<tr>
<td>CACREP</td>
<td>9</td>
</tr>
<tr>
<td>Critical incidents</td>
<td>12</td>
</tr>
<tr>
<td>The Importance of Multicultural Supervision</td>
<td>14</td>
</tr>
<tr>
<td>Models of multicultural supervision</td>
<td>14</td>
</tr>
<tr>
<td>Racial Identity Development</td>
<td>20</td>
</tr>
<tr>
<td>Whiteness</td>
<td>21</td>
</tr>
<tr>
<td>White racial identity</td>
<td>23</td>
</tr>
<tr>
<td>People of color racial identity</td>
<td>26</td>
</tr>
<tr>
<td>Cross Racial/Ethnic Counseling</td>
<td>28</td>
</tr>
<tr>
<td>Racial microaggressions</td>
<td>29</td>
</tr>
<tr>
<td>Difficult dialogues</td>
<td>31</td>
</tr>
<tr>
<td>Chapter 1 Summary</td>
<td>34</td>
</tr>
<tr>
<td>II. METHODOLOGY</td>
<td>36</td>
</tr>
<tr>
<td>Introduction</td>
<td>36</td>
</tr>
<tr>
<td>Researcher Qualifications and Involvement</td>
<td>37</td>
</tr>
<tr>
<td>Research Design</td>
<td>39</td>
</tr>
<tr>
<td>Phenomenology</td>
<td>39</td>
</tr>
<tr>
<td>Characteristics of phenomenology</td>
<td>40</td>
</tr>
<tr>
<td>Procedures</td>
<td>42</td>
</tr>
<tr>
<td>Participant Recruitment</td>
<td>42</td>
</tr>
<tr>
<td>Participant Screening</td>
<td>44</td>
</tr>
<tr>
<td>Sample Size and Characteristics</td>
<td>45</td>
</tr>
</tbody>
</table>
TABLE OF CONTENTS (Continued)

CHAPTER                             Page

Pre-Interview Procedures.................................46
   Epoché...........................................46
   Peer Reviewer......................................49
   Practice Interviews................................50
Data Collection ............................................50
Preparatory Protocol .................................50
Initial Interview Protocol ..............................51
Follow-Up Interview Protocol .........................54
Data Analysis ............................................54
Data Analysis Procedures .........................54
Steps Followed in Data Analysis ....................56
Transcripts.............................................56
Significant Statements ................................57
Meaning Units...........................................58
Descriptions............................................60
Themes..................................................61
Chapter II Summary.....................................62

III. RESULTS ..................................................64
Summary of Participants ...............................64
   Counselor Trainees ..................................65
      Violet...........................................65
      Tiger...........................................67
      Jane...........................................69
      Alexandra....................................70
      George.......................................72
      Clare..........................................73
      Melissa.......................................74
      Mary...........................................75
      Shirley.......................................75
   Supervisors.........................................76
      Addie..........................................77
      James..........................................79
      Amber..........................................80
      Danielle.......................................81
      Colin..........................................82
      Patrick........................................83
      Joyce..........................................84
### Chapter 5: Data Analysis

- **Core Themes**
  - Core Theme 1
    - Sub-theme 1.1. Preparation
    - Sub-theme 1.2. Exploration of resources
    - Sub-theme 1.3. Initiation of discussion
  - Core Theme 2
    - Sub-theme 2.1. Non-existent or minimal supervision discussion
    - Sub-theme 2.2. Other cultural influences are made a priority
    - Sub-theme 2.3. Missing counselor trainees' needs
  - Core Theme 3
    - Sub-theme 3.1. Ability to address differences with clients
    - Sub-theme 3.2. Counselor trainees' perception of client response
    - Sub-theme 3.3. Counselor trainees' supervisor response
  - Core Theme 4
    - Sub-theme 4.1. Supervisors' observations of counselor trainees
    - Sub-theme 4.2. Supervisors provide feedback to counselor trainees
  - Core Theme 5
    - Sub-theme 5.1. Training and counseling experience influence practice

### Steps Followed in Data Analysis

1. **Step 1**: Reading Transcripts
2. **Step 2**: Identifying Significant Statements
3. **Step 3**: Determining Meaning Units
4. **Step 4**: Categorizing Meaning Units
5. **Step 5**: Synthesizing Textural-Structural Descriptions
6. **Step 6**: Identifying Preliminary Themes
7. **Step 7**: Identifying Core Themes

### Summary of Core Theme 1
- Core Theme 1.1. Preparation
- Core Theme 1.2. Exploration of resources
- Core Theme 1.3. Initiation of discussion

### Summary of Core Theme 2
- Core Theme 2.1. Non-existent or minimal supervision discussion
- Core Theme 2.2. Other cultural influences are made a priority
- Core Theme 2.3. Missing counselor trainees' needs

### Summary of Core Theme 3
- Core Theme 3.1. Ability to address differences with clients
- Core Theme 3.2. Counselor trainees' perception of client response
- Core Theme 3.3. Counselor trainees' supervisor response

### Summary of Core Theme 4
- Core Theme 4.1. Supervisors' observations of counselor trainees
- Core Theme 4.2. Supervisors provide feedback to counselor trainees

### Summary of Core Theme 5
- Core Theme 5.1. Training and counseling experience influence practice
TABLE OF CONTENTS (Continued)

<table>
<thead>
<tr>
<th>CHAPTER</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-theme 5.2. Supervision experiences influence practice</td>
<td>137</td>
</tr>
<tr>
<td>Positive experiences</td>
<td>137</td>
</tr>
<tr>
<td>Negative experiences</td>
<td>141</td>
</tr>
<tr>
<td>Summary of Core Theme 5</td>
<td>143</td>
</tr>
<tr>
<td>Chapter III Summary</td>
<td>143</td>
</tr>
<tr>
<td>IV DISCUSSION</td>
<td>144</td>
</tr>
<tr>
<td>Introduction</td>
<td>144</td>
</tr>
<tr>
<td>Review of Research Questions and Core Themes</td>
<td>144</td>
</tr>
<tr>
<td>Methodological Considerations</td>
<td>145</td>
</tr>
<tr>
<td>Telephone interviews</td>
<td>147</td>
</tr>
<tr>
<td>Time</td>
<td>148</td>
</tr>
<tr>
<td>Supervision dyad</td>
<td>149</td>
</tr>
<tr>
<td>Epoché</td>
<td>150</td>
</tr>
<tr>
<td>Peer reviewer</td>
<td>150</td>
</tr>
<tr>
<td>Relationship of Current Study to Previous Literature</td>
<td>151</td>
</tr>
<tr>
<td>Recordings</td>
<td>152</td>
</tr>
<tr>
<td>Race/Ethnicity</td>
<td>154</td>
</tr>
<tr>
<td>Stereotypes</td>
<td>156</td>
</tr>
<tr>
<td>Whiteness</td>
<td>158</td>
</tr>
<tr>
<td>Disclosure</td>
<td>160</td>
</tr>
<tr>
<td>Supervisor Response</td>
<td>160</td>
</tr>
<tr>
<td>Perceived Client Response</td>
<td>162</td>
</tr>
<tr>
<td>Implications for Practice</td>
<td>164</td>
</tr>
<tr>
<td>Implications for Counselor Trainees</td>
<td>164</td>
</tr>
<tr>
<td>For client sessions</td>
<td>164</td>
</tr>
<tr>
<td>For supervision</td>
<td>168</td>
</tr>
<tr>
<td>Implications for Supervisors</td>
<td>170</td>
</tr>
<tr>
<td>Implications for Counselor Educator Programs</td>
<td>175</td>
</tr>
<tr>
<td>Future Directions in Research</td>
<td>176</td>
</tr>
<tr>
<td>Reflections of the Researcher</td>
<td>179</td>
</tr>
<tr>
<td>Summary of Chapter IV</td>
<td>181</td>
</tr>
<tr>
<td>APPENDICES</td>
<td>183</td>
</tr>
<tr>
<td>APPENDIX A. KENT STATE UNIVERSITY INSTITUTIONAL BOARD REVIEW APPROVAL</td>
<td>184</td>
</tr>
<tr>
<td>APPENDIX B. PARTICIPANT RECRUITMENT LETTER</td>
<td>186</td>
</tr>
</tbody>
</table>
TABLE OF CONTENTS (Continued)

| APPENDIX C. COUNSELOR TRAINEE INCLUSION CRITERIA | 188 |
| APPENDIX D. SUPERVISOR INCLUSION CRITERIA | 190 |
| APPENDIX E. CONSENT FORM | 192 |
| APPENDIX F. DEMOGRAPHIC QUESTIONNAIRE | 196 |
| APPENDIX G. PEER REVIEWER CONSENT FORM | 198 |
| APPENDIX H. SAMPLE PEER REVIEWER FORM | 200 |
| APPENDIX I. COUNSELOR TRAINEE INTERVIEW QUESTIONS | 202 |
| APPENDIX J. SUPERVISOR INTERVIEW QUESTIONS | 204 |
| APPENDIX K. FOLLOW-UP INTERVIEW QUESTIONS | 206 |
| REFERENCES | 208 |
# LIST OF TABLES

<table>
<thead>
<tr>
<th>Table</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Steps Followed in Data Collection</td>
<td>47</td>
</tr>
<tr>
<td>2. Data Analysis Process</td>
<td>56</td>
</tr>
<tr>
<td>3. Counselor Trainee Demographics</td>
<td>66</td>
</tr>
<tr>
<td>4. Supervisor Demographics</td>
<td>78</td>
</tr>
<tr>
<td>5. Illustration of Transcription and Bracketing</td>
<td>92</td>
</tr>
<tr>
<td>6. Illustration of Significant Statements</td>
<td>99</td>
</tr>
<tr>
<td>7. Illustration of Significant Statements Horizontalized</td>
<td>101</td>
</tr>
<tr>
<td>8. Illustration of the Determination of Meaning Units</td>
<td>103</td>
</tr>
<tr>
<td>9. Illustration of Categorizing Textural and Structural Descriptions</td>
<td>106</td>
</tr>
<tr>
<td>10. Illustration of Synthesizing Textural and Structural Descriptions</td>
<td>108</td>
</tr>
<tr>
<td>11. Illustration of Preliminary Themes</td>
<td>109</td>
</tr>
<tr>
<td>12. List of Preliminary Themes</td>
<td>110</td>
</tr>
</tbody>
</table>
CHAPTER I
INTRODUCTION TO THE STUDY AND REVIEW OF LITERATURE

Introduction

According to the 2010 United States Census, the population grew by 27.3 million between 2000 and 2010. The vast majority of the growth came from persons reporting their race/ethnicity as “other than White” (U.S. Census Bureau, 2011). Colleges and universities are reflecting this change in their demographics as well. From 1976 to 2010, the percentage of American college students who were non-White or minorities (i.e., Hispanic, Asian/Pacific Islander, and Black) rose by as much as 10% (U.S. Department of Education, 2012). As a result of these demographic changes, the number of minorities seeking counseling at college counseling centers will likely increase.

Likelihood of a White Supervisor and White Trainee

Eighty-two percent of professional counselors in the United States are White (American Counseling Association [ACA], 2012). The White majority is also reflected in counselor trainees (CT) and supervisors in on-campus college counseling centers, a microcosm of the supervisor-counselor-client dynamic. The supervision triad (supervisor, CT and client) will most likely be comprised of persons of differing racial/ethnic backgrounds who are confronting problems and concerns that are cultural in nature (Young, 2004).

Minorities who seek counseling at a counseling center on a college campus often will be matched with a White CT (Hays, Chang, & Dean, 2004; Hays, Chang, & Havice,
2008; Pack-Brown, 1999). CTs at an on-campus counseling center often are enrolled in a training called practicum. Practicum provides CTs experience working with various clients (Trepal, Bailie, & Leeth, 2010). When the CT is of a different race/ethnicity from the client it is considered cross-cultural or cross-racial/ethnic counseling (Chang & Berk, 2009). When a White CT is matched with a minority client it is likely that race/ethnicity can be considered “the elephant in the room” (Zhang & McCoy, 2009). Cross-racial/ethnic counseling does not automatically assume that the CT is White, but often times, the CTs and supervisors are White (Remington & DaCosta, 1989; Utsey, Gernat, & Hammar, 2005).

A great deal of multicultural supervision literature focuses on dyads comprised of White supervisor and minority CT (Dressel, et al., 2007; Fong & Lease, 1997; Norton & Coleman, 2003). Terms used to describe cultural differences between supervisor and CT throughout literature include but are not limited to, cross-racial, multicultural and cross-cultural supervision (Chang, 2009; Schroder, 2009; Young, 2004). All terms involve there being a cultural difference (e.g. race, ethnicity, gender, age, etc.) between the supervisor and CT. The current study focused on the supervisor and CT being racially matched. White CTs will likely receive supervision from a White supervisor (Mindrup, Spray, & Lamberghini-West, 2011). The literature found was limited regarding racially matched supervision of cross-racial/ethnic counseling. The current study used the term mono-racial supervision to describe a racially matched supervision dyad. Specifically the current study explored the mono-racial supervision dyad comprised of White
supervisor and White CT. Collectively, the current study explored mono-racial supervision of cross-racial/ethnic counseling.

In a study of 442 supervision dyads, Hird, Tao, and Gloria (2004) found that the White psychologist supervisors, self-reported, that they spent less time discussing cultural issues when paired with White trainees than when paired with minority trainees. Hird et al. (2004) also found that White supervisors perceived differences of language, and racial identity when working with both White and minority trainees; however White supervisors discussed these differences less frequently in the racially similar dyads. Therefore, it is important that White CTs receive supervision in order to work with minority clients; it is equally important that White supervisors are able to provide supervision of cross-cultural counseling.

**Race and Ethnicity in Supervision**

CTs may encounter clients who have experienced racism or have witnessed racism and are trying to cope with the effects of racism (Daniels, 2001). In supervision, CTs may discuss client experiences of racism. Consequently, the quality of counseling services clients receive will likely be compromised with CTs who consistently do not have cultural discussions in supervision. It is imperative that White supervisors at university and college counseling centers understand and attend to the needs of White trainees working with minority clients (Davidson, Yakushka, & Sanford-Martens, 2004).

Race and ethnicity are very elusive terms that individuals use very loosely. Race appears to be based on what society thinks is “different” and is often based on an individual’s outer appearance. Denmark and Paludi (2008) described *race* as one of the
most “visible” identity membership indicators. Some visible cues that an individual may be from a specific race are skin color, shape of eyes, and sometimes eye color or hair texture. Even though race is often related to the outward appearance of an individual, it may be difficult to determine simply by looking at an individual what racial group he or she identifies with.

Ethnicity may be a bit more challenging to identify because it is often less overt. Schroeder, Andrews, and Hindes (2009) referred to *ethnicity* as a shared social identity that has existed for generations among a group of individuals. Individuals who are of a specific ethnicity may identify with some or all of a particular group’s traditions, language, customs, religion, ancestral origin, and so forth (Denmark & Paludi, 2008). Several visible aspects of ethnicity are the acknowledgment of ceremonial holidays, eating certain foods, and wearing of particular clothing daily or on ceremonial occasions. CTs should be aware of clients’ race and/or ethnicity and be able to discuss any concerns related to race/ethnicity in supervision. To investigate this, the current study sampled White CTs and supervisors about their perceptions and experiences of race and ethnicity in supervision. A qualitative phenomenological method was used to explore these perceptions and experiences.

**Culturally Responsive and Culturally Unresponsive Supervision**

Burkard et al. (2006) defined culturally responsive supervision as instances when the supervisor’s responses acknowledged the existence of, showed interest in, demonstrated knowledge of and expressed an appreciation for the client’s ethnicity and culture. Culturally unresponsive supervision was defined as instances in which
supervisors sought to intentionally dismiss the relevance of culture, or intentional and unintentional acts of omission regarding cultural issues (Burkard et al., 2006). The current study was informed by Burkard et al. (2006) who explored culturally responsive and unresponsive cross-cultural supervision with 13 trainees of color and 13 European American trainees.

Burkard et al. (2006) implemented a consensual qualitative method. Consensual qualitative method is a combination of phenomenology, grounded theory, and comprehensive process analysis (Hill et al., 2005). Participants in the Burkard et al. (2006) study were asked questions about their overall experience of cultural discussions in supervision and specific supervision events when their supervisor was culturally responsive or culturally unresponsive. Participants were also asked to discuss events that had personal meaning (e.g., one trainee reported experiencing reduced fear about discussing racial/cultural issues in therapy and supervision, which in turn increased their confidence) and were significant to their training as a counselor. In culturally responsive supervision, all 26 trainees reported feeling supported in their efforts to explore cultural issues. CTs in Burkard et al.’s (2006) study, reported feeling supported by their supervisor positively affected the supervision relationship, and client outcomes. In culturally unresponsive supervision, cultural issues were ignored, actively discounted, or dismissed by supervisors, which the trainees stated negatively, affected the trainee, the relationship, and client outcomes. When race/ethnicity concerns are ignored or minimized, supervisors may be unknowingly engaging in racial/ethnic oppression (Norton & Coleman, 2003).
Burkard et al. (2006) provided examples of a culturally responsive supervision. One White trainee stated that she missed the importance of a client’s race regarding a work-related situation. The trainee reported that her White supervisor challenged the trainee to think about how the client’s racial identity may have affected the client’s perception of and behavior regarding a work situation. The trainee stated, “My jaw sort of hit the floor when my supervisor stopped to process the racial concerns in the client case” (p. 294). This trainee reported feeling validated by the supervisor. Burkard et al. (2006) reported that culturally responsive supervision prompted trainees to be more curious about cultural issues and more willing to explore cultural concerns with clients in session.

Trainees in the Burkard et al. (2006) study reported that their supervisors were culturally unresponsive when culture was unintentionally or verbally dismissed when discussing client cases. In one instance, a trainee stated that her supervisor “blew it out of the water, like it (i.e., race) was nothing and said the client’s race did not matter” (p. 295). In this unresponsive instance, the trainee acknowledged the client’s race and reported feeling criticized by the supervisor. According to Burkard et al., trainees typically stated that they felt uncomfortable and distrustful of White supervisors and became guarded during supervision after a culturally unresponsive event.

Falender and Shafranske (2012) suggested that if it is perceived that the supervisor is being dismissive or completely ignoring race/ethnicity that the CT states his/her belief of the importance of race/ethnicity regarding the client. By taking this first step the CT communicates to the supervisor that he/she feels that race/ethnicity is an
important factor for the client and discussions need to be had in supervision. The supervisor may respond in a variety of ways.

The supervisor may maintain dismissive behavior. At which point the CT may need to report the supervisor’s behavior to someone with more authority. Or the supervisor will recognize that he/she has been dismissive or has omitted race/ethnicity and adjust supervision to include. A great deal falls on the CT in this situation which may not be a comfortable place for some CTs. Burkard et al. recommended further research that explores supervisors and trainees experiences of culturally responsive and culturally unresponsive when supervisors and trainees are of the same cultural group.

**Purpose of the Study**

The current study examined the supervision of cross-racial/ethnic counseling. Specifically, the current study investigated the perceptions and experiences of White CTs who had worked with at least one minority client and received individual supervision from a White supervisor during practicum. The current study also investigated the perceptions and experiences of White supervisors who conducted individual supervision with at least one White CT who had worked with at least one minority client during practicum.

The terms CT and counselor supervisee are synonymous. The term CT was chosen for the currently study because it highlights that counseling students are in a training role while in practicum. The current study focused exclusively on White trainees and White supervisors in practicum supervision at counseling centers/clinics housed in a Council for Accreditation of Counseling and Related Educational Programs (CACREP)
accredited counselor preparation program in the state of Ohio. CACREP accredited counseling programs were chosen because CTs will likely have similar curricula expectations and supervisors will have similar supervision expectations. CACREP is an independent agency that accredits counseling masters and doctoral degree programs. CACREP is recognized by the Council for Higher Education Accreditation. CACREP’s mission is to provide leadership and to promote excellence in profession preparation through the accreditation of counseling and other educational programs (CACREP, 2009).

It is important to explore CTs and supervisors at CACREP-accredited programs because accreditation indicates the content and quality of the program has been evaluated and meets standards set by the counseling profession (CACREP, 2009). Through phenomenological methodology, the current study investigated the perceptions and experiences of White CTs and White supervisors at a CACREP accredited program with an on-campus counseling center/clinic in the state of Ohio.

**Research Questions**

The research questions of this phenomenological study were: (1) What are the perceptions and experiences of White CTs and White supervisors when the clients’ racial/ethnic identity differs? (2) How have the experiences of the supervision of cross-racial/ethnic counseling impacted the practice of counselors/trainees/supervisors? The current study elicited CTs’ and supervisors’ feelings, thoughts, and behaviors associated with their experiences and perceptions of practicum supervision either currently or within the last six months.
Review of Literature

Counseling Practicum

Counselor preparation includes didactic training in the classroom, setting as well as experiential training during practicum and internship. Practicum and internship are requirements for all CACREP counseling programs and an integral part of counselor preparation (Hecker, Fink, Levasseur, & Parker, 1995). Counseling practicum was the focus of the current study. CT refers to a student in a graduate counseling program who is seeking licensure as a Professional Counselor, and who is currently enrolled in a practicum or internship in a counselor education program (Ohio Counselor, Social Worker & Marriage and Family Therapist Board, 2010).

CACREP. CACREP (2009) requires that all CTs complete supervised practicum experiences. Practicum is a critical component and multifaceted process for CTs’ experience (Bradley & Fiorini, 1999). Counseling students have to apply what was learned at the didactic level into practice with clients. Practicum provides the first opportunity for students to begin working with actual clients. CACREP’s 2009 standards refer to practicum as a supervised clinical experience when the CT develops basic counseling skills and integrates professional knowledge (CACREP, 2009).

There are several CACREP standards that a CT’s practicum must include. One standard is that CTs are to complete supervised practicum experiences that total a minimum of 100 clock hours over a minimum 10-week academic term. Practicum must also include at least 40 clock hours of direct service with actual clients and contribute to the development of counseling skills. CACREP also requires each CT to have weekly
interaction that averages one hour per week of individual and/or triadic supervision. However, the current study examined CTs’ perceptions and experiences of individual supervision.

Another standard is that there must be audio/video recordings for use in supervision or live supervision of the CT’s interactions with clients. The purpose of the recordings is to assist in training that provides clients with quality treatment (Ellis, 2010). Audio recordings are beneficial to hear what was discussed in the counseling session with clients but are limiting in there is no way to visual provided. Video recordings are beneficial because it enables supervisors to observe non-verbal communication by the CT and the client (Poling, 1968). This standard is very important in cross-cultural supervision because it enables CTs to address specific cultural concerns while providing the supervisor the same visibility of the client that he or she has session. Supervisors are able to evaluate specific incidents in counseling regarding race/ethnicity such as physical characteristics and mannerisms of clients. Audio/video recordings also enable supervisors to hear accents and view attire/dress that may be distinctive of minority clients. If video or audio recordings do not occur it is unclear how supervisors would monitor cultural influences in session (Ellis, 2010). The current study focused on on-campus counseling centers/clinics because video recorded, audio recorded and/or live supervision can be observed by the supervisor and CT.

CACREP (2009) also requires that practicum includes professional practice which provides for the application of theory and development of counseling skills under supervision. CTs typically have their first opportunity to apply theory and skills in a
professional setting during practicum (Trepal et al., 2010). Jordan and Kelly (2005) used an open-ended question approach to examine the experience of 24 beginning counselors enrolled in a first semester practicum. Participants were asked to write a paragraph describing a critical incident that occurred during practicum supervision that contributed to their growth as a counselor.

Jordan and Kelly’s (2005) qualitative investigation found that beginning counselors worried about their general preparedness as counselors, as well as getting direction from their supervisor in supervision. Howard, Inman, and Altman (2006) also found that trainees worried about receiving direction from their supervisor. In their study, one trainee reported seeking supervision outside of the practicum site due to lack of direction from the practicum supervisor. This was also reported by Trepal et al. they found that under the negative/harmful themes trainees reported their supervisors to lack support and to be unprofessional at times.

Supervision of the practicum experience allows for evaluation of the CT’s performance with all clients on a regular basis. The CT is performing under the guidance and oversight of the supervisor. Bradley and Kottler (2001) suggested that the supervisor’s role is to guide the CT specifically in supervision. Trainees are in a learning phase in practicum. Supervisors should guide the CTs throughout this learning phase. Specifically, culturally responsive supervision is an area in which CTs need guidance (Bradley & Fiorini, 1999). CACREP (2009) describes the purpose of practicum as providing “opportunities for students to counsel clients who represent the ethnic and demographic diversity of the community” (p. 15). These opportunities may create critical
incidents in cross-cultural counseling and subsequently in the supervision of cross-cultural counseling.

**Critical incidents.** CTs grow and develop during the practicum process. Counselor training programs need to identify and examine experiences that influence counselor development in order to design appropriate counselor training tools. Experiences (e.g. experiential learning, being both a counselor and a client, self-awareness) that influence the CT’s development are referred to as critical incidents (Furr & Carroll, 2003). Researchers have used journaling about critical incidents as an intervention to assist CTs to explore their cultural experiences. In Howard et al.’s (2006) study of nine master’s level White CTs during their first year of supervised practicum, participants were asked to journal about critical incidents they believed were relevant to their growth. CTs identified critical incidents that occurred during supervision. These critical incidents stemmed from interpersonal dynamics between the CT and their supervisors.

In Howard et al.’s (2006) study, CTs reported feeling supported at times during supervision. One CT participant wrote: “I confronted my supervisor about underlying dynamics in our relationship and attempted to process the potential effects they are having. . . . I’m glad that I did, because it helped strengthen our bond and relationship” (p. 46). CTs also described experiences of being unsupported by the supervisor. One CT wrote: “After speaking with her, I felt that my feelings were somewhat unjustified and questioned whether they were normal feelings to have” (p. 46). Findings lend support for the relevance of supervision experiences as it relates to counselor development.
Lee and Vennum (2010) also used journaling to investigate 19 doctoral marriage and family therapy students’ “cultural bumps” that made them aware of their own culture and its influence. For that sample, participants reflected on inner racism that they were not aware of until the journaling experience. For example, one student wrote: “I flashed back on when I was little and I was in the car with my step-uncle. He said ‘be sure and lock your doors when n****s are around’” (p. 243). This study allowed participants to anonymously self-reflect and become more self-aware. Raising self-awareness is one goal in the supervision of White CTs who are working with minority clients.

Toporek, Ortega-Villalobos, and Pope-Davis (2004) continued this line of inquiry in what they describe as multicultural counseling supervision. In their study of critical incidents in supervision, 17 supervisors and 11 master’s level CTs completing practicum at a university counseling center were asked to complete the Multicultural Supervision Critical Incidents Questionnaire developed specifically for the study. Researchers found that 50% of the supervisor and trainee participants reported that as a result of critical incidents they became aware of and further understood how culture affected them and the counseling and supervision processes. In the study, characteristics of culture included gender, religion, socioeconomic status, ethnicity, race, and physical disability (Toporek et al., 2004). Both supervisors and trainees most frequently identified the supervisor initiating discussions of race and ethnicity for the first time in supervision.

Trepal et al. (2010) supported future research of perspectives regarding critical incidents that impacted their professional development. Some of these critical incidents will be related to the client’s race/ethnicity. Experiences of culturally responsive and
culturally unresponsive supervision are considered critical incidents that influence a CT’s development. In this vein, Coleman (2006) suggested that training programs plan opportunities for CTs to interact with peers from diverse racial/ethnic backgrounds within practicum. These opportunities can be extended into supervision to provide White CTs with more growth and learning from minorities.

The Importance of Multicultural Supervision

Multicultural supervision is a vital part of counselor education (Young, 2004). Counselor supervisors should be aware of, and should address, the role of multiculturalism/diversity in the supervisory relationship (ACA, Code of Ethics, F.2.b., 2014). Addressing race/ethnicity in supervision is beneficial for both the CT and, more importantly, the client. Dickson and Jepsen (2007) surveyed a national sample of 516 master’s-level practicum students regarding multicultural concerns related to supervision. Participants were asked to complete three measures: the Multicultural Counseling, the Multicultural Awareness, and the Multicultural Skills inventories. Results suggested that CTs who perceived higher levels of integration of multicultural issues in supervision also reported a higher level of self-perceived multicultural knowledge and awareness. Awareness is enhanced when the supervisor provides guidance for the CT on culture-specific issues (Fukuyama, 1994).

Models of multicultural supervision. Several researchers (Brown & Landrum-Brown, 1995; Hays, 2001; Ober, Granello, & Henfield, 2009; Porter, 1994) have developed models of multicultural supervision. The ADDRESSING model (Hays, 2001) is intended to raise cultural awareness and addressing race/ethnicity in supervision.
The model addresses 10 main cultural influences that supervisors need to consider in their work with CTs: Age and generational influences, Disability status (developmental disability), Disability status (acquired physical/cognitive/psychological disabilities), Religion and spirituality orientation, Ethnicity (which may include race), Socioeconomic status, Sexual orientation, Indigenous heritage, National origin, and Gender. Hays (2001) intended for the ADDRESSING model to be utilized by counselors and clients from any race/ethnic background with an emphasis on minorities. This model is an extremely helpful intervention to assist counselor supervisors and CTs in learning to discuss race/ethnicity in supervision. CTs are encouraged to consider the relevance of each dimension for each client and to follow-up on how clients identify and are influenced by these dimensions (Hays, 2001). It is imperative that CTs learn how to address cultural concerns when working with clients in their practice, because it is intended to ultimately assist them as they progress in the counseling program and beyond.

Brown and Landrum-Brown (1995) proposed the Worldview Congruence Model (WCM), described how cultural groups and different individuals experience the world in different ways. A person’s worldview will affect how he or she perceives and responds to events in his or her surroundings. There are eight dimensions in the WCM that represent a relevant contribution to CT development in multicultural supervision: (1) axiology or values, (2) concept of self, (3) concept of time, (4) ethos (guiding beliefs), (5) epistemology (how one knows), (6) logic (reasoning process), (7) ontology (nature of reality), and (8) psycho-behavioral modality (Brown & Landrum-Brown, 1995).
CTs may have varying views than the client or their supervisor regarding each dimension. Brown and Landrum-Brown (1995) emphasized that worldview conflicts may result in hostility or distrust within the triadic relationship. CTs must be aware of possible incongruence’s that could affect the counseling session and/or the supervisory process. CTs must be aware of his or her own worldview perspectives initially, followed by an assessment of the client’s perspective.

There is a need for a multicultural supervision model that is more comprehensive. Ober et al. (2009) argued that to be truly comprehensive, a multicultural supervision model must do the following: (a) incorporate developmental aspects of supervision by defining the stages of development and providing specific interventions to help trainees move to higher levels of cognitive development; (b) provide an opportunity to discuss the trainees’ multicultural competence and heighten awareness of multicultural issues within the supervisory relationship; and (c) be based on the counseling profession’s firmly held stance about the appropriate content for multicultural counseling and supervision.

Ober et al. (2009) developed the Synergistic Model of Multicultural Supervision (SMMS). SMMS is an integration of three existing models: Blooms Taxonomy of Educational Objectives, Heuristic Model of Non-oppressive Interpersonal Development, and Ancis and Ladany’s (2001) Means of Interpersonal Functioning (MIF) model. The SMMS provides concrete and practical guidance for supervisors wishing to enhance trainee multicultural awareness in personally meaningful and developmentally appropriate ways. The model attends to both content and process within the supervisory session and provides self-reflection and structured interventions. Ober et al. (2009) stated
that the SMMS offers a specific and deliberate process to help CTs become aware of cultural concerns. It is imperative that CTs fully understand the model.

Ancis and Ladany (2001) proposed four stages of the MIF model that CTs may go through in regards to multicultural supervision; it also provides some interventions that supervisors can engage in with trainees at specific stages. One stage is the *Adaptation Stage* when a CT may have a superficial understanding of differences among people and possibly stereotypical attitudes toward particular cultural groups. At this stage, the supervisor may offer readings, focus on the knowledge dimension of multicultural competency, to challenge the trainee’s oppressive belief system. Another stage is the *Incongruence Stage*, a time when the CT is likely to experience conscious incongruence, whereby their previous beliefs about oppression and privilege seem incongruent with events of which they become aware. At this stage, the supervisor may give the trainees homework (e.g., to attend a social function of an oppressed group) to challenge their oppressive beliefs.

The third stage is the *Exploration Stage*. At this time CTs may be more active in the exploring what it means to be a member of their respective cultural group. Individuals may consider their own role in perpetuating oppressive environments. In this stage, supervisors provide emotional support and teach strategies to move beyond guilt, specifically, *White guilt*. Steele (1990) defined White guilt as the knowledge of “ill-gotten advantage” (p. 499). Some White individuals are aware that identifying racially as White as advantages over minorities. In this stage, supervisors focus on skills, self-awareness including, White guilt, and dimensions of multicultural competencies.
The last stage is the *Integration Stage*. In this stage, the CTs can develop multicultural integrity, recognize oppressive concerns, and behaviorally commit to the pursuit of non-oppression. The supervisors process trainees’ experiences in supervision. Supervisors focus on skills and self-awareness dimensions of competency. Although some of these strategies may not be necessary, for some CTs, these activities may be crucial in order for CTs to effectively work with diverse populations.

To identify the area(s) of need, Ober et al. (2009) suggested that supervisory pairs read the Multicultural Counseling Competencies (MCCs) developed by the Association for Multicultural Counseling and Development (AMCD), in a supervision session. The purpose of determining MIF level and area of MCCs is to move the trainees into a higher level of multicultural functioning. Ober et al. (2009) stated that regardless of similarities and differences, the SMMS model encourages trainees to challenge and evaluate their views as they encounter others. Similarities and differences are factors that can affect the counseling relationship. The ultimate goal of the SMMS is to use intentional processes to encourage trainee development to the next phase of the MIF model, that of incongruence.

According to Seponski, Bermudez, and Lewis (2005) CTs must engage in multicultural supervision. Porter (1994) described four stages involved in a Culturally Responsive Supervision (CRS) model. Porter’s (1994) model will be identified as the CRS model for the duration of this document. In the first stage of CRS, introducing a culturally sensitivity cross-cultural perspective, the supervisors attempt to increase the trainees’ awareness of cultural diversity and its influence on experiences, beliefs, and behavior. As trainees present client cases in supervision, supervisors begin to ask
questions or points out cultural aspects of each case, making *culture* relevant at each supervision juncture. Over time, trainees are also referred to relevant scientific literature by the supervisor. Porter (1994) suggested that White trainees in this stage may possess less cultural awareness due to their dominant culture status.

Porter’s (1994) fourth and final stage of the CRS involves introducing the relationship of mental health problems of ethnic minorities of the United States and a socio-cultural framework. The supervisor integrates racism, classism, and other oppressions that affect clients’ lives and attempt to understand how these cultural factors can affect the client’s mental health. CTs may rely on local knowledge of cultural factors and are accountable to the local community and its unique needs (Seponski et al., 2005). For example, if a racially charged incident occurs in a neighborhood it may affect a client who comes into the counseling. CTs must be aware of the local and community events that occur and can affect clients. In the second stage, supervisor’s place an emphasis on the interaction of cultural factors with an individual’s or group’s role within the society.

The third stage of the CRS explores the trainees’ own biases, stereotypes, and racism-assumptions. In this stage the trainees may have some difficulty processing their own bias or assumptions that perpetuate racism. CTs would have to be at a higher level of racial identity which, according to Watt, Robinson, and Lupton-Smith (2002), requires an individual to be self-aware including awareness of *self* as a racial being. This is the most critical stage because it requires the supervisors and trainees to confront their own racism and how they develop differential behaviors and goals in supervision. In this
stage, Porter (1994) suggested that White supervisors who are actively exploring their own racism can successfully do this with White trainees.

Porter’s (1994) next stage of CRS includes a collective, social-action perspective in healing. Supervisors encourage trainees to empower their clients by recommending ways to enhance mental health through community resources. In this stage, supervisors and trainees are also encouraged to participate in community activities and social action to assist in self-exploration. Seponski et al. (2005) encouraged culturally responsive CTs to actually take action to respond to client needs.

**Racial Identity Development**

Race/ethnicity is a variable of culture and is important for some clients in counseling. A concern such as trauma or stress that is directly related to race/ethnicity could be the primary reason a client participates in counseling. In college counseling centers, CTs do not have the luxury of deciding whether or not to work with specific groups of clients (Ancis & Ladany, 2001). As a result, it is important for trainees to understand the influence(s) of race/ethnicity that will enable them to design and deliver services that are more responsive to the needs of all clients (U.S. Department of Health and Human Services, 2001), especially their minority clients.

Understanding racial identity includes understanding minority clients’ experiences of oppression and racism (Hays et al., 2008). It is crucial for CTs to learn about their own racial identity (Parker, Moore, & Neimeyer, 1998) as well as the racial identity of their clients. The concept of *whiteness* must be explored in order to assist White CTs learn about and understand their own racial identity. Helms (1995) discussed
several statuses of racial identity to White CTs enhance their self-awareness and understand their clients’ racial identity. Since Helms’ models of racial identity have been the most cited and researched specifically related to White privilege and racism (Hays et al., 2008) the current study chose to review solely the White Racial Identity Ego Status and the People of Color Racial Identity models.

**Whiteness.** Many White individuals have difficulties identifying themselves as part of a racial group (Pack-Brown, 1999). In U.S society, “Whites” (rather than Caucasians) are members of the entitled group. Skin color, deemed by some Whites, indicates that “Whiteness” has permitted their members to have access to entitled status (Ponterotto, Casas, Suzuki, & Alexander, 2003). Whiteness as defined by Roper-Huilman, Winters, and Enke (2013) is a concept that includes skin color, socioeconomic status and political desires of the dominant race in the United States who have the power to make such categorizations. With Whiteness, there is power or entitlement and privileges. White privilege is difficult for some White people to recognize, a factor that makes it difficult to form alliances with other races or to dismantle racial privilege (Ropers-Huilman et al., 2013).

This idea of “entitled status,” or White privilege, will likely affect both the minority client and/or the White CT involved in counseling. The pattern of focusing solely on minorities and the discrimination or oppression they have experienced must cease. Ropers-Huilman et al. (2013) suggested examining the harmful effects of racism and the direct benefits Whites obtain from it in an effort to assist White CTs in working with minorities. Sue and Sue (2013) suggested that by dealing with their own nested or
embedded feelings about race/ethnicity, White CTs can enhance or negate a deeper understanding of themselves as racial/ethnic individuals and their understanding of the worldviews of racially/ethnically different clients. Focusing on self first allows the CT to see themselves as racial individuals. This is intended to enable the CT to be aware of their client’s race/ethnicity in cross-cultural counseling.

Malott, Paone, Schafele, and Cates (2011) examined five White, United States citizens purposively selected due to race. Participants self-reported engagement in past and present antiracist activities. Phenomenological methodology was implemented to explore perceptions of participants’ Whiteness. Participants reported regular and persistent resurfacing of personal racist beliefs and experiencing “blindness” that reduced their ability to perceive racism. Hence, they did not perceive a way to abandon racism but whether ways to manage racism (e.g. constant reflection, a willingness to forgive oneself when racism is displayed, attempts to mend racist actions). By examining their own perceptions of Whiteness, White CTs may therefore, develop the skills necessary to work with minority clients.

It will be helpful for supervisors to share information regarding experiences a CT may encounter when examining his or her own racial identity. Sharing information regarding experiences is helpful for CTs to work with minority clients. In Sue and Sue’s 6th edition Counseling the Culturally Diverse: Theory and Practice (2013), Dr. Mark Kiselica described developing empathy for minorities because of a background of oppression his ancestors experienced after reading Sue’s first edition of the same book originally entitled Counseling the Culturally Different (1981). Dr. Kiselica described
how he has benefited from being White and participated in racism unconsciously, forgetting his ancestors’ engaged in oppression. Reading the first edition of the book he was now contributing to appeared to have changed not only his professional course but also his personal beliefs and behaviors toward minorities. Learning about his own feelings about race allowed him to work with minority clients in counseling and contribute to multicultural literature.

**White racial identity.** It is important for both White supervisors and CTs to recognize their own racial identity in order to better understand their minority clients. It is likely difficult to imagine that White people recognize race as a part of their identity (Rowe, 2006). Helm’s (1995) White Racial Identity model sought to have Whites accept their own identity and accept the diversity of others. Helms (1995) suggested six statuses for the development of White counselor supervisors and CTs: (a) contact, (b) disintegration, (c) reintegration, (d) pseudoindepende, (e) immersion/emersion and (f) autonomy. White CTs/supervisors can move fluidly through each status and exhibit characteristics of multiple statuses (Daniels, 2001). Within each status there are attitudes and behaviors that CTs/supervisors may possess.

In the *contact status* CTs/supervisors are oblivious to racism and their participation in it. For example a CT/supervisor may say “I don’t see color; everyone is equal.” In the *disintegration status* White CTs/supervisors have irresolvable racial dilemmas that may provoke confusion and anxiety. For example the individual may have been taught by family that Blacks are “second class citizens” and the CT may struggle in working with a Black client and not seeing them as less than Whites. This status stems
from past incidents concerning race which causes anxiety for the CT working with minority clients.

The next status is reintegration; this is when White CTs/supervisors are intolerant of other racial groups and glorifies their own racial group. An example would be, when the White CT reveals thoughts in supervision such as “Blacks are always trying to use the system while Whites earn what they possess.” At this status, Whites are perceived as positive and good while Blacks are disparaged; in turn, Whites accept the benefits of being White and create distance from Blacks (Brown, Parham, & Walker, 1996). In the pseudoindependence status White CTs are pretending to tolerate other groups as well as an intellectual dedication to their own racial group. For example, a CT may say “I enjoy watching the different ways that Blacks and Whites approach life; but my job is to help clients act on the values and behaviors of the general society” (Brown et al., p. 511). White CTs at this level believe in minorities assimilating to the dominate culture.

In the immersion/emersion status, White CTs/supervisors are in a searching for a new understanding of racism and a redefinition of Whiteness. Individuals at this status recognize that racism exists and that they may have participated in racism; now, they are looking to understand racism and their role in it. Daniels (2001) suggested that White CTs/supervisors in this stage recognize how they have benefited from being White in a racist society. The immersion/emersion status leads to the autonomy status which uses internal standards for self-definition and the capacity to give up the privileges of racism. A positive White identity is internalized and an acceptance or appreciation for racial differences is developed. White CTs/supervisors know and understand what it means to
be White and the privileges that come with the identity. They also can appreciate and/or accept the racial differences of clients.

In contrast, Helms’ model has been criticized by several researchers as problematic (Blitz, 2006; Leach, Behrens, & LaFleur, 2002; Rowe, 2006). Blitz (2006) suggested that with Helm’s model, people may unfortunately settle on one identity and not fully actualize any other status. “In this way, they can become stuck in an immature status, and, intentionally or not, perpetuate racism” (Blitz, 2006, p. 243). Furthermore, being stuck in a status will likely perpetuate privilege and oppression. Consequently, the number of statues is also problematic for researchers attempting to design a study implementing the model and, therefore, makes it difficult to test the theory (Rowe, 2006). Leach et al. (2002) argued that Helms’ White Racial Identity model has little to do with how Whites identify or feel about themselves.

Hays et al. (2004) qualitatively explored how White counselors define and experience privilege and oppression. Their study sought to answer two research questions: “How do White counselors conceptualize privilege and oppression as separate, but related constructs?” and “What experiences to White counselors generally describe concerning privilege and oppression?” Two interviews were conducted with eight counselors who held at least a master’s degree and were practicing in a counseling setting. Once the data were saturated the transcripts were checked for accuracy, by consulting participants. Each researcher examined the transcripts for preliminary themes. Primary themes were formed after an inductive process of open coding.
Based on the primary themes, Hays et al. (2004) developed a model pertaining to the conceptualization of privilege and oppression. For participants the model categorized that privilege and oppression reciprocally relate to external influence (Hays et al., 2004). Researchers found that societal influences of government, family, religion, media, education and industry affected individuals’ views and experiences. These findings are important to explore when working with White trainees.

It is important for CTs to assess their own racial statuses throughout the supervision process in order to determine if any adjustments need to be made while working with persons of color. It is imperative that a discussion regarding both the supervisor and trainee racial statuses occurs in supervision, especially when both the supervisor and trainee are White. This discussion must occur to resolve any miscommunications, preconceived thoughts, assumptions, or prejudices. Trainees’ racial identity development is important for future ethical practice with clients as well as their own individual development (Hays et al., 2004). Identifying and developing one’s own racial identity is the best way to understand and respect other races/ethnicities. Once trainees identify their own racial identity status, it is also important to assess the client’s racial identity status as well.

**People of color racial identity.** Minorities who seek counseling and are matched with a White CT may find it difficult to convey their feelings to one who has not experienced the subtle, insidious, and pervasive impact of racism (Cooper & Lesser, 1997). Racism as defined by Driskill (2006) occurs when the dominant racial group, Whites, has power to enforce its views on racial minority groups. Racism still exists in
the 21st century, and the effects of racism are felt directly by its victims and indirectly by those who witness it (Daniels, 2001). Knowledge of how racial identity interacts with clients’ experiences of racism is crucial (Daniels, 2001).

Helms (1995) described several statuses that clients of color may identify with. The five statues are: (a) conformity, (b) dissonance, (c) immersion/emersion, (d) internalization, and (e) integrative awareness. In the conformity status, clients denounce their own racial group and give merit to White standards. For example, an Asian client may come into counseling stating “Asians do not really matter…White people get everything.” Helms (1995) identified the dissonance status as a period when clients are confused and have ambivalence about their own racial group. In this status, a Native American client may be unsure of what it means to be Native American in a society dominated by Whites.

The immersion/emersion status, is characterized by the client belittling that which is perceived as White and in turn has an idealization of own racial group (Helms, 1995). For example, a Black client may come in stating “White people believe that they are so much smarter but Black people really control the United States.” In the next status, internalization, clients have the ability to respond objectively to Whites and make a positive commitment to one’s own racial group. Clients at this status would able to come into counseling with a White CT and accurately correct any cultural misunderstandings about his or own racial/ethnic group. The last status, integrative awareness, is where the client has the ability to empathize with members of other oppressed groups and the
capacity to value one’s own racial identity. A Jewish client is able to empathize with a Black person’s experience of oppression while valuing the Jewish experience.

Clients may move through theses statues at different times in their lives or they may become stagnant in one status. There is no sequential order or a set status at a particular point in time. CTs must be aware of their own racial identity status and their clients’ racial identity status. It is beneficial to explore the client’s racial identity status, specifically, for a better understanding of how to address racial/ethnic concerns in the counseling session. CTs may then present a case conceptualization including clients’ racial identity status in supervision.

**Cross Racial/Ethnic Counseling**

The role of race and ethnicity may be considered in counseling (Watt et al., 2002). Some research has examined client perceptions of cross-racial/ethnic counseling. CTs may move beyond treating race and ethnicity on the surface (Chang & Berk, 2009) and discuss underlying meanings that can impact the counseling relationship (Pope-Davis et al., 2002). Interestingly, in a study of 16 racial/ethnic minority clients who received treatment from 16 European American counselors, Chang and Berk (2009) found that clients were unsatisfied with therapy when the counselor minimized their experiences with discrimination or oppression. In one instance, an Asian client reported that her White counselor minimized her feelings of tension regarding an experience the client had in a class debate surrounding White privilege. The counselor reportedly minimized the client’s feelings by telling her she had a “preoccupation with race” and that it was a “phase” she was going through (Chang & Berk, 2009). Although CTs may not agree
with a client’s feelings about specific racial/ethnic situations, acknowledgement of the client’s feelings would display good listening skills which are important for any client.

Pope-Davis et al. (2002) conducted a grounded theory study to develop a model of client perspectives of multicultural counseling. They interviewed 10 undergraduate students who were clients and had experience with a counselor they deemed culturally different from themselves. Two 90-minute interviews were conducted with each client. To ensure that all clients were provided with similar opportunities to address certain topic areas, pre-established questions were used to facilitate descriptions of their experiences. The participants were asked seven open-ended questions about their counseling experience, the counselors, and how their cultural concerns were brought up and addressed. One Black client matched with a White counselor reported that she dropped out of counseling because the counselor did not address or discuss concerns regarding discrimination and oppression.

The results of these two studies (Chang & Berk, 2009; Pope-Davis et al. 2002) demonstrate that client perception of the counselor not addressing cultural concerns influenced the experience with the counselor and ultimately led to the client dropping out of counseling. Studies can inform the supervision of cross-racial/ethnic counseling. Specifically, a White CT’s cultural unresponsiveness may interfere with his or her ability to provide satisfactory counseling to a minority client.

**Racial microaggressions.** Some research has explored the impact of racial microaggressions (Ong et al., 2013; Sue et al., 2007). Racial microaggressions can create a barrier to clinical practice and affect the counseling relationship. Sue et al. (2007)
defined racial microaggressions as “brief and commonplace daily verbal, behavioral, and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial slights and insults to the target person or group” (p. 1).

Ong et al. (2013) examined 152 Asian American college freshman experiences of racial microaggressions during a two-week time period. Multilevel analysis was used to analyze participant responses. Multilevel analysis allowed participants to enter the study after it began and utilized data from participants who had missing information.

Results underscored the importance of discussions of race/ethnicity in supervision. Specifically, 78% of participants noted that they had experienced at least one microaggression during the two-week period. Researchers also found that the majority of microaggressions experienced included comments that were categorized as microinvalidations. Microaggressions were defined as interpersonal/environmental cues that excluded the thoughts and feelings of racial minorities (e.g., “I was told I speak good English”; “I was asked where I was born” (p. 191). Ong et al. concluded that there is a gap in clinical practice when working with minority clients and it is essential for CTs to discuss in supervision minority clients who have experienced a microaggression.

Microaggressions can be considered a more covert form of racism compared to overt racism. An example of an overt act of racism would be for a White client to say that he does not want to see a Black CT because he or she would not be able to counsel him because “they are stupid”. A covert act or racial microaggression would be for a White CT to describe to her supervisor a Black client based on the client’s skin tone, with the supervisor responding “Black people have different skin tones?…I don’t see color.”
Racial microaggressions are those subtle statements that may seem harmless to the individual making the statement, but are offensive to someone from a racial/ethnic minority group. Being aware of possible microaggressions would help CTs reduce the perception of bias or prejudices. Every effort to identify and monitor microaggressions must be made by trainees (Sue et al., 2007). This can be learned in supervision by the supervisor identifying areas of concern regarding microaggressions and working with the trainee to make changes.

The primary responsibility for diffusing any anxiety regarding race/ethnicity belongs to the supervisor’s. Experiential training is necessary to be able to facilitate these dialogues. Sue, Lin, Torino, Capodilupo, and Rivera (2009) suggested that supervisors create experiences for CTs outside of the classroom that involves interaction and dialogue with CTs from another college/university that differ in race. Experiences outside academia would present real life experience that can be transferred into the supervision arena.

**Difficult dialogues.** Watt et al. (2009) defined a difficult dialogue as an exchange of ideas or opinions between individuals that centers on an awakening of potentially conflicting views of individual beliefs or values on multicultural issues. If difficult dialogues are handled improperly they could have an adverse effect on the supervisory relationship and/or the counseling relationship. If a CT has personal beliefs regarding a specific race and is working with a client who is from that race, those personal beliefs should be examined in supervision. If the CT says something in counseling that the client may view as negative about race/ethnicity, it could cause the
client to not want to process important cultural concerns in counseling for fear of judgment by the CT or even worse, it may cause the client to terminate services.

In their study of difficult dialogues on race, Sue et al. (2009) conducted focus groups of 14 students who identified themselves as a Person of Color at Teachers College, Columbia University, and claimed to have experienced a difficult dialogue in the classroom. Participants were solicited through flyers at the university’s community (campus and neighborhood). Advertisements for the study asked whether Students of Color had ever experienced a difficult dialogue on race in which they felt “put down,” “overlooked,” or “insulted,” and whether they would be willing to share their experiences in a focus group. Volunteers were placed in one of two focus groups on the basis of their scheduling availability: Group 1 consisted of two Asians, two Latinos, one Black, and one biracial; and Group 2 consisted of seven Blacks and one Asian.

Sue et al. (2009) found that a common theme in the focus groups was that successful and unsuccessful dialogues on race depended heavily on the racial sensitivities and skills of the professor. Participants described the ineffective professors as ones who either became “frozen or paralyzed” when difficult dialogue ensued, were uncomfortable or anxious, or sought to end the dialogue. Some successful dialogues consisted of instructors providing strategies for facilitating difficult dialogues. For example student testimonies revealed: “just saying how do you feel…[to know that] you have a right to feel that way…[it’s] just validating to know your heard…just for me, not having professors get mad a what’s being said, just accepting the reality of different students [is
helpful” (Sue et al., 2009, p. 188). As a result of this study it was clear that educators at all levels would benefit in facilitating difficult dialogues on race/ethnicity.

Engaging in a difficult dialogue potentially puts individuals in a position of disclosing intimate thoughts, beliefs, or feelings related to the topic of race (Sue et al., 2009). Not knowing what the purpose is or what the consequences will be, people are hesitant to disclose these thoughts and feelings. Many CTs are likely uncomfortable in engaging difficult dialogues about race/ethnicity because they are afraid of being judged.

After a series of pilot studies, Ladany, Hill, Corbett and Nutt (1996) created The Supervisee Nondisclosure survey and implemented the survey with 108 counseling psychology students in training. The survey enabled the participants to “free-form” their thoughts regarding thoughts, feelings or reactions that he or she had not disclosed to their supervisor while in training. Participants were also asked to write about the reasoning for his or nondisclosure (Ladany et al., 1996).

Ladany et al. (1996) found that 97% of participants reported that they withheld information from their supervisor for a variety of reasons. Participants reported not disclosing information as a result of an array of reasons, including but not limited to, perceived unimportance, supervisee’s belief that the supervisor was not competent, deference to the supervisor. Ladany et al. (1996) also found that when some participants did not disclose information to his or her supervisor the supervisee would disclose information to other people such as a peer or friend. It was recommended that supervisors engage in disclosure of their own struggles and mistakes in an effort to display humanness and normalize mistakes for the CT (Ladany et al., 1996).
Difficult dialogues and non-disclosures include a level of being uncomfortable. Christiansen et al. (2011) suggested that these situations require supervisors and trainees to sit with the discomfort of their feelings and to continue to be open and engaged in the supervision process by working through the discomfort. Again, supervisors are the ones with the responsibility for initiating and facilitating these discussions.

**Chapter I Summary**

The purpose of the current study was to explore the perceptions and experiences of White CTs and White supervisors during practicum supervision. Research (Ancis & Ladany (2001); Brown & Landrum-Brown, 1995; Ober et al., 2009) suggests that CTs may experience concerns addressing race/ethnicity in supervision and may have doubts about their ability to help minority clients. If the client discusses racial/ethnic concerns in session, it is reasonable to assume that the White CT will often struggle with the racial/ethnic concerns with working with the minority client. Discussions of race/ethnicity in supervision affect all members of the counseling triad: supervisor, trainee and client. Racial/ethnic factors in supervision need further exploration in the counseling literature.

This chapter explored the need for and importance of cultural dynamics of counseling supervision. In many ways, research that explores the ways culture and cultural differences affect interactions with others, including those interactions that transpire within supervision of multicultural counseling, is in the infancy stage (Bradley & Kottler, 2001). The current study’s aim was not to define individuals by their race or ethnicity, nor did it assume that all people of one race or ethnic background are identical.
(Schroeder et al., 2009). The current study expanded the research literature by exploring the experiences of White CTs supervised by White supervisors and White supervisors who supervised White trainees. Through the qualitative method of phenomenology the current study explored the experiences of CTs and supervisors in practicum supervision of cross-racial/ethnic counseling. Highlighting the experiences of CTs and supervisors helped identify deficiencies to be addressed in counselor training.

Chapter I introduced the study and reviewed relevant literature. Chapter II describes the qualitative method of phenomenology which was appropriate for the study of White CTs’ and White supervisors’ perceptions and experiences of supervision when clients were racially/ethnically different. The participants were involved in supervision of practicum experiences at a college counseling center. The procedures used for participant selection, data collection, and data analysis are explored.
CHAPTER II
METHODOLOGY

Introduction

It is recommended that Counselor Trainees (CTs) develop awareness, knowledge, and skills in order to intervene effectively in the lives of people from culturally diverse backgrounds (Lee, 2011). This awareness, knowledge, and skills should be cultivated during supervision. Burkard et al. (2006) indicated that one purpose of supervision is to foster CTs’ sensitivity to race/ethnicity and their ability to proficiently address multicultural issues in their clinical work. If CTs are not already able to address multicultural concerns, supervision is the best place for developing these skills.

A deeper understanding of the practicum supervision experiences of supervisors and CTs when the client is culturally different is needed to further prepare CTs to work with diverse clients. The present study explored the experiences of CTs and supervisors in practicum supervision. Special attention was given to the CT-supervisor relationship as well as the trainee-client relationship from the trainee’s perceptions. The research questions for the current study were: (1) What are the perceptions and experiences of White CTs and White supervisors when the clients’ racial/ethnic identity differs? (2) How have the experiences of the supervision of cross-racial/ethnic counseling impacted the practice of counselors/trainees/supervisors?

The qualitative method of phenomenology was selected as the most suitable explorative research design (Groenewald, 2004). Phenomenology was selected because it
attempts to discover “what exists” from the perceptions of those who went through the experience (Wargo, 2013). The “what” unfolds as participants begin to describe their perceptions and experiences in interviews. In the phenomenological research interviews, the researcher sought to explore full descriptions of experiences participants’ have lived through (Giorgi, 2009). The researcher’s qualifications will affect the phenomenology research design.

**Researcher Qualifications and Involvement**

The researcher conducted all interviews for the current study. I am a Black female who is a doctoral candidate in the CACREP-accredited Counselor Education and Supervision Ph.D. degree program at Kent State University in Kent, Ohio. I am a licensed Supervising Clinical Counselor and a licensed School Counselor in the state of Ohio. I have worked in both school and community settings for the past ten years. I am a member of ACA, the Ohio Counseling Association (OCA), and the Ohio School Counselor Association (OSCA). I am middle class, heterosexual, married, and mother of two male children.

Moustakas (1994) suggested that the researcher has a personal, vested interest in the phenomenon. The primary interest on this research topic arose from supervising counseling practicum students when I was enrolled in a doctoral supervision class. One trainee was White and worked with clients who were racially/ethnically different from the trainee. As the supervisor, I experienced some difficulty addressing race/ethnicity with this trainee. Being a Black supervisor, supervising a White trainee, was an eye-opening experience prompting a great deal of self-awareness. When the trainee
worked with clients who were Black, I felt some obligation to respond to cultural incidents. At the same time, not to focus solely on racial/ethnic differences, I rarely discussed cultural concerns.

As a minority supervisor, I experienced critical incidents race/ethnicity differently from the White trainee. For example, when the trainee discussed that she was intimidated by her Black client discussing gang activity in session, I was intrigued. I am unsure why I did not share my thoughts with the trainee or engage in a conversation about the differences in her experience and my own experience. Not engaging in cultural conversations with the trainee prevented her and me from exploring these experiences. After being a clinician for several years, I became more aware that the majority of trainees in Northeast Ohio, and most practicing counselors, are White. In turn, this also means that a majority of supervisors are White. The abundance of White counselor supervisors and White CTs prompted me to systematically explore this area of multicultural counseling. I empathized with minority clients and wanted to assist training programs to prepare White CTs to effectively work with minority clients.

I completed a master’s counseling practicum and supervised master’s counseling students in settings where minority clients received counseling from White trainees who also were supervised by White supervisors. Those experiences enabled me to become aware of cultural concerns present in counseling sessions as well as in supervision sessions. Therefore, my experience led to my current research interest in the practicum experiences of trainees and supervisors. I found that the best way for me to explore this interest was through a phenomenological research design.
Research Design

Phenomenology

Phenomenological method was selected in order to have a better understanding of the lived experiences of White trainees and supervisors in the supervision of cross-racial/ethnic counseling. According to Giorgi (2006), phenomenological research relates to the sense of what is being said and not the literal, empirical expression. Phenomenological methodology explores descriptions of lived experiences (Giorgi, 1985). Focusing on descriptions provides insight into individual worlds, problems, relationships with others, anxieties, and so forth (Giorgi, 1985).

In order to understand what one considers to be a phenomenon, the researcher must explore the perceptions and experiences of individuals who experienced the phenomenon. The researcher sought to explore each participant’s supervision experiences. The phenomenon identified was as follows: mono-racial/ethnic supervision of cross-racial/ethnic counseling. The researcher chose this phenomenon because it is one that she does not experience herself and one that those who do experience it can talk about (Giorgi, 2009). As the researcher reflected on same-race supervision dyads she saw that these supervision experiences have phenomenal characteristics.

The study focused on the experiences of White CTs who received supervision from a White supervisor or White supervisors who provided supervision to White CTs; these persons are the only ones who can report about these particular experiences (Giorgi, 2009). These experiences happen in counselor training programs and have subjective characteristics as well as individualized meanings. To have a better understanding of
supervision experiences, it is important to understand the common or shared experiences of the phenomenon among several persons (Creswell, 2013). During data collection, the meaning of the experiences was discussed between the researcher and the participants. The meaning was further developed by the researcher during data analysis.

**Characteristics of phenomenology.** Phenomenology is a qualitative research method originally developed by the central figure, philosopher Edmund Husserl (Spiegelberg, 1982; Wertz, 2005). Husserl (1859-1938) was originally trained as a mathematician at the Universities of Leipzig, Berlin, and Vienna. At Vienna, Franz Brentano turned Husserl’s attention to philosophy (Stewart & Mickunas, 1990).

According to Wertz (2005), Husserl implemented his mathematical skills to become a philosopher who formulated scientific methods that are uniquely fashioned to assist psychological researchers in the investigation of human experience and behavior. By the second decade of the twentieth century, Husserl was increasingly recognized for his philosophical work. From 1913 until the year of his retirement, he and several coworkers produced a series of volumes dealing with phenomenological philosophy (Stewart & Mickunas, 1990).

The term *phenomenology* is derived from two Greek words *phainomenon* (an "appearance") and *logos" (" reason" or “word, hence a reasoned inquiry") (Stewart & Mickunas, 1990). According to Husserl, the guiding theme of phenomenology is to “go back to the things themselves” (Stewart & Mickunas, 1990). The focus of phenomenology is on understanding a concept or phenomenon. Giorgi (1985) interpreted Husserl’s expression to mean to go to the everyday world where people are living
through various phenomena. A phenomenological study describes the meaning of the lived experiences for several individuals and is related to a concept or the phenomenon (Creswell, 2013).

In the phenomenological methodology, participants describe their experiences, and the researcher sets aside, as much as possible, her experiences in order to see things from a fresh perspective. Rather than exploring the individual themselves, Locke, Myers, and Herr (2001) suggested that phenomenology highlights the lived experience of specific individuals. These shared individual experiences of the phenomenon will ultimately be reduced to the collective essence. Phenomenology is indeed a reasoned inquiry which discovers the inherent essences of appearances. An *appearance* is anything of which one is conscious. Anything at all which appears in consciousness is a legitimate area of philosophical investigation. According to Stewart and Mickunas (1990), an *appearance* is a manifestation of the essence.

Giorgi (2006) suggested that *essences* and *meanings* are seen, intuited, and brought into the presence of the researcher's consciousness. The term *essence* indicates what a thing is, and every essence can be expressed by an idea (Natanson, 1973). Locke et al. (2001) suggested that the researcher provide the reader to understand the essence of the participants experience and recognize the meaning of the experience. The current study focused on the central underlying meaning of the cross-cultural experience in counseling supervision.

Phenomenology is committed to descriptions of experiences, not explanations or analyses (Moustakas, 1994). It is concerned with conscious experiences and not
objective realities (Stewart & Mickunas, 1990). *Consciousness* refers to the awareness of the system, as they are presented, without addition or deletion of the strict meaning of phenomenon (Giorgi, 1997). Phenomenology is precisely the discipline that tries to discover and account for the presence of meanings in the stream of consciousness (Giorgi, 1985). Phenomenology is concerned with identifying that which is inherent and unchanging in the meaning of the item or idea under scrutiny (Bednall, 2006). The researcher sought to explore the meanings present for participants when discussing their supervision experience.

**Procedures**

**Participant Recruitment**

Prior to data collection, approval from the Kent State University Institutional Review Board (IRB) was obtained (see Appendix A). Participant selection included individuals who were involved in practicum supervision as a CT or supervisor. Professional email listservs and a snowballing technique were used to recruit participants. A recruitment letter (see Appendix B) was posted on the Ohio Counseling Association listserv and the Counselor Education and Supervision Network listserv (CESNET-L). A snowballing sampling was used to obtain additional participants. Snowballing is a method of expanding the sample by asking one participant to recommend others for interviewing (Crabtree & Miller, 1992).

For the snowballing method, the researcher consulted the CACREP Directory of Accredited Programs. At the time the current study was conducted there were a total of 17 CACREP accredited programs in the state of Ohio. The websites of all 17 programs
were reviewed to determine the contact information of the director of the counseling center at each perspective institution. Each counseling center director was contacted via email to determine if his or her program required counseling students to complete practicum on campus. Ten of the 17 directors responded to the email indicating that counseling students completed practicum at their on-campus counseling center. The other seven directors did not respond to the researcher’s email.

Directors were then asked via email to forward the participant recruitment letter to potential participants. One program director delivered the recruitment letter to a listserv distributed to all practicum students and supervisors in the program. The e-mail included the researcher’s name and contact information. Potential participants identified from the listservs and emails reported their interest to participate in the current study by contacting the researcher via email or telephone. The researcher called potential participants to screen them for inclusion in the current study.

Most recruitment took place electronically. The researcher also completed in-person recruitment visits. The researcher emailed practicum instructors and instructors of doctoral level supervision courses at three institutions within a 40-mile driving radius of the researcher. Three instructors replied to the email and scheduled times for the researcher to visit the class. The researcher visited two practicum classes and one doctoral level supervision class at a local university. Eight CACREP programs were represented in the final participant selection.
Participant Screening

Criterion sampling was used to ensure that participants experienced the phenomenon and were willing and capable to offer relevant and information-rich data (Patton, 2002). According to Patton (2002), criterion sampling involves selecting participants who meet certain predetermined criteria of importance. A total of 21 potential participants contacted the researcher. Two potential participants contacted the researcher via telephone and the majority contacted the researcher via email. Once interested participants responded to the researcher via email or telephone, they were screened for inclusion to determine if they were appropriate for the study.

Appendix C provides the inclusion criteria for the CT participants and a detailed step-by-step account of the process implemented to screen participants. The inclusion criteria sought to identify the following participants: someone who (a) identified racially as White; (b) is or was (within the last six months) a practicum counseling student who provided counseling to at least one client who differed in race/ethnicity; (c) was currently or within the last six months enrolled in a practicum class; and (d) received individual practicum supervision from a White supervisor. The time frame of either currently being enrolled in practicum or having been enrolled in the last six months was important for recall purposes. It is important to reflect on recent experiences, because if the experience occurred too far in the past, the decline of the recollection of the experience will be greater (Giorgi, 2009). There were a total of 10 potential CT participants, and 9 met all the inclusion criteria. The one potential participant who did not meet the inclusion criteria was thanked for her time.
Appendix D provides the inclusion criteria for the supervisor participants and a detailed step-by-step account of the process implemented to screen participants. The inclusion criteria sought to identify the following participants: someone who (a) identified racially as White, (b) holds a minimum of a master’s degree, (c) is licensed as a Professional Counselor or Professional Clinical Counselor in the state of Ohio, (d) is or was (within the last six months) a practicum supervisor at a CACREP accredited State of Ohio counseling program with an on-campus counseling center, and (e) provided supervision to at least one White counseling student who provided counseling to at least one client who differed in race/ethnicity. Supervisors were able to provide experiences from work with as many CTs as he/she choose as long as the supervision had taken place within the last 6 months. This component was different from the trainee’s accounts because CT’s provided supervision experiences from only one supervisor.

There were a total of 11 potential supervisor participants. Nine potential participants met all of the inclusion criteria for the current study. The two who did not meet the inclusion criteria were thanked for their time. Participants were from a total of 8 different CACREP accredited institutions in the state of Ohio.

**Sample Size and Characteristics**

For phenomenological methodology a number of participants experiences are collected until the point of saturation (Creswell, Hanson, Clark, & Morales, 2007). Researchers experience saturation when no new data are emerging (Wargo, 2013). Polkinghorne (1984) stated that interviewing between 5 to 25 participants who have all experienced the phenomenon is sufficient. At the beginning of this research study the
sample size was set for at least six CTs and six supervisors. For the current study 18 participants were interviewed: nine CTs and nine supervisors. Giorgi (1985) suggested that the more participants there are, the greater the variations, and hence the better the ability to reveal what is essential. The researcher’s goal was that the final sample size was consistent with the recommendations of the literature.

All participants gave their consent for the interviews to be audio recorded. Participants were informed that they could terminate their participation in the study at any time without penalty. To ensure confidentiality, a number and letter system was created to identify each participant throughout data analysis. Each participant was assigned a pseudonym to further ensure confidentiality. There were several procedures completed prior to interviews being conducted. Table 1 offers a flow chart describing the data collection procedures utilized in the current study.

**Pre-Interview Procedures**

**Epoché**

I set aside any preconceived thoughts or feelings regarding the supervision of cross-cultural counseling through the process of *epoché*. One of the key concepts of phenomenology is *epoché*. *Epoché* is a Greek word meaning to refrain from judgment, to abstain from or stay away from the everyday, ordinary way of perceiving things. *Bracketing* is how *epoché* is achieved and is necessary prior to the interview and is necessary after each interview. *Bracketing* required me to set aside my own experiences and any prior scientific assumptions, as much as possible, to take a fresh perspective toward the phenomenon under examination (Creswell, 2013; Wertz, 2005) (See Table 1).
Table 1.

Steps Followed in Data Collection

| I. Pre-Interview Procedures | • Approval sought from the KSU Human Subjects Review Board  
| | • Researcher conducted practice interviews with individuals not affiliated with the current study  
| | • Emails were sent to the Directors of CACREP accredited colleges/universities on-campus counseling clinics in the state of Ohio  
| | • Email to sent to the Ohio Counseling Association Listserv  
| | • Potential participants contacted researcher and were screened  
| | • Researcher bracketed prior to interviews and consulted with peer reviewer regarding any bias or assumptions  
| | • Initial interview was scheduled  
| | • Consent and demographic forms were emailed to participants  
| | • Expectations of Initial and Follow-up interviews were discussed  
| | • All consents were signed  
| II. Initial interviews | • Initial interviews completed with participants  
| | • All interviews were audio recorded  
| | • Bracketing was done after the interviews  
| III. Transcriptions | • Initial interviews were transcribed  
| | • Transcriptions were sent to participants for accuracy checking  
| | • Follow-up interviews were scheduled  
| IV. Follow-up interviews | • Follow-up of interviews were completed with participants  
| | • Accuracy from first interviews was reviewed with participants  
| | • Participants were presented with follow-up questions  

In the process of bracketing I set aside things that I perceived to be my own truth. According to Moustakas (1994), in epoché, the everyday understandings, judgments, and knowing is set aside, and the phenomenon is revisited, freshly, naively, and in a wide open sense. In the current study, to assist in bracketing, I wrote process notes before interviews started and directly after each interview was completed. These notes about bias, thoughts and feelings prior to conducting interviews and about my own experience of conducting the study was shared with a peer reviewer. [Process notes captured
observations, feelings assumptions, biases and insights of the researcher (Groenewald, 2004).

Because I am a minority, I had to set aside any prior prejudice or discriminatory experiences. For example, my experiences of being the only Black student in the majority of graduate courses and often being asked to speak for all Blacks regarding cultural concerns was set aside. I also had to set aside my own perception of needing to prove my skills and abilities to White people. My perceptions are a result of stereotypes associated with Black people being inadequate when compared to their White counterparts. As a result of these stereotypes I believe that White trainees perceive minority supervisors as being incapable of providing appropriate supervision in comparison to White supervisors. This was another perception that had to be set aside prior to conducting data collection.

I continuously approached the study with a “fresh” perspective and conducted the current study by setting aside any preconceived notions about the supervision of cross-racial/ethnic counseling. *Epoché* calls for seeing things in a new way that requires learning to see what stands before the eyes and to not assume anything. Moustakas (1994) suggested that bracketing can be a difficult task and required the researcher to allow the phenomenon to be what it was and come to know it as it presents itself. I had to take a new look at what each participant presented as his or her experience.
Peer Reviewer

A peer reviewer is someone who reads the researcher’s notes and provides feedback to the researcher (Cho & Cho, 2011). The peer reviewer was a doctoral student in the same counselor education program as the researcher. The researcher spoke to and exchanged emails with the peer reviewer prior to, during, and after collecting data. The peer reviewer reviewed and signed the peer reviewer consent form (see Appendix G). Speaking with the peer reviewer prior to all interviews enabled the researcher to discuss any thoughts or feelings and possible bias. The peer reviewer used the peer reviewer form to document any notes about topics discussed, reactions, thoughts and feedback (see Appendix H). Using process notes and a peer reviewer assisted in establishing trustworthiness of the study.

To help the researcher reflect on the research process and debriefing the interview experience the researcher met with the peer reviewer after the completion of the first interviews (Creswell, 2013). Upon completion of transcription from the first interview, the peer reviewer was provided with a copy of the transcripts. The peer reviewer assisted the researcher in identifying themes and categories after reading first interview transcripts. This collaboration with the peer reviewer also enabled the researcher to generate any specific questions for participants during initial interviews.

According to Locke et al. (2001), the qualitative approach to inquiry values immersion of the researcher in the phenomenon and involves subjectivity. The researcher attempted to immerse herself into the inquiry process by practicing good listening skills. Creswell et al. (2013) suggested that phenomenologists work from
specific statements and experiences of the participants. The use of the participants’ detailed response as a source of information regarding the supervision of cross-racial/ethnic counseling allowed for disclosure of experiences that would not have been accessible through surveys. Interviews allowed participants to provide detailed descriptions of their experiences. The intent of phenomenology is to describe the commonalities and differences reported by the participants as they experience the phenomenon. There were several steps involved in data collection.

**Practice Interviews**

To develop the interview protocol, the researcher conducted practice interviews with two CTs and two supervisors. The primary purpose of the practice interviews was to evaluate the interview questions. Conducting the practice interviews provided the researcher the opportunity to become comfortable with the interview questions and the protocol. The practice interviews were essential to prepare the researcher for the potentially difficult racial/ethnic dialogues likely to occur when working with participants all of whom would be White. Interview questions and the protocol were modified after feedback from the practice interviews.

**Data Collection**

**Preparatory Protocol**

Once the researcher determined that potential participants met all the inclusion criteria, via email the researcher established dates and times with each participant for the initial interview. All participants reported that a telephone interview would be preferable. Participants were informed in an email of their rights as research participants and their
voluntary participation in the study. Expectations of initial and follow-up interviews were also discussed. Informed consent, which included consent for audio recording, was also attached to an email and the researcher’s contact information was provided.

The researcher forwarded the Consent Form (see Appendix E) and Demographic Questionnaire (see Appendix F) to the participant via email prior to the first interview. Participants were asked to review, sign, scan, and email or fax on a secure line, the Consent and Demographic forms back to the researcher. Each participant completed the Demographic Questionnaire that included questions of: age, gender, relationship status, and educational degree(s) held. CTs also were asked the level of practicum he or she was enrolled in (first or second semester), and each supervisor was asked the number of years he or she had been supervising. Each participant was also asked if he or she had any multicultural training or had taken a class prior to the practicum experience discussed in the current study.

**Initial Interview Protocol**

The phenomenological method involves a series of interviews with each individual, the purpose being to obtain each participant’s experience. The researcher conducted two interviews with each participant. A phenomenological interview is a semi-structured, interactive process that utilizes open-ended comments and questions (Moustakas, 1994). For this study, two individual interviews were conducted with CTs and supervisors.

Groenewald (2004) suggested that the interview be a dialogue where both researcher and participant are engaged. The researcher conducted dialogue interviews
where the researcher and participant engaged in a conversation about the participants’ perceptions and experiences. The number of questions varied from one participant to the other based on the individual participant’s responses. Ultimately, the content centered on the experiences of the supervision of cross-racial/ethnic counseling.

All interviews were conducted on the telephone and scheduled at time that was convenient for the participant. Participants were asked to be in a quiet and comfortable location in order to fully focus on the interview and for audio recording to occur to be as clear as possible. At the start of each interview the participant was asked to choose a pseudonym that would be used throughout the research process. The researcher introduced herself and discussed her qualifications and involvement in the study. Because the researcher identifies racially as Black and interviewed all White participants, she believed it was important to establish rapport with each participant. Rapport needed to be established because neither the researcher nor the participants could be aware of when boundaries of intimacy might be encountered in discussing cross-racial/ethnic counseling supervision (Giorgi, 2009).

Discussing experiences of cross-racial/ethnic counseling supervision in a cross-racial/ethnic interview may constitute a difficult dialogue. Establishing rapport early in the interview was intended to help participants to be open and honest about their experiences of the supervision of cross-racial/ethnic counseling. Once rapport appeared to be established, CTs were asked to reflect on specific questions (see Appendix I) while supervisors were asked to reflect on specific questions (see Appendix J).
The researcher followed each participant’s lead with prompts and encouragement in order to obtain as rich a description as possible of their lived experience (Friedman, Friedlander, & Blustein, 2005). Questions were asked to clarify experiences. According to Giorgi (1997), questions posed to participants are generally broad and open-ended, so that the participant has a sufficient opportunity to express his or her viewpoint extensively. The researcher created open-ended and broad questions. When the participant described his or her feelings, complete experience and when no further clarification was required, the interview was considered complete.

According to Wertz (2005), the goal of data collection in phenomenological research is to obtain that the actual descriptions that reflect the details of the lived situations rather than hypotheses or opinions about, explanations of, interpretations of inferences, or generalizations regarding the phenomenon. Simply stated, the “how” and the “what” of the participants’ experiences were explored. The current study did not establish a word-limit, which encouraged participants to disclose as much information as they felt comfortable.

The researcher remained true to the experiences by describing, as accurately as possible, the phenomenon and refraining from any pre-given framework. Each interview was audio recorded and transcribed. The initial interviews lasted from 15-60 minutes. Transcription included the literal statements as well as the significant paralinguistic (e.g., voice tone, pitch, and volume) communications. As suggested by Hycner (1985), the researcher left a large margin to the right of the transcription page so that she could later be able to note meanings. Noting meanings while reading transcripts allowed the
researcher to document any initial thoughts and the accessibility to review notes throughout the data analysis process.

**Follow-Up Interview Protocol**

Within two weeks of each participant’s initial interview, the researcher provided a copy of the transcribed interview to each of the participants. The transcripts were emailed to each participant. Participants were instructed to review the transcript in its entirety in order to ensure that their statements were transcribed accurately. They also instructed to provide two days and times when he/she would be available to complete the follow-up interview. Each participant was then scheduled for at least a 30-minute telephone interview within one week after he or she received the transcripts. In the follow-up interview, all participants were asked specific questions (see Appendix K). The purpose of the follow-up interview was to enable the researcher to clarify any information from the follow-up interview and explore any additional reactions, thoughts, or reflections participants had after the initial interview. All follow-up interviews were audio recorded. Any additions found during the follow-up interviews were synthesized into the final analysis of the data.

**Data Analysis**

**Data Analysis Procedures**

Table 2 presents the data analysis procedures used in the current study. Each step was applied to each participant’s transcript individually. All initial and follow-up interviews were transcribed by the researcher within two weeks after conducting the interviews. The raw audio-recorded data were transcribed verbatim for each participant
by the researcher within two weeks after the interview. Moustakas (1994) suggested reviewing the data several times. Reviewing the data each time should open new awareness of the aspects of the experience that connect with the experience as a whole (Moustakas, 1994). He went on to recommend that the researcher keep his or her “eyes turned to the center of the experience” and study what is just in front of him or her, exactly as it appears.

For confidentiality and organizing purposes, each participant was assigned a pseudonym. Wargo’s (2013) transcription format suggestions were implemented throughout the transcription process. At the top of the first page of each transcription were the participants’ pseudonym and the date the interview occurred. Because more than one interview took place, each interview was identified by the month and year of the interview (e.g., Pseudonym, October, 2013; Pseudonym, December, 2013). There was a one inch margin on the left and two and a half inch margin on the right. Transcripts were double spaced; all lines and all pages were numbered. Several concepts of Husserl’s phenomenological method allowed the researcher to translate the experiences into relevant counseling language that can be implemented into the practice of supervision. Among those concepts were, significant statements, meaning units, textural and structural descriptions, composite textural-structural descriptions, preliminary themes and core themes (See Table 2).
Table 2

*Data Analysis Process*

| I. Transcription                      | • Initial interviews were transcribed by the researcher  
|                                      | • Transcripts were read while listening to audio recordings for a full description of the experience |
| II. Significant Statements           | • Horizontalization- statements of importance to mono-racial supervision were placed on the same plane having equal value  
|                                      | • Repetitive or overlapping statements were placed in a miscellaneous column |
| III. Meaning Units                   | • Statements were broken down into manageable parts  
|                                      | • Statements were transformed into meaning units relevant to the supervision of cross-racial/ethnic counseling  
|                                      | • Peer Reviewer was consulted to assist in identifying meaning units |
| IV. Descriptions                    | • Meaning units were categorized by textural and structural descriptors  
|                                      | • Textural descriptions or the “what” a participant experienced the phenomenon  
|                                      | • Structural descriptions or the “how” participants experienced the phenomenon  
|                                      | • Synthesis into composite textural-structural descriptions |
| VI. Themes                           | • Preliminary themes for each participant were identified  
|                                      | • All participants’ preliminary themes were categorized together by commonalities and salience  
|                                      | • Core themes were identified as a means to capture participants’ overarching experience or the essence of the experience  
|                                      | • Sub-themes were identified to further cluster responses  
|                                      | • Peer reviewer was consulted to assist in identifying themes |

**Steps Followed in Data Analysis**

**Transcripts**

The transcribed interviews were then reviewed through the methods and procedures of Giorgi’s (2009) Descriptive Phenomenological Method (DPM) and Moustakas (1994) modified method. Step one in Giorgi’s DPM involved each transcript being read for a sense of the whole experience. The researcher made this her step one in the process as well as reading and re-reading the whole transcript of each participant’s interviews. The audio recording was listened to while the researcher read the transcripts to confirm accuracy.
According to Giorgi (1985), for transcribed interviews, it may take multiple readings to thoroughly review and understand the language of the participant. The researcher read and reread the transcribed interviews in order to understand the participants’ description of their experiences. The researcher sought to understand the meaning of the description based solely on the description without the researcher developing any interpretation (Giorgi, 2009). Although step two in DPM is the determination of meaning units, the researcher chose step two to be the process of identifying significant statements.

**Significant Statements**

Significant statements were identified through the process of *phenomenological reduction*. Giorgi (2009) stated that no data analysis can claim to be phenomenological without the attitude of phenomenological reduction (Giorgi, 2009). Because one cannot analyze a whole text simultaneously, phenomenological reduction is completed by the researcher breaking down transcripts into manageable parts or *significant statements* Giorgi (1985). Significant statements are important accounts that describe unique qualities of the experience (Moustakas, 1994). The researcher implemented Giorgi’s (2009) DPM strategies when identifying significant statements. When rereading transcripts the researcher highlighted and placed forward slash marks throughout each transcript to identify significant statements. Invariant or unchanged significant statements were then horizontalized.

One of the first steps involved in phenomenological analysis is horizontalization (Moustakas, 1994). Horizontalization involves placing every significant statement
relevant to the topic on the same plane or having equal value. More importantly, the researcher did not speculate about the relevance or importance of the data. Hence, there was no hierarchy of statements and all statements were evenly weighed.

Horizontalization was completed by reviewing the interview transcripts and highlighting significant statements that provided an understanding of how the participants experienced the phenomenon (Moustakas, 1994). One of the purposes of horizontalization was to develop a list of non-repetitive, non-overlapping statements. Instead of eliminating redundant units suggested by Groenewald (2004), the researcher transferred the units to a miscellaneous category in case their significance to the holistic impact of the phenomenon became apparent at a later point (Bednall, 2006). Once all significant statements were identified for all participants the researcher went back to the first participant and begin transforming significant statements into meaning units for each participant.

Meaning Units

Step three involved forming meaning units. As suggested by Groenewald (2004), the researcher paid close attention to key words, phrases, and statements of participants in order to create the natural meaning units. Natural meaning units are self-definable and self-delimiting expressions in the words of the participants (Wargo, 2013). To assist in identifying meaning units imaginative variation was implemented. Imaginative variation involves the researcher reviewing participant significant statements and infusing his or thoughts about the account as it is relevant to the phenomenon (Giorgi, 2009). The
researcher reviewed each significant statement and infused her thoughts of what the
statement meant to the participant in regards to mono-racial supervision.

Creating meaning units allowed the researcher to break down the text into
more manageable parts that could be more easily applied to counseling concepts.
According to Giorgi (2009), a meaning unit is a descriptive term that signifies a meaning
relevant to the study and is contained within a segregated unit. For example, the
description one CT provided regarding her supervisor’s emphasis on sexual orientation
was:

… it was much more focused on that … much more … we would delve into
this and understand and talk about it … stuff like that … um, race ethnicity
again it was maybe barely touched upon but it was never a focus of
supervision

The meaning unit formed in this example was “sexual orientation was the focus.”

Meaning units were formed by rereading more slowly the description, and each
time that the researcher experienced a transition in meaning, the researcher marked that
place and continued to read until the next meaning unit was detected (Giorgi, 2009). The
end of the step is a series of meaning units still expressed in the participant’s own
everyday language. In the written transcriptions there are different places where
transitions can occur; therefore, different researchers may create different meaning units
(Giorgi, 2009). Giorgi (2009) stated that what ultimately matters is how the meaning
units are transformed and how, or if, the meaning units can be reintegrated into the
structure of the phenomenon.
Meaning units were transformed into relevant counseling terms (Giorgi, 2009). The process of transformation depends on clear reflection and on the ability to attend, recognize, and describe with clarity (Moustakas, 1994). To begin the process of transforming, meaning units were placed in columns. The first column was in the exact language of the participant but in third-person expression. In subsequent columns, the researcher transformed each meaning unit into language relevant for the experience of cross-racial/ethnic counseling supervision. The process continued until the best transformation of the meaning unit was established. Giorgi (2009) reinforced that the analysis of meaning units requires discipline and many attempts at getting the right transformation. Once all meaning units were transformed into expressions pertinent to cross-racial/ethnic counseling supervision, meaning units were then categorized by textural and structural descriptions.

**Descriptions**

Step four involved categorizing meaning units into textural and structural descriptions. When reviewing the meaning units the researcher considered textural descriptions or the “what” that occurred in supervision. The researcher also identified structural descriptions or the “how” participants’ experienced supervision as well as. The textural descriptions were matched and synthesized with structural descriptions that fit. For example, one participant reported that she felt that sexual orientation was more important to her supervisor than race/ethnicity. This was categorized as a textural description. The same participant also reported that her supervisor glossed over
race/ethnicity by directly advising her to concentrate more on sexual orientation than race/ethnicity. This was categorized as a structural description.

Another example of the textural description is when another participant reported that race/ethnicity was discussed in supervision. The same participant expressed that her supervisor inquired about the client’s racial/ethnic identity and processed what that meant to the client. This description was categorized as a structural description. Once categorized the textural descriptions were matched with structural descriptions that fit. Both examples above were matched together based on the textural description and the structural description. These descriptions were then synthesized together and preliminary themes were identified.

**Themes**

Step five of the data analysis process was assigning idiographic themes to all composite descriptions. Idiographic themes were defined by Vogt (2005) as “individual, singular, unique or concrete” (p. 150). The term preliminary was chosen to further describe ideographic themes. Preliminary themes were generated by noting the number of times similar expressions, words, and sentences were used across transcripts (Marshall & Wieling, 2003). The researcher also implemented *imaginative variation* to assist in identifying preliminary themes.

Saldaña (2009) discussed “themeing the data” as the process of labeling and analyzing portions of data with thematic statements. Saldaña (2009) suggested that themeing the data is appropriate for research studies involving interviews. For the current study, a theme was defined as a sentence or phrase that identified what a composite
textural-structural description was about and/or what it meant to the participants (Saldaña, 2009). The researcher examined each participant’s descriptions and determined their relevance for the phenomenon. Saldaña (2009) explained what themes were comprised of: “Themes can consist of such ideas as descriptions of behavior within a culture, explanations for why something happens, iconic statements, and morals from participant stories” (Saldaña, 2009, p. 17).

Ultimately, the researcher identified preliminary themes based on thematic statements within participants’ descriptions. Each participants’ preliminary themes were then matched together to identify core themes. Core themes were common or essential themes identified by participants (Creswell, 2013). The essences of the experience are described in the core themes. The researcher sought to recognize the “essence” or theme of the experiences of mono-racial supervision of cross-racial/ethnic counseling through the identification of the core themes.

Chapter II Summary

Chapter II has provided a thorough overview of the methods employed in this study. The qualitative researcher is the instrument for both data collection and analysis (Locke et al., 2001). During data collection, the researcher was the port through which the participants’ experiences were revealed. During data analysis, the researcher sought to fully understand the meaning of the phenomenon for each participant. One goal of the researcher was to examine the units and transform them from the everyday language of the participant (Giorgi, 2009) to counseling language. For example, several participants reported that clients were asked about their cultural background. In counseling terms this
practice was transformed into “…during session, clients his/her racial/ethnic identity was assessed.” Another example, when a participant reported that he/she was “working with a client” that was transformed into “clinical work or in session work with clients.” Because the researcher is a counselor it enabled her to transform everyday language into counseling specific language.

This section discussed research design, preparation, procedures, data collection and data analysis. Phenomenological method is open in its reflection on “the things themselves” and in its care not to impose order on its subject matter (Wertz, 2005). By enabling participants to speak freely about their experiences order will not be imposed on the subject matter. The procedures for this study consisted of identifying a phenomenon to study, identifying study participants with specific criteria, bracketing out the researcher’s experiences, and collecting data from the participants who have experienced the phenomenon (Creswell, 2013). The data were then translated into counseling literature. From the transcripts significant statements, meaning units, and core themes were integrated in effort to construct the essence of the experiences of the phenomenon (Moustakas, 1994). Chapter III presents the findings of the current study.
CHAPTER III

RESULTS

Chapter II described the methodological process for the current study. Chapter III presents the steps of data analysis and the results of the phenomenological study that explored *mono-racial supervision* of *cross-racial/ethnic counseling*. Mono-racial supervision occurs when the supervisor (S) and counselor trainee (CT) identify the same racially. Cross-racial/ethnic counseling occurs when the counselor/CT and the client’s race/ethnicity differ. Specifically, the current study explored mono-racial supervision comprised of a White supervisor and a White CT when the client’s race/ethnicity differed from the supervisor and CT. The research questions that guided the current study were:

1. What are the perceptions and experiences of White CTs and White supervisors when the clients’ racial/ethnic identity differs?
2. How have the experiences of the supervision of cross-racial/ethnic counseling impacted the practice of counselors/trainees/supervisors?

The first section of this chapter describes a summary of each participant. The second section provides an in-depth examination of data analysis. The third section presents the core themes that comprise the structure of the supervision experiences for the participants of this study.

**Summary of Participants**

To further ensure confidentiality pseudonyms were assigned by the researcher. To assist in identifying participants throughout the remaining of this chapter, the acronym “CT” and CT are used interchangeably. Also, “S” and supervisor are used
interchangeably. The current research study gathered data from nine Ss and nine CTs, totaling 18 participants. The total sample included 14 (70%) females and 4 (30%) males, all of whom identified as White. Of the 14 female participants, 8 were CTs and 7 were Ss; of the 4 male participants, 1 was a CT and 3 were Ss. All CTs had earned a bachelor’s degree. The average age of the CTs was 34 years. Eight CTs were clinical mental health counseling students (this includes one being enrolled in a marriage and family therapy program), and one was a school counseling student. All nine CTs reported prior multicultural training, and all of them reported participating in individual counseling supervision. Additional CT demographic information of the CTs is presented in Table 3.

Counselor Trainees

Violet. Violet was the first CT interviewed. Violet described herself as a 27-year-old female. Her prior multicultural training included having taken a multicultural course and having participated in a diversity project for a qualitative methods course. She reported being enrolled in a Marriage and Family Therapy program and having counseled clients who were mostly couples and families. Violet indicated that she was inexperienced working with minority clients during practicum; she did not want to “say something wrong or be insensitive” when working with her minority clients. She worked with African-American and Asian clients. Violet indicated that she did not address race/ethnicity with clients and as a result was unsure of any impact race/ethnicity had on the client. She stated: “I guess I just avoided it.”
Table 3

*Counselor Trainee Demographics*

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Gender</th>
<th>Prior Multicultural Experience</th>
<th>Race/Ethnicity of Clients (reported by counselor trainee)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violet</td>
<td>27</td>
<td>F</td>
<td>Multicultural Course</td>
<td>Black &amp; Asian</td>
</tr>
<tr>
<td>Tiger</td>
<td>38</td>
<td>F</td>
<td>Multicultural Course</td>
<td>Black &amp; Hispanic</td>
</tr>
<tr>
<td>Jane</td>
<td>39</td>
<td>F</td>
<td>Worked in Inner city Cleveland</td>
<td>Black, Amish &amp; Latino</td>
</tr>
<tr>
<td>Alexandra</td>
<td>24</td>
<td>F</td>
<td>Worked with a variety of socioeconomic groups and a Multicultural Course</td>
<td>Chinese</td>
</tr>
<tr>
<td>George</td>
<td>24</td>
<td>M</td>
<td>Non-profit work and a Multicultural Course</td>
<td>Black</td>
</tr>
<tr>
<td>Clare</td>
<td>37</td>
<td>F</td>
<td>Several Multicultural Trainings and Courses</td>
<td>Black &amp; Hispanic</td>
</tr>
<tr>
<td>Melissa</td>
<td>23</td>
<td>F</td>
<td>Multicultural Course</td>
<td>Black</td>
</tr>
<tr>
<td>Mary</td>
<td>48</td>
<td>F</td>
<td>Multicultural Course</td>
<td>Black</td>
</tr>
<tr>
<td>Shirley</td>
<td>49</td>
<td>F</td>
<td>Seminars, ACA Meetings, Multicultural Course</td>
<td>Black &amp; Asian</td>
</tr>
</tbody>
</table>

Violet expressed that race/ethnicity was discussed in supervision as a generality and not specific to clients she counseled. Violet described possibly missing pertinent cultural information as a result of not discussing race/ethnicity specifically in supervision: “I think there were probably issues that I did not attend to.” She described not receiving any direction from her supervisor regarding race/ethnicity.

In the follow-up interview, Violet reported that her transcripts appeared to be accurate. She expressed that she believed that the current study was important and that she liked the inclusion of supervisors: “… I think their perspective[s] would be the key to
this whole thing.” Violet reported that she attributed her willingness to participate in the current study to good “dissertation karma” that she will need one day. She also expressed that research, such as the current study, is needed in order to advance the field and to “maintain the integrity of the field”. Violet explained how the current study has shaped her thoughts:

Looking back, I know I didn’t touch on race/ethnicity as much as I should have … it could be considered some form of transference…growing up in an all White community and going to school with all Whites…we didn’t talk about race/ethnicity….

Violet expressed that her “color blind mentality” might have influenced her work with minority clients. Violet reported that now she is more aware of her past behavior in sessions with clients and that she is not going to be so color blind moving forward.

**Tiger.** Tiger was the next CT interviewed. She described herself as a 38-year-old female. Her multicultural experience included growing up and living in diverse cities. She also reported having taken a multicultural course both in her undergraduate and graduate studies. She reported not having a large variety of diverse clients in practicum due to the geographic location of the institution. Tiger described practicum as a “great learning experience.” She stated that her clientele was not as diverse as she would have preferred. She described the races/ethnicities of clients counseled in practicum as “10 to 15% African-American and 5% Hispanic”. She indicated that she did not discuss race/ethnicity in session with clients.
Tiger described the differences between the clients and her as being “small town culture” as well as race. She stated: “…the culture of an African-American in a small town is different than the Caucasian.” She described one African-American client who had multiple generations of family living in one home. Tiger reported that the client lived with his grandmother, mother, older sister, younger brother, an aunt, and two cousins. Tiger reported that the White clients she worked with only had one family member living in the home.

Tiger stated that although race/ethnicity was not addressed in sessions with clients, it was discussed in supervision: “…because we want to be culturally competent, obviously, because we are both Caucasian…” Tiger described discussing resources that would assist the African-American client with living in a home with multiple generations. She described being comfortable assisting clients with concerns that may be attributed to race/ethnicity. Tiger attributed her level of comfort to personal experience with friends of varying cultural backgrounds and educational training. She felt uncomfortable addressing the differences directly with clients because she did not want to sound “ignorant or prejudice.”

In the follow-up interview, Tiger reported that her transcripts appeared to be accurate. Tiger stated that her participation in the current study made her “think about things differently”. She expressed that she is now more aware and wants to be more culturally competent when working with clients. Tiger explained that she was willing to participate in the current study because she wants to support doctoral students, adding
that one day she will be one. She reported that understanding diversity and being culturally competent are important to her.

**Jane.** Jane described herself as a 39-year-old female. Her prior multicultural experience included working in inner-city Cleveland with different cultures and working with the Amish population in a rural environment. She also reported having taken a multicultural course and a Social and Philosophical Foundations of Education course.

Jane described working with a variety of races/ethnicities in her practicum:

“African-Americans, Latinos/Latinas, Chicanos/Chicanes, family from the Middle East, and an Indian client.” She described discussing race/ethnicity in sessions with clients.

Jane described her work with an older Black female client:

She viewed me as not being able to understand or empathize with what they were going through…so that was probably the hardest part to start the relationship with a mutual respect for each other’s positions so that was challenging for sure.

Jane attributed her ability to discuss race in sessions with the client to attending a predominately Black high school in the inner-city, and described how she addressed race in the session: “I’m not an African-American woman…I’ll never understand what you’re experiencing fully but you know, I would at least try to recognize that there is some privileges there.”

Jane described her supervision experience as being impactful in a variety ways. She described not discussing race/ethnicity concerns with her supervisor because she thought that her supervisor had a lack of cultural knowledge. She stated: “Since my supervisor never discussed these things, I wasn’t comfortable with talking about
race/ethnicity with her”. She added, “I roll my eyes” in supervision because she did not respect her supervisor’s clinical opinion; Jane reported mostly discussing race/ethnicity concerns with colleagues.

In her follow-up interview, Jane reported that her transcripts appeared accurate. Since her initial interview, Jane discussed multicultural factors and supervisors in her internship class and thought it was interesting that the topic arose after participating in the current interview. Jane expressed her concern for supervisors to receive the appropriate training in order to assist CTs and ultimately licensed counselors. She said she was willing to participate in the current study because she has “strong” feelings about supervision and the “lack of preparation” that counselors sometimes have in working with diverse clients.

**Alexandra.** Alexandra described herself as a 24-year-old female. Her multicultural experience included working with several different socio economic status (SES) groups at a community agency. Alexandra also reported taking a multicultural course while in the graduate program.

She indicated that clients were randomly assigned in practicum and sometimes would be assigned the same day. Because the clients were randomly assigned and she was unable to properly prepare, she was not prepared when she was assigned a Chinese client. She stated: “I think I could have been a little more tactful had I been prepared.” Alexandra described that while completing intake documents the client did not understand a question about sexual orientation. She described that the client was not familiar with the descriptor of “sexual orientation” in his cultural background. Alexandra
stated: “Had I known about this prior to the session, I would have absolutely done some research prior to seeing the client.” She described having a supervision discussion about how to be more prepared in the future.

Alexandra described discussing the Asian client in supervision. She stated: “I brought it up in supervision because it was not something that I was anticipating for the day, so I wasn’t even ready to see the client.” She described watching the videotaped session in supervision and receiving feedback from her supervisor who told Alexandra: “…in the moment you handled it the best way you [could].” Alexandra recalled being directed to discuss any differences early on in counseling sessions with minorities. She described being comfortable discussing race/ethnicity in supervision. Alexandra stated that her supervisor was “unconditional and accepting,” which had an impact on her; she stated “I am fortunate to have my supervisor.”

In her follow-up interview, Alexandra reported that her transcripts appeared accurate to her and that she had no additional thoughts or reactions. She said she participated in the current study because she conducted a study of her own while pursuing her undergraduate degree. Alexandra reported that it was difficult to find participants, so, in turn; she attempted to participate in any relevant studies. She discussed the impact the current study had on her by stating that she remembered discussing race/ethnicity differences in her didactic classes. She expanded on this experience by stating “that there wasn’t a 'how’ given…when…how do you do it in a way that won’t be offensive or make them feel excluded.” Alexandra emphasized the need for the current study in assisting CTs to work with clients who are different from them.
George. George described himself as a 24-year-old male. George’s prior multicultural experience included working with non-profit organizations. He also reported having taken a multicultural graduate course. George reported working with a Black client during practicum. He described discussing race with the client: “…that was in the beginning of our sessions…I asked her a question at the end of our first session uh….what she thought of having a counselor who is a White male and she is a Black female.” George described the client’s response as receptive: “She said and I quote ‘it’s fine; my best friend is a White guy’…”

George reported discussing this client in supervision. He stated that his supervisor directed him to discuss racial difference with the client. George described that prior to his supervisor directing him to discuss race with the client, he had not thought about addressing the difference. He reported: “I think I’m much more ready to address [race/ethnicity] now.” George stated that in the future if he senses any hostility or distance in communicating with the client, he will approach the topic.

In his follow-up interview, George reported that his transcripts appeared to be accurate and that he did not have any additional thoughts or reactions. George attributed his willingness to participate in the current study to wanting to “help out” and that that his experience was “unique enough” to participate. He expressed having a personal concern of his own that may have caused some countertransference with the client. He stated: “I didn’t want to make my own decisions about my personal stuff be present with her.” He said he did not want to go in-depth regarding the specific concern and reported that the concern was regarding race/ethnicity.
Clare. Clare described herself as a 37-year-old female. Clare’s prior multicultural experience included multicultural training at state and national conferences. She also reported having taken one multicultural course and discussing multicultural topics in other courses throughout her graduate program. Clare reported working with Black and Hispanic clients in practicum.

Clare reported not discussing race/ethnicity in sessions with her clients. She said that if she had had a discussion with clients about the race/ethnicity difference between them that more rapport would have been developed. Clare added, “I also feel that I would now be more likely to bring that up in supervision.” Clare reported not discussing race/ethnicity in supervision: “…no one has ever asked me ‘What do you think their experience is having a White counselor?’…that has never been asked.” Clare described wanting to discuss race/ethnicity in supervision:

I think I would have liked to discuss it more, but then I think I wonder about the limitations of a White supervisor talking to a White supervisee about the experiences of African-American clients…Like, I wonder how much they could really provide or help me gain, and so I don’t know.

Clare reported having increased awareness that differences are important and, specifically, within cross-racial/ethnic counseling. She reported that minority clients could benefit from discussing racial differences when their counselor is White.

In her follow-up interview, Clare reported that she reviewed her transcripts, and everything appeared to be accurate. She reported that since the initial interview, she had reflected on the topic. Clare expressed that the current study put race/ethnicity at the
“forefront of [my] mind”. She attributed her willingness to participate in the study to wanting “good research karma” for one day when she writes her own dissertation. Clare also expressed that the topic is a very important one and can assist counselor training programs.

**Melissa.** Melissa described herself as a 23-year old female. Melissa’s prior multicultural experience included taking one multicultural course at the graduate level. She also reported working with a Black client in practicum.

Melissa described the counseling relationship with her Black client as “normal.” She went on to add: “There didn’t seem to be any strong differences affecting the counseling process.” Because of Melissa’s perception that the racial difference did not affect the counseling process, she reported not discussing race with the client: “With this client, there never seemed to be a reason to bring it up.” Melissa reported not discussing race/ethnicity in supervision.

Because Melissa perceived the client to not have any racial concerns, she described not needing to discuss race in supervision. Melissa stated: “I think I would need more supervision if I didn’t know much about race or if it [race] was affecting their [the clients’] problem.” Melissa reported that although race/ethnicity was not discussed in supervision, she was comfortable with discussing race/ethnicity if needed.

In her follow-up interview, Melissa reported that her transcripts appeared accurate and that she did not have any additional thoughts or reactions. Melissa said she participated in the current study because she “want[ed] to help” and thought the topic was
“interesting.” Melisa expressed that it will be interesting as she moves into internship to see how and or if race/ethnicity is addressed.

Mary. Mary described herself as a 48-year-old female. Mary’s prior multicultural experience included taking one multicultural course at the graduate level and working with Black clients in practicum. Mary reported that there appeared to be no client concerns from her Black clients about working with a White CT. Mary reported working with a bi-racial client whom she described as being White and Black. According to Mary, this client “…wanted to be White and he wasn’t accepting the Black part of him.” Mary reported discussing this client’s concerns in supervision.

Mary described a discussion she had with her supervisor regarding the client’s race: “…so we had discussions about that…kind of when are we going to move out of the 60’s or 40’s…when is this going to be over? We both felt that way.” Mary stated that this supervision experience prepared her to work with minority clients.

In her follow-up interview, Mary reported that her transcripts were accurate and that she had no additional thoughts or reflections. She said her willingness to participate in the current study was because the criteria were specific to the racial/ethnic background of her supervision/counseling dyads. Mary also reported that she “…liked the multicultural/racial themes.”

Shirley. Shirley described herself as a 49-year old female. Shirley’s prior multicultural experience included attending seminars and the American Counseling Association meetings. She reported having taken one multicultural course at the graduate level and working with Black and Asian clients in practicum.
Shirley reported that her clients’ concerns were surrounding factors other than race/ethnicity. She described a Black client who had “developmental issues, not serious mental health issues.” Shirley also discussed an Asian client who had concerns regarding maintaining her autonomy while respecting her parents’ cultural expectations. She reported having discussions about race/ethnicity early on in treatment and also having discussions about race/ethnicity in supervision. Shirley described discussing resources to assist clients with her supervisor:

…what are some of the local resources and if there [are] not some local resources, and if there aren’t some local resources, what are some of the Internet or library resources and stuff like that.

Shirley also reported discussing a variety of ways to educate herself and to learn about resources to use when working with her clients with her supervisor. Shirley stated that this supervision experience assisted in enabling her to feel more comfortable with discussing race/ethnicity both in client sessions and in supervision.

In her follow-up interview, Shirley reported that her transcripts appeared to be accurate. She also reported that she had no additional thoughts or reactions. Shirley attributed her willingness to participate in the current study to having conducted a few small studies herself and wanting to “give back”. She expressed having the knowledge of attempting to find participants and being unable to secure all of them.

**Supervisors**

The next section introduces each supervisor participant. The average age of the supervisors was 43. All supervisors had earned a master’s degree, and two supervisors
had earned a doctoral degree. All nine were State of Ohio licensed professional clinical counselors with supervisory designation; each supervisor provided individual counseling supervision to CTs. Additional demographics of the supervisors are presented in Table 4.

**Addie.** Addie was the first supervisor interviewed. Addie described herself as a 38-year-old female, and that her CT had worked with Black and Latina clients. She described how race/ethnicity was addressed in the initial assessment session with clients: It is also something that is addressed with the client in the assessment…we ask ‘is this something I should be aware of or anything you would like me to be sensitive to?’ Addie explained that by asking the client to identify any sensitive areas, the client is able to clarify or elaborate on any concerns. She expressed that her CT did not initiate the topic of race/ethnicity in supervision. She stated: “It has come up when I’ve raised the issue due to the behaviors that weren’t severe, but I think that could have been seen as symptoms of a mental health issue.” Addie also reported that some client concerns were really more cultural concerns and she made sure to address the concerns so that the CT did not misinterpret.

In her follow-up interview, Addie made a few clarifications to her transcripts such as adding the word ‘clients’ instead of ‘they’ when she described the race/ethnicities her CT’s clients. She attributed her willingness to participate in the current study to feeling that it is an important topic to know more about. She stated: “It is a good thing to be mindful of.” She reported that she enjoyed assisting in the research and looks forward to hearing the results.
Table 4

**Supervisor Demographics**

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Gender</th>
<th>Degree Held</th>
<th>Prior Multicultural Experience</th>
<th>Years Counseling</th>
<th>Years Supervising</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addie</td>
<td>38</td>
<td>F</td>
<td>MA</td>
<td>Annual Multicultural Training &amp; Course</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Amber</td>
<td>42</td>
<td>F</td>
<td>MA</td>
<td>Multicultural Trainings &amp; Courses</td>
<td>18</td>
<td>14</td>
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<tr>
<td>James</td>
<td>56</td>
<td>M</td>
<td>PhD</td>
<td>Published in Diversity Counseling-LGBT, disability &amp; age issues;</td>
<td>19</td>
<td>13</td>
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<td></td>
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<tr>
<td>Danielle</td>
<td>36</td>
<td>F</td>
<td>M.Ed.</td>
<td>Trainings, Multicultural Courses</td>
<td>7</td>
<td>3</td>
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<td>Colin</td>
<td>48</td>
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<td>MS</td>
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<td>4</td>
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<td>Not Disclosed</td>
<td>M</td>
<td>MA</td>
<td>Multicultural Courses Annual Training</td>
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<td>5</td>
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<td>40</td>
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<td>6</td>
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<td>Michelle</td>
<td>66</td>
<td>F</td>
<td>PhD</td>
<td>Multicultural Courses &amp; Trainings</td>
<td>31</td>
<td>31</td>
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<tr>
<td>Susan</td>
<td>43</td>
<td>F</td>
<td>MA</td>
<td>Multicultural Courses &amp; Trainings</td>
<td>12</td>
<td>11</td>
</tr>
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</table>
James. James described himself as a 56-year-old male with an earned doctorate in Counselor Education and Supervision and 13 years of supervisory experience. He reported having prior multicultural training and 19 years of counseling experience. James also reported having published in the field of diversity counseling, specifically LGBT, ability, and age.

James reported that his CT worked with a Nigerian and a Turkish client during practicum. He described how the CT initiated the discussion in supervision:

It came out like this… it was just right from the start ‘ah oh my gosh I think I have a Muslim woman or something like that where she wears the Niqab…what do I need to know…what have I got to do differently?’

He reported that he advised the CT to “listen carefully and when you don’t understand ask questions.” James encouraged his CT to learn more about client’s race/ethnicity and/or culture. He also advised the CT to ask the client questions for clarification.

James reported that his supervision experience “went well” and that he emphasized diversity. He stated: “Emphasis, specifically, that every encounter is a diverse encounter.” He described how the CT took directives received in supervision, and applied interventions in sessions with the client:

If anything, I saw a lot of attempts…More than anything, I saw a kind of similar kind of counseling, and I saw them come back with more questions…A lot of it came to getting them to sort of relax and get to a point where you can do some research on this… ask a lot of questions…get the person to help you understand… if you don’t understand get them to help you understand.
James attributed his ability to address race/ethnicity in supervision to his own experience of being marginalized. He expressed: “…I’m gay inside, and I know not everybody knows. Or things are going just fine and when they find out, you can sense the difference in them.” He encouraged his CT to “sit with” clients who were different from the CT in order to get a good understanding for the individual.

In his follow-up interview, James requested two changes to his transcripts. James attributed his willingness to participate in the current study to being a graduate of the Counselor Education department at an institution in Mid-eastern Ohio and wanting to support the researcher.

**Amber.** Amber described herself as a 42-year-old female. She reported having earned a master’s degree in counseling and having 14 years of supervisory experience. Her multicultural experience included training and 18 years of counseling experience. Amber reported that her CT worked with Black clients during practicum. She described that her CT’s issues appeared to be more about SES than race.

Amber reported that the CT addressed race/ethnicity during the initial session with the client. She said, “…if she didn’t do the initial screening and she was getting the case from somebody else who did the screening…she is kind of going over that and you know asking some more detailed questions on her own.” Amber reported that she encouraged the CT to assess what was culturally important to client. Amber reported that discussions regarding clients’ cultural needs took place in supervision: “…depending on what kind of answers she gets back from the client maybe we’ve already talked about those sort of scenarios and then she kind of knows where to go from there.” Amber also
described assessing the CT’s bias. She suggested that it is really important to know the client’s cultural background in order to “really help someone.”

In her follow-up interview, Amber reported that her transcripts seemed to be “clear”. She added that she encourages her CTs to be respectful of their clients’ culture regardless of “minority or majority.” Amber expressed that everyone is an individual who brings their own beliefs and values to counseling. She reported that she attributed her willingness to participate in the current study to being a doctoral student herself and possessing the knowledge of the difficulties of obtaining participants for studies.

Danielle. Danielle described herself as a 36-year-old female. Danielle reported having earned a master’s degree in education and having three years of supervisory experience. Her prior multicultural experience included training and seven years of counseling experience.

Danielle reported that her CT worked with Black, Hispanic, and Middle Eastern clients in practicum. Danielle reported about a supervision session with a CT who may have been prejudiced against the client. She described their supervision session regarding a Black client who had taken a phone call during a session and began yelling at the person on the phone. She stated: “…I asked if she [the client] was upset and he said ‘I didn’t think that she was really upset…that’s just the way those people interact…that’s just the way they talk’… That’s when I was like ‘They?’” Danielle reported that the statement the CT made raised several red flags for her. She reported having to address the concern with the CT several times before he understood how he could be perceived as prejudiced.
In her follow-up interview, Danielle reported that her transcripts appeared accurate and that she had no additional thoughts or reflections. Danielle attributed her willingness to participate in the current study to “wanting to help”. She expressed that she believed that the current study was an interesting topic and that she would like to hear the results. Danielle expressed that she believes that she does a “good job” addressing race/ethnicity with her CTs. She reported that the current study highlighted what she already does and reminded her to continue to include cultural competence in supervision sessions.

**Colin.** Colin described himself as a 48-year old male. Colin reported having earned a master’s degree in counselor education and having four years of supervisory experience. His prior multicultural experience included multicultural training and over 18 years of counseling experience. Colin reported that his CT worked with a Black client and a Hispanic client during practicum. He described how sometimes race/ethnicity gets “blended” with “other things” such as SES. He stated: “…which unfortunately sometimes comes hand-in-hand with our population but not exclusively.” Colin reported that sometimes one of his CT’s was unsure if the clients’ behavior was related to their race/ethnicity or if the behavior was a symptom of his/her diagnosis.

In his follow-up interview, Colin reported that his transcripts appeared accurate and that he did not have anything to add regarding his experience. Colin said he wanted to participate in the current study to “help with the education process. I like growing people in the field.”
Patrick. Patrick chose not to disclose his age. Patrick reported having earned a master’s degree in counseling and is currently working toward a doctoral degree in counselor education and supervision. He reported having five years of supervisory experience. Patrick’s multicultural experience included multicultural training and eight years of counseling experience.

Patrick reported that one of his CTs worked with Black clients during practicum. His CT described one client who appeared to struggle with racial identity: “…she was living with her grandmother, and so there was some discussion about how the grandmother may have identified more so with one group where the client, at that age, may have had less of a cultural identity.” Patrick reported working with CT on how to assist the client with developing her own identity. He reported advising the CT to assess which cultural aspects were important to the client and assist the client in creating her own identity.

Patrick reported that discussions regarding race/ethnicity occurred in supervision. He added: “We frequently had the discussion associated to using the client as a resource for recognizing some variations.” He reported that by utilizing clients as a resource the CT could learn about that client’s individual race/ethnicity. Patrick described the CT taking a more “person-centered approach and attempting to understand the client’s situation ‘as she understood it.’”

In his follow-up interview, Patrick reported that he found his transcripts to be accurate. Patrick described some additional reflections:
The initial interview had brought to my conscious awareness some of the historical experiences that I had in supervision, and I found this a nice opportunity to reflect on those experiences as well as acknowledge some of the students that I may have had an impact on.

Patrick reported attributing his willingness to participate in the current study to “research karma” and a topic that he had a personal interest in as well as an investment as a counselor educator.

**Joyce.** Joyce described herself as a 40-year-old female. Joyce reported having earned a master’s degree in counseling and having six years of supervisory experience. Her multicultural experience included multicultural training and 13 years of counseling experience. Joyce reported that her CT worked with mostly Black clients. She described that the CT struggled somewhat with working with her Black clients: “…understanding and trying to be respectful but not having the knowledge of how to do that appropriately.” Joyce described ways in which she assisted the CT with educating herself in order to gain more knowledge about her clients. She explained: “…we discussed in supervision…we tried to do some diversity trainings across the board…” She reported that the CT was receptive to her feedback as evidenced by doing her own research and discussing that in supervision.

Joyce indicated that more of her concerns with supervising the CT were more about the clients’ SES: “…where there was a mixture of African-American and Caucasian clients and there were some things that came up that were general to socio economic status…” Joyce discussed educating one CT regarding SES as well as Black
culture. She reported that in supervision, she assessed the CT’s background and any bias or assumptions the CT had. Joyce attributed her ability to address race/ethnicity in supervision to her mentor who was Black and assisted her in becoming comfortable discussing Black culture: “…I could be open with her and she could be open with me also with different questions…she was fine with kind of educating me.

In her follow-up interview, Joyce reported no in accuracies after reviewing her transcripts. Joyce stated that she participated in the current study because she enjoys supervision and learning from CTs. She stated:

I guess it’s easier to see when somebody else is having an issue but it’s not always easy to recognize when it’s yourself…so when issues came up for the person I was supervising it also made me look at myself and make sure that I was being as appropriate as I could and had the education that I needed…so kind of keeping myself in check as well.

**Michelle.** Michelle described herself as a 66-year-old female. Michelle reported having earned a doctoral degree in counselor education and having 31 years of supervisory experience. Her prior multicultural experience included multicultural training and 31 years of counseling.

Michelle reported that the CTs she supervised worked with Hispanic, Asian, and Black clients. She described a Hispanic client that one of her CTs worked with who had domestic violence concerns. She stated: “She returned to the situation…really felt that she had to go back…she saw him more as his machismo…” Michelle reported that the CT would ask questions in supervision regarding how to work with a client whose
cultural background requires women to be more subservient. She described how the discussions occurred in supervision:

Well I think the supervisee [CT] brought up the concern about the case and then I might have asked more about ‘How do you think their heritage has come into play?’…I think I might have brought it up.

Michelle reported that the CT was able to apply interventions that were discussed within supervision in sessions with the client. She reported observing the CT emphasizing “safety” and educating the client on her options. Michelle described a client satisfaction survey that is utilized after a client has successfully been discharged from counseling services. She stated that it includes the question: “What is the staff’s respect of your cultural background?” Michelle reported that this question is important because it allows the client to accurately report his/her experience of his/her cultural background being respected. This question also allows for an assessment of the CT’s skills or possible need of more multicultural training or experience.

In Michelle’s follow-up interview, she reported that after reviewing her transcripts she found them to be accurate. She added that she believes cultural competency is even more important today in our world than ever before. She said she was willing to participate in the current study because she remembered being a doctoral candidate and needing participants for her own dissertation as well as “the importance of the project.”
Susan.  Susan described herself as a 38-year-old female. Susan reported having seven years supervisory experience. Her multicultural experience included multicultural training and 12 years of counseling experience working with a variety of minority clients. Susan reported that her CT worked with a Hispanic and an Amish client. The CT’s Hispanic client was a male who experienced some abuse from his older brother. Susan described how CT attempted to relate to the client. She explained, “My supervisee said that there is also some machismo, and she attributed that to his Hispanic background, and she said that she could relate to him because that was similar to her Italian background.”

Susan reported that her CT’s ability to relate her own ethnic identity enabled her to connect with her client and empathize with the client’s experience. Susan described a client of one of the CT’s, an Amish client who was living in a shelter after leaving her parents’ home to escape her father’s alleged abuse. Susan reported that the workers at the shelter emphasized the client needed to decide if she was going to remain Amish. Susan described how her CT processed the client’s decision: “My supervisee [CT] believes that wouldn’t be any of our role into pushing her into that but more of supporting her and letting her come to a decision on her own.” Susan reported that she and her CT discussed this client’s concerns in supervision.

Susan reported that race/ethnicity was not a topic of discussion in supervision until she decided to participate in the current study. She stated: “I spoke with her more in depth because I knew you and I would be talking.” She described the discussion she had with her CT:

I asked her if she’d be interested in taking part in something like this, and I told
her that and she said ‘yeah’ right away, and I said that I thought this would help the supervision experience and help us explore some things we hadn’t explored as much as I wanted to…

Susan reported that her CT was receptive to exploring more about her client’s race/ethnicity in supervision as evidenced by her willingness to do more research and ability to present questions in supervision.

In her follow-up interview, Susan reported that her transcripts appeared accurate and that she had nothing more to add. She described her willingness to participate in the current study: “Well, I work in an inpatient psych unit, and I’ve worked here for 10 years and I find it upsetting to me that we’ll have 25-30% African-Americans and never has there been anyone who is a therapist here that was African-American.” Susan reported that these clients are an example of many minority clients who are matched with White counselors. Susan further reported that studies such as the current study explore the important topic of race/ethnicity in supervision where the supervisor is White and the CT is White. “…had I not participated in the study I might not have had those discussions with my supervisee.”

**Summary of Participant Descriptions**

Each participant expressed a unique experience of the supervision of cross-race/ethnic counseling. As unique as each experience was, there were some commonalities. Data analysis generated themes of common experiences. The next section provides a step-by-step account of the data analysis process that generated the themes, along with some specific examples.
Data Analysis

Each participant described unique aspects of experiences of mono-racial supervision of cross-racial/ethnic counseling. The goal of the current study was to articulate the common “essence” of the phenomenon of mono-racial supervision of cross-racial/ethnic counseling and present how the commonalities were determined. The data analysis process is provided with examples of specific participant reports. Throughout the analysis process, I approached the data with a phenomenological attitude. Giorgi (2009) described the phenomenological attitude involving “everything from the perspective of consciousness, that is to look at all objects from the perspective of how they are experienced regardless of whether or not they actually are the way they are being experienced” (p. 87). In order to assume a phenomenological attitude, Giorgi (2009) suggested that the researcher break from the natural attitude of everyday life, where things are taken for granted and explore how participants actually experience the phenomenon.

For example, a child lost a tooth, placed it under his pillow, in the morning the tooth was gone and money was in its place. The phenomenon here is “tooth loss.” What actually happened is that his parents came into his room in the middle of the night, took the tooth, and replaced it with money. From the child’s perspective of consciousness, or the way in which he experienced the tooth removal, was that the tooth fairy came in the middle of the night, took his tooth, and put money in its place. A phenomenological researcher examines what his or her experience was regardless of the actual events that occurred. For the current study, reviewing actual supervision sessions was not what I
wanted to explore. I examined participants’ conscious experience and accounts of mono-racial supervision of cross-racial counseling.

Specifically, the focus of the current study did not call for a word-for-word account of supervision sessions. The current study explored what and how participants perceived their experience of mono-racial supervision sessions when cross-racial/ethnic counseling had occurred. Exploring the recall of experiences of mono-racial supervision of cross-racial/ethnic counseling solely based on the participants’ experiences was the phenomenological attitude needed to conduct this study. The phenomenological attitude is where participant experiences are explored through the lens of intentionality of consciousness or an exploration of “both the outward experience and the inward consciousness…based on memory, image and meaning” of the object (Creswell, 1998, pg. 52). The “object” in the current study was the experience of mono-racial supervision of cross-racial/ethnic counseling: Each participant was asked to think back to the actual supervision sessions and express how he or she experienced supervision. Another component of data analysis was époché which occurred throughout the data analysis process.

Époché

As defined in Chapter II, époché is the researcher’s practice of separating any biases related to the participants’ experiences. Époché was completed through bracketing or writing down any thoughts or feelings regarding participant experiences prior to and throughout the process of data collection as well as during the data analysis process. Throughout data analysis, bracketing was completed in two ways: (a) I kept a journal of
thoughts or questions, and (b) notes were written in the right margin of the transcript. Table 5 provides an illustration of Violet’s (CT) transcript along with my bracketing.

Because Violet (CT) was the first participant interviewed, her transcript was used as an example throughout the data analysis section. Page and line numbers were used to identify verbatim statements from participant transcripts which were needed later on in the data analysis process. I interviewed each participant, listened to and heard, without altering the participants’ description with my own habits of thinking, feeling, and seeing (Moustakas, 1994). I bracketed by taking notes and becoming aware of past thoughts, feelings, and biases associated with cross-racial/ethnic counseling and attempted not to allow those past constructs to influence the current study (Giorgi, 2009). I was fully and attentively present in the research experience.

As mentioned prior, I identify racially as Black. I found the procedure of bracketing to be difficult at times because of some uncomfortable feelings that arose during some of the interviews. There were two interviews conducted when participants discussed Black clients and their experiences working with Black clients. In those interviews, participants discussed stereotypical behavior associated with Black individuals which made me more conscious of the participants’ experiences. For example, a CT participant discussed a Black client whom she worked with in practicum: “I’ve had a client who was a young woman…a 26 year old woman who was married to her high school sweetheart…they had three children…the father was the same father of all three kids and they were what I call hard working blue collar folks.” (See Table 5).
Table 5

*Illustration of Transcription and Bracketing*

1. Participant: Violet, Nov-2013
2. Researcher: What population of
3. clients did you counsel?
4. Violet: yeah I’m marriage and family
5. So I mostly see couples and families
6. Researcher: got ya…ok…alright…ok
7. Now in practicum do you
8. remember bringing up any uh
9. situations that had to do with clients
10. that was race or ethnicity based when
11. you were in supervision?
12. Violet: Uh like in supervision?
13. Researcher: yeah
14. Violet: Did we discuss stuff like that?
15. Researcher: yeah
16. Violet: um… I would say sadly like
17. maybe we touched upon it in
18. the sense of was there any cultural
19. issues that need to be addressed.
20. Researcher: ok
21. Violet: but it was never probably
22. delved into the point that it
23. needed to be
24. Researcher: ok…like would you say
25. that there were any issues
26. with clients that might have been
27. racially motivated or surrounded
28. race or ethnicity that you could have
29. used…
30. Violet: um I think that there were
31. probably issues that I didn’t
32. attend to
33. Researcher: ok…alright
34. Violet: um I think that at my point in
35. my career kind of the
36. inexperience and the kind of
37. sensitivity about wanting to go there
38. and push too far and say something
39. wrong or be insensitivity or
40. something like that prevented me
41. become thoroughly exploring that
42. with my clients.

Not sure why this is sad…glad it was even “touched”

Who determines the point race/ethnicity needs to be delved into?

Not sure why I didn’t ask what other issues needed to be attended to?
The same participant went on to describe a White client she worked with in practicum. “I had a 29 year old White woman who had 4 children with all different fathers…you know, she had domestic violence issues and addiction and all kinds of uh…she had a history of mental health problems in the family…a history addiction in the family…she had addiction and mental health problems.” The participant seemed surprised that typical stereotypes reversed for White and Black people were different for her White and Black clients. The participant went on to state that the White client was more difficult to work with than the Black client.

While listening to the audio recording of this interview for the second time and reading the transcript, I wrote notes about my experience: “Wow, some people are still surprised to see Black people who are hard working, get married prior to having children, and have the same parents for all children…unfortunately there are still stereotypes that lead others to believe that this client’s life is mythical in nature and there aren’t enough examples to dispute these stereotypes…my life experience is similar to this Black client, and I have advanced education, so maybe I’m like a unicorn…”

Thoughts, feelings and reflections documented within bracketing were shared with a peer reviewer. I discussed these thoughts with the peer reviewer who assisted me in expressing her thoughts without affecting data collection. Bracketing is an excellent tool that allowed me to be objective during interviews and document any thoughts, feelings, or reflections after transcribing the interviews, so what I thought or felt would not be forgotten or mixed with participant accounts.
**Peer Reviewer Feedback**

The peer reviewer and I, as mentioned earlier, are in the same doctoral program. The peer reviewer was an essential part of the data analysis process. Utilizing a peer reviewer assisted in increasing the credibility of the current study. The peer reviewer served as an independent, third-party examiner who systematically reviewed the researcher’s data (Schwandt, 2007). Upon completion of the first two interviews, transcripts were e-mailed to the peer reviewer for review. The first two interview transcripts were sent to the peer reviewer prior to conducting the remaining interviews. In sending the first two interviews prior to conducting the remaining interviews, I received feedback on possible leading behavior on my behalf as well as any incomplete participants’ responses that may have needed additional information. Once all interviews were conducted and transcribed, I sent all of the transcripts to the peer reviewer. The peer reviewer examined all of the transcripts and provided feedback regarding preliminary themes.

The peer reviewer and I scheduled a time to discuss initial themes that were generated. During the discussion, the peer reviewer and I discussed possible themes that emerged from the interviews. Similar themes and some that were different were identified. Upon formulating preliminary themes, I emailed them to the peer reviewer for feedback. Another time was scheduled for me and the peer reviewer to discuss the themes. I then discussed any feedback, questions, or concerns with the peer reviewer.

I conducted a second analysis of data and again consulted the peer reviewer. I contacted the peer reviewer and inquired about her review of significant statements and
her transformation of statements into meaning units. The peer reviewer and I discussed the process of determining meaning units via telephone. An illustration of the peer reviewer’s feedback regarding meaning units is provided later in the chapter, along with the researcher’s transformations of significant statements into meaning units. The peer reviewer offered helpful feedback and transformation of significant statements via email.

The current study used a modified version of Moustakas (1994) phenomenology data analysis and Giorgio’s (2009) Descriptive Phenomenological Method (DPM) of analyzing data. The following seven steps were taken for each participant (see Figure 1): (1) reading each transcript, (2) identifying of significant statements, (3) determining meaning units, (4) categorizing meaning units as textural or structural descriptions, (5) synthesizing textural-structural descriptions, (6) identifying preliminary themes and (7) identifying core themes.

Steps Followed in Data Analysis

Step 1: Reading Transcripts

I began listening to the audio recorded interviews immediately after the initial interview of each participant. Each recorded interview was transcribed by me. A Word document was created and named for each participant with the number of order in which he/she was interviewed (e.g. 1Violet, Nov-2013). I single spaced and placed a number on each page and each line of the transcript in order to assist with reading the full description of the phenomenon to be able to capture the experience while reading the text. The first line of the Word document included the participant’s name and month and year the interview took place.
Step 1: Reading Transcripts
Step 2: Identifying Significant Statements
Step 3: Determining Meaning Units
Step 4: Categorizing Meaning Units as Textural or Structural Descriptions
Step 5: Synthesizing Textural-Structural Descriptions
Step 6: Identifying Preliminary Themes
Step 7: Identifying Core Themes

Figure 1. Step-by-Step Account of Data Analysis
Upon completion of transcription, the transcripts were sent to participants via certified postal mail. Fourteen of the participants were unable to receive their certified mail copy as a result of not being present when the mail was delivered, resulting in these being returned by the post office to me. I then contacted the 14 participants to ask if sending an email copy would suffice. All 14 participants agreed to receive their transcripts via email. After receiving the transcripts, all participants reviewed and clarified any inaccuracies during the follow-up interview. One participant shared that she did not realize “how ignorant I sound.” Based on her transcripts, she wanted to replace the word “they” with “clients.” She expressed that she did not want others to view her as stereotyping a specific race/ethnicity and that was not clear after she reviewed her transcripts. Once all follow-up interviews were completed, the researcher listened to the audio recordings and transcribed each follow-up interview.

At the end of each participant’s initial interview transcript, I started a new line and began to transcribe each participant’s follow-up interview. To separate each interview, I typed “Follow-up interview” on the line directly after the transcription of the initial interview. Similar to the first line of the initial interview transcript, I then typed the participants’ pseudonym, month and year the interview occurred was placed on the next line (e.g. 1Violet, Dec-2013). I then began transcription of the follow-up interview. Once all participants’ follow-up interviews were completed, I went back to the first participant’s, Violet’s, transcripts and began to read the entire transcript for a sense of the whole experience.
I thoroughly read the transcripts in order to get the overall sense of what the whole description was about (Giorgi, 2009). I read each participant’s transcript in this way and then implemented step 2 of the data analysis process, identifying *significant statements*.

**Step 2: Identifying Significant Statements**

There were several tasks involved in identifying significant statements. As stated by Giorgi (2009), no data analysis can claim to be phenomenological without the attitude of *phenomenological reduction*. A phenomenological reduction involves reducing a participant’s whole description of a lived experience to statements of significance about the phenomenon being studied. There is no one way to conduct phenomenological reduction. Giorgi (2009) suggested that there are different levels of reduction. Within the phenomenological reduction, transcripts in the current study were reduced to focus on significant statements specific to mono-racial supervision of cross-racial/ethnic counseling. The reduction was completed in the following 3 tasks:

1. Transcripts were read again; this time, they were read with the goal of determining *significant statements*.

2. Transcripts were then broken down into parts in order to “do them justice” (Giorgi, 2009, p. 129). Table 6 is an illustration of how all significant statements were emphasized in each participant’s transcripts. Again, Table 6 is a presentation of page one of Violet’s (CT) transcripts with significant statements in bold and italicized. Significant statements, oftentimes, followed
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<td>1.</td>
<td>Participant: Violet</td>
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<td>2.</td>
<td>Date: 11/12/13</td>
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<td>3.</td>
<td>Researcher: What population of clients did you counsel?</td>
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<td>Violet: yeah I’m marriage and family so</td>
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<td>5.</td>
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<td>6.</td>
<td>Researcher: got ya…ok…alright…ok…</td>
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<td>Now in practicum do you remember bringing up any uh situations that had to do with clients that were race or ethnicity based when you were in supervision?</td>
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<td>8.</td>
<td>Violet: Uh like in supervision?</td>
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<td>9.</td>
<td>Researcher: yeah</td>
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<td>10.</td>
<td>Violet: Did we discuss stuff like that?</td>
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<td>11.</td>
<td>Researcher: yeah</td>
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<td>12.</td>
<td>Violet: um… <em>I would say sadly like maybe we touched upon it</em> in the sense of was there any cultural issues that need to be addressed.</td>
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<td>race or ethnicity that you could have used…</td>
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<td>Violet: um <em>I think that there were probably issues that I didn’t attend to um</em> I think that at my point in my career kind of the inexperience and the kind of sensitivity about wanting to go there and push too far and say something wrong or be insensitivity or something like that prevented me</td>
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<tr>
<td>18.</td>
<td>Violet: become thoroughly exploring that with my clients.</td>
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</table>
one after another without an exchange between the participant and the researcher. Sometimes, there was a significant statement in one sentence and the next sentence also included a significant statement. Giorgi (2009) suggested marking with the text each time there was a shift in the description. To assist in determining significant statements that followed one another, I placed an asterisk within the text each time there was a shift per (see Table 6, line 18).

3. All non-repetitive or overlapping statements were horizontalized in a table. Horizontalization was completed by placing every significant statement relevant to the experience of mono-racial supervision of cross-racial/ethnic counseling on the same horizon. Table 7 is an example of how horizontalization of statements occurred. The example is of Violet’s statements and was completed for each participant. The numbers represent the order in which significant statements appeared in the transcript. For example, for Violet, the first significant statement was, “I would say sadly like maybe we touched upon it.” Therefore, this statement is numbered as 1 and all significant statements were sequentially numbered. Following Bendall’s (2006) recommendation, I placed repetitive or overlapping statements into a miscellaneous category in case their significance to the holistic impact of the phenomenon became apparent at a later point. In the current study, the researcher did not find that statements placed in the miscellaneous category had any significance to the findings and were just repetitive and overlapping. The next step, determination of meaning units, was the third step in the data analysis process.
Table 7

**Illustration of Significant Statements Horizontalized**

| 1. I would say sadly like maybe we touched upon it | 2. …in the sense of was there any cultural issues that need to be addressed. | 3. …but it was never probably delved into the point that it needed to be |
| 4. I think that there were probably issues that I didn’t attend to um | 5. I think that at my point in my career kind of the inexperience and the kind of sensitivity about wanting to go there and push too far | 6. …and say something wrong or be insensitivity or something like that prevented me become thoroughly exploring that with my clients. |

**Step 3: Determining Meaning Units**

Once the significant statements were abstracted from the transcripts, *meaning units* relevant to the phenomena were determined. *Imaginative variation* was implemented to assist in the transformation of significant statements into meaning units. I reviewed each participant’s experiences as a whole and infused my thoughts about the account as it was relevant to the phenomenon. Essentially, imaginative variation involved simplifying significant statements that did not distort the participant’s description, rather, highlighted my researcher grasp of what was consciously taking place (Giorgi, 2009). The transformation of significant statements into meaning units was accomplished in 4 tasks:

1. Significant statements were transformed into third-person expressions.
2. I added my thoughts relevant to mono-racial supervision of cross-racial/ethnic counseling to the significant statement.
3. I consulted with my peer reviewer who added her thoughts to participants’ significant statements.
4. I determined which meaning unit was the best transformation of each significant statement.

The first task involved changing the significant statements into third-person expressions. Table 8 is the determination of Violet’s meaning units and an illustration of how all participants’ meaning units were determined. Column one repeats words of the participant exactly with a third-person expression instead of first-person. Giorgi (2009) recommended using third-person expression so that it is clear the researcher is conveying the participant’s experience rather than the researcher’s own experience. I found changing the statements into a third-person expression was part of assuming the phenomenological attitude because it enabled me to be objective and separate my own thoughts or past experiences from the participant’s lived experience.

During this third step of data analysis, I consulted the peer reviewer again. Table 8 is also a representation the peer reviewer’s and my transformations of significant statements into meaning units. Column two is an illustration of my transformations and column three is an illustration of the peer reviewer’s transformations. All participants’ meaning units were determined in this way. Verbatim quotes were also added when transforming significant statements into meaning units. To continue with the use of Violet’s (CT) experience, the illustration is of the transformation of Violet’s significant statements into meaning units. For example, Violet stated that she and her supervisor “only touched on it.” To make the significant statement into a meaning unit I transformed the statement into “race/ethnicity was not a priority in supervision.” Because I conducted the interview I knew that “it” meant “race/ethnicity” I asked a
question regarding race/ethnicity during the initial interview. I transformed race/ethnicity “only” being “touched on” into “race/ethnicity not being made a priority in supervision.”
I determined that this transformation was the meaning unit that best described Violet’s experience.

Table 8
Illustration of the Determination of Meaning Units

<table>
<thead>
<tr>
<th>Violet’s Statements in 3rd Person</th>
<th>Researcher’s Transformations</th>
<th>Peer Reviewer’s Transformations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Violet would say sadly like maybe Violet and supervisor touched upon it.</td>
<td>Violet (CT) states that race/ethnicity was not a priority in supervision.</td>
<td>CTs are saddened when race/ethnicity is barely discussed in supervision.</td>
</tr>
<tr>
<td>2. Violet thinks that there were probably issues that she did not attend to</td>
<td>Violet (CT) states that she missed concerns associated with race/ethnicity because she did not address the topic.</td>
<td>Trainee states that it is likely she overlooked cultural issues that may have existed in her work with her client.</td>
</tr>
<tr>
<td>3. Violet thinks that at the point in her career kind of the inexperience and the kind of sensitivity about wanting to go there and push too far and say something wrong or be insensitivity or something like that prevented her to become thoroughly exploring that with her clients</td>
<td>Violet (CT) states that she did not explore cultural differences with the client due to inexperience and not wanting clients to perceive that she was insensitive if she “pushed too far or say something wrong.”</td>
<td>Trainee states that fear of offending the client and lack of experience in addressing potential cultural issues prevented her from exploring these issues with her clients.</td>
</tr>
</tbody>
</table>
Ultimately there were several meaning units that were transformed for each participant. In order to identify meaning units, the significant statements were re-read while still assuming a phenomenological reduction attitude and while being mindful that statements profess to be an experience of mono-racial supervision. As stated by Giorgi (2009), phenomenological researchers are seeking the structure of the phenomenon for all participants, not the individualized experience of each. Therefore, each meaning unit is integrated for the insight or implication that it has for the experience of the phenomenon (Giorgi, 2009). In determining meaning units, I asked myself two questions: (a) How is the statement essential to better understand the experience of mono-racial supervision of cross-racial/ethnic counseling? and (b) Can the statement be clustered into a structural or textural description of the experience? I viewed each meaning unit as having significance and provided a representation of the experience of participating in mono-racial supervision.

There is no definitive number of attempts at transforming significant statements into meaning units. Meaning units is usually not determined on the first attempt (Giorgi, 2009). Meaning units were determined with at least two attempts while others required several attempts of transformation. The determination was made by reviewing each statement individually and transforming the statement as many times until the best determination was made. As suggested by Giorgi (2009), attempts at determine meaning units were logged separately from the significant statements. I maintained a separate Word document with attempts at determining each meaning unit. In the current study, there were at least two attempts needed to determine all meaning units. I decided on the
meaning unit that best described each participant’s experience of the phenomenon. After determining meaning units, the meaning units were categorized as either *structural* or *textural descriptions*, Step 4 of the data analysis process.

**Step 4: Categorizing Meaning Units**

Step 4 of the data analysis process was to place meaning units into two categories: (1) *textural* descriptions or what happened, and (2) *structural* descriptions or how it happened. Categorizing the meaning units based on textural descriptions was intended to answer one of the research questions: “What are the perceptions and experiences of White CTs and White supervisors when the clients’ racial/ethnic identity differs?” The categorization of meaning units based on structural descriptions answered the second research question: “How have the experiences of the supervision of cross-racial/ethnic counseling impacted the practice of counselors/trainees/supervisors?”

When reviewing meaning units I implemented imaginative variation in order to specify which category the meaning unit would be assigned to. I read each meaning unit and asked myself “does this meaning unit describe the ‘what’ or the ‘how’ the participant experienced the phenomenon?” Table 9 is an example of how Violet’s meaning units were categorized into either textural or structural descriptions. Table 9 also serves as an illustration of how all meaning units were placed into either textural or structural categories. For example, I read Violet’s meaning unit ‘Violet (CT) states that race/ethnicity was not a priority in supervision’ and I asked myself does this meaning unit identify as a textural or a structural description? I determined that this meaning unit was a
textural description because it described ‘what’ Violet experienced. I completed this task for each meaning unit.

Table 9

*Illustration of Categorizing Textural and Structural Descriptions*

<table>
<thead>
<tr>
<th>Textural: What</th>
<th>Structural: How</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violet (CT) states that race/ethnicity was not a priority in supervision.</td>
<td>Violet (CT) states that sexual orientation was “easier to attend to” because it is more socially acceptable. Violet (CT) states that her supervisor could have encouraged her.</td>
</tr>
<tr>
<td>Violet (CT) states that as a result of not discussing race/ethnicity in-depth in supervision she did not address the topic with the client.</td>
<td>Violet (CT) states that she “missed concerns” associated with race/ethnicity because she did not address the topic. Violet (CT) states that she did not explore cultural differences with the client due to inexperience and not wanting clients to perceive that she was insensitive if she “pushed too far or say something wrong.”</td>
</tr>
<tr>
<td>Violet’s (CT) practice as a CT/counselor was affected by this supervision experience.</td>
<td>Violet (CT) states she wants to learn from the client even if what she learns is uncomfortable. Violet (CT) states that if she had a discussion in supervision regarding race/ethnicity she would have been more comfortable having the discussion in session with clients.</td>
</tr>
</tbody>
</table>

Verbatim quotes were also infused into descriptions to further describe the experience. The identification of page and line numbers helped to go back to the transcript and abstract the participant’s verbatim descriptions. The next step, Step 5, was *synthesizing textural and structural descriptions*. 
Step 5: Synthesizing Textural-Structural Descriptions

Step 5 of the data analysis process involved synthesizing textural-structural descriptions together to create a composite description. After categorizing the meaning units into textural or structural descriptions I then synthesized or matched the ‘how’ descriptions with the ‘what’ descriptions. I reviewed the textural descriptions and assessing “If this is ‘what’ the participant experienced then I need to determine ‘how’ the participant experienced what he or she described.” Table 10 provides an illustration of the synthesis of Violet’s first composite textural-structural descriptions.

Table 10

Illustration of Synthesizing Textural and Structural Descriptions

1. Violet (CT) states that race/ethnicity was not a priority in supervision because sexual orientation appeared “easier to attend to” as a result of sexual orientation being more socially acceptable.

I determined that one of Violet’s textural or ‘what’ descriptions of her experience was that race/ethnicity was not made a priority in supervision. I then reviewed the structural descriptions and determined ‘how’ Violet experienced race/ethnicity not being made a priority. Again using imaginative variation, I determined that the best description of Violet’s experience of ‘how’ race/ethnicity was not made a priority in supervision was Violet’s structural description that “sexual orientation appeared to be easier to attend to in supervision because it is more socially acceptable.” I then synthesized the descriptions in order to create a composite description. When synthesizing the textural and structural descriptions I moved back and forth between textural descriptions and structural
descriptions in order to determine the best composite description. The next step, Step 6, was to identify *preliminary themes* derived from each composite description.

**Step 6: Identifying Preliminary Themes**

Identifying preliminary themes was Step 6 in the data analysis process. In order to identify preliminary themes, I went back to the participants’ composite textural-structural descriptions and identified key words or phrases pertinent to the phenomenon. I determined phrases or keywords that were relevant to the current study. Once the keywords or phrases were identified, I used the keywords or phrases as the titles of the preliminary themes. I created a table with a column for each preliminary theme. For example, Violet’s description was that race/ethnicity was not a priority in supervision because sexual orientation appeared “easier to attend to” as a result of sexual orientation being more socially acceptable. Table 11 is an illustration of some preliminary themes with Violet’s composite descriptions listed underneath the preliminary themes. I identified the phrase “race/ethnicity was not a priority” as a preliminary theme because the phrase highlighted pertinent information for the current study. There were 4 tasks involved in identifying preliminary themes:

1. Again I started at the first participant’s composite textural-structural descriptions and identified keywords or phrases.

2. The identified keywords or phrases were then made the title of the preliminary theme and placed in columns. The preliminary theme was underlined and placed at the top of each column in a Word document.
Table 11

*Illustration of Preliminary Themes*

<table>
<thead>
<tr>
<th>Race/Ethnicity not a priority</th>
<th>Client Perception</th>
<th>Effect of Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violet (CT) states that race/ethnicity was not a priority in supervision because sexual orientation appeared “easier to attend to” as a result of sexual orientation being more socially acceptable. Violet (CT) states that as a result of race/ethnicity not being made a priority in supervision and her inexperience working with minority clients she may have “missed” client concerns related to culture.</td>
<td>Violet (CT) did not want her clients to perceive her as insensitive if she “pushed too far” or said something “wrong.” Therefore she did not address race/ethnicity differences with the clients.</td>
<td>Violet’s (CT) practice as a CT/counselor was affected by this supervision experience because now she is aware that if she has supervision discussions regarding race/ethnicity she would be more comfortable addressing cultural differences in session with clients.</td>
</tr>
</tbody>
</table>

3. I then placed composite descriptions in the column under the identified preliminary theme. I completed the first participant’s preliminary themes and went on to repeat the same steps for each participant.

4. When new keywords or phrases were identified a new column was made. This process involved me going back and forth between composite descriptions and already identified preliminary themes to determine if the composite description matched an already identified preliminary theme or if a new preliminary theme needed to be
determined. There were a total of 20 preliminary themes. All composite descriptions were categorized based on the preliminary theme that captured the descriptions.

The list of preliminary themes (see Table 12) was exhausted when all participant descriptions were categorized and no new keywords or phrases were identified. There was no set number of participant descriptions listed under each preliminary theme. For example, the preliminary theme of “Supervisor level of Education/Training/Experience” had nine participant descriptions pertaining to the preliminary theme. In contrast, the preliminary theme of “Cultural Norms vs. Mental Health Concerns” only had two participant descriptions that pertained to the preliminary theme. All preliminary themes

Table 12

List of Preliminary Themes

1. Race/Ethnicity not a Priority
2. Client Perception
3. Affect on Practice
4. Preparation
5. Assignment of Clients
6. Observation
7. Addressing Differences with Clients
8. Supervisory Relationship
9. Differences affect client treatment
10. Client response
11. Supposed client perception
12. Stereotypes
13. Supervisor level of Education/Training/Experience
14. Supervisor Response
15. CT Needs
16. No Client Discussion
17. Resources
18. Initiation of Supervision Discussion
19. Supervision Discussions
20. Cultural Norms vs. Mental Health Concerns
were pertinent to the current study regardless of the number of participant descriptions that were identified for each preliminary theme. Once all preliminary themes were identified the preliminary synthesized to identify the core themes of the current study. The next step, Step 7 is the identification of core themes.

**Step 7: Identifying Core Themes**

All preliminary themes were synthesized using imaginative variation to identify common core themes. Giorgi (2009) suggested that imaginative variation is used to identify commonalities across participants. Participants in the current study experienced the phenomenon of mono-racial supervision of cross-racial counseling in a variety of ways. The various experiences are captured in the presentation of core themes.

All preliminary themes were matched based on commonalities of the lived experience. This section elaborates on the core themes that were identified in the synthesis of preliminary themes. The identification of core themes was guided by the research questions: (a) “What are the perceptions and experiences of White CTs and White supervisors when the clients’ racial/ethnic identity differs?” and (b) “How have the experiences of the supervision of cross-racial/ethnic counseling impacted the practice of counselors/trainees/supervisors?” Similar to determining meaning units, there were several attempts at identifying core themes.

I ultimately identified each theme that was essential to the participants’ experience of the mono-racial supervision of cross-racial/ethnic counseling. I chose themes that involved the essence of participants’ experiences which included themes that were common across participants and themes that were pertinent to the current study but
weren’t necessarily common. This section introduces the five core themes and several sub themes. Sub-themes were derived from clusters of participants’ experiences that were not present in all participants’ account but further described the essence of the experience of an already existing theme. The five core themes:

1. When discussions of race/ethnicity occur in mono-racial supervision, awareness of cultural influence is raised and needs are identified.

2. When race/ethnicity is not made a priority in mono-racial supervision of cross-racial/ethnic counseling, needs of CTs are not met and other cultural influences appear more important.

3. CTs participating in mono-racial supervision have concerns about (a) their ability to address differences with clients, (b) client perceptions of working with a White CT, and (c) the supervisor’s response.

4. Supervisors conducting mono-racial supervision focus on (a) observing CTs, (b) the feedback and (c) directives he or she provides CTs.

5. Supervisors and CTs engaged in mono-racial supervision have experiences that affect their practice either positively or negatively.

The final section of this chapter describes each core theme in detail. This section more fully elaborates on the themes identified in the synthesis of descriptions, as well as provides support from participant accounts. Through imaginative variation, I rewrote and consolidated commonalities of participants’ descriptions which assisted in the identification of the five core themes and sub-themes. As discussed earlier in this chapter,
I consulted with the peer reviewer to determine themes. The peer reviewer assisted in the naming of themes and the identification of several sub-themes.

**Core Themes**

**Core Theme 1**

*When discussions of race/ethnicity occur in mono-racial supervision awareness of cultural influence is raised and needs are identified.*

Participants empathized that as a result of discussing race/ethnicity in their supervision experiences, CTs gained a sense of awareness of multicultural concerns and were also able to discuss differences in session with clients. As discussed in Chapter I, Dickson and Jepsen (2007) found that CTs reported a higher level of multicultural knowledge and awareness when multicultural issues were discussed in supervision. The current study’s first research question pertained to how participants’ experienced mono-racial supervision of cross-racial counseling. After completing the steps of data analysis, Core Theme 1 was consistent with the findings of the Dickson and Jepsen’s (2007) study in that participants reflected an increased awareness when race/ethnicity was discussed in supervision.

Addie (S) reflected that the topic of race/ethnicity was discussed when she thought that her CT’s client presented with symptoms that were cultural in nature and not so much mental health related. Addie (S) described that when she initiated the discussion in supervision, her CT’s response was, “Oh I didn’t think of it from that point of view.” By having the discussion in supervision, Addie (S) was able to raise her CT’s awareness of the client’s cultural concerns. Several sub-themes emerged surrounding having
discussions regarding race/ethnicity in supervision. The next section presents the sub-theme of preparation including supervisor participants’ perceptions of their CTs' preparation for practicum as well as CTs’ accounts of their own preparation to work with minority clients. The subthemes all had an effect on discussing race/ethnicity in supervision. The sub-themes were: preparation, exploration of resources, initiation of the discussion, and impact on the supervisory relationship.

**Sub-theme 1.1. Preparation.** As discussed in Chapter I, Jordan and Kelly (2005) found that beginning counselors worried about their general preparedness as counselors. In preparing to be a licensed counselor counseling students complete several didactic courses prior to entering practicum. All CT participants reported having completed a multicultural course prior to being enrolled in practicum. In fact, Susan (S) described that in “recent years” she has noticed that CT’s appear to have “good multicultural training prior to participating in practicum.” Susan (S) reflected that CTs appear to be more prepared to work with minority clients as evidenced by supervision discussions she had regarding race/ethnicity.

Although Susan (S) thought that CTs were prepared to work with minority clients, Alexandra (CT) had a different perception of being prepared in didactic courses. Alexandra (CT) felt that multicultural concerns were discussed in didactic classes but there “wasn’t a ‘how’ or ‘when’” to address or discuss cultural differences. Similarly, James (S) reflected that CT’s learn a great deal about diversity in didactic courses but “do not remember when they start work with clients.” James (S) further expressed that he wants CTs to have a “wide experience” in practicum, but he noted that it is hard when
 clients are randomly assigned. James’ perception of CTs forgetting concepts learned in didactic courses was confirmed with Alexandra’s (CT) account of being unprepared to work with a randomly assigned client.

The random assignment of clients in practicum affects CTs being prepared to work with minority clients. Alexandra’s (CT) expression of discussing race/ethnicity in supervision regarding a client she was unprepared to work with happened in the following way:

I brought it up in supervision because it was not something that I was anticipating for the day so I wasn’t even ready to see the client… the situation that occurred was that he didn’t know the definitions of the words… on the information sheet for sexual orientation he didn’t know what those meant… in supervision actually we just talked a lot about how we can be aware of it in the future.

Alexandra’s account did not mention anything about what she’d already learned about working with Asian clients, and when she was in session, she felt that she “could have been more tactful had I’d been prepared.” Alexandra further reflected that had she been more prepared, she would have “done some research prior to seeing the client.”

In the supervision discussions regarding race/ethnicity participants in the current study expressed the use of resources. The exploration of resources is the second sub-theme of Core Theme 1.

Sub-theme 1.2. Exploration of resources. Within mono-racial supervision of cross-racial/ethnic counseling several participants identified the need to explore resources
to assist in work with minority clients. Colin (S) described his CT’s need to use the client as a resource:

We frequently had the discussion associated to using the client as a resource for recognizing some variations… in particular the one client who was approximately six years old…and she was living with her grandmother and so there was some discussion about how grandmother may have identified more so with one group where the client at that age may have had less of a cultural identity… and so our discussions…we had that I recall included each member as a consultant basically and understanding what cultural aspects might be important to them.

Similarly, James (S) also described advising his CT to use the client as a resource:

…because on one hand I’m like listen carefully and when you don’t understand ask questions and on the other hand not a whole lot of preparation in some respects for instance you don’t have to change yourself…a lot of it came to getting them to sort of relax and get to a point where you can do some research on this…ask a lot of questions…get the person to help you understand…if you don’t understand get them to help you understand.

In Shirley’s (CT) account she described working with an Asian-American client who was born in the United States and her client’s parents were “foreign born”. Shirley expressed that she was unfamiliar with Asian culture and so was her client. Shirley reflected on her supervision discussion regarding the client:

…we are going to have to learn this together so we approached that together and came up with resources for her to learn more about her parents’ culture so that she
was more sensitive to their [her parents] expectations… what are some of the local resources and if there not some local resources and if there aren’t some local resources what are some of the internet or library resources.

While the exploration of resources appeared to be important to participants the initiation of the discussion of race/ethnicity was also salient.

**Sub-theme 1.3. Initiation of discussion.** Consistent with ACA’s Code of Ethics (2014) counselor supervisors should address, the role of multiculturalism/diversity in the supervisory relationship supervisor participants in the current study addressed race/ethnicity in supervision. Participants who experienced discussions of race/ethnicity in supervision indicated how the discussion was initiated. For example, Addie (S) described her interpretation of her CT’s hesitation in initiating a discussion regarding race/ethnicity: “the trainee did not have questions that she brought into supervision…she is still fairly new.” As a result, Addie (S) reflected that she initiated the discussion of race/ethnicity:

> It has come up when I’ve raised the issue due to the behaviors that weren’t severe but I think that could have been seen as symptoms of a mental health issue and I was concerned that they were really more cultural norms…and so being careful not to pathologize something simply because it is different than what her experience has been.

Addie (S) described the CT was receptive to the initiation of the discussion and “very open to discussing pathology versus cultural norms.” Similarly, in Susan’s (S) supervision experience, her CT did not initiate the topic of race/ethnicity either. Susan
described that she initiated the discussion as a result of participating in the current study.
She stated “…no not until I spoke with her more in depth because I knew you and I
would be talking.”

James (S) reflected an opposite supervision experience when his CT initiated the
discussion:

…it was just right from the start ‘ah oh my gosh I think I have a Muslim woman
or something like that where she wears the Niqab…what do I need
to know…what have I got to do differently?’

James (S) described how the introduction of this client enabled the CT to discuss other
concerns related to cultural influences.

**Summary of Core Theme 1.** Core Theme 1 described how participants
interpreted having discussions in supervision regarding race/ethnicity. Supervision
discussions raised awareness of CT’s preparation needs prior to and while in supervision.
Supervision discussions also explored using the client as resource and the exploration of
local and internet resources. According to participant’s accounts, supervisor’s initiated
discussions regarding race/ethnicity and rarely did CT’s initiate the discussion.

**Core Theme 2**

**When race/ethnicity is not made a priority in mono-racial supervision of
cross-racial/ethnic counseling, needs of CTs are not being met and other cultural
influences appear more important.**

Participants who experienced race/ethnicity not being made a priority in
supervision expressed that race/ethnicity did not appear to be a concern for the client. CT
participants determined that race/ethnicity was not a priority as a result of his/her supervisor minimally discussing the topic and/or focusing more on another cultural influence the supervisor perceived was impacting the client. Supervisor participants’ described similar experiences in identifying that their CTs’ clients appeared to have other cultural concerns that influenced their treatment.

Clare (CT) reflected that in her supervision experience, race/ethnicity was not made a priority because it was never addressed. As Clare (CT) described:

I don’t ever remember in supervision the supervisor ever bringing up race specifically and then talking about the race difference between myself and the client…so it’s never been…very overt… nobody has ever asked me ‘what do you think their experience is of having a White counselor?’…

Clare (CT) further reflected that she “thought a lot about” race/ethnicity differences because she worked with such a diverse clientele but never had a supervision discussion and attributed the lack of discussion to possible limitations. Clare (CT) described:

I think I would have liked to discuss it more but then I think I wonder about the limitations of a White supervisor talking to a White supervisee about the experiences of African-American clients… I wonder if they how much they could really provide or help me gain and so I don’t know…I don’t think that it is as readily acknowledged as it should be…and kind of looking at it from a client’s perspective and saying that every client comes with their own unique culture I think that that’s communicated but I don’t think that we investigate well what is
that culture for each client and race…I don’t think that the specificity for each
client is brought into counseling or in supervision.

Clare’s perception of the affects of not discussing race/ethnicity in supervision is further
discussed in Theme 3.

Three sub-themes were identified within Core Theme 2: non-existent or minimal supervision discussions, meeting CT needs, and other cultural influences were made a priority.

**Sub-theme 2.1. Non-existent or minimal supervision discussion.** Three participants’ described not having supervision discussions regarding race/ethnicity prior to participating in the current study. As mentioned earlier in the chapter, Susan (S) reflected not having supervision discussions with her CT until she was about to participate in the current study. Although Susan reported that her CT worked with clients who were different, racially and/or ethnically, Susan had not discussed the differences in supervision with her CT.

Similarly, both Melissa (CT) and Clare (CT) described experiencing no discussions of race/ethnicity in supervision. Clare (CT) reflected “no not that I can remember…In supervision, you talk about…kind of the context of your client” as it relates to demographics but not regarding any implications that cultural influences may have in counseling or supervision. Melissa (CT) also expressed “no they never did” regarding her supervisor not having discussions regarding race/ethnicity.

Although some participants reflected experiencing not discussing race/ethnicity in supervision, there were some participants’ who reflected experiencing at least minimal
discussions in supervision. Violet (CT) described discussing a client who struggled with concentrating on homework at home because of cultural concerns: “…after the counseling session when he revealed that to us we immediately sat down and talked about, you know, like what’s going on to approach it with mom…” Violet reported that her supervisor “somewhat” acknowledged race/ethnicity, explaining that her supervisor knew more about the “small town culture” and did not have a very broad few. Violet described providing more information about minority clients in supervision than her supervisor did.

Violet’s (CT) account of her supervision experience was that race/ethnicity was minimally discussed. She stated: “…Race, ethnicity, again, it was maybe barely touched upon but it was never a focus of supervision…” She reported that her supervisor’s focus was not on race/ethnicity at all. Violet described it as being “put on the back burner,” stating that: “I guess we are still tip-toeing around things they see it as easier and that’s unfortunate.” Jane (CT) reported having minimal discussions in supervision due to her perception that her supervisor lacked knowledge about minorities. Jane (CT) expressed that she would limit the conversation. She stated: “I would roll my eyes at her and talk to my colleagues…” Jane preferred to not discuss race/ethnicity with her supervisor, because she did not believe that her supervisor was capable of assisting with working with minorities. She reported that she would rather discuss her concerns with fellow counseling students than with her supervisor due to her supervisor’s lack of knowledge.

Sub-theme 2.2. Other cultural influences are made a priority. Amber (S) reflected that race/ethnicity was not a priority in supervision. She expressed that it was
“more the idea of culture” rather than race/ethnicity. Amber reported that she and the CT only discussed where the client came from and their “environment.” Amber reported that geographic location appeared to be a more relevant concern for the clients the CT worked with than race/ethnicity. She reported that they focused on “…where they came from or the environment that they grew up in”. Amber expressed that the “culture” of the town they were in appeared to be more relevant for clients than race/ethnicity.

Religion was a more relevant cultural influence than race/ethnicity in Joyce’s (S) supervision experience. Joyce (S) reflected:

I would say I’m thinking of one particular person [CT] who had a very strong Catholic background…she had particularly more so understanding the religious beliefs…I think she had somebody who was a seven day Adventist…and so there were some religious and cultural things that came up for this particular client the person I’m supervising was having difficulties with.

Joyce (S) further reflected that their supervision discussions surrounded the CT wanting to be respectful of the client’s religious beliefs but not “knowing how to do so appropriately.”

Socioeconomic status (SES) was another relevant concern reported. Shirley (CT) expressed that she felt SES was more important for the clients served. She stated: “I really think the biggest difference is the socio economic expectations…” Shirley reported that she did not feel that race/ethnicity was as important as SES. From Colin’s (S) account, he appeared to be in agreement with Shirley. Colin described discussing not just race/ethnicity, “…but more the culture of poverty.” He discussed that it appeared
that poverty was more of a concern that the clients his CT worked with than race/ethnicity.

Michelle (S) described a very similar experience: “I had more of an issue supervising people…I want to say less with culture and ethnicity and race…more with socio economic.” She reported that, oftentimes, the CT was from a different SES background than most of her clients. Michelle expressed that the differences in SES was something she processed in supervision with the CT, stating that it appeared to be more of a relevant concern than race/ethnicity. Although Susan reported not discussing race/ethnicity prior to her participation in the current study, she reported that SES was a concern that her CT brought into supervision: “She said that the most significant difference is socioeconomic, and she sees that as more significant than gender or race.” She reported that the CT expressed that she could relate with the client regarding gender and race; therefore, SES was the biggest difference that posed a concern for the CT.

The last difference between CTs and their clients reported as more relevant than race/ethnicity was sexual orientation. Tiger (CT) described how sexual orientation was more relevant. “It was much more focused on that…much more…we would delve into this and understand and talk about it…” Tiger reported that she felt that her supervisor’s focus was more on sexual identity because it appeared to be “easier” to discuss. She reported that she felt that sexual orientation was more “socially acceptable” to discuss; therefore, it was simpler to acknowledge.

Tiger (CT) stated “sexual orientation was much more focused on.” She described “delving into” the topic of sexual orientation but not race/ethnicity. Tiger speculated that
if she had been encouraged by her supervisor to discuss race/ethnicity, as opposed to sexual orientation, she would have felt more comfortable with addressing race/ethnicity with her clients. She believed that society, and her supervisor, were still, unfortunately, “tip toeing” around race/ethnicity.

**Sub-theme 2.3. Missing counselor trainee’s needs.** As a result of race/ethnicity not being made a priority in supervision, some CTs’ needs were missed. CT participants indicated that they needed specific assistance in supervision when working with minority clients. As discussed in sub-theme 2.1., Melissa (CT) did not experience discussing race/ethnicity in supervision nor did she perceive that there was a reason to discuss race/ethnicity differences with clients. She reflected:

> I think I would need supervision in certain…situations…if I didn’t know much about… if they came in wanting to know more about their race or if it was…affecting their problem…more then I think I would need more supervision on it.

Violet (CT) also reflected that her need to feel comfortable addressing race/ethnicity differences with clients was missed as a result of having minimal discussion in supervision. She reflected:

> I think that if we were really exploring ethnicity more in supervision I would have felt more comfortable talking about it… I would have had the language that I needed and I would have had that push to suck it up and talk about it and see how it goes.
If Violet was guided to discuss race/ethnicity by her supervisor it appears that she would have addressed differences with clients.

**Summary of Core Theme 2.** Some participants described that race/ethnicity was not made a priority in their supervision experiences. Participants reflected that supervision discussions regarding race/ethnicity were either non-existent, minimal, or other cultural influences were made a priority. As a result of race/ethnicity not being made a priority, CT participants expressed that some of their needs were missed.

**Core Theme 3**

*CTs participating in mono-racial supervision have concerns about (a) their ability to address differences with clients, (b) client perceptions of working with a White CT, and (c) the supervisor’s response.*

In Core Themes 1 and 2, participants reflected on supervision experiences when race/ethnicity was discussed or not made a priority. All supervisor and CT participant accounts of supervision experiences had implications for cross-racial/ethnic counseling. This section on Core Theme 3 presents CT participant descriptions of their ability to address race/ethnicity in session with clients, CT participants’ concerns about client perceptions of working with a White counselor, and CT’s description of their supervisor’s response to addressing race/ethnicity in supervision.

All CT participants described working with minority clients in some capacity while in practicum. Some participants described only completing an intake assessment with a minority client while others reflected on ongoing counseling with minority clients. For example, Alexandra’s (CT) experience of working with only one minority client
during an intake session was similar to George’s (S) experience working with a minority client for several sessions in that they both reported that the client was receptive to discussing cultural differences in session. Regardless of the amount of time spent working with minority clients CT’s reported their ability to address race/ethnicity differences in session with client different. Supervision played a large role in the CTs’ ability to have discussions with clients.

**Sub-theme 3.1. Ability to address differences with clients.** Several participants’ related this supervision experiences to the ability to address differences in session with clients. As described in sub-theme 2.1., Violet’s (CT) account of supervision was that race/ethnicity was minimally discussed. As a result Violet (CT) reflected that she did not address racial/ethnicity differences in session with clients. She expressed:

> I feel like I probably missed some angles that I could have maybe learned more about because I feel…that I pull a lot from my client…and due to my hesitation I never really asked those questions I definitely think that I missed a huge learning experience and I think there was something I could have been encouraged to say with my clients.

Violet (CT) further reflected in her follow-up interview that there is “a color blind mentality so individuals don’t address it because it doesn’t matter when in fact it does matter because the research says that it does.” Both Shirley (CT) and Melissa (CT) expressed that they were not encouraged in supervision to address race/ethnicity in session with their clients. Participants’ also reflected that they did not perceive that the
difference in race between them and their clients had any effect on the counseling relationship. Shirley (CT) expressed that she did not think race “played a big part”, so she did not address racial differences with clients. Similarly, Melissa (CT) reflected “the most part it was like totally normal…there didn’t seem to be any strong differences… affecting the counseling process.” Melissa further reflected that there “never seemed to be a reason to bring it up.”

Although there were some supervision experiences that influenced CTs to not address race/ethnicity in session with clients, there were some accounts of CTs addressing cultural differences with clients. Both supervisor and CT participants’ expressed that race/ethnicity was addressed early on in session with clients. George (CT) reflected on asking his client what her thoughts were regarding working with a White counselor:

that was in the beginning of our sessions…I asked her a question at the end of our first session….what she thought of having a counselor who is a White male and she is a Black female…she said and I quote “it’s fine my best friend is a White guy.”

George (CT) further reflected that his supervisor “advised me to address that issue.” Alexandra (CT) expressed:

So pointing out the differences in the beginning would be definitely helpful…it was kind of a scary thing to do especially in the information gathering process…but when I tried it with another client he…responded well to it…it wasn’t as scary as I thought it would be.
Alexandra (CT) reflected that there were “absolutely times when I pointed out the racial differences” and attributed her ability to do so to “past experiences. She expressed:

I grew up in the inner-city…I went to a predominately African-American high school so for me talking about race was almost second nature…but I’m not going to say I felt completely comfortable with it…sometimes I found myself having to be defensive…almost to legitimize myself almost to say look I’m not an African-American woman…I’ll never understand what your experiencing fully but…I would at least try to recognize that there is some privileges there.

Supervisor participants’ also expressed that CTs had the ability to address race/ethnicity in session with clients. Addie (S) reflected that her CTs addressed cultural differences at the assessment with clients. She reflected:

…we ask ‘Is this something I should be aware of or anything you would like me to be sensitive to or…awareness. That gives them the opportunity to say ‘well you may not understand this to that’…at least it gives them the opportunity to address something if they wanted to.

James (S) also expressed that her CT discussed race/ethnicity early on in session with clients. He reflected that his CT “did not know how” to address race/ethnicity differences in the first session so after supervision discussions “by the second or third session they were doing that.” He further reflected that in supervision, his CT expressed that the CT reported that after addressing the difference in session with the client it “wasn’t as big of a deal as she thought.”
Sub-theme 3.2. Counselor trainees’ perception of client response. Several CT participants expressed concern regarding client’s response to working with and/or addressing racial/ethnic differences with a White CT. Although the focus of the current study did not include the client’s experience, the CTs’ perception of the client’s response was a salient theme for CTs engaged in mono-racial supervision of cross-racial counseling. Even though Jane’s (CT) account of supervision involved minimal discussion regarding race/ethnicity, she expressed a concern about how the client perceived her as a White CT. Jane (CT) reflected that in supervision she felt that her supervisor displayed bias against Black people. She expressed:

…my supervisor was a Caucasian woman who did not have the same experiences that I had working with other races and at times it was challenging because I think that she would over generalize…saying things like ‘Well, that’s how African-Americans are…that’s how African-Americans do things’.

Jane further reflected “I never want my bias to influence clients…” Violet (CT) too reflected having minimal supervision discussions regarding race/ethnicity and a concern about client’s response to working with her. She articulated: “I didn’t want to like say something wrong and have them be like ‘oh well we don’t like her because she’s insensitive…or was…offensive to us.’” Because both Jane and Violet had minimal discussion, neither was able to fully explore their perception of clients’ response to working with a White CT. Tiger’s (CT) was different in that she expressed being able to discuss her perception of her client’s response while in supervision:
I mean there is a slight uncomfortableness…because I don’t want to come off ignorant or prejudice which I’m not…just depending on the…person you’re talking to might be more sensitive about it then you’d expect them to be so it’s just trying to find that level of comfort with them to let them know you know it doesn’t bother me I can meet you on your level…

She further reflected on the client’s response to addressing differences in session
“yeah…absolutely I think there was a positive response from the child and the mother.”

James’ (S) account of supervision was that he discussed his client’s reaction to addressing race/ethnicity. He articulated “the client seemed to be very warm and receptive to…discussing their issues and having that counseling experience.”

Sub-theme 3.3. Counselor trainees’ supervisor response. Although only one participant expressed concern regarding the power differential between supervisor and CT, it is a salient aspect of the supervision experience. Jane (CT) reflected:

For me, with the power difference with her being my clinical supervisor there were times that were challenging to speak up and say where I differ in opinion basically. With this supervisor I feel like that if I would have pointed out her bias that she could have potentially may have been…I don’t know she just wasn’t as competent in her multicultural competence as I would have liked her to have been. I don’t think that she would have taken that well. I thought that she would have become defensive.
Jane further reflected that as a result of her supervisor not being “as competent” as she would have liked. This experience was directly related to the supervisory relationship and the effect that the hierarchy has on the relationship.

**Summary of Core Theme 3.** CTs reflected on their ability to address race/ethnicity in supervision. CTs also reflected on being concerned about how minority clients’ perceived their counseling experience with a White counselor. With race/ethnicity already being a difficult dialogue, CTs reported being unsure of their supervisors’ response regarding race/ethnicity and are often hesitant in discussing race/ethnicity in supervision. The next section describes salient aspects of supervision related to supervisors.

**Core Theme 4**

**Supervisors conducting mono-racial supervision focus on (a) observing CTs, (b) feedback provided to the CT and (c) directives he or she provides CTs.**

This core theme relates to the study’s first research question which asks how participants experience mono-racial supervision of cross-racial counseling. Supervisor participants referred to their observations of CTs and the feedback provided to CTs during supervision. This section begins with supervisors’ reflections of their observations of CTs working with minority clients.

**Sub-theme 4.1. Supervisors’ observations of counselor trainees.** As mentioned in Chapter I, CACREP accredited institutions use audio/video recordings as a way to observe CT’s work with clients. Although the current study did not ask a question regarding how CTs were observed, three participants eluded to observing CTs in practice
with clients. Colin, James and Susan all reflected on observing their CTs work with minority clients. Colin (S) reflected:

…so there appeared to be an awareness where I would hear them ask how the client’s families did things for like traditional holidays…if those were things that were celebrated and so forth…it was more of an inquisition versus an expectation of “what are you doing?” it was more of “how are you doing…does your family practice anything around Halloween or another holiday?”…

Colin (S) did not articulate exactly how he would “hear” the CT ask the client questions but through imaginative variation the researcher attributed his “hearing” to some sort of observation either audio/video or live observation. Similarly, James (S) reflected on CT’s supervision discussions transferred to counseling sessions. He stated:

If anything I saw a lot of attempts…more than anything I saw kind of similar kind of counseling and I saw them come back with more questions…a lot of it came to getting them to sort of relax and get to a point where you can do some research on this…ask a lot of questions.

Again, although James did not articulate how he “saw” the CT work with clients, the researcher attributed his “seeing” to observation of either video/audio recording or possibly live sessions. Lastly, Susan (S) reflected on observing client behavior which prompted Susan to have a supervision discussion with her CT. Susan stated “…it’s pretty complicated; the girl will wait like 30 minutes to answer her questions and she will look down and make really histrionic eye movements…” Just as with James and Colin, the researcher inferred that Susan was able to observe her CTs work with a client. Through
observation and supervision discussions, supervisor participants were able to provide CTs with feedback to assist CTs with counseling minority clients. The next salient aspect for supervisor participants was the feedback they provided to CTs during mono-racial supervision of cross-racial/ethnic counseling.

**Sub-theme 4.2. Supervisors provide feedback to counselor trainees.** Several supervisor participants reflected that in their experience of mono-racial supervision of cross-racial/ethnic counseling they provided CTs with feedback regarding the CTs work with clients. James (S) reflected that when his CT was working with a Nigerian man, he advised the CT to gather more information from the client. He expressed: “I made some more kind of directives that she implemented relieving that tension and talking about how ‘oh I bet that’s difficult being at odds with you family and I’d like to help you more’.” James further articulated that his CT did not ask questions initially and that his prompt assisted the CT in processing the client’s needs in session.

Patrick (S) articulated that in his supervision experience he had to have discussions with CTs regarding the difference between cultural norms and mental health symptoms. If a CT is not familiar with specific race/ethnic norms, he or she can mistake cultural norms for mental health symptoms. Patrick (S) reflected:

I would say initially I would ask questions about ‘do you think this client’s issue is a product of their cultural background?’…or ‘do you think it’s a product of a specific disorder or issue they need to be working on?’ I think that more recently now she is bringing up those issues herself and thinking out loud…trying to sort…is this part of her depression or is it her cultural background.
Similarly, Addie’s (S) supervision experience involved determining if a client’s behaviors were cultural in nature or mental health symptoms. She reflected:

It has come up when I’ve raised the issue due to the behaviors that weren’t severe but I think that could have been seen as symptoms of a mental health issue and I was concerned that they were really more cultural norms…and so being careful not to pathologize something simply because it is different than what her experience has been. She was very open to discussing pathology vs. cultural norms.

**Summary of Core Theme 4.** All supervisor participants reflected on how their supervision experiences influenced their practice. Participants also reflected on training and experience that influenced their supervision experience and practice. Both influence on practice and experience answered the second research question for the current study. The next section discusses positive and negative effects on participants’ practice and experiences that affect participants’.

**Core Theme 5**

**Supervisors and CTs engaged in mono-racial supervision have experiences that affect their practice either positively or negatively.**

This core theme relates to the current study’s second question which asks how participants’ experiences of the supervision of cross-racial/ethnic counseling impacted their practice as counselors/trainees/supervisors. Some participants’ attributed their ability to discuss race/ethnicity in supervision to their training and experiences. Participants’ referred to both positive and negative experiences of mono-racial
supervision which helped them to adjust or enhance their practice as supervisor, CT or licensed counselor. As a result of several CT participants having already completed practicum and having licensure, the affect on their practice was also considered.

**Sub-theme 5.1. Training and counseling experience influence practice.** Prior multicultural training and experience counseling minority clients influences practice. Two CT participants expressed concerns regarding their supervisors’ multicultural training. Within Core Theme 2, both Jane (CT) and Tiger (CT) reflected on having minimal supervision discussions regarding race/ethnicity. Both CTs also alluded to the minimal discussion being a result of their supervisors’ lack of multicultural training or experiences. Jane (CT) expressed:

…a lot of clinical supervisors who are not at the doctoral level are not trained a lot and so they don’t know much about the different supervisory methods…and this supervisor frustrated me more than any supervisor I’ve ever had. This made me question ‘why are you working here with this population?’ She had a master’s degree in clinical mental health counseling and majority of clinical supervisors do not receive any formal training in supervision and I’m flabbergasted by that.

Similarly, Tiger (CT) reflected that her supervisor had not had much experience working with different races or ethnicities: “…I think her being in a small town dealing with 80-90% Caucasian she could be a little more aware so… it was just kind of like me pointing out certain things to her.”

Several supervisor participants attributed their ability to discuss race/ethnicity in supervision to their training and personal experiences. As opposed to Tiger, Danielle (S)
was surprised how unaware two of her CTs were of cultural differences and reflected
“...just my life experience...I guess I’ve had more than just the people I supervise.” She
articulated that her CTs had limited experience with different races/ethnicities which
affected their practice with minority clients.

Addie (S) reflected that “…I think the more that you do the work and the more
you’re exposed to different cultures, I think the more you become aware of...different
norms.” James (S) reflected on his personal experience that assists him in discussing
race/ethnicity in supervision. He articulated:

I’m a gay man and I came into the profession knowing…I mean having that
direct experience of being marginalized so that had already kind of sensitized me
to the whole concept…I’ve had the lovely experience of having had the
realization infused through my whole...PhD experience and I chaired some
groups around diversity…I worked on the first national conference on gender,
race and class so it’s really important part for me.

Jane’s (CT) experience of her master’s level supervisor not having a lot of
multicultural experience is consistent with James’ (S) account of having diversity
“infused” throughout his doctoral program. Joyce (S) attributed her ability to address
cultural issues in supervision to having a “great mentor” who was Black and assisted her
in working with clients when she started as a licensed counselor. She also attributes her
ability to assist clients to being familiar with the population having had her own
experience working with them.
Lastly, Patrick (S) attributed his ability to address cultural differences in supervision to “a fascination with different cultural perspectives” and his experience with diverse populations both personal and professional. Patrick (S) states that even with a diverse experience of his own he is not aware of ALL cultures and will explore other methods such as “talking to someone or do some research.”

Sub-theme 5.2. Supervision experiences influence practice. All participants reflected on how their supervision experiences, that were either positive or negative, affected their practice. Participants who reported a positive experience expressed that their supervision experience was helpful, and it was one that they could take into future supervision experiences. Participants who reported negative supervision experience expressed that they learned “what not to do” in future supervision sessions as well as counseling sessions. The next section introduces participants’ accounts of positive supervision experiences.

Positive experiences. All supervisor participants’ and four CT participants’ articulated having positive supervision experiences overall. Through imaginative variation, the researcher inferred that the experience was positive based on participants’ report that the supervision experience assisted with working with minority clients during and even after practicum. Colin (S) reflected that he thinks “…every time I have an experience with a supervisee there’s an impact there.” The positive supervision experiences influence on practice was matched across participants based on commonalities. Participants’ reflected an enhancement or increase in awareness from their supervision experience. Addie (S) reflected: “this supervision experience
reinforces the knowledge that I have and that we need to all be open-minded and...be aware...culturally aware....especially when making diagnosis.” Similarly, Susan (S) reflected:

… it has impacted me and being more aware of diversity… diversity and the wide range that is everywhere we are and also how we might identify with so many things that might not be just about gender or race.

Patrick (S) also reflected on having an awareness of the client’s needs. He articulated:

“so that sort of cultural stuff and...how does that pertain to their...family values.”

In addition to reflecting on an increase awareness of race/ethnicity differences, participants’ also reflected on identifying racially as White and the effects being White has in mono-racial supervision and cross-racial/ethnic counseling. James (S) reflected:

…although I work to remind them [CTs] that just because they are a European man and they are working with a European woman and she is from the same town that doesn’t make them the same it still makes it a diversity experience…I do like people to sit with people they think are very different from them for a while even if they look like them.

Danielle’s (S) account of her supervision experience also reminded her of how “removed” White people can be from racial/ethnic different people. She reflected:

… it’s opened my eyes to how White people are…it was really hard for me because…to understand people who haven’t been around different cultures how they do certain things so I have really make sure to pick up on that stuff to make
sure...helping them work through cultural issues...because I didn’t understand how badly they really didn’t get it.

Two supervisor participants reflected that their supervision experience prompted them to look inward and assess if they were assisting their CTs as best as they could regarding multicultural concerns in supervision. Joyce expressed:

I guess it’s easier to see when somebody else is having an issue but it’s not always easy to recognize when it’s yourself...so when issues came up for the person I was supervising it also made me look at myself and make sure that I was being as appropriate as I could and had the education that I needed...so kind of keeping myself in check as well.

Similarly, Michelle (S) reflected:

Well I think certainly with the variety of clients that we a seeing when a student presents a case and I haven’t had that experience we kind of process the case together and it is a good learning experience for me also....

In supervision, historically, CTs are assumed to be the only member of the dyad learning. In the current study, both parties reported learning in their supervision experiences. Shirley (CT) reflected that she has learned to “enhance the communication” between herself and her client as well as herself and her supervisor. She also reflected that she “absolutely” feels comfortable discussing race/ethnicity in supervision after this experience. A new level of comfortable was expressed by other participants as a result of their supervision experiences. Alexandra (CT) reflected:
I am now more comfortable taking cultural topics into supervision because I think that my supervisor and I have built a great relationship over the semester…sometimes you come in and your feeling really good about yourself and other times you come in and you’re not feeling very good about yourself but she is very like unconditional and accepting it’s like wherever you’re at it ok…so I just feel like she would be someone that I would absolutely talk with.

Mary (CT) reflected that she is definitely more prepared because of the “comfortable atmosphere” to discuss race/ethnicity differences in supervision and in client sessions. Additionally, Amber (S) expressed that she learned what questions she needs to ask CTs in supervision. She reflected:

I’m very much from the cognitive behavioral supervision…kind of view so I’ll ask a lot of questions…we’ll look at the case and talk about that and I’ll ask…‘how do you think their culture is influencing them and do you think that the culture is even influencing them?’…‘have you talked to them about that?’…if not you know these are things you need to do and then going a step forward how comfortable.

Lastly, George (CT) expressed that his experience impacted his practice in that it was different from research he was familiar with. George (CT) reflected:

I understand that there is a large amount of research out there that suggests clients of different cultural backgrounds with different counselors tend to not stay in counseling for very long…so my experience may actually be different than what
the research suggests…that’s also not discounting how the counselor addressed
the situation as well.

Several participants revealed negative supervision experiences and how those
experiences impacted their practice. The next section describes negative supervision
sessions and what participants learned in their experiences.

**Negative experiences.** As discussed in Core Theme 2, supervision discussions
regarding race/ethnicity were either non-existent or not a priority according to some
participants. Five participants further expressed what they learned or in essence what
they learned “not to do” during their supervision experiences. Jane (CT) reflected:

> Since my supervisor never discussed these things I wasn’t comfortable with
talking about race/ethnicity with her…and I think that caused a lack of trust in our
relationship and frankly I don’t think I respected any feedback that she gave me
clinically. It’s like when you grow up…you experience something bad and you
say I’m never going to do that again…I never want to be like her when I start
supervising…I definitely learned what not to do.

Interestingly, Violet (CT) also reflected on what she would do when she becomes a
supervisor:

> …definitely when race and ethnicity is a big part and due to lack of supervision I
got…and I think it may be hard for me to provide that supervision…because I
never got to see how that supervision and I am fairly post-modern in my
supervision…I’m very collaborative and so I will integrate that and do…a cultural
genogram with my supervisees.
Violet learned from her negative experience and suggested that when she becomes a supervisor that she will implement different interventions that will assist CTs in working with minority clients. Another area that Tiger (CT) acknowledged was that she perceived herself being more culturally competent than her supervisor. Tiger (CT) reflected “I would say on the cultural side, I probably do a little more of the problem solving…because I have a little more expertise in that area than she does…” Similarly, two other CT participants expressed that their supervisors were not culturally competent either. Regardless of Clare’s (CT) and Melissa’s (CT) perception of their supervisors’ cultural competence, both learned that they still need to have supervision discussions regarding cultural influences. Clare (CT) reflected:

…in moving forward I definitely want to have those conversations and to see what happens by having them…I also feel that I would now be more likely to bring that up in supervision. I guess an increase in awareness…that is something that you should be talking about and that it is important to talk about and how that can benefit clients.

Similarly, Melissa (CT) reflected:

I think I would need supervision in certain…situations…if I didn’t know much about…if they [client] came in wanting to know more about their race or if it was like affecting their like problem more then I think I would need more supervision on it.
As a result of Melissa’s negative supervision experience, she learned that when she is working with a client and she is not familiar with his or her cultural background, she will need more supervision.

**Summary of Core Theme 5.** Core Theme 5 relates to how supervisors’ and CTs’ experiences of mono-racial supervision of cross-racial/ethnic counseling affect their practice as supervisors/CTs/licensed counselors. Overwhelmingly, supervisor participants’ all reported positive experiences of supervision and reflected on aspects of their supervision experiences that they will apply to future supervision experiences. Some CT participants’ also expressed positive experiences in supervision while others expressed negative experiences. Participants with negative accounts of supervision were still able to learn from their experiences and learned aspects of which they will take into future supervision experiences.

**Chapter III Summary**

In the current study, the five core themes comprised the essence of the participants’ experiences of the supervision of cross-racial/ethnic counseling. Chapter III detailed the results of this phenomenological exploration of mono-racial supervision of cross-racial/ethnic counseling. Chapter IV includes a discussion of the implications of findings of the current study pertain to the counseling profession. Methodological Considerations of the study are also presented. Also discussed in the next chapter are the researcher’s reflections and considerations for future research.
CHAPTER IV

DISCUSSION

Introduction

The previous chapter presented the findings of the experiences of mono-racial supervision of cross-racial/ethnic counseling at CACREP accredited colleges/universities in the state of Ohio. In this final chapter, the findings of the current research study are reviewed and interpreted with previous literature relevant to the topic. The purpose of this chapter is to interpret the results through the following: (a) review of research questions and core themes, (b) methodological considerations, (c) results related to previous literature on cross-racial/ethnic counseling and supervision, (d) implications for practice, (e) future directions in research, (f) reflections of the researcher, and (g) summary.

Review of Research Questions and Core Themes

This phenomenological study explored the practicum supervision experiences of White counselor trainees (CT) and White supervisors when CTs worked with minority clients. The intent of the study was to understand CTs’ and supervisors’ feelings, thoughts, and behaviors associated with their experiences in mono-racial supervision of cross-racial/ethnic counseling and the affect on the counseling minority clients. There were two research questions guiding the current study: (1) What are the perceptions and experiences of White CTs and White supervisors when the clients’ racial/ethnic identity differs? and (2) How have the experiences of the supervision of cross-racial/ethnic counseling impacted the practice of counselors/trainees/supervisors?
The results of the current study sought to answer the research questions by providing a variety of perspectives regarding participants’ experiences and perceptions of mono-racial supervision of cross-racial/ethnic counseling.

As presented in Chapter III, five core themes of mono-racial supervision of cross-racial/ethnic counseling emerged from the data analysis: (1) When discussions of race/ethnicity occur in mono-racial supervision, awareness of cultural influence is raised and needs are identified, (2) When race/ethnicity is not made a priority in mono-racial supervision, needs of CTs are not met and other cultural influences appear more important, (3) CTs participating in mono-racial supervision have concerns about (a) their ability to address differences with clients, (b) client perceptions of working with a White CT, and (c) the supervisor’s response, (4) Supervisors conducting mono-racial supervision focus on (a) observing CTs, (b) the feedback and (c) directives he or she provides CTs, and (5) Supervisors and CTs engaged in mono-racial supervision have experiences that affect their practice either positively or negatively. In the following section, methodological considerations are discussed, especially as they relate to data collection; suggestions for future studies are presented.

**Methodological Considerations**

Exploring the perceptions and experiences of supervisors and CTs from a phenomenological approach provided an alternative to methodology implemented in previous investigations of the supervision of cross-racial/ethnic counseling. Previous research implemented a variety of research methods, such as consensual (combination of phenomenology, grounded theory, and comprehensive process analysis; Burkard et al.,
2006), open-ended questionnaire (Lee & Vennum, 2010; Toporek et al., 2004), and journal recordings (Howard et al., 2006). Also, most of the previous research explored the experiences of White CTs, not indicating the race of the supervisor (Howard et al., 2006; Jordan & Kelly, 2005).

The current study was purposefully limited to CT participants who met the following criteria: (a) identified racially as White, (b) are or were (within the last six months) a practicum counseling student who provided counseling to at least one client who differed in race/ethnicity, (c) were currently or within the last six months enrolled in a practicum class, and (d) received individual practicum supervision from a White supervisor. Supervisor participants met the following criteria: (a) identified racially as White, (b) held a minimum of a master’s degree, (c) were licensed as a Professional Counselor or Professional Clinical Counselor in the state of Ohio, (d) are or were (within the last six months) a practicum supervisor at a CACREP accredited State of Ohio counseling program with an on-campus counseling center, and (e) provided supervision to at least one White counseling student who provided counseling to at least one client who differed in race/ethnicity.

Although the intent of the current study was to examine the experiences of participants who met the criteria listed above, results were interpreted in light of further considerations related to methodology. The method in which interviews were conducted and the amount of time that allotted for interviews were aspects of the current study that I considered. Also, considering that supervisors and CTs were not from matched supervision dyads may have affected the experiences reported by the participants. Lastly,
the process of epoché and the use of a peer reviewer are aspects of the current study that I considered.

**Telephone interviews.** Although not by design, each round of interviews was conducted over the telephone because of participants’ geographic location or scheduling conveniences. Because most interviews occurred during the workday, many participants seemed to want to start the interviews quickly, which may have limited rapport building (Rubin & Rubin, 2005). In the current study, communication with participants occurred via email (e.g. scheduling interview times, providing demographic and consent forms, transcripts) prior to the initial interview and before the follow-up interview.

There are several considerations regarding conducting telephone interviews. In conducting only telephone interviews, body language could not be seen by the participants or me. Participant body cues were missed and the participants may have missed body cues that the researcher displayed as a result of only conducting telephone interviews. The researcher’s racial identification was not revealed, and this could have had an impact on the participants’ report of their perceptions and experiences. If the participants were aware of the researcher’s race, they may not have discussed aspects of the supervision experience in fear of potentially offending the researcher.

If the participants were not aware of the researcher’s race, it may have enabled the participants’ to reveal details of their supervision experience without fear of offending or being discriminatory against me. As mentioned earlier, the researcher attended one practicum class and one supervision class, and two participants emerged from those classes. Those two participants revealed that they were a part of the classes in the initial
contact email, so they were aware of the researcher’s race. Those participants were not asked how the researcher’s race affected their responses; it is possible that the researcher’s race could have had an effect on their responses. The researcher’s race was not revealed to the remaining 16 participants; therefore, it is unknown how the researcher’s racial identification as Black impacted 16 of the participants.

During telephone interviews participant self-report is another methodological consideration. The current study relied solely on participant self-report of their race, as well as counseling and supervision experiences. Although participants may have provided information that was favorable to them, there was no indication that the participants were dishonest. It is important to be mindful that participants may not share in interviews some experiences or aspects of their experiences that would reflect negatively on them.

**Time.** Participants were asked to block out one hour of their schedule in order to provide rapport building time and time for the actual interview. Initial interview time ranged from 15-70 minutes. The researcher found that some participants did not need the full hour whereas two of participants went slightly over an hour. When scheduling, many participants were surprised that one hour was needed and some struggled with finding a date to block out one entire hour. Rapport appeared to be developed with the majority of participants as evidenced by their willingness to answer questions and elaborate when prompted. The follow-up interview lasted 5-20 minutes.

As a result of the participant recruitment letter and consent form being reviewed prior to the study, some participant answers revealed that they spent some time thinking
about the current study prior to. For example, Susan (S) reported that the current study prompted her to have a conversation with her CT regarding her clients’ race/ethnicity. She reported that race/ethnicity had not been discussed prior to the current study. Susan stated, “…No, not until I spoke with her more in depth because I knew you and I would be talking to you.” This is an example of the leadership role supervisor’s play in supervision which is consistent with Core Theme 1 which discusses the initiation of discussions regarding race/ethnicity.

**Supervision dyad.** Because both supervisors and CTs were not from matched dyads, their reported experiences may have never been revealed to their respective CTs or supervisors. A CT participant may have not discussed his or her supervision experience with his or her supervisor and vice versa. Because participants’ identities were confidential participants may have enabled participants to discuss concerns or feelings regarding the supervision of cross-racial/ethnic counseling that were never revealed while in supervision.

Throughout supervising practicum students supervisors may have multiple CTs at one time. Supervisor participants in the current study were not limited to discussing only one CT. Supervisors were able to discuss an unlimited number of CTs. It is likely that supervisor participants may have chosen to discuss CTs that they supervised who needed more assistance regarding race/ethnicity differences with the client based on the supervisor's perception. CTs participants were limited to discussing supervision experiences with one supervisor. CTs were limited to his or her current or recent past practicum supervisor.
**Epoché.** As mentioned earlier, epoché involves the researcher refraining from any prejudgments regarding the phenomenon throughout the exploration of the topic (Moustakas, 1994). Throughout the current study, I utilized the practice of bracketing to assist in epoché. Bracketing involved taking notes separate from any of the participant accounts. Bracketing is an excellent tool to help researchers remain objective during data collection and data analysis. Bracketing allowed me document any thoughts, feelings, or reflections before data collection, after transcribing the interviews, and throughout the data analysis process. I interviewed each participant; the experience revealed was listened to and heard, without allowing my own thoughts or beliefs to interfere with participants’ accounts of their experience (Moustakas, 1994). I bracketed by becoming aware of past thoughts, feelings, and biases associated with cross-racial/ethnic counseling and attempted not to allow those past constructs to influence the ongoing research experience (Giorgi, 2009). The notes taken when implementing epoché were discussed with my peer reviewer.

**Peer reviewer.** A final methodological consideration concerns the use of a peer reviewer. The researcher consulted with a peer reviewer which was a very beneficial step in both the data collection and the data analysis phases. As mentioned earlier, a peer reviewer is someone who provides feedback to the researcher (Cho & Cho, 2011). This step in the methodology enabled the researcher to remain honest in her thoughts and feelings about the research process. Having a peer reviewer also ensured trustworthiness of the data in that the researcher was not the only individual to review the data and/or
analyze the data. I recommended using a peer reviewer in a qualitative study to ensure trustworthiness and credibility.

Lastly, there were some methods that the researcher would have done differently. When transcripts were presented to participants, it would have been a good idea to ask participants to reflect on any additions he/she may have had while reviewing the transcript. Instead of asking the question during the follow-up interview, it may have been thought provoking during the review of the transcripts. By prompting participants at that time, it may have enabled them to reflect on any additions they may have wanted to discuss in the follow-up interview. Also, the option of choosing practicum I or II on the demographic sheet would have not been included because not all counseling programs identify practicum as I and II.

**Relationship of Current Study to Previous Literature**

Several topics discussed by participants were relevant to previous research findings in multicultural counseling supervision. Specifically, previous research discussed the influence of race/ethnicity on supervision and client sessions (e.g. Chang & Berk, 2009; Watt et al., 2002). Participants in the current study discussed the importance of race/ethnicity including stereotypes and Whiteness. Some CT participants discussed disclosure of thoughts or feelings associated with working with minority clients within supervision. Related to disclosure CT participants revealed how their supervisor’s response affected CTs’ supervision experience. Perceived client response was also a topic explored in previous research and participant accounts in the current study.

Video/audio recording of practicum sessions is a requirement of CACREP accredited
counseling programs. The current study results relates to previous research regarding audio/video recordings.

Only one participant, Alexandra (CT), specifically expressed having discussions in supervision regarding the use of audio/video recordings. The absence of further discussion of this topic is relevant to the supervision of cross-racial/ethnic counseling. The following sections present the findings of the current study similar to those found on multicultural counseling supervision and whether participants presented a unique experience.

**Recordings**

Previous literature reviewed the use of audio/video recordings of counseling sessions in practicum supervision experiences (Ellis, 2010; Poling, 1968; Yenawine, & Arbuckle, 1971). In the current study, there was not a specific question dedicated to audio/video recording use in supervision. Alexandra (CT) reported having an Asian client who was unfamiliar with the term “sexual orientation” and asked her what it meant. Alexandra (CT) shared her supervision discussion:

In supervision we both were surprised about the question so when we watched the tape it was like ‘oh gosh’ in the moment you handled it the best way you can…with not being prepared I guess. It was kind of one of those things where I want to explain it in the most tactful most inclusive terms.

With the limited discussions of the use of video/audio recording in supervision it is beneficial to connect the current study to previous literature on recordings.
Huhra, Yamokoski-Maynhart, and Prieto (2008) suggested implementing the Integrated Developmental Model of Supervision (IDM; Stoltenberg, McNeill, & Delworth, 1998) in conjunction with video recordings. IDM involves three stages in which CTs learn while in supervision. In the first stage, the CT is inexperienced and depends on his or her supervisor a great deal. In the second stage, the CT has more experience and the focus is less on the CT and more on the client’s needs. In the third stage, the CT is more advanced in his or her counseling skills and exhibit more comfort in their role as a counselor in training (Huhra, et al., 2008).

IDM can assist supervisors in using video recordings to conceptualize clients including cultural influences. It is recommended that supervisors with CTs at stage one review video tapes often in supervision (Huhra, et al., 2008). In reviewing the video recordings, supervisors can ascertain CTs’ awareness of cultural differences. Supervisors with CTs at stage two use video recordings to assist CTs in deciphering between the CT’s needs and the needs of the client. For example, if a CT discusses in supervision his or her need for a client to make more eye contact the supervisor, through the use of video recordings, can recognize if the CT’s need is appropriate or if the client’s need to not make eye contact is cultural in nature. Lastly, CTs in the third stage of IDM will review his or her own video recordings independently. It is recommended that supervisors encourage CTs to lead the supervision discussion and analysis of their own video recordings (Huhra, et al., 2008). In the third stage, instead of learning techniques, CTs and supervisors are able to review video tapes and process cultural concerns that are relevant to the counseling sessions. Even if supervisors are watching or listening to video
recordings, it is ultimately the CT’s decision to disclose any inner experiences (Ladany et al., 1996). In addition to recordings the topic of race/ethnicity was important for the current study.

**Race/Ethnicity**

Previous research defined a supervisor’s acknowledgment of the client’s race/ethnicity as culturally responsive supervision (Burkard et al., 2006). In a consensual qualitative method study, Burkard et al. (2006) suggested that when multicultural issues are addressed in supervision there is a positive effect on the CT and the supervisory relationship. The same positive effect was mirrored by the findings of the current study. Alexandra (CT) shared this observation of culturally responsive supervision:

> I brought it up in supervision because it was not something that I was anticipating for the day so I wasn’t even ready to see the client... In supervision actually we just talked a lot about how we can be aware of it in the future…and now that I am aware of that situation I know how I would proceed with it but to make other students aware in the future that maybe some people may not know what those mean and how to explain that tactfully.

In current study, when participants experienced in-depth discussions of race/ethnicity they reported perceived positive effects on supervision. Participants reported several reactions to race/ethnicity being discussed in supervision including, but not limited to, CTs felt supported by their supervisor, rapport was built, and there was a higher level of comfort discussing race/ethnicity with clients when discussions regarding race/ethnicity occurred in supervision.
According to Dickson and Jepsen (2007), during practicum, counseling students have a higher level of awareness and multicultural knowledge when multicultural concerns are infused into supervision. CT participants in the current study who reported experiencing in-depth discussions in supervision regarding race/ethnicity appeared to be more aware of multicultural concerns as evidenced by their report of willingness to discuss the topic in supervision and with clients. CT participants described that when race/ethnicity was discussed in supervision they felt comfortable addressing race/ethnicity in session with clients. All CT participants expressed that they wanted to discuss race/ethnicity concerns in supervision even when race/ethnicity was not made a priority by their supervisor.

Participants also experienced different reactions to race/ethnicity not being a priority in supervision which could be considered culturally unresponsive supervision. Similar to the Burkard et al. (2006) study, when CTs in the current study perceived that race/ethnicity was dismissed or ignored by the supervisor, feelings of distrust or being uncomfortable arose. Burkard’s (2006) findings were similar to the reactions of participants reported within Core Theme 2 when race/ethnicity was not made a priority in supervision. Jane’s (CT) supervision experience fell in the category of culturally unresponsive:

Since my supervisor never discussed these things I wasn’t comfortable with talking about race/ethnicity with her…and I think that caused a lack of trust in our relationship and frankly I don’t think I respected any feedback that she gave me
clinically. It’s like when you grow up…you experience something bad and you say I’m never going to do that again…

CTs reported reactions to experiences of culturally unresponsive supervision including, but not limited to, race/ethnicity was dismissed in supervision, minimally discussed, and that other concerns appeared more relevant than race/ethnicity. A variety of participants’ reactions demonstrated that when race/ethnicity is not made a priority in supervision it is a defining moment for CT participants.

As a result of race/ethnicity being ignored or minimized in supervision, CTs may no longer trust the supervisor and ultimately withdraw psychologically from the supervision process (Norton & Coleman, 2003). Some consequences of culturally unresponsive supervision are that the CT no longer trusts the supervisor and, therefore, will not disclose important thoughts or feelings. Subsequently, this will directly affect the client if the CT does not process racial/ethnic differences. Similarly, if the client feels that his or her race/ethnicity is ignored or dismissed in counseling then the client may not be able to trust the CT or feel comfortable enough to discuss any concerns related to race/ethnicity. Being stereotyped is one way in which clients may feel that their race/ethnic identity is being dismissed.

**Stereotypes**

As discussed earlier, Ancis and Ladany’s (2001) Means of Interpersonal Functioning (MIF) model proposes four stages that CTs may go through in regards to multicultural supervision. Some participants in the current study appeared to identify with stage one, the *Adaptation Stage*. At this stage, Ancis and Ladany (2001) suggested
that a CT may have a superficial understanding of differences among people and possibly stereotypical attitudes toward particular cultural groups. Participant Violet (CT) expressed that she was “culturally competent” and reported that she did not want to “use big words” with one of her client’s mother in an effort to “meet her where she was at.” It is understandable using language the client understands but this could be misunderstood as she had to “dumb things down” in order for her Black client’s mother to understand. This coincides with the stereotype that Black people are dumb or uneducated.

Violet also described what she reported as her knowledge of how Black and White households are different. She reported that Black families “eat in and everyone cooks and helps clean up afterward” and that White families usually “go out to eat.” This example could be interpreted as a stereotype. Some of her description is, indeed, parallel to the researcher’s own family experience but this assumption could be misunderstood by both Black and White clients. This is not the case for all Black or White families.

Within Core Theme 1, when discussions of race/ethnicity are discussed in mono-racial supervision of cross-racial/ethnic counseling, awareness of cultural issues is raised. If Violet had discussions of race/ethnicity within supervision stereotypes and assumptions about minority clients would have been reduced.

It is important that CTs have an understanding that traditions may be similar among families from different race/ethnicities traditions but are not always the same across the board. Similarly, Danielle (S) stated that her CT expressed his perceived stereotypes about Black women:
…he disagreed with me and he thought…I said ‘You know I thought that that was kind of prejudice you know to say that all African-American women especially’…and I think he said women…‘Abrasively talk on the phone’…and he said that was just what he was use to…so he wasn’t very responsive to me…which made me upset…which made be revisit it a couple of times with him…he ended up getting it and understood what I was saying…he said he didn’t say it correctly.

Lastly, in regards to stereotypes Mary (CT) reported that she and her supervisor wonder when our society will progress beyond racist stereotypes. She expressed “…so we had discussions about …when are we going to move out of the 60’s or 40’s…20’s for that matter… when is this going to be over? We both felt that way…” While some participants appeared to describe stereotypes regarding clients at least one participant expressed wanting to move past racial stereotypes. Perhaps one way to move past stereotypes is for White supervisors and CTs to acknowledge his or her own racial identity.

**Whiteness**

As mentioned earlier, Whiteness is a concept that includes skin color, socioeconomic status, and political desires of the dominant race in the United States who have the power to make such categorizations (Roper-Huilman, Winters, & Enke, 2013). No participants in the current study addressed their own racial identity. However, there was mention of potential “White guilt.” Again, Ancis and Ladany’s (2001) MIF model provides some interventions that supervisors can engage in with CTs at specific stages.
The third stage of the MIF model is the *Exploration Stage*. At this time, CTs may be more active in the exploring what it means to be a member of their respective cultural group. In this stage, supervisors provide emotional support and teach strategies to move beyond guilt.

White guilt has been defined as the knowledge of advantages over minorities as a result of identifying racially as White (Steele, 1990). There was at least one participant who mentioned White guilt. Danielle (S) stated:

I think that she just…she’s one of those that just can’t…she wants to understand but doesn’t want to accept that this is something that is real… something that people go through everyday…she thinks that everybody should be treated equally and that kind of stuff… I think that she has White guilt maybe…

Although White guilt was not a topic explored in the current it appeared that White guilt may affect White CTs or supervisors’ practice with minority clients. This experience relates to Core Theme 2 of the current study. Because participants did not report discussing the topic of Whiteness or White guilt, needs of the CTs were not met. If Danielle (S) had a supervision discussion with her CT regarding her perception of the CT’s “White guilt”, it could have promoted growth for the CT and enabled the CT to be aware of any changes that needed to be made in her work with minority clients.

Engaging in culturally responsive supervision will enable enhance CTs ability to disclose feelings or thoughts associated with working with minority clients.
Disclosure

As discussed in Chapter I, Sue et al. (2009) found that participants were hesitant to disclose intimate thoughts, beliefs, or feelings related to the topic of race because they were unsure of what the consequences would be. Similarly, Ladany et al. (1996) found that participants who reported a negative reaction to their supervisor would have non-disclosure in supervision and instead disclose feelings or thoughts to peers. The current study’s findings were consistent with previous research on non-disclosure.

Jane’s (CT) account revealed that she had a negative reaction to her supervisor and as a result did not disclose information regarding her minority client. Jane (CT) exclaimed: “I would usually roll my eyes at her and talk to my colleagues about it.” Jane further expressed: “She had the power in the relationship…and I was fearful of confronting what I viewed as somewhat bias and definitely not multicultural competent.” Jane’s observation lends support to Ladany et al.’s (1996) proposition that negative reactions to supervisor’s led to nondisclosure in a passive manner by the CT. Instead of disclosing thoughts or beliefs regarding race/ethnicity in supervision, Jane chose to speak to others because she were unsure of what the supervisor’s response would be.

Supervisor Response

Previous research found that CTs enrolled in practicum were concerned about not receiving direction from his or her supervisor (Howard, et al., 2006; Jordan & Kelly, 2005). The concerns found in previous research were not the same for at least one participant in the current study. George (CT) reported that his supervisor prepared him to work with a minority client by providing direction. George expressed that addressing
race/ethnicity with his client was previously discussed in supervision. He articulated “…my supervisor advised me to address that issue.” This is striking because George further reported that he would not have addressed the difference without the direction provided by his supervisor. He revealed:

…prior to the experience, no, I did not think that there being a difference was influential in the counseling experience if there seemed to be any sort of hostility or distance in communicating with the topic than I would approach that topic.

In addition to George (CT) expressing that specific direction was provided by his supervisor while in supervision, all supervisor participants in the current study expressed that they directed their CTs in supervision.

These observations were contradictory to Hird et al.’s (2004) findings that White supervisors spent less time discussing cultural differences when matched with White CTs than with minority CTs. In fact, supervisors in the current study reported that race/ethnicity was discussed often and that they learned from their CTs. Michelle (S) reflected:

Well, I think certainly with the variety of clients that we are seeing when a student presents a case and I haven’t had that experience we kind of process the case together and it is a good learning experience for me also.…

Supervisor participants reported often initiating the discussion before the CT. Supervisors expressed that when CTs did not feel race/ethnic was important to the client they encouraged the CT to explore the racial/ethnicity difference with the client. The decision of the extent of which race/ethnicity is explored in the counseling session is to
be made by the client. Supervisors in the current study felt that it was the CT’s responsibility to at least address the racial/ethnic difference between the CT and client.

Supervisors were also able to empathize with CTs when CTs were hesitant to address race/ethnicity. The ability to understand why the CT was hesitant was related to supervisors once being in the same position as a CT themselves and having to broach what is a sensitive topic for some clients. This experience corresponded to Core Theme 4 of the current study because supervisors focus on directives and feedback provide to CTs. Having experienced similar counseling sessions as former CTs, supervisors were able to guide the CT to appropriately address and discuss race/ethnicity with minority clients. Supervisors recalled learning new information from CTs regarding specific cultural backgrounds as well as ways in which to explore race/ethnicity in session with clients. Supervisors felt that supervision experiences enable them to teach CTs as well as work collaboratively with CTs in order to ultimately assist the client. Client response was another concern for CTs.

**Perceived Client Response**

All CTs reported experiences that did not include any indication that any of their clients dropped out of counseling as a result of being matched with a White counselor. Previous research (Chang & Berk, 2009; Pope-Davis et al., 2002) suggested that when minority clients are matched with a White counselor who offends the client or does not address the racial difference with the client, oftentimes, the clients do not return to counseling. George (CT) reported that his counseling experience was “different from some previous research.” George (CT) expressed:
I understand that there is a large amount of research out there that suggest clients of different cultural backgrounds with different counselors tend to not stay in counseling for very long…so my experience may actually be different than what the research suggests …that’s also not discounting how the counselor address the situation as well.

George (CT) alluded that the approach the CT takes in addressing the racial difference with the client may influence the client’s response to having a White counselor.

Colin discussed advising his CTs to use the client as a “resource”. From my perspective, when implementing phenomenological reduction, this statement can be applied in two ways regarding the client’s response. First, using the client as a resource may suggest that the minority client *always* has to educate “White people” and some minorities might view this as negative. Secondly, minority clients may prefer that a White person ask his or her questions rather than make assumptions about cultural norms that may influence the client. Some minorities may complain that White individuals do not understand or know their experience. In reality, White individuals will never fully understand minorities’ experiences because they are not minorities. To assist in bridging the gap, when minority clients are matched with White CTs, they may think about responding in a way that enables them to share experiences in an attempt to educate White people. If minorities do not educate White individuals, then, who will?

If minorities do educate others regarding cultural influences then stereotypes will continue to perpetuate negative aspects of minorities and that will help no one. Although the researcher does not speak for all minority individuals, she considers herself
a representative for those who share some of her same life and educational experiences. The researcher encourages minority clients to share their own experiences so that CTs/counselors can better understand how to meet their needs in counseling.

**Implications for Practice**

The current study’s research findings have several implications for the counseling profession. This section briefly describes recommendations for supervisors; specifically, how supervisors can assist CTs working with clients who are racially/ethnically different from the CT. Questions that supervisors can present to CTs and questions that CTs may ask in supervision are also provided. Recommendations for CTs, specifically White CTs being supervised by a White supervisor, are presented. Questions CTs can pose in supervision and in session with minority clients are also provided.

**Implications for Counselor Trainees**

**For client sessions.** The CT participants in the current study frequently discussed wanting to be prepared to work with all clients including clients who are racially/ethnically different from the CT. CT participants also noted not wanting to appear insensitive to racial/ethnic differences between CT and client. At the same time, CTs assessing their own racial biases were also found to be an integral part of supervision for some participants. Oftentimes not being fully prepared or having a choice to work with minority clients in practicum, allowed CTs engaged in self-exploration, exploring the client’s racial/ethnic identity and addressing any differences with clients in session. The current study offers new ways for CTs to explore race/ethnicity differences in supervision as well as in session with minority clients.
Multiple CT participants expressed that they were concerned about their ability to address race/ethnicity differences with their clients in sessions. A result, their experiences were conceptualized under Core Theme 3, which could be alternatively categorized as culturally responsive supervision. Culturally responsive supervision includes self-knowledge. An observation from Violet (CT) is provided. Her response is from the follow-up interview question exploring any possible transference:

Looking back, I know I didn’t touch on race/ethnicity as much as I should have…it could be considered some form of transference…growing up in an all White community and going to school with all Whites…we didn’t talk about race/ethnicity…color blind mentality so you don’t address it because it doesn’t matter when in fact it does matter because the research says that it does.

As reported in the above account, Violet expressed conducting self-exploration. Falender and Shafranske (2012) suggested that CTs ask themselves “Who am I as a cultural being?” To help explore one’s own racial identity, this author suggests that White CTs explore Helms’ White Racial Identity model, discussed in depth in Chapter I. This model can assist CTs in exploring his/her status identification. Once the CT discovers a status that he or she identifies with the next step would be to explore the status of the client.

The researcher suggests that CTs review Helm’s People of Color Racial Identity Model and recognize the status of the specific minority client the CT is working with. Utilizing the People of Color Model in session with a client may also be beneficial for both the client and the CT. If race/ethnicity is addressed in session with the client and if
the client expresses that the race/ethnicity difference is a concern for him/her, it would behoove the CT to process such a model with the client. Having the client identify which status he/she feels best describes who he/she is would assist in clinical practice with the client. The CT can then provide appropriate interventions when working with the client.

Within Core Theme 3, both CT participants in the current study reported assessing their own ability to address race/ethnicity in session with clients. Hays’ (2001) ADDRESSING model identifies 10 cultural influences that supervisors need to consider in supervision. Ethnicity (which includes race) is the cultural influence that was relevant to the current study (Hays, 2001). Hays (2001) encouraged clinicians to explore the relevance of race/ethnicity for each client, follow-up on how the client identifies racial/ethnically, and explore how the client is influenced by race/ethnicity.

Within Core Theme 3, CTs were concerned about clients’ perceptions of abilities. CT participants in the current study were concerned about how the client would perceive their ability to address race/ethnicity. Many studies specific to cross-racial/ethnic counseling focus on the self-report of clients. For example, in a study by Chang and Berk (2009), the experiences of minority clients in cross-racial/ethnic counseling relationships with White counselors were examined. Clients reported that they were unsatisfied with therapy when the counselor minimized their experiences with discrimination or oppression. CT participants in the current study were sensitive to how their clients felt about addressing race/ethnicity in session because the CTs did not want clients to feel unsatisfied with how the CT broached the topic. As a result, CT participants had different reactions to addressing race/ethnicity with clients. CTs, didn't address
race/ethnicity with clients, briefly addressed it, or had in-depth discussions with clients. The results of the current study suggest that in an effort to not diminish or dismiss a client’s race/ethnicity CTs will address race/ethnicity with clients. Addressing race/ethnicity enables the client to determine if race/ethnicity is a topic that requires delving into within counseling.

CTs had reactions to being unfamiliar with a specific cultural backgrounds and how to work with clients surrounding cultural concerns. I recommend that CTs explore the client’s race/ethnicity in session with the client by asking questions of the client:

1. How do you identify racially/ethnically?
2. What are the customs or traditions that I need to be aware of?
3. What is your level of comfort level with having a White counselor?
4. What struggles do you have that are cultural in nature?

Cardemil and Battle (2003) suggested that CTs introduce the topic of culture first in the therapy session. They also suggested that when in doubt about the salience of these issues in treatment, that trainees should initiate the discussion in order to provide an opportunity for direct discussion should it become relevant. CTs must take cues from the client regarding his or her response to working with a CT/counselor who is culturally different from the client. There are a variety of client responses that CTs should be prepared for.

- Clients may be willing to explore in session as evidenced by client’s in-depth discussions regarding their race/ethnicity identity
- Clients may not think race/ethnicity is an influence for him or her as evidenced by no further discussion by the client.

- Clients may also report discussions with others regarding race/ethnicity outside of the counseling session.

In addition to implications for CTs, the results of the current study also provided implications for supervisors.

**For supervision.** CTs whose supervision experience consisted of race/ethnicity not being made a priority, Core Theme 2, is also considered culturally unresponsive supervision. CT participants in the current study attributed minimal discussion of race/ethnicity in supervision to his or her supervisor’s lack of multicultural knowledge. One participant expressed a fear of the supervisor’s reaction if she further discussed race/ethnicity after the supervisor dismissed the topic in supervision. Jane (CT) described having “more experience” with minority individuals than her supervisor. Jane described: “I don’t know; she just wasn’t as competent in her multicultural competence as I would have liked her to have been.”

Due to the power hierarchy within the supervisory relationship, CTs are sometimes reluctant to address the supervisor’s limitations. The consequences for addressing the supervisor’s limitations could include either professional or interpersonal repercussions (Norton & Coleman, 2003). Supervision should be an open and honest place for communication. CTs must feel empowered to discuss his or her feelings regarding what is pertinent to the client regardless of any power differential.
The researcher recommends that CTs discuss differences with supervisors by centering the discussion on the needs of the clients. If there is a difference in opinion between CT and supervisor, both opinions should be discussed and ultimately what works for the client should be the focus of supervision. In order to engage in what potentially could be difficult dialogues in supervision, an open and honest atmosphere must be created. Supervisors play a large role in creating an open and honest environment.

As a result of the current study, the author recommends several questions that CTs can bring into supervision. Both CTs and supervisors can reflect on the following questions:

1. How will racial/ethnic differences be addressed in supervision?
2. What if the client feels that our racial/ethnicity differences will impede on his or her counseling experience?
3. What if the client does not trust me as a result of our racial/ethnic differences?
4. How should I address differences with the client?
5. How do I learn more about the cultural background of the client?

These questions can be asked early in supervision in order to discuss the topic prior to working with clients. These questions can also be asked throughout the supervisory process especially when CTs start to work with new clients. Question 1 derives from Core Theme 1 which addresses the initiation of the discussion of race/ethnicity into supervision. Client response was considered in Core Theme 3 and with questions 2 and 3 the CT explores what they can do depending on client response to
the racial/ethnic difference with CT. Core Theme 3 also addressed CTs ability to address cultural differences with clients. Question 4 involves how the CT explores addressing the difference(s) with the client in supervision prior to addressing in session with the client. Lastly, findings of the current story within, Core Theme 1, presented that an exploration of resources was important to participants and question 5 explores how the CT can learn more about different races/ethnicities. Asking these questions establishes expectations of the CT and enables the supervisor to provide guidance to the CT which is consistent with Core Theme 4. The current study’s findings provided other implications for supervisors.

**Implications for Supervisors**

The current study offers implications for supervisors. Findings may be helpful to supervisors and counselor educator programs. Offering culturally responsive supervision is consistent with ACA’s, Code of Ethics. Counselor supervisors should be aware of, and should address, the role of multiculturalism/diversity in the supervisory relationship (ACA, *Code of Ethics*, F.2.b., 2014). Supervisors may decide whether the findings from the current study are transferable to their own supervision practices. For example, in the current study, participants indicated that supervisors need to be supportive and culturally responsive. Similarly, Core Theme 4 may encourage supervisors to provide feedback and directives in supervision when CTs are working with clients who are different culturally from the CT.

One of the themes in previous multicultural literature is the role of the supervisor in discussing race/ethnicity in supervision. Prior research suggests that supervisors
initiate the topic of race/ethnicity while in supervision (Bernard & Goodyear, 2004; Fukuyama, 1994). Therefore, as suggested by Addie’s (S) account, the supervisor initiating the discussion is important in preparing CTs to work with different clients.

As mentioned in Core Theme 5, participants reported both positive and negative experiences. Participant accounts in the current study suggest that there is a power differential between supervisor and CT. There is potential for a great imbalance that can impact both the supervision experience and clinical cases if the power differential is viewed negatively by either member of the dyad. Supervisors must consider the power differential when working with CTs. As mentioned earlier, one CT participant reported in the current study, that she felt she could not discuss with her supervisor her perceptions of the supervisor’s bias against Black clients. She reported that due to the supervisors’ “superior role” in the supervision dyad, she was uncomfortable with disagreeing with her supervisor. Therefore, the CT did not discuss race/ethnicity at all in supervision.

The researcher suggests that supervisors offer CTs assistance and support regarding difficult dialogues in supervision. Also, if the CT perceives that there will be no negative consequences surrounding a difference in opinion within the difficult discussions, then he/she may express those differences. Fong and Lease (1997) provided strategies specifically formulated for White supervisors. They suggested that the supervisor attempt to balance the power differential. One way they suggested the balance to occur is by the supervisor discussing evaluation procedures and encouraging the CT to ask questions and raise any concerns. For example, James (S) described having discussions of race/ethnicity “right from the start.” By encouraging the CT to ask
questions and/or raise concerns enables the supervisor to emphasize a collaborative approach to supervision.

Supervisors may find themselves playing an influential role in leading discussions about interventions regarding racial/ethnic considerations (Falender & Shafranske, 2012). Previous research (Falender & Shafranske, 2012; Sue et al., 2009) suggested that it is the responsibility of the supervisor to introduce race/ethnicity in supervision. Sue et al. (2009) suggested that it is the responsibility of the supervisor to introduce race/ethnicity into supervision. Falender and Shafranske (2012) suggested that the supervisor introduce the idea of cultural humility. Cultural humility was defined as a mindset of being open and aware of individual diversity. It also involves understanding cultural aspects and implementing those aspects into supervision and clinical work (Falender & Shafranske, 2012).

A collaborative approach was discussed within Core Theme 5. In the current study, a supervisor participant expressed a concern regarding what she perceived to be the CT’s stereotyping of a Black clients behavior. Initially, the supervisor reported that the CT was not responsive to the supervisor’s probing of the appropriateness of his assessment that all Black people talk loudly as evidenced by CT’s unwillingness to adjust his thoughts. In this example, had the supervisor not continued to discuss the concern in subsequent supervision sessions she would have enabled the CT to continue with inaccurate stereotypes of Black individuals. The CT could attribute the stereotype to all Black clients which would affect clinical practice.
As discussed earlier, a feeling of trust and being prepared to address race/ethnicity must be experienced by the CT. Within Core Theme 1, CTs ability to address race/ethnicity in session with clients requires preparation and within Core Theme 2, CT’s comfort level with addressing race/ethnicity is also considered. To be able to infuse race/ethnicity into supervision and ultimately in client sessions, each member of the dyad must be prepared to address race/ethnicity. A result of creating trust and being prepared to discuss race/ethnicity the topic of race/ethnicity becomes more pertinent for both the supervisor and CT.

Brown and Landrum-Brown (1995) WCM model consists of the dimension of “ethos or guiding beliefs”. Existing biases or stereotypes about minorities are considered guiding beliefs. The supervisor’s assessment of CTs is captured in Core Theme 4. Supervisors in the current study assessed CT’s preconceived stereotypes related to minorities. Preconceived stereotypes regarding minorities were assessed by asking the CT questions. Questions are necessary in order to guide the CT to process what stereotypes he or she may have already possessed and how such stereotypes can affect the counseling relationship. Ober et al. (2009) suggested having the CTs do homework to challenge their beliefs. An example of a homework assignment that challenges CTs at the incongruence stage is to watch a movie (i.e. Higher Learning, Do the Right Thing) regarding the overt discrimination that minorities have experienced, have CTs journal about that experience and have CTs compare their own experiences of discrimination or prejudice to that of the clients. Homework such as this enables CTs to think beyond what they have experienced and will assist them in working with their clients.
Supervisors and/or counselor educators, both teaching and in practice, can incorporate discussions of race/ethnicity within supervision. From the findings of the current study the researcher developed for supervisors to pose to CTs:

1. What are some of the biases that you have had to look at for when working with clients who were culturally different than you?
2. Are there any concerns working with clients from different cultural backgrounds?
3. Have you addressed the cultural difference with this client?
4. What was the client’s response to addressing the difference?
5. How prepared are/were you with addressing the difference?
6. Are there any local, internet or other cultural resources you need to better assist this client?

Based on the findings of the current study the researcher recommends that supervisors ask these questions in supervision. Questions 1 and 2 derived from Core Theme 4 which addresses supervisors observing and assessing CTs. Core Theme 3 pertains to CTs ability to address differences with clients and question 3 speaks to the CTs ability. Client’s response was considered with Core Theme 3 and question 4 explores client response. Core Theme 1 addressed CTs being prepared to address cultural differences with clients and question 5 involves supervisors assessing CT’s perception of being prepared. Lastly, Core Theme 1 also addressed that an exploration of resources was important to participants and question 6 explores resources. The researcher suggests that these questions be introduced earlier on in the supervision process and then inquired
about throughout supervision for the duration. The implementation of questions such as these allow for ongoing review of work with clients who maybe racially/ethnically different from the CT.

**Implications for Counselor Educator Programs**

A natural starting place for increasing culturally responsive supervision would be the counselor educator programs, specifically supervision courses for master level as well as doctoral level students and also the multicultural courses. Participant, Jane (CT), in the current study expressed concern regarding her supervisor. She stated “she had a Masters degree in clinical mental health counseling and majority of clinical supervisors do not receive any formal training in supervision and I’m flabbergasted.” Many clinical supervisors have earned master degrees, and this researcher suggests that counselor educator programs implement a supervision course as one of the last courses taken before master level students are enrolled in practicum.

Curriculum could be expanded to include a master level supervision course that entails the role of CT’s in supervision. The course would introduce the requirements of supervision and the necessity. CTs can learn how to appropriately engage in supervision. If we are teaching supervisors to provide effective supervision, why not teach CTs how to engage in supervision? Toward the end of this course reviewing, discussion related to the role of a supervisor, that is essential for CTs to engage in, is imperative. At this time, there is not a requirement for master level supervisors to engage in a semester/quarter course. The researcher suggests that counselor educator programs provide a master level course to CTs in order to provide direction for supervision.
Another suggestion for counselor education programs is to ensure that culturally responsive supervisors are hired and trained. Having supervisors with diverse backgrounds as well as diverse experiences increases the likelihood of supervisors providing culturally responsive supervision. Several supervisor participants in the current study revealed that having diverse experiences enabled them to address and discuss race/ethnicity within supervision. CT participants also expressed that when their supervisors appeared to not be culturally competent, culturally responsive supervision was not provided. Increasing diverse faculty and/or faculty with diverse experiences can increase culturally responsive supervision.

**Future Directions in Research**

This current study was conducted in response to the large number of White supervisors engaged in supervision with White CTs working with minority clients. While a great deal of multicultural supervision literature focuses on dyads comprised of White supervisor and minority CTs (Dressel, et al., 2007; Fong & Lease, 1997; Norton & Coleman, 2003), the current study described new characteristics specific for mono-racial supervision. The results of the current study provide many different possible directions for future research. These unique aspects of the supervision experiences of White CTs and White supervisors support the continued need for multicultural supervision research.

The use of qualitative methods assisted the researcher in gathering data in a narrative form. As mentioned earlier, the use of qualitative and specifically phenomenological methodology explores descriptions of lived experiences (Giorgi, 1985). Focusing on descriptions enabled the researcher to explore participants’ insights...
into individual supervision experiences. Another methodology to consider researching mono-racial supervision of cross-racial/ethnic counseling would be conducting a grounded theory study. The participants could be CTs, supervisors, or both (either form matched dyads or non-matched dyads). The researcher would collect data through observing participants’ while in supervision, one-on-one interviews, or possibly forming focus groups (Creswell, 1998). Some open ended questions that can be explored are:

- What was the experience of supervision when the CT worked with a client who was racial/ethnically different?
- What were the primary ways in which cultural differences were discussed in supervision?

Providing a grounded theory can assist the counseling profession in generating an emergent theory of the process of counselor supervision for CTs who work with clients who are culturally different from the CT (Strauss & Corbin, 1998).

In future studies, the researcher recommends that other scholars ask the question of how many sessions the CT has worked with the client. In the current study, one of the criteria was that the CT worked with the client but there was no specification as to how many sessions needed to be had. In the current study, CTs’ work with clients ranged from one assessment appointment to at least a reported four sessions. Those numbers were revealed by participants but not something the researcher inquired about specifically. Therefore, it is unclear as to how many specific sessions other CT participants or the CTs discussed by supervisor participants. A step further would be to also explore the number of sessions supervision was had. It is unclear if CTs that
supervisor participants discussed remained in practicum the entire semester or if he/she did not return to supervision as a result of a culturally unresponsive supervision experience. No CT participant reported withdrawing from class as a result of culturally unresponsive supervision experience.

It would be beneficial to explore the experiences of minority CTs and minority supervisors matched with minority clients. It would also be useful to explore experiences of CTs and supervisors in matched dyads. Although the current study specifically explored race/ethnicity differences, other identifiers (e.g. gender, age, relationship status, etc.) can also be explored in supervision. Several participants alluded to socioeconomic status being more of a concern than race/ethnicity. It would be valuable to explore the experiences of CTs and supervisors who were from different SES’s than the client. Few participants discussed the supervisors’ level of education. Some participants felt that the supervisors’ level of education might have impacted the supervision experiences. Although the current study did not inquire about the education level of the CTs’ supervisor beyond a master’s degree, it would be interesting to explore the experiences of supervisors at the master’s level versus supervisors at a doctoral level.

Researchers should consider exploring focus groups that would solicit CTs who have worked with clients who were culturally different than the CT and had supervision discussions regarding such clients. The focus groups could include clinical mental health, school counseling and marriage and family therapy students. Each group of student experiences may have different aspects worth exploring for the counseling profession at large.
Another area to expand this study would be for a researcher to explore what stage supervisors or CTs identify on Helms’ White Racial Identity and/or People of Color. Exploring which status a participant identified with may provide the researcher with more insight into how participants view themselves. Providing participants with the model at the start of the initial interview may provide more insight into how he or she identifies racially which part of self-exploration. Having an awareness of a specific status also may have had some affect on how CTs work with minority clients. Lastly, the researcher suggests scholars explore supervision experiences that are off-campus. Many institutions provide off-campus internship experiences. Exploring experiences of those supervisors and/or CTs’ off-campus may produce different results.

**Reflections of the Researcher**

Cultural competence does not equate to cultural responsiveness. Cultural competence has been defined as attitudes/beliefs, knowledge and skill level working with minority clients (Hird et al., 2004). A CT and/or a supervisor may have a great deal of knowledge about specific races/ethnicities but that does not mean that CTs and supervisors have the knowledge of discussing race/ethnicity in supervision and/or addressing race/ethnicity in sessions about the clients. Supervisors and CTs, especially White supervisors and White CTs working with minority clients, must take the attitudes/beliefs, knowledge, and skill level a step further by discussing in supervision and addressing with clients any racial/ethnic differences. By becoming culturally responsive, both supervisors and CTs will provide optimal level of care for clients.
I am passionate about the supervision of cross-racial/ethnic counseling and providing ways to improve the process of supervision. Learning ways to assist counselors in training is something that I know is important and an area I wanted to contribute. My recommendation to other researchers would be to find something that contributes to your field of study and that you are passionate about at the same time. This will make the task less daunting and much more pleasurable. It is similar to Confucius’ famous quote “choose a job you love and you will never have to work a day in your life.” Choose a topic you love and you will not hate the research. As much I enjoyed conducting the study, there were some things I would have done differently.

I would suggest that researchers complete their own transcription of audio recordings. Although it was the least enjoyable aspect of the study, it enabled me to stay personally connected to my participants’ experiences. There were subtle sounds or pauses within interviews that were a part of the experiences. If I did not complete my own transcription, I would have missed the opportunity to gain more of an understanding of the participants’ experience. For, example Tiger described living in a town that was not very diverse. I also resided in the very small town in the past. As a result of my own experiences, I was able to better understand her experiences. After the interview, I did not remember the exchange at all, but when I listened to her interview it reminded me of some of the feelings she might have experienced while living in that town.

I would suggest for researchers who plan to do more than one interview with participants to conduct the follow-up interview (s) as quickly as possible. I found that by conducting the follow-up interview within a week or two, I was able to preserve the
rapport built with participants and appeared to keep participants interested as evidenced by everyone completing the follow-up interview. I also participated in a couple of studies where the researchers allowed for at least a month in between the initial and follow-up interviews, and I found that was too much time between sessions. Because of that, I had a hard time remembering what I said in the initial interview and could not elaborate on initial responses.

Sometimes it I found it difficult to “take-off” my supervisor or even counselor hat. I found myself reacting to some of the unfortunate experiences of CTs who reported experiencing culturally unresponsive supervision. I wanted to advise the CT of what could have been implemented to improve the supervision experience based on my own experience, or I wanted to conduct counseling with some of the supervisor participants who reported such frustration with their CT’s lack cultural responsiveness. Ultimately, I enjoyed conducting the study. I became a counselor because I want to help individuals. I also believe that each individual has a story, and I enjoyed listening to them all. Similarly, I enjoyed listening to each participant’s “story” or experience and applying information to the advancement of the counseling profession.

**Summary of Chapter IV**

Chapter IV presented research findings relevant to previous research. According to statistics obtained from the American Counseling Association (ACA; 2012), 82% of reported professional counselors are White. As a result, a majority of supervisors are White and CTs are also White. Counselors in training may work with minority clients and must be prepared to do so. The current study sought to formulate themes that assist
in preparing supervisors and CTs engaged in mono-racial supervision of cross-racial/ethnic counseling. The themes contribute to the understanding of the supervision of cross-racial/ethnic counseling by exploring the perceptions and experiences of White supervisors and White CTs. The themes discovered do not minimize each participant’s individual experience. The findings of the current study offer a much needed exploration of mono-racial supervision experiences when the client identifies racially/ethnically different.
APPENDIX A

KENT STATE UNIVERSITY

INSTITUTIONAL BOARD REVIEW APPROVAL
Appendix A

Kent State University Institutional Review Board Approval

From: RAGS Research Compliance <researchcompliance@kent.edu>
Date: Tue, Nov 5, 2013 at 2:17 PM
Subject: IRB Level I, category 2 approval for Protocol application #13-497 - please retain this email for your records
To: "tmbarnes@kent.edu" <tmbarnes@kent.edu>, "JENCIUS, MARTIN" <mjencius@kent.edu>


The Kent State University Institutional Review Board has reviewed and approved your Application for Approval to Use Human Research Participants as Level I/Exempt from Annual review research. Your research project involves minimal risk to human subjects and meets the criteria for the following category of exemption under federal regulations:

- Exemption 2: Educational Tests, Surveys, Interviews, or Public Behavior Observations

This application was approved on November 4, 2013.

***Submission of annual review reports is not required for Level I/Exempt projects.

If any modifications are made in research design, methodology, or procedures that increase the risks to subjects or includes activities that do not fall within the approved exemption category, those modifications must be submitted to and approved by the IRB before implementation.

Please contact an IRB discipline specific reviewer or the Office of Research Compliance to discuss the changes and whether a new application must be submitted. http://www.kent.edu/research/researchsafetyandcompliance/irb/index.cfm

Kent State University has a Federal Wide Assurance on file with the Office for Human Research Protections (OHRP); FWA Number 00001853.

If you have any questions or concerns, please contact us at Researchcompliance@kent.edu or by phone at 330.672.2704 or 330.672.8058.

Respectfully,
Kent State University Office of Research Compliance
224 Cartwright Hall | fax 330.672.2658

Kevin McCreary | Research Compliance Coordinator | 330.672.8058 | kmccrea1@kent.edu
Paulette Washko | Manager, Research Compliance | 330.672.2704 | Pwashko@kent.edu

For links to obtain general information, access forms, and complete required training, visit our website at www.kent.edu/research.
APPENDIX B

PARTICIPANT RECRUITMENT LETTER
Appendix B

Participant Recruitment Letter

Subject Line: Research Request
Hello---

My name is Tiffany Darby, a Ph.D. candidate in the Counseling and Human Development Services program at Kent State University in Kent, Ohio. I am in the data collection phase of my dissertation research and I would like to extend an invitation to interested and qualified potential participants. I am conducting a phenomenological study on the experiences of White counselor trainees and White supervisors who participated in cross-racial/ethnic counseling supervision at CACREP accredited counseling programs in the State of Ohio. To be eligible, White counselor trainees must have received supervision from a White supervisor and supervisors must have supervised a White counselor trainee at an on-campus counseling center/clinic. Supervisors and trainees do not have to be from the same dyad.

This study will require completion of an initial individual interview with me (approximately 60-90 minutes in duration) at a time most convenient to you. Initial interviews will be conducted face-to-face, depending on your geographic location, at a confidential site of your choice or via telephone. Two-weeks after the initial interview you will receive a copy of the transcript and will be asked to review for accuracy. You will be asked to discuss any changes or additional reactions, thoughts or reflections, in the Initial telephone interview with me (at least 30 minutes in duration) at a time most convenient to you. All interviews will be audio taped and all audio tapes will be destroyed at the end of the study. Only limited demographic information and a pseudonym, of your choosing, will be included in the final write up of the results.

If you agree to participate in this study, you will receive a consent form and a demographic questionnaire via email prior to the first interview. You will be asked to scan each completed form via email or fax to a secure line back to the researcher.

If you are interested in participating, or if you know of a counselor trainee or supervisor who might qualify and be interested, please contact me directly at tmbarnes@kent.edu or if you prefer, you may call me at (216) 407-3190. My dissertation co-directors, Dr. Cynthia Osborn (cosborn@kent.edu) and Dr. Martin Jencius (mjencius@kent.edu), may be contacted as well. The project has been approved by the Kent State University Human Subject Review Board.

Thank you,

Tiffany M. Darby, M.Ed., PCC-S
Doctoral Candidate
APPENDIX C
COUNSELOR TRAINEE
INCLUSION CRITERIA
Appendix C

Counselor Trainee

Inclusion Criteria

1. For those participants who express interest in possibly participating in the study, ask the following questions:
   a. Do you identify racially as White?
      i. If yes, move to question b.
      ii. If not, stop.
   b. Are you currently, or have you been within the last six months, a practicum student at a CACREP accredited counseling program in the State of Ohio with an on-campus counseling center?
      i. If yes, move to question c.
      ii. If not, stop.
   c. Is or was (within the last six months) your practicum supervisor White?
      i. If yes, move to question d.
      ii. If not, stop.
   d. In practicum, are you or did you (within the last six months) provide counseling for at least one client who was racially/ethnically different from you?
      i. If yes, participation is appropriate for the study.
      ii. If no, stop.
APPENDIX D

SUPERVISOR INCLUSION CRITERIA
Appendix D

Supervisor

Inclusion Criteria

1. For those participants who express interest in possibly participating in the study, ask the following questions:
   a. Do you identify racially as White?
      i. If yes, move to question b.
      ii. If not, stop.
   b. Do you possess a Master’s degree?
      If yes, move to question c.
      ii. If not, stop
   c. Are you a licensed Professional Counselor or Professional Clinical Counselor in the State of Ohio?
      If yes, move to question d.
      ii. If not, stop
   d. Are you currently, or have you been within the last six months, a practicum supervisor at a CACREP accredited counseling program in the State of Ohio with an on-campus counseling center?
      i. If yes, move to question e.
      ii. If not, stop.
   e. Do or did (within the last six months) you supervise a White trainee who counseled at least one client who was racially/ethnically different from them?
      If yes, participation is appropriate for the study.
      ii. If not, stop.
APPENDIX E

CONSENT FORM
Appendix E

Informed Consent to Participate in a Research Study

**Study Title:** White Counselor Trainees’ and White Supervisors Experiences of Cross-Racial/Ethnic Counseling Supervision

**Principal Investigator:** Tiffany M. Darby, PCC-S

You are being invited to participate in a research study. This consent form will provide you with information on the research project, what you will need to do, and the associated risks and benefits of the research. Your participation is voluntary. Please read this form carefully. It is important that you ask questions and fully understand the research in order to make an informed decision. Please keep a copy of this document for your records.

**Purpose:** The purpose of this study is to explore the practicum supervision experiences of supervisors and CTs when clients were racially/ethnically different. Exploring such a phenomenon from this perspective may allow for greater understanding of how racial/ethnic concerns are communicated within supervised training. This study may ultimately aid in developing supervision methods for future training.

**Procedures**

You will be asked to participate in an initial interview lasting 60-90 (approximately) minute individual face-to-face interview depending on your time and geographic location (within a 60-mile radius of me). If you have time constraints or are outside the 60-mile radius a telephone interview will be scheduled. Also, you should plan on being in a location that is private and free from distraction during the interviews. Your initial interview will be transcribed within two-weeks and the materials will be sent to you through e-mail to an e-mail address of your choosing for your review. A date and time will be scheduled for an Initial interview at least 30-minute telephone interview within one week of you receiving the transcripts. Before committing to the study, please be sure to check your availability between the months of October 2013 and February 2014. Your full participation will not to exceed six months. If you agree to participate, I ask that you participate throughout the duration of the study. You may discontinue participation at any time, however, without incurring any penalty.

**Audio Recording**

Data collection interviews will be audio recorded. All recordings will be permanently erased at the completion of the investigation. Please check one:

_____ I give permission for the audio recording to be used as described above.
_____ I DO NOT give permission for the audio recording to be used as described above.
**Benefits**
It is anticipated that participants may benefit from the current study by exploring supervisors and trainees' full range of supervision experiences, which may ultimately aid in developing more sophisticated and diversified training methods. Specifically, it is intended that counselors will heighten their awareness and deepen their understanding of the meaning of their experiences which may further their commitment to providing optimal client care.

**Risks and Discomforts**
It is not anticipated that participants will experience any risks in the current study. Due to the potential for sharing private recollections of experiences and engaging in difficult dialogues regarding racial/ethnic concerns, there is some vulnerability that may arise from your participation in the study. The benefits of participating are anticipated to far outweigh any risks or discomforts.

**Privacy and Confidentiality**
Your confidentiality will be protected throughout the study, within the limits of the law. Your identity will be known only to the researcher. Pseudonyms of your choosing will be used for the discussion and dissemination of the study's findings. Interviews will be audio recorded. If you would like, you may listen to the recordings before they are transcribed. Interview responses will be coded by pseudonyms to avoid having the participant's name associated with the responses. Transcripts and audiotapes will be kept in a secure location and will be destroyed at the conclusion of the study. Results of the study will be written as in partial fulfillment of my dissertation requirements. Results will also be presented at professional meetings and conferences, and the data will be included in future professional publications.

**Peer Reviewer Consent**
As a participant of this study, your information will be reviewed by a peer reviewer. A peer reviewer will only be aware of pseudonyms and assist me in organizing data after interviews are completed. The peer reviewer has signed a consent form acknowledging their understanding of the participant's right to privacy and their agreement to keep all knowledge of the interviews confidential. If you want to know more about the peer reviewing process, please feel free to ask me or my dissertation co-directors. Please check one:

- _____ I give permission for my information to be reviewed by the peer reviewer described above.
- _____ I DO NOT give permission for my information to be reviewed by the peer reviewer described above.

**Voluntary Participation**
Taking part in this research study is entirely up to you. You may choose not to participate or you may discontinue your participation at any time without penalty or loss of benefits to which you are otherwise entitled. You will be informed of any new, relevant information that may affect your health, welfare, or willingness to continue your study participation.
Contact Information
If you have questions at any time during the study, please contact me at 216-407-3190 or via e-mail at tmbarnes@kent.edu. Marty Jencius, Ph.D. (mjencius@kent.edu) and Cynthia Osborn, Ph.D. (cosborn@kent.edu) are my dissertation co-directors and may be contacted at 330-672-2662. The project has been approved by the Kent State Institutional Review Board (IRB). If you have any questions or concerns you may call the IRB at (330) 672-2704.

Consent Statement and Signature
I have read this consent form and have had the opportunity to have my questions answered to my satisfaction. I voluntarily agree to participate in this study. I understand that a copy of this consent was sent to me via email for future reference.

_____________________________  __________________
Participant Signature          Date
APPENDIX F

DEMOGRAPHIC QUESTIONNAIRE
Appendix F

Demographic Questionnaire

To help the researcher gather basic information about your education and training please respond to the following: (Note: All information will be kept confidential.)

Please circle your role: Supervisor  CT

Pseudo Name: __________________________________________

Age: __________________________________________

Gender: __________________________________________

Relationship Status: ________________________________________

Educational Degrees Held: __________________________________________

License Held: __________________________________________

Which practicum class supervision experience will you discuss? (Please check one)  ____ Practicum I  ____ Practicum II

Have you had any prior multicultural training or experiences? (Please check one)  ____ Yes  ____ No

If Yes, please describe: __________________________________________

________________________________________________________________________

________________________________________________________________________

Have you taken any multicultural courses? (Please check one)  ____ Yes  ____ No

If Yes, please describe: __________________________________________

________________________________________________________________________

________________________________________________________________________

Supervisors:

• How many months/years of counseling experience do you have?______________
• Is this your first supervisory experience?  Y or  N
• If no, how many months/years have you supervised?______________
APPENDIX G

PEER REVIEWER CONSENT FORM
Appendix G

Peer Reviewer Consent Form

Hello,

Thank you for your willingness to serve as a Peer Reviewer for my dissertation research. Your commitment to provide feedback throughout data collection and analysis is much appreciated. As a peer reviewer for this study you will critique, question and look for emerging themes to increase the transferability and credibility of the results of this study. You will be asked to comment of the accuracy of my representation of each participant’s response after reading the transcripts. Lastly, you will be asked to identify areas where my personal bias may have influenced data collection and analysis.

By signing this consent form you are acknowledging that you understand the participants’ right to privacy and agree to keep all knowledge of the interviews confidential. Only participants’ pseudonyms will be used as a form of identification throughout the study. As I began the process of data collection and throughout I will contact you for feedback via email or telephone at your convenience.

As a token of my appreciation, please plan to enjoy a $25 gift card following the completion of the peer reviewing process. I will be in contact with you soon. If you have any questions, comments or concerns please do not hesitate to contact me by email at tmbarnes@kent.edu or (216-407-3190). You may also contact my dissertation co-directors, Marty Jencius, Ph.D. (mjencius@kent.edu) and Cynthia Osborn, Ph.D. (cosborn@kent.edu) at 330-672-2662. Thank you again for agreeing to serve as my peer reviewer.

Sincerely,

Tiffany M. Darby, M.Ed., PCC-S
Doctoral Candidate
Kent State University
tmbarnes@kent.edu
216-407-3190

Consent Statement
I agree to abide by the privacy and confidentiality regulations set forth by the Kent State University Institutional Review Board. I understand my role as a peer reviewer in this study, and if I violate the privacy and confidentiality of any participant in this study I understand that I will be reported to the faculty advisors in this study as well as the Kent State Institutional Board. As a peer reviewer I understand that I am only to review the individual interviews. I am aware of what I have to do, and that I can stop at any time.

Signature of Peer Reviewer                                                    Date
APPENDIX H

SAMPLE PEER REVIEWER FORM
Appendix H

Sample Peer Review Form

<table>
<thead>
<tr>
<th>Date and Time</th>
<th>Topics/Issues Reviewed</th>
<th>Peer Reviewer’s reactions</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/25/14</td>
<td>Transcripts; 1 CT and 1 supervisor</td>
<td>• I need to review all to get a better overview</td>
</tr>
<tr>
<td>1/18/14</td>
<td>All transcripts; previous literature</td>
<td>• Supervisors report being more culturally responsive than supervisees • Population of clients seen in an on-campus counseling center</td>
</tr>
<tr>
<td>2/21/14</td>
<td>Themes; relevant literature</td>
<td>• Impressions after reading all transcripts. • Power differential between CTs and supervisors • CTs may have minimized the potential importance of cultural differences • Clearly perceptions were a common theme--there were times when the supervisee perceived himself/herself to be culturally competent</td>
</tr>
</tbody>
</table>
APPENDIX I

COUNSELOR TRAINEE INTERVIEW QUESTIONS
Appendix I

Counselor Trainee Interview Questions

1. What were the races/ethnicities of clients you provided counseling for during practicum who were different from you?

2. What were your experiences counseling client(s) during practicum who were racially/ethnically different from you?

3. What were your experiences during practicum supervision when discussing clients who were racially/ethnically different from you?

4. How do you perceive that these experiences impacted of the clinical cases?

5. How do you perceive that these supervision experiences influenced your practice as a CT/counselor?
APPENDIX J

SUPERVISOR

INTERVIEW QUESTIONS
Appendix J

Supervisor Interview Questions

1. What were the races/ethnicities of clients your trainee provided counseling for during practicum who were different from you?

2. What were your practicum experiences supervising CTs who provided counseling to clients who were racially/ethnically different from you?

3. How do you perceive that these experiences impacted the clinical cases?

4. How do you perceive that these supervision experiences influenced your practice as a supervisor?
APPENDIX K

FOLLOW-UP INTERVIEW QUESTIONS
Appendix K

Follow-up Interview Questions

Pseudonym _________________________

Telephone Script: The purpose of this Initial interview is to enable me to clarify any information from the first interview and explore any additional reactions, thoughts or reflections you had after the initial interview. Please answer the following questions:

1. After reflecting on our first interview together and considering the transcription you reviewed, is there anything you would like to clarify?

2. What additional reactions, thoughts, or reflections have arisen as a result of the initial interview?

3. What made you decide to participate in this study?

4. What was the impact of counseling someone who was racial/ethnically different?
REFERENCES


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