Experiences of Prejudice, Role Difficulties, and Counseling Self-Efficacy Among U.S. Racial and Ethnic Minority Supervisees Working With White Supervisors

Johanna E. Nilsson and Changming Duan

This study explored supervision experiences in 69 U.S. racial/ethnic minority supervisees working with White supervisors. The results demonstrated that perceived prejudice was associated with role ambiguity and role conflict in supervision, suggesting that supervision may not occur in isolation from trainees' lived experience. Implications for training and research are addressed.

Este estudio exploró las experiencias durante la supervisión de 69 estadounidenses pertenecientes a minorías raciales/étnicas trabajando con supervisores Blancos. Los resultados demostraron que el perjuicio observado estaba asociado con la ambigüedad del rol y el conflicto del rol en la supervisión, lo que sugiere que no puede darse una supervisión aislada de la experiencia vital del aprendiz. Se abordan las implicaciones para la formación e investigación.

s more U.S. racial and ethnic minority students enter the counseling and psychology professions, cross-racial supervisory relationships become increasingly common in such training programs. Racial and ethnic minority supervisees often find themselves in supervisory relationships, which are rather intimate by nature, with White supervisors (Fong & Lease, 1997). The cultural backgrounds of both supervisors and supervisees can influence the content, process, and outcome of supervision (Bernard & Goodyear, 2004; Brown & Brown-Landrum, 1995; Garrett et al., 2001). Although it is known that supervision plays a critical role in the training of students (Loganbill, Hardy, & Delworth, 1982), little is known about how cross-racial supervisory relationships influence U.S. racial and ethnic minority students' training experiences (e.g., Estrada, Frame, & Williams, 2004; Fong & Lease, 1997; Goodyear & Guzzardo, 2000). To gain knowledge in this area, we examined the relationships between role difficulties in supervision, counseling self-efficacy, and perceived prejudice in U.S. racial and ethnic minority supervisees (e.g., African American, Hispanic, Asian American, and Native American) working with White supervisors.

According to Pinderhughes (1989), White privilege is present and unspoken in all cross-cultural interactions. This privilege is "an unnamed and unnoticed complex system of relationships . . . in which Whites are conferred power and advantages and people of color are confronted [and resist] systematic and eco-

Johanna E. Nilsson and Changming Duan, Division of Counseling and Educational Psychology, University of Missouri–Kansas City. Correspondence concerning this article should be addressed to Johanna E. Nilsson, Division of Counseling and Educational Psychology, 215 Education Building, 5100 Rockhill Road, University of Missouri–Kansas City, Kansas City, MO 64110 (e-mail: nilssonj@umkc.edu).

^{© 2007} American Counseling Association. All rights reserved.

nomic disadvantages" (Neville, Worthington, & Spanierman, 2001, p. 269). For White supervisors, unexamined White privilege can result in the acceptance of the mainstream Euro-American culture as the standard for evaluating behaviors and a disregard for the experience of individuals from other cultural and racial backgrounds (Fong & Lease, 1997). In comparison with White supervisees, U.S. racial and ethnic minority supervisees may be more cautious and less trustful of White supervisors because of White privilege, racism, and oppression (Brown & Brown-Landrum, 1995; Fong & Lease, 1997).

Also inherent in the supervisory relationship is a power differential, with the power afforded to supervisors given their evaluative and directive roles (Bernard & Goodyear, 2004). Because of this power differential, supervisees may feel confused about their roles in the supervisory relationship and vulnerable in their efforts to meet their supervisors' expectations. Olk and Friedlander (1992) identified two specific types of role difficulties that supervisees can experience: role ambiguity and role conflict. Role ambiguity refers to supervisees' lacking a clear understanding of what is expected of them, how to meet the expectations, and the consequences of ineffective behaviors. Although it may be difficult for any supervisee to ask for clarifications regarding supervisors' expectations and evaluation methods, U.S. racial and ethnic minority supervisees working with White supervisors may feel even more hesitant in raising such questions because of the dynamics associated with power and oppression. Role conflict addresses supervisees' difficulties in integrating the expectations associated with the sometimes contradictory roles of being a student, supervisee, colleague, and counselor. Adding racial and power dynamics to the integration of these opposing roles may make the process even more complex for U.S. racial and ethnic minority students.

Concerning the determinants of role difficulties, scholars suggest that supervisees who are at the beginning level of training will experience more role ambiguity in comparison with supervisees who are more advanced, whereas more advanced supervisees are more vulnerable to role conflicts (Olk & Friedlander, 1992). Although empirical results regarding training level and role difficulties are inconclusive at this point (Ladany & Friedlander, 1995; Nilsson & Anderson, 2004; Olk & Friedlander, 1992), higher levels of role difficulties have been found to be associated with less satisfaction with supervision and weaker ratings of the supervisory working alliance (Ladany & Friedlander, 1995; Nilsson & Anderson, 2004; Olk & Friedlander, 1992). In addition, a relationship between role ambiguity and counseling self-efficacy has been reported (Nilsson & Anderson, 2004), suggesting that uncertainty about supervisors' expectations may influence counseling self-efficacy, a variable considered critical for successful counseling skill development (Larson, 1998).

Counseling self-efficacy is defined as counselors' beliefs in their abilities to effectively counsel in the near future. It is believed that counseling self-efficacy influences how much anxiety supervisees will experience and how

much effort they expend on learning difficult and complex counseling behaviors (Larson, 1998). The results of several studies support the relationship between counselor self-efficacy and counseling training and supervision (e.g., Ladany, Ellis, & Friedlander, 1999; Larson et al., 1992). Although a negative correlation between counseling self-efficacy and role ambiguity was found in a study of international student supervisees (Nilsson & Anderson, 2004), it is not known whether such a relationship holds true for U.S. racial and ethnic minority students. Similarly, little is known about the influence of perceived prejudice on the different types of role conflict.

Empirical evidence from the supervision and counseling literatures indicates that cross-racial relationships in supervision and counseling can be affected by each member's current or past experiences of prejudice, racism, and oppression, or what some scholars refer to as cultural mistrust (Phelps, Taylor, & Gerard, 2001; Terrell & Terrell, 1984). In counseling, consequences of cultural mistrust (or healthy cultural paranoia; see Grier & Cobbs, 1968; Phelps et al., 2001) include individuals of racial and ethnic minority backgrounds expecting White counselors to be less expert, accepting, and trustworthy (Watkins & Terrell, 1988) and prematurely terminating counseling (Terrell & Terrell, 1984).

In comparison with their White supervisee counterparts, African American supervisees have been found to expect their supervisors to be less empathic and less congruent and to provide less regard (Vander Kolk, 1974). In Cook and Helms's (1988) study, African American, Latino, and Native American supervisees reported feeling less liked by their supervisors than did Asian American supervisees. In that study, feeling liked by supervisors emerged as a critical component, accounting for a significant amount of the variance in supervisees' satisfaction with supervision. Additionally, Duan and Roehlke (2001) found that supervisees involved in cross-racial supervision dyads were more satisfied with supervision when they felt more comfortable self-disclosing and perceived that their supervisors viewed them as having positive characteristics.

Although the research on cross-cultural factors in supervision and counseling is not extensive (Estrada et al., 2004), it does provide an initial and convincing argument that experiences of prejudice may influence the experiences of racial and ethnic minority individuals in one-on-one relationships with White individuals, especially when the White person holds the more powerful position in the relationship. To better understand the supervision needs of U.S. racial and ethnic minority supervisees, it is important to understand the roles of perceived prejudice and counseling self-efficacy on their supervision experiences, namely, their role difficulties. In this study, we tested the following four hypotheses: (a) higher levels of perceived prejudice are associated with more role ambiguity and more role conflict; (b) more role ambiguity and more role conflict are associated with less counseling self-efficacy; (c) level

of training, counseling self-efficacy, and perceived prejudice will predict role ambiguity and role conflict; and (d) experience of perceived prejudice will contribute to the variance in role ambiguity and role conflict above and beyond the contribution of level of training and counseling self-efficacy.

method

SAMPLE

Sixty-nine racial and ethnic minority supervisees, all U.S. citizens and all working with White supervisors, participated in this study. Of these, 33% (n = 23) self-described as Hispanic, Latino, or Latina; 23% (n = 16) as African American or Black; 19% (n = 13) as multiracial; 16% (n = 11) as Asian American or Pacific Islander; 6% (n = 4) as Arab American; and 3% (n = 4) 2) as American Indian or Alaska Native. Seventy-one percent (n = 49) were women. The participants' ages ranged from 22 to 47 years (M = 29.26, SD =5.10). All participants were enrolled in psychology programs accredited by the American Psychological Association (APA; counseling, 39%, n = 27; clinical, 37%, n = 26; school, 19%, n = 13; and professional-scientific, 4%, n = 3). (Percentages do not equal 100% because of rounding.) In terms of level of training, 20% (n = 14) were in the 1st or 2nd year of doctoral training with a previous highest degree being a bachelor's degree; 22% (n = 15) were in the 1st or 2nd year of doctoral training with a previous highest degree being a master's degree; 29% (n = 20) were in the 3rd, 4th, or 5th year of doctoral training; and 29% (n = 20) were on a predoctoral internship.

INSTRUMENTS

Counseling Self-Estimate Inventory (COSE; Larson et al., 1992). The COSE is a 37-item instrument, using a Likert-type scale (1 = strongly disagree, 6 = strongly agree), that assesses counselors' perceptions of their self-efficacy in counseling situations. Higher scores indicate greater degrees of self-perceived counseling self-efficacy. The COSE yields a total score and scores on five subscales: Microskills, Process, Difficult Client Behaviors, Cultural Competence, and Awareness of Values. An example of a COSE statement is "I am confident that I will be able to conceptualize my client's problems." Only the total scale score of the COSE was used in the present study. Among counseling trainees, evidence of validity has been supported by relationships between the COSE and positive feedback (Daniels & Larson, 2001); counseling training (Larson et al., 1999); and problem solving skills, self-esteem, and anxiety (Larson et al., 1992). Cronbach's alpha for the COSE has been documented, ranging from .87 (Larson et al., 1992) to .91 (Nilsson & Anderson, 2004). For the present sample, Cronbach's alpha was .90 for the COSE.

Majority-Minority Relations Survey (MMRS; Sodowsky, Lai, & Plake, 1991). The MMRS is a 38-item instrument, using a Likert-type scale (1 indicates strong

affiliation with majority group, suggesting assimilation; 6 = indicates strong affiliation with one's minority group, suggesting rejection of American culture), that produces a total score and scores on three subscales: Perceived Prejudice, Acculturation, and Language Usage. Acculturation is considered a multidimensional construct with prejudice being one of its correlates (Roysircar & Maestas, 2002). Only the Perceived Prejudice subscale was used in the present study. This 20-item subscale assesses the degree to which racial and ethnic minority people feel accepted by people in the majority culture; whether they feel overlooked for recognition because of their ethnicity; and whether they feel their history, values, and lifestyle are not cared for by the majority culture. An example of a statement from this subscale is "The majority people try to fit me into the stereotypes that they have about my ethnic group." Higher scores indicate more experiences of perceived prejudice.

The MMRS was originally developed for Hispanics and Asian Americans but has been used for other minority groups. For example, Osvold and Sodowsky (1995) used perceived prejudice as a variable in a study of Native American and African American women and found it to be a reliable measure for these groups. Given Osvold and Sodowsky's findings and the face validity based on our own examination of the test items, we determined to use the Perceived Prejudice subscale as a measure of experience of prejudice for our sample of U.S. racial and ethnic minority supervisees. Evidence of validity of the Perceived Prejudice subscale has been supported by its relationships with generation status; firstgeneration immigrants were found to perceive more prejudice than second-, third-, and fourth-generation immigrants (Sodowsky et al., 1991). Perceived prejudice is also associated with depressive symptoms among international students from South Asia (Rahman & Rollock, 2004). In previous studies, Chronbach's alpha for the Perceived Prejudice subscale has ranged from .82 to .92 (Osvold & Sodowsky, 1995; Sodowsky et al., 1991). For the present sample, Cronbach's alpha was .89 for the Perceived Prejudice subscale.

Role Conflict and Role Ambiguity Inventory (RCRAI; Olk & Friedlander, 1992). The RCRAI is a 29-item instrument, using a Likert-type scale (1 = not at all, 5 = very much so), that measures supervisees' perceptions of role difficulties in supervision. Higher scores indicate greater perceptions of role difficulties. The RCRAI yields two subscales: Role Ambiguity (16 items) and Role Conflict (13 items). Role ambiguity is defined as supervisees' uncertainty about supervisory expectations, uncertainty about performance in accordance with these expectations, and uncertainty regarding their supervisors' evaluation criteria. An example of a role ambiguity statement is "I was not certain about what material to present to my supervisor." Role conflict is defined as supervisees' experiences of opposing expectations of behavior because of performing multiple roles simultaneously, such as being a supervisee, student, therapist, and colleague. An example of a role conflict statement is "I disagreed with my supervisor about implementing a specific technique, but I also wanted to do what the supervisor thought best."

Evidence of validity for the RCRAI has been demonstrated among counseling trainees, in that higher scores are associated with dissatisfaction with supervision, more anxiety (Olk & Friedlander, 1992), and a weaker supervisory working alliance (Ladany & Friedlander, 1995; Nilsson & Anderson 2004). Role ambiguity has been associated with lower levels of counseling self-efficacy among international students in psychology training (Nilsson & Anderson, 2004). Nelson and Friedlander (2001) also found that students with high scores on the Role Conflict subscale often reported harmful dual relationships and power struggles with supervisors. Cronbach's alphas have been reported as .91 for the Role Ambiguity subscale and .89 for the Role Conflict subscale (Olk & Friedlander, 1992). For the present sample, Cronbach's alpha was .91 for both the Role Ambiguity and Role Conflict subscales.

In addition, the participants completed a demographic questionnaire that recorded age, gender, religious preference, race or ethnicity, relationship status, current degree program, years of training, and highest degree earned.

PROCEDURE

The data were collected in conjunction with a larger study that focused on international students in counseling training. U.S. Caucasian and racial and ethnic minority students were also invited to participate in the study. However, as of now, only data on the international students have been reported. A total of 250 training directors (counseling, n = 50; clinical, n = 50; school, n = 40; professional-scientific, n = 10; and internship, n = 100) were randomly selected from all APA-accredited programs. Of these, 151 training directors agreed to distribute surveys along with consent forms to students in their training programs or internship sites. The training directors at program sites were instructed to randomly distribute two surveys to U.S. racial and ethnic minority students in their programs, whereas training directors at internship sites were instructed to randomly distribute only one survey because of the small number of interns per site. After distributing the surveys, the training directors were instructed to return the enclosed postcards on which they indicted how many surveys they were able to distribute. We chose not to follow up with a second mailing, because doing so would involve the training directors keeping track of which students had received surveys. The response rate was 44% (87 responses from 196 distributed surveys). Of these 87 racial and ethnic minority supervisees, 69 reported working with White supervisors.

results

Several univariate analyses of variance were performed to rule out any differences between counseling and clinical students on the study variables. Students from other programs, such as school psychology, were not included because of the small sample sizes. No statistically significant differences were found between students in counseling and clinical

programs. Table 1 presents the descriptive statistics, including means, standard deviations, and correlation matrix for all study variables.

Correlational analyses supported our first hypothesis. Perceived prejudice correlated with role ambiguity (r = .24, p < .05) and with role conflict (r = .27, p < .05). The second hypothesis was partially supported given that role ambiguity was negatively correlated with counseling self-efficacy (r = -.32, p < .01), but no significant relationships were obtained between role conflict and counseling self-efficacy. All results showed small effect sizes.

The third and fourth hypotheses were tested via two hierarchical regression analyses, one on role ambiguity and one on role conflict. Level of training, counseling self-efficacy, and perceived prejudice were the predictor variables in both analyses. Level of training and counseling self-efficacy were entered in the first step, and perceived prejudice was entered in the second step. The hypotheses were partially supported. Role ambiguity was not predicted by the linear combination of level of training and counseling self-efficacy: for Step 1, F(2, 59) = 2.97, p > .05, $R^2 = .09$. However, the model became significant when perceived prejudice was entered, even though perceived prejudice did not add to the variance in role ambiguity above and beyond level of training and counseling self-efficacy: for Step 2, F(3, 58) = 3.36, p < .05, $R^2 = .15$ (small effect size); $\Delta R^2 = .06$, $\Delta F(1, 58) = 3.84$, p > .05. These results indicate that the linear combination of level of training, counseling self-efficacy, and perceived prejudice predicts role ambiguity (see Table 2).

Role conflict was not predicted by the linear combination of level training and counseling self-efficacy: for Step 1, F(2, 59) = 0.71, p > .05, $R^2 = .02$. However, perceived prejudice added to the variance in role conflict above and beyond counseling self-efficacy and level of training, although the model as a whole was not significant: for Step 2, F(3, 58) = 2.00, p > .05, $R^2 = .09$; $\Delta R^2 = .07$, $\Delta F(1, 58) = 4.53$, p < .05 (see Table 2). These results suggest that, among the predictor variables, perceived prejudice was the only variable that explained unique variance in role conflict.

TABLE 1

Means, Standard Deviations, and Correlation Matrix
for All Study Variables

| Variable | М | SD | 1 | 2 | 3 | 4 | 5 |
|-------------------------------------|--------|-------|---|------|-------|------|-----|
| 1. COSE | 165.78 | 22.98 | _ | 32** | 13 | .00 | .13 |
| 2. RCRAI Role Ambiguity | 32.65 | 12.38 | | _ | .68** | .24* | 03 |
| 3. RCRAI Role Conflict | 22.98 | 8.44 | | | _ | .27* | .11 |
| MMRS Perceived | | | | | | | |
| Prejudice | 60.64 | 16.66 | | | | _ | .06 |
| Level of training | 2.66 | 1.10 | | | | | _ |

Note. n = 62-69. COSE = Counseling Self-Estimate Inventory; RCRAI = Role Conflict and Role Ambiguity Inventory; MMRS = Majority-Minority Relations Survey. *p < .05. **p < .01.

TABLE 2
Summary of Hierarchical Regression Analyses for Variables Predicting Role Difficulties

| Variable | В | SE B | β | t | R ² |
|---------------------------|-----|------|-----|--------|----------------|
| Predicting role ambiguity | | | | | |
| Step 1 | | | | | |
| Level | 37 | 1.35 | 03 | -0.28 | |
| COSE | 16 | 0.06 | 30 | -2.43* | .09 |
| Step 2 | | | | | |
| Prejudice | .18 | 0.09 | .24 | 1.96 | .15* |
| Predicting role conflict | | | | | |
| Step 1 | | | | | |
| Level | .95 | 0.98 | .12 | 0.97 | |
| COSE | 03 | 0.05 | 08 | -0.63 | .02 |
| Step 2 | | | | | |
| Prejudice | .14 | 0.07 | .27 | 2.12* | .09 |
| -1 | | | | | |

Note. n = 61. Level = level of training; COSE = Counseling Self-Estimate Inventory; Prejudice = Majority-Minority Relations Survey Perceived Prejudice. *p < .05.

discussion

This study examined the relationships between training level, counseling self-efficacy, perceived prejudice, and role difficulties in supervision in U.S. racial and ethnic minority supervisees working with White supervisors. As hypothesized, perceived prejudice was significantly correlated with both role ambiguity and role conflict, indicating that more experiences of prejudice were associated with more uncertainty regarding supervisor's expectations and evaluations and how to manage the sometimes contradictory roles of being a student, supervisee, colleague, and counselor simultaneously. These findings support the ideas that supervisory relationships are not isolated from the social contexts in which we live and that racial and ethnic minority students' experiences of perceived prejudice, among other factors, are associated with their experiences in supervision.

Consistent with previous research, role ambiguity was associated with counseling self-efficacy. This finding supports previous results of a relationship between counseling self-efficacy and role ambiguity among international students (Nilsson & Anderson, 2004) and extends it to U.S. racial and ethnic minority supervisees. It is possible that when supervisees feel more certain about supervisory expectations, they experience higher levels of efficacy for working with clients. It may also be that when students feel more efficacious about working with clients, they gain skills that assist them with clarifying issues in supervision. In contrast, the results failed to show any significant relationship between role conflict and counseling self-efficacy. It is possible that feeling more competent with one's clients may not necessarily give racial and

ethnic minority supervisees the ability to better navigate the roles of being a counselor, supervisee, and colleague when working with a White supervisor.

It is noteworthy that perceived prejudice, together with level of training and counseling self-efficacy, predicted role ambiguity and that it was the sole predictor of role conflict. It appears that experiences of prejudice increase U.S. racial and ethnic minority students' uncertainty in how to relate to White supervisors and manage the different roles, expectations, and possible conflicts inherent in the supervisory relationship. As a whole, these findings clearly provide empirical support to the propositions made by Brown and Brown-Landrum (1995) and Fong and Lease (1997) that experiences associated with prejudice, oppression, and White privilege can influence racial and ethnic minority supervisees' experiences in supervision.

There are several limitations in this study that must be noted. First, the sample size was small, likely because of having training directors distributing the surveys, which resulted in no follow-up contact with nonresponding students. Additionally, we do not know the method training directors used to randomly distribute surveys to students. Furthermore, because of the small sample size, all U.S. racial and ethnic minority participants were collapsed into one group, disregarding the great diversity within this group. Not only may students from different racial and ethnic backgrounds have unique experiences of prejudice, but their experiences in counseling training may also differ. In addition, no data were collected on supervisees' and supervisors' prior multicultural training and experiences or on the supervisors' gender. It is possible that such variables could moderate or mediate this study's findings. Future research on the influence of such variables is recommended.

The results from this study indicate that at least some U.S. racial and ethnic minority supervisees have experienced prejudice and that those experiences are associated with their experiences in supervision. Specifically, the relationship between prejudice and role difficulties in supervision highlights the importance of White supervisors explicitly informing supervisees about expectations and discussing the roles that supervisees play in the supervisory relationship. By providing detailed information about what will take place in supervision and the involvement of supervisees in this relationship, supervisors may help reduce possible role conflict and role ambiguity for U.S. racial and ethnic minority supervisees.

Furthermore, we want to highlight the need for supervisors to validate and respect experiences of prejudice of U.S. racial and ethnic minority supervisees and the influence such experiences may have on supervisees' behaviors in supervision. For example, possible hesitancy in self-disclosure must be respected and understood (Brown & Brown-Landrum, 1995; Fong & Lease, 1997). Supervisors must also take caution to refrain from harming supervisees by fostering, intentionally or unintentionally, a supervisory relationship that perpetuates racism. Learning about cultural mistrust (Grier & Cobbs, 1968; Phelps et al.,

2001), White privilege (McIntosh, 1988), and color-blind racial attitudes (see Neville et al., 2001) may provide supervisors with an understanding of how prejudice and racial dynamics may enter the supervisory relationship. Moreover, by acknowledging the experiences of prejudice in the lives of U.S. racial and ethnic minority supervisees, supervisors acknowledge some of the strengths and wisdom that these supervisees bring to their work with clients.

Continuing research in the area of prejudice and its relationship with other supervisory variables, such as self-disclosure, working alliance, and satisfaction, seems warranted. Examination of other variables that may interfere in the process of supervision, such as racism in training institutions and attitudes held by supervisors, may broaden the understanding of cross-racial and multicultural supervision. Such knowledge will inevitably further understanding and improve training and supervision of U.S. racial and ethnic minority supervisees.

references

- Bernard, J. M., & Goodyear, R. K. (2004). Fundamentals of clinical supervision. Needham Heights, MA: Allyn & Bacon.
- Brown, M. T., & Brown-Landrum, J. (1995). Counselor supervision: Cross-cultural perspectives. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (pp. 263–286). Thousand Oaks, CA: Sage.
- Cook, D. A., & Helms, J. E. (1988). Visible racial/ethnic group supervisees' satisfaction with cross-cultural supervision as predicted by relationship characteristics. *Journal of Counseling Psychology*, 35, 268–274.
- Daniels, J. A., & Larson, L. M. (2001). The impact of performance feedback on counseling self-efficacy and counselor anxiety. *Counselor Education and Supervision*, 41, 120–130.
- Duan, C., & Roehlke, H. (2001). A descriptive "snapshot" of cross-racial supervision in university counseling center internships. *Journal of Multicultural Counseling and Development*, 29, 131–146.
- Estrada, D., Frame, M. W., & Williams, C. B. (2004). Cross-cultural supervision: Guiding the conversation toward race and ethnicity. *Journal of Multicultural Counseling and Development*, 32, 307–319.
- Fong, M. L., & Lease, S. H. (1997). Cross-cultural supervision: Issues for the White supervisor. In D. B. Pope-Davis & H. L. K. Coleman (Eds.), Multicultural counseling competencies: Assessment, education, and training and supervision (pp. 387–405). Thousand Oaks, CA: Sage.
- Garrett, M. T., Borders, L. D., Crutchfield, L. B., Torres-Rivera, E., Brotherton, D., & Curtis, R. (2001). Multicultural superVISION: A paradigm of cultural responsiveness for supervisors. Journal of Multicultural Counseling and Development, 29, 147–158.
- Goodyear, R. K., & Guzzardo, C. R. (2000). Psychotherapy supervision and training. In S. D. Brown & L. W. Lent (Eds.), *Handbook of counseling psychology* (pp. 83–108). New York: Wiley. Grier, W., & Cobbs, P. (1968). *Black rage*. New York: Bantam Books.
- Ladany, N., Ellis, M. V., & Friedlander, M. L. (1999). The supervisory working alliance, trainee self-efficacy, and satisfaction. *Journal of Counseling & Development*, 77, 447–455.
- Ladany, N., & Friedlander, M. L. (1995). The relationship between the supervisory working alliance and trainees' experience of role conflict and role ambiguity. *Counselor Education and Supervision*, 34, 220–231.
- Larson, L. M. (1998). The social cognitive model of counselor training. The Counseling Psychologist, 26, 219–273.
- Larson, L. M., Clark, M. P., Wesley, L. H., Koraleski, S. F., Daniels, J. A., & Smith, P. L. (1999). Videos versus role play to increase counseling self-efficacy in prepracticum trainees. *Counselor Education and Supervision*, 38, 237–248.

- Larson, L. M., Suzuki, L. A., Gillespie, K. N., Potenza, M. T., Bechtel, M. A., & Toulouse, A. L. (1992). Development and validation of the Counseling Self-Estimate Inventory. *Journal of Counseling Psychology*, 39, 105–120.
- Loganbill, C., Hardy, E., & Delworth, U. (1982). Supervision: A conceptual model. The Counseling Psychologist, 10, 3–42.
- McIntosh, P. (1988). White privilege and male privilege: A personal account of coming to see correspondences through work in women's studies (Working Paper Series No. 189). Wellesley, MA: Wellesley College, Center for Research on Women.
- Nelson, M. L., & Friedlander, M. L. (2001). A close look at conflictual supervisory relationships: The trainee's perspective. *Journal of Counseling Psychology*, 48, 283–395.
- Neville, H. A., Worthington, R. L., & Spanierman, L. B. (2001). Race, power, and multicultural counseling psychology: Understanding White privilege and color-blind racial attitudes. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (2nd ed., pp. 257–288). Thousand Oaks, CA: Sage.
- Nilsson, J. E., & Anderson, A. Z. (2004). Supervising international students: The role of acculturation, role ambiguity, and multicultural discussions. *Professional Psychology: Research and Practice*, 35, 306–312.
- Olk, M. E., & Friedlander, M. L. (1992). Trainees' experiences of role conflict and role ambiguity in supervisory relationships. *Journal of Counseling Psychology*, *39*, 389–397.
- Osvold, L. L., & Sodowsky G. R. (1995). Eating attitudes of Native American and African American women: Differences by race and acculturation. *Explorations in Ethnic Studies*, 18, 187–210.
- Phelps, R. E., Taylor, J. D., & Gerard, P. A. (2001). Cultural mistrust, ethnic identity, racial identity, and self-esteem among ethnically diverse Black university students. *Journal of Counseling & Development*, 79, 209–216.
- Pinderhughes, E. (1989). Understanding race, ethnicity, and power: The key to efficiency in clinical practice. New York: Free Press.
- Rahman, O., & Rollock, D. (2004). Acculturation, competence, and mental health among South Asian students in the United States. *Journal of Multicultural Counseling and Development,* 32, 130–142.
- Roysircar, G., & Maestas, M. L. (2002). Assessing acculturation and cultural variables. In K. S. Kurasaki, S. Okazaki, & S. Stanley (Eds.), Asian American mental health: Assessment theories and methods (pp. 77–94). New York: Kluwer Academic/Plenum.
- Sodowsky, G. R., Lai, E. W. M., & Plake, B. S. (1991). Moderating effects of sociocultural variables on acculturation attitudes of Hispanics and Asian Americans. *Journal of Counseling & Development*, 70, 194–204.
- Terrell, F., & Terrell, S. L. (1984). Race of counselor, client sex, cultural mistrust level, and premature termination from counseling among Black clients. *Journal of Counseling Psychology*, 31, 371–375.
- Vander Kolk, C. J. (1974). The relationship of personality, values, and race to anticipation of the supervisory relationship. Rehabilitation Counseling Bulletin, 18, 41–46.
- Watkins, C. E., & Terrell, F. (1988). Mistrust level and its effects on counseling expectations in Black client-White counselor relationships: An analogue study. *Journal of Counseling Psychology*, 35, 194–197.