

CULTURAL AND RELATIONAL ISSUES IN SUPERVISION

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June 13 & 20, 2023

WELCOME EVERYONE!

- Introductions from Ta'janette and Penny
- IN THE CHAT:
 - Number of years you've been supervising
 - One or two (okay, up to 3) words that come to mind when you think about being a supervisor!
- What do you LOVE about supervising? Discuss!
- Okay, what do you...NOT love?

LEARNING OBJECTIVES

- Describe distinct responsibilities of supervision and identify participants' unique strengths and growth areas as supervisors
- Discuss formation and maintenance of supervisory relationships, including attention to safety and power, providing feedback focused on intern learning and growth, and managing common trainee issues
- Define major tenets of multicultural and feminist supervision and begin to analyze how to incorporate aspects of these approaches into their own supervisory style
- Discuss microaggressions and common trainee experiences with cultural issues in therapy and supervision and practice how to address them
- Identify strengths and growth areas in multicultural supervision competence

WORKSHOP OUTLINE

- What is Supervision: Reviewing and Revisiting
- Models of Supervision
- Multicultural and Feminist Perspectives of SV
- Multicultural Supervision
- Multicultural Competencies in SV
- Supervisory Relationship
- Supervisor Support, Development, and Self-Care/Community Care

SELF-ASSESSMENT

- Supervisor Self-Efficacy Assessment
 - Scan the SSE, making note of items that jump out at you as either strengths or growth areas (in the interest of time, do NOT complete the whole thing)
- Small group discussion about where you are!

SUPERVISION IS COMPLEX!

HOW COMPLEX IS IT??!!

What are all the dimensions/demands/systems that contribute?

NAMING ONE COMPLEXITY

- Your supervisees will POSSIBLY (though not at all certainly) have had more education and training in developing cultural competence, cultural humility, and multicultural issues in supervision.
 - The literature in this area for all aspects of practice keeps expanding (although there are still a lot of gaps)
 - This may mean that they *literally* know more about or have more experience with this particular aspect of practice than you do, or they *may think* they know more about this than you do
- Your supervisees also will almost assuredly have had a course in Supervision in grad school, which some of you may or may not have
- What are potential consequences of this?

WHAT IS SUPERVISION? REVIEWING AND REVISITING

SUPERVISION: WHAT IS IT? WHAT IS IT NOT

- THE GOOD, THE BAD, AND THE UUUUUUGLY!
Brief examples of YOUR OWN supervisory experiences
- Using APA's (2014) definition, supervision is a "**distinct professional practice** employing a **collaborative relationship** that has both facilitative and evaluative components, that extends over time, which has the goals of enhancing the professional competence and science-informed practice of the supervisee, monitoring the quality of services provided..."
- Roles/responsibilities - "The supervisor serves as **role model** for the supervisee, fulfills the highest **duty of protecting the public**, and is a **gatekeeper for the profession** ensuring that supervisees meet competence standards in order to advance to the next level or to licensure." - APA
- Effective SV ultimately leads to better clinical outcomes

SV GUIDELINES APA GUIDELINES

- APA Guidelines on Supervision are organized by seven domains (that can overlap practically and conceptually)
 - Supervisor Competence
 - Diversity
 - Supervisory Relationship
 - Professionalism
 - Assessment/ Evaluation/ Feedback
 - Problems of Professional Competence
 - Ethical, Legal, and Regulatory Considerations

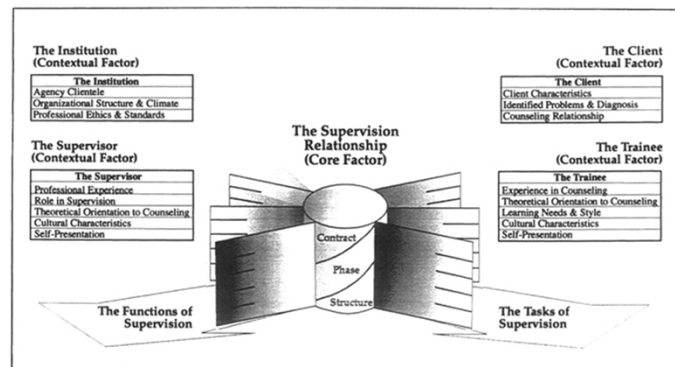
SUPERVISION MODELS (BRIEFLY)

- There are MANY different models of supervision. They can often be grouped into one of the following categories:
 - Orientation-specific
 - Utilizes the tenets and analyses of specific theories
 - Developmental
 - Recognizes stages of counselor development and how the movement through stages is not always linear
 - Integrated
 - Addresses skill, competency development, affective issues, and contextual dimensions of supervision

COMMONLY REFERENCED SUPERVISION MODELS

- Integrative Developmental Model (McNeill & Stoltenberg, 2016)
- Discrimination Model (Bernard & Goodyear, 2009)
- Systemic (Holloway, 1995)
- Psychodynamic
- Cognitive Behavioral
- Person-Centered

Systems Approach Holloway, 1995



MULTICULTURAL AND FEMINIST PERSPECTIVES

- Feminist Clinical Supervision
 - Incorporates elements from multicultural and other critical psychologies
 - Centers gendered experiences
 - Analyzes power and gender to promote a supervisory relationship that is egalitarian
 - Endeavors to empower the supervisee
 - Conceptualizes supervisee and client strengths and areas of challenge using a multicultural lens

MULTICULTURAL SUPERVISION

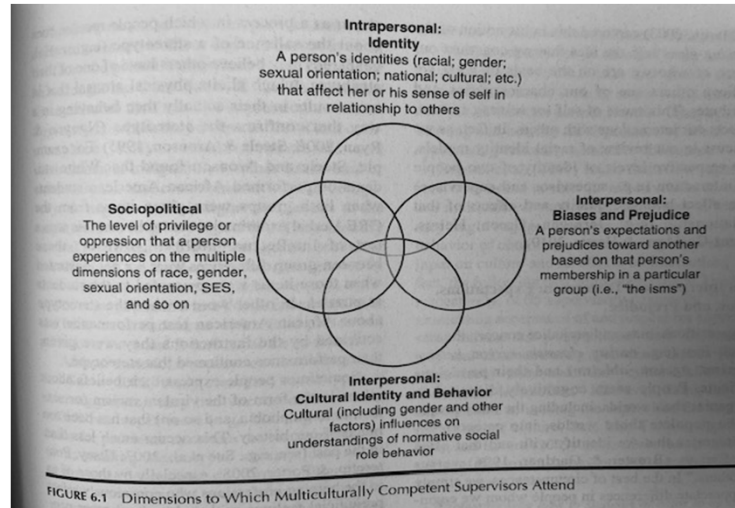
- SUPERVISOR IS PIVOTAL IN ENSURING MULTICULTURAL MATTERS ARE ADDRESSED APPROPRIATELY
- SV are often behind SVEE in multicultural awareness and knowledge
- Effective MC SV requires a commitment to developing critical consciousness
- Effective MC SV requires identity development
- Also **cultural humility**: self-reflective, other-oriented, and power-attenuating openness to clients as multicultural beings (Thomas Tormala et al, 2018)
- A strong Working Alliance is a prerequisite to productive MC SV
- Our cultural selves should enrich and energize supervision, not deplete it

MULTICULTURAL COMPETENCIES

Multicultural Competencies

Bernard & Goodyear, 2019

Dimensions
to
which
Multiculturally
Competent
Supervisors
Attend:



SUPERVISORY RELATIONSHIP

“A RELATIONSHIP ABOUT A RELATIONSHIP ABOUT OTHER RELATIONSHIPS”

- Supervision is a 3-person (or more) system
- Supervision relationship is “a relationship about a relationship about other relationships”
- You both have your multifaceted and intersecting identities
- You both exist in a sociopolitical context
- You have your experiences with other supervisees...
- Your supervisee carries in all their previous supervisors...
- And then you throw in Group Supervision...

POWER IN SUPERVISION




- Supervision is hierarchical by definition and design
 - This means that power differences are inherent
- Types of power per Holloway, 1995
 - Reward
 - Coercive
 - Legitimate
 - Expert
 - Referent

Power Dynamics in Supervision Scale

Cook, McKibben, & Wind, 2018

Table 1

Sample Power Dynamics in Supervision Scale Items With the Visual Analog Scale

I identified the goals for this supervision session		My supervisor identified the goals for this supervision session
I had the power in our supervisory relationship in this supervision session		My supervisor had the power in our supervisory relationship in this supervision session
I was able to speak freely in this supervision session		I withheld information in this supervision session

Let's Discuss!

How have you or how are you willing to acknowledge and navigate power in supervision?

STRATEGIES TO WORK WITH POWER IN SUPERVISION

- Recognize that the power is the property of the relationship and does not solely reside within one person or the other (Hinde, 1979).
- Ensure that there is mutual involvement
 - This could include agenda setting and inviting the supervisee to come with two or more goals and/or things to discuss during each supervision session
- Acknowledge things that you do not know, when appropriate
- Discuss expectations for supervision and one another
- Discuss fears and needs at the outset and throughout supervision
- Create an environment and relationship where supervisees feel sufficiently safe to speak freely and provide feedback when things are and are not working well

WORKING ALLIANCE

(Bernard & Goodyear, 2019)

- **Working alliance** is the “collaboration to change”
- Comprised of three elements:
 - 1) Goals: What we’re here to accomplish
 - 2) Task : How we’re going to do that
 - 3) Bond: How together we are/feel in this
- Shared goals and expectations—congruence of these expectations is important

Good WA helps:

- SVEE willingness to disclose material
- Adherence to tx protocols
- Quality of therapeutic alliance between SVEE and clients!
- Supervisee disclosure in supervision

STRATEGIES TO ESTABLISH/MAINTAIN A GOOD WORKING ALLIANCE

- Good to have a **SV-SVEE contract** at the outset of work
- Role modeling ethical behavior
- Discuss and revisit establishing trust, relationship: “How are we doing?”
- Clarity in Evaluation: summative and formative
- Supervisor style: What is your style, how does that work with SVEE needs, and are you able to “tweak” to create productive learning environment
- Self-disclosure (including struggles you’ve had as a clinician!!)
- Use of you influence as expert:
 - Acknowledging there may be things the SVEE knows that you aren’t as familiar with, but you also have experience and training that exceeds theirs. Ideally, you are modeling cultural humility while also asserting your expertise

SUPERVISEE RESISTANCE AND CULTURAL COMPETENCE (Bernard & Goodyear, 2019)

Most new SV say biggest difficulty is how to intervene with resistant SVEE!

- Resistance can be self-protective, especially if SVEE has had previous negative supervision/training experiences
 - Students who have been marginalized/invalidated or experienced supervision or training that has been hostile to incorporation of culture
- Shouldn’t be used to blame the supervisee—resistance is a challenge but blame should never be invoked

Manifestations of resistance

- Resist SV influence—deflecting discussions, non-disclosing
- Resist the supervisory experience itself—late to sessions, not prepared
- Noncompliant with tasks—don’t videotape when asked
- Noncompliant with tx plans with client

DISCUSS: RESISTANCE TO DEVELOPING CULTURAL COMPETENCE AND HUMILITY: WHAT MIGHT BE SOME REASONS?

SUPERVISEE SHAME AND ANXIETY AND CULTURAL COMPETENCE

SVEE Shame—"I am flawed"; "I should know more/be better at this"

- SV can create minimally shame inducing environment
- SV should recognize signs, discuss at outset with SVEE
 - *IN YOUR EXPERIENCE, WHAT ARE SOME OF THESE SIGNS?*

SV Anxiety

- Two fronts of anxiety: Work with clients and Work with SV
- Anxiety affects
 - 1) ability to learn 2) ability to demonstrate skills 3) manner of responding to SV
- Optimal level of anxiety: Yerkes-Dodson (Inverted U)
- SV needs to balance challenge and support, or support and evaluation
- Imposter syndrome

STRATEGIES TO MANAGE RESISTANCE, SHAME, AND ANXIETY

- Focus the SV on client (case conceptualization) than on SVEE behavior
- Invoke SVEE curiosity and observe process: "Hm. I'm noticing we often get off track when we bring up cultural dynamics between you and your clients. Let's brainstorm what's going on"
- Normalize the developmental nature of SV and resistance, shame, imposter syndrome, and anxiety are often part of development (and can be especially potent when discussing cultural issues, identity, and our cultural missteps, areas of ignorance, and harms we have experience or perpetrated in the past)
- Share struggles you have had
- Use assessment measures as a guide and/or provide resources (also normalizes)

HOW ABOUT US, SUPERVISORS?

(SPOILER ALERT: ALL THAT STUFF WE JUST DISCUSSED CAN HAPPEN FOR US, TOO!)

HOW ABOUT YOUR ONGOING DEVELOPMENT OF CULTURAL COMPETENCE, EMBRACING CULTURAL HUMILITY?

STRENGTHS? GROWTH AREAS? STRATEGIES?

LET'S TRY ANOTHER SELF-ASSESSMENT!: MULTICULTURAL SUPERVISION COMPETENCIES QUESTIONNAIRE

DEALING DIRECTLY WITH CULTURAL ISSUES IN THERAPY: RESOURCE

- Supervisees may feel stuck or frozen about how to respond to cultural content in session, or they may need additional practice
- Let's check a couple out!
- Deliberate Practice Exercises!

CASE VIGNETTE

- Supervisee/intern (he/him) identifies as a gay male. He requested experience with forensic populations during the training year, and was set up to run a virtual group for adult men in jail. During the first session, one group member made derogatory comments about the supervisee having effeminate mannerisms; a couple other group members snickered, and others were silent. Intern felt flustered and intimidated, and said he essentially ignored the comments and moved forward with the group lesson. Afterwards, he spoke to our office's masters-level clinical manager (who technically supervised both me and the supervisee, and who is the one who set up the group opportunity). Manager immediately said the intern no longer needs to run the group, and intern agreed to back out. He then came to our weekly supervision a few days later and updates you on what happened.

- 1) **What are the issues you can identify here?**
- 2) **Where would you start? What are your priorities as a supervisor?**

MICROAGGRESSIONS

- Coined in 1970 to describe dismissals and insults inflicted upon Black people
- Refer to intentional or unintentional actions, statements, or environmental "indignities" that are hostile or negative towards people of color (Sue et. al 2007)
- Often commonplace, subtle, and brief
- Often psychologically taxing

<https://www.youtube.com/watch?v=cPaVit6TJiw>

Categories of Microaggressions

Sue, 2007

- **Microassaults**
 - "Conscious and intentional actions or slurs, such as using racial epithets, displaying swastikas or deliberately serving a white person before a person of color in a restaurant."
- **Microinsults**
 - "Verbal and nonverbal communications that subtly convey rudeness and insensitivity and demean a person's racial heritage or identity."
- **Microinvalidations**
 - "Communications that subtly exclude, negate or nullify the thoughts, feelings or experiential reality of a person of color."

THE PERSON IN THE TARGET OR AGENT GROUP MAY NOT IMMEDIATELY APPRAISE THE SITUATION AS A MICROAGGRESSION

What is the Impact of Microaggressions?

- We have ALL consciously and subconsciously been exposed to certain messages about particular groups/individuals
- Even with our best intentions, we can still have an impact that is harmful to others
- The "micro" part of microaggressions may suggest that these are small things, but they can have a significant impact on a person

<https://www.youtube.com/watch?v=nQ9l7y4UuxY>

<https://www.mtv.com/episodes/zmbp3z/decoded-what-if-white-people-experienced-microaggressions-season-1-ep-8>

MICROINTERVENTION

(Sue et al, 2019)

STRATEGY	OBJECTIVES	TACTIC	EXAMPLE
MAKING THE "INVISIBLE" VISIBLE	Bring microaggression to forefront of person's awareness	Undermine the metacommunication	"You assume I am dangerous because of the way I look." "What was that all about? Are you afraid of him?"
DISARM THE MICROAGGRESSION	Instantly stop or deflect the microaggression	Express disagreement State values and set limits State what is happening Use an exclamation	"I don't agree with what you just said." "While I understand that you have a right to say what you want, I'm asking you to show a little more respect for me by not making offensive comments." "Really? Come on!" "Ouch!"
EDUCATE THE OFFENDER	Engage in 1-on-1 dialogue	Lower the defenses Differentiate between intent and impact	"I know you didn't realize this, but that comment you made was demeaning to Maryam because not all Arab Americans are a threat to

Let's Practice Handling Microaggressions!

As TARGET in SV

SVEE assumes African American clients who struggle with grief have had people die due to police brutality w/o asking them first how their loved ones passed away (to Af-Am SV)

"Based on what I have read about the Latino community," to a Latino supervisor when stating assumptions about community norms.

"I'm unsure of how to work with Native American clients, as I feel unable to relate to them"

As PERPETRATOR in SV

Your supervisee points out in group supervision that you tend to interrupt female trainees and not male trainees

As SV to SVEE experiencing from client

"You don't look like you're from around here. Where are you from?"

"I can't tell if you're a man or a woman"

"

CULTURALLY RESPONSIVE/ UNRESPONSIVE SUPERVISION (Burkhard et al, 2006)

THESE EXIST on a continuum, both within a supervision experience with a single supervisor and across supervision experiences with multiple supervisors.

RESPONSIVE

Supervisor "...acknowledges the existence of, show interest in, demonstrate knowledge of, and express appreciation for the client's [and supervisee's] ethnicity and culture and that place the client's [and supervisee's] problem in a cultural context" (p. 402).

OUTCOME: Supervisees felt supported for exploring cultural issues, which positively affected the supervisee, the supervision relationship, and client outcomes.

UNRESPONSIVE

Supervisors sought to intentionally dismiss the relevance of culture, or intentional and unintentional acts of omission regarding cultural issues.

OUTCOME: Negatively affected the supervisee, the relationship, and/or client outcomes.

***Supervisees of color experienced unresponsiveness more frequently and with more negative effects**

SUPERVISEES FEELING OFFENDED BY CLIENTS

(HaRim Ahn et al, 2020)

When feeling offended (regarding their own identities from clients) supervisees:

- 1) Felt frozen after the events and uncertain about how to respond,
- 2) Wished they had handled the events differently
- 3) Had difficulty maintaining an empathic, nonjudgmental therapeutic stance

Trainees also struggled when clients expressed opinions or beliefs that ran counter to their own values.

Trainees wished they had been more direct, but they felt they lacked the skills to address it therapeutically and did not want to harm the relationship

Most trainees talked with supervisors, but some did not because they thought

- a) Supervisors could not help
- b) Offense was not important enough

Advice for supervisors:

- *Tune in to trainee therapists' potentially strong reactions to clients from different cultural/values backgrounds.
- *Initiate conversations about how trainees are reacting to their clients, especially if clients hold privileged identities.
- *Discuss and model talking openly about such concerns.

SUPERVISEES EXPERIENCING MICROAGGRESSIONS AND HARASSMENT FROM CLIENTS (Bautista-Biddle et al, 2020)

ETHICAL IMPERATIVE TO PROTECT TRAINEES:

The APA ethics code explicitly protects psychology graduate students from harassment and discrimination both in working with patients and within supervisory relationships. Supervisors are additionally instructed to avoid harm or mistreatment of their supervisees

"Some trainees are expected to endure harassment, microaggressions, and discrimination under the guise of surviving a "good training experience." This may be detrimental to trainees' professional development and emotional well-being, especially if they are not receiving culturally competent supervision from supervisors."

In one recent (small) study in a VA system, the majority of trainee respondents AND SUPERVISORS had experienced harassment from clients based on their identities

Research indicates marginalized trainees are confronted by potentially hostile patients, in addition to lacking support from supervisors in how to handle such situations. They experience racism, sexism and harassment, and homophobia

Suggestions:

- Develop an integrative, developmental model of SV that considers identity development of SV and SVEE
- Be proactive in discussing identities, previous experiences of microaggressions/harassment from clients
- Peer support and mentoring opportunities

FIRST QUESTION TO ASK A SVEE WHO HAS EXPERIENCED HARASSMENT: DO YOU FEEL SAFE?

DEPTH OF CONVERSATION OF IDENTITY IN SUPERVISION (Phillips et al, 2017)

Depth:

An on-going, thoughtful discussion that involves self-reflection and intimate sharing between supervisee and supervisor.

A deep discussion may involve a turning point, or series of turning points, at which shifts occurred in your construction of your own personal identity and professional perspectives regarding multicultural diversity.

Perceived depth of discussions of **gender, race/ethnicity, and sexual orientation** was significantly and positively correlated with supervisory working alliance, multicultural intervention self-efficacy, and general counseling self-efficacy, and significantly and negatively correlated with role ambiguity and role conflict.

MULTICULTURAL GROUP SUPERVISION (Chin et al, 2014)

Content areas important to establishing multicultural competence

1. Providing a group process that is safe, respectful, and collaborative;
2. Addressing conflicts or misapplications of multicultural understanding;
3. Providing informed consent regarding confidentiality among group members and limits of confidentiality for the supervisor (e.g., for purposes of protection of the client and evaluation of the supervisee) and the importance attached to personal disclosures
4. Being skilled to ask in a way that validates their importance about multiple identity statuses of clients, and to reflect on these from the perspective of the supervisee in the interests of the therapy;
5. Identifying the unique features, perspectives, and worldviews of the client or clients and how these overlap, or not, with those of the therapist and supervisor and the impact of all these on therapy and the supervision process
6. Addressing stereotypic or categorical approaches that may infer commonality in clients, supervisees-therapists, or supervisors from the same culture (Chin, 2009).

AND-Modeling Cultural Humility!

DESIRED BEHAVIORS TO INCREASE TRAINEE MC (Adams et al, 2023)

Behaviors trainees wanted to engage in

Discuss how aspects of diversity, power, privilege could influence the therapy relationship

Discussion of client's cultural or ethnic background as it relates to clinical presentation or client perspective of challenges

Behaviors supervisors wanted to engage in

Provide examples of conceptualization or theory that directly incorporates identity (e.g., Minority Stress Model, ADDRESSING model).

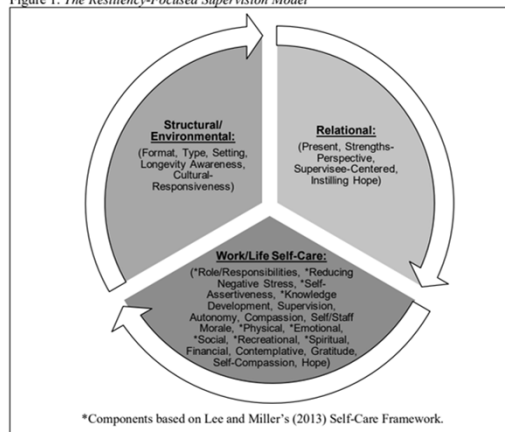
Provide time/opportunity in supervision for the trainee's own self-reflection and examination

SUPERVISOR SUPPORT/DEVELOPMENT SELF- AND COMMUNITY-CARE



The Resiliency-Focused Supervision Model Mack, 2020

Figure 1. *The Resiliency-Focused Supervision Model*



General Strategies

- Remember that self-care is an ethical imperative!
 - Consider your signs of distress in advance
 - Develop stress prevention and reduction plans
 - Problem-solve barriers to self-care implementation
 - Regularly reflect on how you're doing and what you need to maintain or be different
- Consult! Consult! And consult again!
- SV can't do all and be all:
 - Cultivate connections, share resources, etc

SUMMARY OF STRATEGIES

- Address issues of power and identities in supervision from the beginning
- Develop supervision contract and build working alliance
- Approach supervision from a developmental perspective and normalize challenges
- Model cultural humility and consider self-disclosure for role modeling
- Practice microinterventions for microaggressions, challenging cultural moments
- Engage in periodic self-assessments and self-reflection, soliciting feedback from peers (ideally in connection or community with others)
- Provide supervisees with occasional self-assessments and discuss from a developmental perspective (baseline, T1, T2, final)
- Ask supervisees who have experienced offense or harassment by clients if they feel safe
- Tune into what supervisees aren't talking about in supervision and what you don't ask about
- Connect students with other resources, peers and mentors
- Keep learning and growing yourself!!

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