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Taiwanese International Students in Clinical Supervision: A Phenomenological Study

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Taiwanese International Students in Clinical Supervision: A Phenomenological Study

Abstract

The population of international students has continued to grow in the past two decades and become an important segment of U.S. university enrollment (Ng & Smith, 2001). Altogether, there is limited literature that is devoted to international students' experience in clinical supervision and merely any international students studies specifically focused on the Taiwanese international student subgroup. This study examined the experiences of Taiwanese international students in clinical supervision. Interpretative Phenomenological Analysis (IPA) was used to extract the phenomenon of participants' lifeworld and qualitative data were collected from individual semi-structured interviews with Taiwanese international students (N=6). Data analysis led to four primary themes: *layered power differential, invisibility, language salience in acculturation, and humanizing practices.* Participants shared in-depth reflections about the challenges they confronted when their unique cultural identities were often overlooked in supervision, where a salient part of themselves became invisible to others and dismissed. As participants progressed in their course of training, the parallel process of their professional growth and acculturation further supported their professional identity formation process as a psychologist in training. The humanizing practices they received in supervision became a nourishing foundation, that participants will be able to pass on to future trainees. The findings of the current study provided directions for supervisors and training programs when working with Taiwanese international students to offer more culturally responsive supervisory interventions and support.

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Joey Chiao-Yin Hsiao

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ABSTRACT

The population of international students has continued to grow in the past two decades and become an important segment of U.S. university enrollment (Ng & Smith, 2001). Altogether, there is limited literature that is devoted to international students' experience in clinical supervision and merely any international students studies specifically focused on the Taiwanese international student subgroup. This study examined the experiences of Taiwanese international students in clinical supervision. Interpretative Phenomenological Analysis (IPA) was used to extract the phenomenon of participants' lifeworld and qualitative data were collected from individual semi-structured interviews with Taiwanese international students (N=6). Data analysis led to four primary themes: *layered power differential, invisibility, language salience in acculturation, and humanizing practices.* Participants shared in-depth reflections about the challenges they confronted when their unique cultural identities were often overlooked in supervision, where a salient part of themselves became invisible to others and dismissed. As participants progressed in their course of training, the parallel process of their professional growth and acculturation further supported their professional identity formation process as a psychologist in training. The humanizing practices they received in supervision became a nourishing foundation, that participants will be able to pass on to future trainees. The findings of the current study provided directions for supervisors and training programs when working with Taiwanese

international students to offer more culturally responsive supervisory interventions and

support.

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TABLE OF CONTENTS

CHAPTER ONE: INTRODUCTION

Clinical supervision is the strategy that most characterizes the preparation of mental health professionals (Bernard & Goodyear, 2019). As multiculturalism has been a focus in psychotherapy, having cross-cultural experiences and a multicultural background can be considered as an asset and strength as a clinician (Nilsson & Anderson, 2004). However, there are few studies examining cross-national clinical supervision and the challenges international students face in the U.S. (Falender et al., 2021).

As psychotherapy are highly culture and context related, the stress associated with adjusting to a new learning environment is inevitable for psychologists in training who also hold identities as international students (Hsu & Huang, 2017; Ng & Smith, 2009). Contextual factors such as language proficiency, acculturation processes, and Westernized evaluation and assessment processes in training can further impact the quality of supervision with international students (McKinley, 2019; Nilsson & Anderson, 2004). Current literature provides a limited understanding of international supervision and how to modify current clinical supervision models to ensure more applicability and effectiveness with international populations (McKinley, 2019; Nilsson & Anderson, 2004).

The population of international students can mean any students who study abroad in the U.S. and their experiences differ significantly due to various factors. Thus, along with the rising focus of advancing quality data of the AAPI and Pacific Islander populations in higher education (Nguyen et al., 2014), the current study aims to explore the lived experiences of clinical supervision of a group of Taiwanese international students in the U.S.

Clinical Supervision

The term clinical supervision is often used along with "supervision" and "psychotherapy supervision" (Watkins & Milne, 2014). The American Psychological Association (APA) Guideline defines clinical supervision in health service psychology as a distinct professional practice employing a collaborative relationship between supervisor and supervisee (APA, 2015). The importance of supervision is apparent to burgeoning professionals, regulatory boards, the credentials provided by professional organizations, and program accreditation (APA, 2015; O'Donovan, et al., 2011).

Types of Supervision

Supervision is an essential component of psychotherapy training and can be conducted in various types and formats based on the training settings. Different forms of supervision might be suitable for certain supervisees due to their professional development and the needs of the organization (Bedford et al., 2020; Bernard & Goodyear, 2019).

Structured supervision

Structured supervision usually involves more planning from the supervisor's side. Supervisors will set expectations of the supervisee's learning outcomes and tasks that need to be completed in supervision. Structured supervision tends to create a more explicit power differential between supervisor and supervisee (Bernard & Goodyear, 2019).

Unstructured supervision

Unstructured supervision can be supervisor-directed or supervisee-directed. The supervisor's role in unstructured supervision is to ensure learning progress without directing it. It may rely on pre-session planning, mid-session consultation, and post-session debriefing without a specific agenda of supervision (Bernard & Goodyear, 2019).

Individual supervision

Individual supervision is considered the cornerstone of supervision (Watkins & Milne, 2014). Most trainees experience various forms of supervision including group supervision and live observation, whereas almost all trainees participate in individual supervision due to the requirement of their training and certification (Bernard & Goodyear, 2019).

Group supervision

Beyond individual supervision, group supervision is also commonly employed (Bernard & Goodyear, 2019). Group supervision is long-established and was found beneficial when it is offered on a regular basis with designated supervisors. Benefits of group supervision include economic efficiency, opportunities for vicarious learning,

breadth of client exposure, and greater quantity and diversity of feedback (Gainor &

Constantine, 2002). It also allows supervisors to gain a more comprehensive picture of a

supervisee's competence and provides diverse opportunities for a supervisee to learn

supervision skills (Watkins & Milne, 2014).

Supervision Models

Supervision models provide a grounding framework for supervisors (Bernard &

Goodyear, 2019). Supervisors who operate from supervision models as a conceptual

foundation are likely to offer more cohesive guidance to facilitate positive outcomes in

supervision and therapy (Watkins & Milne, 2014).

There are broadly three categories of supervision models: models grounded in

psychotherapy theories, development models, and process models (Bernard & Goodyear,

2019; Watkins, 2017). Supervisors utilizing psychotherapy-based models use the lens of

their theoretical orientation in their work in supervision. Consequently, the focus of

supervision differs based on the theories they operate upon (Bernard & Goodyear, 2019;

Thomas, 2010). The primary advantage of psychotherapy-based supervision models is

that it provides supervisees with a deeper level of learning in counseling skills and case

conceptualization based on psychotherapy theories. Yet, it can be confusing for

supervisees to differentiate the functions of supervision and therapy and the confusion

can potentially lead to ethical issues such as dual relationships (Thomas, 2010).

Developmental supervision models center the supervisees' needs based on their

professional development level and relative performance (Bernard & Goodyear, 2019).

The *integrated developmental model* (IDM) is considered one of the best-known and

4

widely applied developmental models (Stoltenberg & McNeill, 2010). The IDM describes counselor development as occurring through four levels and each stage is characterized by changes of supervisee's self-other awareness, motivation, and autonomy (Stoltenberg & McNeill, 2010). It is suggested that by assessing supervisee's development level, supervisors are able to provide more suitable interventions. The matching of supervisor and supervisee developmental stages can also be pivotal for effective supervision (Stoltenberg & McNeill, 2010).

The third major category of supervision models is process models. The focus of process supervision models centers around the educational and relational process between supervisor and supervisee (Bernard & Goodyear, 2019). Bernard's (1979) *discrimination model* (DM) is considered the most widely applied and accessible among various process models. The DM highlights three foci for supervisors to assess including supervisee's intervention, conceptualization, and personalization. After assessing supervisee's competence in the three foci, the supervisors may take different professional roles including teacher, counselor, and consultant to intervene in facilitating supervisee's growth (Bernard & Goodyear, 2019).

Functions of Supervision

The goal of supervision is to enhance the professional competence and practice of the supervisees, monitor the quality of services provided, protect the public, and serve a gatekeeping function for the profession (APA, 2015; Watkins & Milne, 2014). There are two primary functions of clinical supervision: facilitative and evaluative components (Watkins, 2017).

Facilitative component

Competency-Based Supervision. Clinical supervision is the pathway to competence for mental health professionals (Falender & Shafranske, 2004, 2017). For psychotherapists, supervision is essential to the development of a supervisee's competence and plays a critical role in maintaining the standards of the profession (APA, 2015; Bernard & Goodyear, 2019). The goal of supervision is to enhance the supervisee's *competence* and *metacompetence* (Dennin & Ellis, 2003). *Competence* consists of the professional's knowledge, awareness, and skills in the chosen field as well as the development of professional identity and professionalism. *Metacomptenece* is a supervisee's ability to assess their own competence and be aware of what they do not know and when they need outside consultation (Dennin & Ellis, 2003).

Supervision can be seen as the bridge between campus and practice, which connects the supervisee's knowledge and research to clinical work and continues to master the skills of their chosen profession (Bernard & Goodyear, 2019). It is typically provided by a member of the same profession. Same-discipline supervision provides opportunities for supervisees to be socialized in the profession. Cross-disciplinary supervision is more commonly practiced in integrated care settings (e.g., medical centers and hospitals) due to the increasing need for interprofessional teamwork and care collaboration in health care (Bedford, et al., 2020). Bedford and colleagues (2020) discussed the benefits and challenges of Interprofessional Education (IPE), where doctoral trainees were trained by students from other disciplines and supervised by practitioners from other professions. The benefit of cross-disciplinary supervision and

IPE is facilitating students' understanding of their own professional identity in the context of the interprofessional team. Higher consistency of supervision in IPE was found facilitative for supervisees to gain a deeper understanding of the role of psychologists in clinical settings (Bedford, et al., 2020; Walkins, 2017). However, it can be daunting for supervisees to navigate their professional role in health care due to lacking a professional modeling role of a psychologist in their training (Bedford, et al., 2020).

Relationship-Based Education. Supervision is distinguished from "training" as it is extended and individualized. Rather than a workshop or professional seminar that is offered with a time limitation, supervision is ongoing and allows supervisory relationships to develop over time (Watkins & Milne, 2014). Creaner (2013) further describes supervision as a relationship with purpose. Supervision relationship factors (e.g., supervisory alliance, bond, and real relationship) are considered predictors of supervisee outcomes (Wampold & Imel, 2015; Watkins, 2017). Watkins provides a unitary explanation of how supervisee change occurs in supervision in the Contextual Supervision Relationship Models (CSRM), which illustrates the complexity of psychotherapy relationships (Watkins, 2017).

Alongside the normative functions to ensure client well-being, supervision also serves restorative functions to support supervisees' personal and professional well-being (O'donovan, 2011). Restorative tasks include emotional support, processing, and enhancing effective professional self-care. Such interpersonal connections create a space to shift the attention to the professionals rather than solely focus on the client (Watkins & Milne, 2014). Supervisees are welcome to explore their thoughts and feelings in

7

supervision, with the assumption that gaining personal insight allows therapists to be more compassionate and comprehensive with client's pain and issues (O'donovan, 2011). It is believed that when supervisees are in good care, they are more capable of empathizing with their clients and provide quality care (O'donovan, 2011; Solomon & Barden, 2016). Effective mentorship in psychological well-being provides a supportive and caring environment and can decrease the burnout rate in a psychotherapist's career (Solomon & Barden, 2016).

Professional Identity Development. Professional identity is defined as the self-conceptualization as a type of profession that consists of the interplay between structural and attitudinal changes throughout one's training experience (Brott & Myers, 1999). Professional identity serves as a frame of reference from which one carries out a professional role; it is a foundation that guides through a counselor's significant professional decisions (Brott & Myers, 1999; Watkins & Milne, 2014).

The supervisor's role is to demonstrate and model professional identities in order to facilitate the supervisee's professional development. It was found that supervisors who have a strong connection to the profession of counseling result in more professional development of the supervisee (Cruikshanks & Burns, 2017). On the contrary, for supervisors who lack a counselor professional identity, the supervisees will likely struggle to develop their own professional identity (Gainor & Constantine, 2002). Altogether, with proper training and exposure to recognize the unique roles and responsibilities of a psychotherapist, supervisees are able to attain awareness of their

professional identity and meet ethical obligations of their clinical practice (Cruikshanks & Burns, 2017; Mellin et al., 2011).

Evaluative Component

Professional Liability. Quality assurance is one of the primary ethical responsibilities of clinical supervisors and their role is the safeguard client well-being (Falender & Shafranske, 2004). Unlicensed psychologists and psychotherapists are mandated to attain supervision hours and during their training, where the supervisors are responsible for their supervisee's actions (Polychronis & Brown, 2016). In fact, in most cases of supervisee misconduct, supervisors are generally held fully responsible regardless of the nature of the supervisees' misbehavior and malpractice (Polychronis & Brown, 2016).

Evaluation and Assessment. It is important to note that supervision is evaluative and hierarchical (Watkins & Milne, 2014). The supervisor is expected to evaluate therapy outcomes for the client as well as the supervisee's therapeutic competence (O'Donovan et al., 2011). To enhance professional growth, formative and summative feedback is provided to the supervisee in multiple aspects including ethical awareness conduct, professional knowledge and skills, relational skills, consultation, response to supervision, and notable strengths and areas of improvement (Falender & Shafranske, 2004).

The evaluative components of clinical supervision tend to create the power differential and dynamic tensions between supervisor and supervisee (Falender & Shafranske, 2017). In Sommer et al's study (2010), the supervisee was invited to use metaphoric stories to describe their experience of professional development in clinical

9

supervision. One theme that emerged in the supervisee's sharing is the "recurrent cycles of highs and lows" in supervision; the supervisee used metaphors such as "emotional roller coaster" and "Ugly Duckling" to describe the hardship of being trainees in relation to perceived devaluation in the mental health hierarchy (Sommer, et al., 2010).

Due to the evaluative functions and other contextual factors in supervisory relationships, most trainees reported experiencing disruptive levels of anxiety during clinical supervision (Ellis et al., 2015; Falender & Shafranske, 2004). Supervisees can develop more sensitivity to comments from supervisors and professors; they desire to prove their competence as they are at the bottom of the pyramid (Sommer, et al., 2010). Though such anxiety can potentially motivate a supervisee's professional growth, unaddressed high levels of anxiety can decrease the supervisee's clinical performance and self-efficacy (O'donovan, 2011; Solomon & Barden, 2016).

Factors for Effective Clinical Supervision

In understanding the effectiveness of clinical supervision, current research focuses mostly on the process of supervision rather than the impact of supervision. Yet, there is limited empirical research on the effectiveness of supervision on supervisee and client outcome (Milne et al., 2008; O'donovan, 2011).

Supervisory Relationship

The supervisory relationship is thought to be fundamental in facilitating the supervisee's growth in clinical competence (Falender & Shafranske, 2012). The supervisory working alliance (SWA) is widely considered a critical factor of effective supervision (Bernard & Goodyear, 2019; Killian, 2001; O'Donovan et al., 2011; Watkins,

2017). In fact, SWA is the most "robust, empirically supported, and uniformly embraced supervision common factor" (Watkins, 2017, p.206).

The alliance refers to the working relationship between the supervisor and supervisee and the joining collaboration in supervision advances therapist development and client progress (Watkins, 2014, 2017). Many factors can influence the development of SWA, including supervisor and supervisee personalities, cultural factors, and gender (Bernard & Goodyear, 2019). The supervisory alliance is the context in which learning occurs; there is a positive association between strong SWA and the perceived effectiveness of supervision (Watkins, 2014, 2017). Supervisees also report higher satisfaction and a greater willingness to self-disclose when they have a strong alliance with their supervisors (Inman, 2006; Watkins, 2017). On the contrary, unfavorably perceived SWA is found to be associated with higher degree of supervisee stress, anxiety, burnout, and more role ambiguity and conflicts (Watkins, 2014, 2017; Watkins & Milne, 2014).

In a meta-analysis conducted in South Korea, the supervisory working alliance was found to be positively correlated with supervision satisfaction, self-efficacy, self-disclosure, and working alliance in counseling (Park, et al., 2019). Specifically, the subfactors of the supervisory working alliance including goals, tasks, and bonds showed a strong correlation with supervisory satisfaction. Park and colleagues (2019) also pointed out cultural differences in determinants of the results of supervision satisfaction; Western countries show that the bond is the most important determinant to higher satisfaction in

supervision, whereas goals and tasks that were agreed upon by supervisor and supervisee are more important in Eastern countries.

A stronger supervisory alliance models and promotes an effective therapeutic alliance between the supervisee and the client (Watkins, 2017). Supervisees learn from their supervisors' interpersonal skills and professional roles and further transfer their learning to the therapeutic relationship they establish with clients. Meanwhile, the supervisory alliance might also parallel the supervisee's relationship with their clients (Williams Kapten, 2020). Due to the similarity between therapeutic alliance and supervisory alliance, many techniques that are found effective in establishing therapeutic relationships are also applicable in promoting SWA (Bernard & Goodyear, 2019; Bell et al., 2016). Empathy, unconditional positive regard, trustworthiness, and genuineness are suggested to build SWA and empathy is foremost the greatest predictor of effective supervision (Bell et al., 2016; Shanfield et al., 1992).

Though a strong alliance is highly encouraged due to its positive influence on the supervisory process and outcome, the risk of ineffective supervisory alliance is the ambiguous boundary between therapy and supervision (O'Donovan et al., 2011; Watkins, 2017). If the supervisor fails to maintain the professional boundary and is overly engaged in the supervisee's personal issues, it can be considered a dual relationship and violation of the ethical principle of psychotherapy and supervision (Thomas, 2010). Thus, it is important for supervisors to maintain professional boundaries while serving the restorative functions of clinical supervision, clarifying the goal of supervision, and encouraging supervisee to seek appropriate persons to assist their personal issues (Bell et

al., 2016; Thomas, 2010). Professional mental health services or consultation should be provided to supervisees as needed to facilitate the supervisee's professional insight and personal growth (Watkins, 2017).

Supervisor Factors

Many characteristics of supervisors may predict supervision outcomes (Bambling, 2014). For example, Riggs and Bretz (2006) found that supervisors with the higher stability of attachment styles tend to develop a stronger working alliance with their supervisees. This finding is based on the assumption that one's attachment style serves as a schema in individuals' interpersonal relationships, including supervisory relationships (Bambling, 2014). In addition, the supervisor's verbal and nonverbal communication skills are also critical as those skills are related to supervisee rating of supervisory alliance and supervision evaluation. Particularly, the supervisor's emotional sensibility, social expressivity, and social control show a stronger prediction of a positive supervisory working alliance (Bambling & King, 2014). These interpersonal skills equip supervisors to be observant and attentive to emotional communication with supervisees and address them effectively and appropriately in clinical supervision (Bambling, 2014; Bambling & King, 2014).

Overall, supervisor approach and style such as supervision model and theoretical approach are found influential for supervisee's learning environment and outcomes of supervision (Landany et al., 2001; Milne et al., 2008). However, each supervisor has a unique supervision style in their practice (Watkins & Milne, 2014). The individualized style of supervision creates a unique connection in the supervisor-supervisee dyad. Yet,

13

across the variation of supervision style, it was found that in part to meet of supervisee's expectation with a supportive style, supervisees are more likely to adhere to the treatment approach and show positive learning outcomes (Landany et al., 2001).

Supervisee Factors

Along with supervisor factors, supervisees also have individual characteristics that are influential to their supervision process and outcome. Gnilk et al (2016) found that maladaptive perfectionism and adult attachment style (anxious and avoidant) interact with each other and negatively impact both therapeutic and supervisory working alliance. Meanwhile, higher interpersonal and therapeutic skills along with stability in interpersonal relationships are found predictive to supervisee's higher flexibility in learning styles and therapeutic attitudes (Bambling, 2014). Such characteristics positively impact supervisee's learning experiences in supervision, who are more likely to demonstrate ego strengths and openness to supervisor's feedback (Bambling, 2014; White & Queener, 2013).

Despite individual differences, supervisees were found often experiencing excessive anxiety, especially beginner counselors during their first supervised practicum experience (Stoltenberg & McNeill, 2010). Supervisee anxiety may stem from the evaluative functions of supervision, where supervisees are put in a vulnerable position with less power in the supervisory relationship (Hutman & Ellis, 2020). Supervisors are encouraged to continuously monitor the quality of the relationship and proactively communicate with the supervisee and their anxiety openly (Ellis, et al., 2015; Watkins et al., 2019). Role induction is found effective in reducing the supervisee's anxiety by

clarifying role expectations and responsibilities in the supervisory relationship (Ellis, et al., 2015; Watkins, 2017). Unaddressed anxiety resulting from context factors such as cultural differences can also inhibit the supervisee's self-disclosure in supervision (Ellis, et al., 2015; Hutman & Ellis, 2020).

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Multicultural Supervision

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All supervision is inherently multicultural given that the supervisor and supervisee bring to supervision the sum of their intersecting identities (Chopra, 2013). In other words, multiculturalism is not a separate component of clinical supervision but is infused in all aspects of clinical supervision (Bernard & Goodyear, 2019).

In fact, diversity competence is considered essential to supervision competence in APA's Guidelines for Clinical Supervision (APA, 2015). Ellis and colleagues (2014) also include attentiveness to multicultural issues in evaluating a supervisor's adequacy and competence in clinical supervision. The benefits of focused multicultural supervision include improvement of services to the supervisee's clients, enhancement of the training experiences for supervisees, and development of a more satisfactory supervisory relationship (Constantine, 2001, 2003; Constantine & Sue, 2005; Pope-Davis, 2003).

Diversity/Multicultural Competence (MCC)

Multicultural Competence (MCC) has been a primary focus in the field of counseling and psychotherapy for the past three decades (Chopra, 2013; Constantine, 2001, 2003; Constantine & Sue, 2005; Inman & Ladany, 2014; Pope-Davis, 2003; Sue et al., 1982; Sue et al., 1998). MCC is commonly referred to as a therapist's knowledge, awareness, and skills when working with clients with cultural identities including, but not

limited to, racial, ethnic, gender, sexual orientation, social class, religious, disability identities (Constantine & Sue, 2005; Sue et al., 1982). MCC has been fruitfully applied to all aspects of psychotherapy and is equally relevant for and applicable to clinical supervision (Constantine & Sue, 2005).

In applying the MCC framework in clinical supervision, diversity competence refers to supervisor's competence in working with others from different cultural backgrounds and recognizing the complexity and intersectionality of cultural identities in supervisory interaction, including that with and between the client(s), supervisor, and supervisee (APA, 2015). Bernard & Goodyear (2019) identify four dimensions of multicultural competence that supervisors should pay attention to and be knowledgeable of. The four dimensions are a) the intrapersonal dimension of identity, b) interpersonal dimension of expectations, bias, and prejudice, c) interpersonal dimension of responding to others' cultural identities and behavior, and d) the sociopolitical dimension of privilege, oppression, and institutionalized *-isms*. These dimensions are not independent but show strong association with each other, which requires supervisors to have a deep understanding of their own self-identities and how those identities interact with others' cultural identities (Bernard & Goodyear, 2019).

In the supervisor-supervisee-client triad, the supervisor's role is the facilitator of multicultural case conceptualization and culturally appropriate mental health services to ensure clients' well-being (Constantine & Sue, 2005). Meanwhile, the supervisor also needs to bring attention to multicultural issues in the supervisory relationship and process (Bernard & Goodyear 2019; Inman, 2006; Inman & Ladany, 2014). Though both

supervisor and supervisee participate in the multicultural supervisory interaction, due to the nature of the supervisor's position of power, supervisors are expected to be responsible for and attentive to multicultural considerations and initiate cultural discussion in clinical supervision (Inman & Ladany, 2014; Pendry, 2012; Watkins & Milne, 2014). Creaner (2013) also pointed out that the supervisor is the primary factor interfering with a multicultural focus in supervision. In sum, the multicultural focus on clinical supervision requires more effort from the supervisor beyond avoiding offending the supervisee or clients from diverse backgrounds; supervisors will need to do inner work to explore their own cultural bias and prejudice and continue educating themselves in multicultural issues (Inman & Ladany, 2014).

Research shows that there is a positive relationship between a supervisor's multicultural competence and supervisee's perceived supervisory working alliance and satisfaction of supervision (Inman, 2006). The findings indicate that when supervision is multiculturally focused, supervisees reported higher multicultural competence including case conceptualization skills and treatment planning (Inman, 2006). However, many supervisors were found undertrained in multicultural supervision skills and demonstrated a lack of multicultural competence while working with supervisees of diverse cultural identities. Supervisors' lack of multicultural competence alongside their position of power often leads to potential harm for both the supervisees and their clients (Constantine & Sue, 2005; Fukuyama et al., 1994). A lack of multicultural competence can reflect both a supervisor's limited training and their experience with regard to cultural diversity (Constantine & Sue, 2005). Many studies show that supervisees perceive the supervisory

17

process and outcome to be ineffective due to their supervisor's limited cultural

experiences and multicultural sensitivity (Constantine, 2003; Fukuyama, 1994; Inman,

2006; Lawless et al., 2001).

Limitation of MCC

While multicultural competence (MCC) is widely applied in multicultural

education and training, the MCC framework has limitations (Davis et al., 2018). One of

the critiques MCC has received in the past decade is related to the nature of the tripartite

model of multicultural competence (awareness, knowledge, and skills) and its

competence-focus (Davis et al., 2018). The word "competence" implies that there is a

fixed set of goals of multicultural counseling knowledge and skills and a clinician can be

considered "competent" of multiculturalism. In response to the critique of MCC and the

question "can anyone ever be completely culturally competent in working with diverse

clients," Sue and Sue (2016, p.49) noted that the three dimensions of MCC may be

"necessarily but not sufficient conditions to work effectively with diverse clients." The

missing ingredients of MCC may include other attributes such as openness and cultural

humility (Tervalon & Murray-García, 1998; Hook et al., 2013).

Multicultural Orientation (MCO)

While the MCC continues to be implemented across multicultural training and

education, the multicultural orientation (MCO) framework highlights the therapeutic

relationship as the key to multicultural counseling (Davis et al., 2018). The MCO

framework refers to a humble, respective, and open approach to addressing culture in

therapy (Davis et al., 2018; Owen et al., 2016; Owen et al., 2011). The MCO proposed to

address the needs of the missing ingredients of the MCC, the attitude-value attribute (Watkins et al., 2019). Psychotherapists are encouraged to develop an orientation of cultural factors, similar to their theoretical orientation, as a guide in exploring cultural factors and how those factors impact psychotherapy and interpersonal interaction within psychotherapy (Owen et al., 2014; Owen et al., 2011).

The MCO framework highlights that cultural awareness and notion inform all aspects of psychotherapy including conceptualizations, treatment planning, assessments, and rapport building with clients (Davis et al., 2018; Hook et al., 2013). Instead of focusing on specific counseling skills and interventions for diverse groups, MCO emphasizes the "being" with clients as well as psychotherapists' open and humble attitude and comfortability in engaging in cultural discussion with clients with different cultural backgrounds (Davis et al., 2018). The MCO consists of three key constructs: cultural humility, cultural opportunities, and cultural comfort (Davis et al., 2018).

Cultural Humility

Cultural humility is identified as the core component of the MCO (Owen, 2016). Cultural humility is the "ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the client [or supervisee]" (Hook et al., 2013, p. 35). Cultural humility encourages therapists to be curious and open in understanding client's cultural identities while acknowledging the therapist's position of power in the therapist-client dyad (Hook et al., 2013; Owen et al., 2014; Tervalon & Murray-García, 1998).

Cultural Opportunities

Cultural opportunities refer to times in treatment when cultural issues present themselves for exploration, (e.g., a client's cultural statements; Owen et al., 2016). Therapists who seize cultural opportunities will lean in to engage in discussion related to cultural issues with clients and explore client's cultural beliefs, values, practice, and identities and how these cultural factors play a role in a client's presenting of concerns and the therapeutic relationship (Owen et al., 2016). Contrarily, therapists who fail to pay attention to salient cultural factors in treatment lead to missed cultural opportunities (Owen et al., 2016).

Cultural Comfort

Cultural comfort refers to an individuals' authenticity, ease, and comfort level when engaging in discussion related to a client's cultural identities and values (Owen et al., 2016). Therapists with low cultural comfort may present as anxious, restless, or defensive when cultural issues are brought up in therapy (Owen, 2013; Owen et al., 2016).

MCO in the Supervision Relationship (MCO-S)

While the MCO framework provides a guiding theory in multicultural counseling, psychotherapeutic dynamics, processes, and outcomes, its application is also found in clinical supervision (Watkins et al., 2019). As discussed earlier, all supervision is inherently multicultural; each individual in the triad holds different cultural identities including cultural heritage, language, education, age, social class, acculturation, sex, gender identities, and more. Thus, the MCO is found equally relevant for and applicable

to psychotherapy relationships and psychotherapy supervision (Chopra, 2013; Watkins et al., 2019).

MCO-S refers to "the philosophy, attitudes, and values that supervisors, supervisees, and clients hold about cultures" (Watkins et al., 2019, p.41). MCO-S is designed as a process-orientated and attitudes-additive complement that highlights the ways in which cultural dynamics influence cultural encounters in psychotherapy supervision, that supervisor, supervisee, and clients jointly create (Watkins et al., 2019). That is, how supervisor and supervisee's cultural views interact to affect the formation and maintenance of the supervisory relationships is in a way, modeling for supervisees how to navigate cultural dynamics in psychotherapy with clients (Watkins et al., 2019). Therefore, attending, infusing, and integrating the cultural dynamics into the supervisor-supervisee dyad, which naturally occurs during supervision, facilitates meaningful learning about MCO. Such learning can be further transferred to the workings of the therapist-client dyad (Watkins et al., 2019).

The three components of MCO, cultural humility, cultural opportunity, and cultural comfort are also applicable to psychotherapy supervision (Watkins et al., 2019). Cultural humility is considered an important feature of culturally responsive supervisors. Culturally humble supervisors view themselves as always in the process of multicultural learning, where they are willing to acknowledge their cultural bias and blind spots and recognize how their cultural worldview has impacted their cultural beliefs, values, and practice (Hook et al., 2013; Watkins et al., 2019). Meanwhile, culturally humble supervisors develop habits in their interpersonal interactions with supervisees to cultivate

an attitude of openness, curiosity, and genuine interest in their supervisees (Hook et al., 2013; Tsui et al., 2014).

Power differentials and cultural differences are likely discussed openly in supervision when supervisors demonstrate cultural humility and are willing to prioritize the development of MCO of themselves and the supervisees (Hook et al., 2013). Namely, supervisors with cultural humility are more willing to initiate, incite, and instill cultural discussion in supervision (Hook et al., 2013; Inman & Ladany, 2014). When initiating or inviting conversations about culture with a supervisee, supervisors may bring attention directly to the cultural difference between supervisor and supervisee or connect more closely with the processes of client work such as in case conceptualization or treatment planning (Hook et al., 2013).

Besides the willingness to work on themselves, culturally humble supervisors also help supervisees to cultivate cultural humility and provide more culturally appropriate intervention in therapy. In aiding such learning outcome, supervisors need to accurately assess a supervisee's cultural strengths, weaknesses, and limitations, which should be conducted with the collaboration of the supervisee's self-evaluation and observations of the supervisee's counseling behavior (Hook et al., 2013). Supervision will need to provide direct feedback to supervisees working with culturally diverse clients and to establish norms in supervision that positive and negative feedback is a normal part of the supervision process and a learning opportunity (Hook et al., 2013).

When infusing the MCO framework in clinical work and supervision, it is important to recognize that therapists of color (TOC) often experience challenges in

22

implementing the three critical concepts of MCO. In response to systemic issues such as racism, microaggressions, intergenerational trauma, and the pressure to assimilate to White culture, TOC will likely practice the MCO differently than their White, Euro-American colleagues (Moon & Sandage, 2019). It is a complex process for TOCs to incorporate psychological theories that were created from Eurocentric populations and meet the requirement of clinical training (Paine et al., 2018). For trainees of color, they have to endure the challenges in engaging cultural dynamics with their clients, colleagues, and supervisors, while navigating the incongruence between their own cultural beliefs and experiences and the Eurocentric expectation in their practice (Moon & Sandage, 2019).

Layered Cultural Processes in Multicultural Supervision

The terms multicultural supervision, cross-cultural supervision, cross-racial supervision, and interracial supervision are often used interchangeably in the literature (Constantine, 2003; Fukuyama, 1994; Schroeder et al., 2009; Wilcox et al., 2021).

Despite the significance of the inclusion of multicultural issues in supervision being highly recognized, cultural differences are not frequently addressed (Burkard et al., 2006; Gatmon et al 2001). Supervisees were often also found to experience negative events in cross-cultural supervision (Burkard et al., 2006; Fukuyama, 1994). Negative events can result from cultural insensitivity (e.g., stereotypical transference), questioning supervisees' clinical skills, challenges related to culturally appropriate interventions, and conflicted communication (Fukuyama, 1994; Hall, 2018; Walker et al., 2007; Wong et al., 2013). Furthermore, many supervisors in cross-cultural contexts reported challenges

in providing culture-related feedback as such conversation can often be highly conflicted and supervisors were not provided with training to equip them to navigate cultural discussion in supervision (Burkard et al., 2006; Ellis et al., 2014; Lawless et al. 2001). These issues were commonly found in cross-cultural supervision including cultural differences related to race, gender, sexual orientation, and ability/disability (Allan et al., 2017; Gatmon et al., 2001; Rivas, 2020; Walker et al., 2007). In addition, the mismatch between the supervisor and supervisee's racial identity development is also attributed to ruptures and negative events in clinical supervision (Burkard et al., 2006; Wilcox et al., 2020).

In consideration of the complex nature of the supervision triad and multicultural issues, the current study aims to break down the layered cultural interactions and focus on cross-racial and cross-national supervision.

Cross-Racial Supervision

Cross-racial encounters in supervision have become more and more common and many researchers have examined the influence of racial matching in clinical supervision (Watkins & Milne, 2014). Considering the power differential in the supervisory relationship, cultural and racial issues can arise in various contexts. Schroeder and colleagues (2009) conducted a research review and noted three critical issues in cross-racial supervision in current literature including a) perceptions of supervisor's MCC, b) the effect of racial identity on working alliance and MCC, and c) the level of acculturation within the supervisory relationship. Within the three critical issues,

Schroeder also found that a strong supervisory working alliance is more likely to happen when supervisors are culturally responsive and competent (Schroeder et al., 2009).

While cross-racial supervision can be any combination of two persons who hold different racial or ethnic identities, many studies show differences in perceived multicultural competence between supervisor and supervisee. Non-White supervisors are likely to be rated by students as more culturally competent and influential in supervisees' development of MCC when compared to White supervisors (Ladany et al., 1997; Pope-Davis et al., 2003). Supervisors of color were found to spend more time addressing cultural issues in supervision than White supervisors (Hird et al., 2001). Meanwhile, White supervisors tend to report less multicultural competence than supervisors of color (Hird et al., 2001). In terms of what cultural issues are discussed in supervision, White supervisors were found to place more importance on language, race, identity, religion, and sexual orientation with their supervisees, while supervisors of color report not rating one cultural issue as more important to discuss than other issues (Schroeder et al., 2009). These findings indicate that there is a racial/ethnic difference in how and how much cultural discussions are being had in supervision.

Regarding supervisory relationships in cross-racial supervision, Duan and Roehlke (2001) found that supervisees were more sensitive to cultural and racial issues when compared to their supervisors. Supervisors reported making more efforts to address cultural issues than perceived by the supervisee, and satisfaction with supervision was related to supervisees' self-disclosure and perceived positive attitudes towards each other between supervisor and supervisee (Duan & Roehlke, 2001). In another study, Burkard et

al (2006) examined the relation of supervisor's responsiveness to cultural issues with supervisory relationships; supervisees report an overall positive relationship with their supervisors to show interest and acknowledgment in cultural differences in the client-supervisor-supervisee triad. On the contrary, as unresponsive events occur, where supervisors ignore or dismiss cultural discussion, supervisees of color reported a weaker working alliance with their supervisors and established less trust with their supervisors (Burkard et al., 2006). In this study, supervisees of color also reported a higher sense of validation when cultural issues were addressed in supervision when compared to White supervisees (Burkard et al., 2006).

When examining cross-racial encounters in supervision, it is important to recognize the power differential in the supervisor-supervisee dyad along with contextual factors including systematic racial issues and privileged identities of the majority group. Such contextual factors contribute to supervisee anxiety and can lead to supervisee's nondisclosure in supervision (Cook & Helms, 1988; Duan & Roehlke, 2001; Hernandez, 2009; Pendry, 2011). In Williams Kapten's (2020) article "Power, Powerlessness, and the Parallel Process," she carefully documented the cross-racial interactions in supervision as a Black female psychology trainee working with a White female supervisor. Williams Kapten (2020) documented her fear of being offended and being offensive when raising cultural concerns in supervision as well as "discomfort, nervous, hypervigilant, pressure to perform, exhausting and powerless" in such cross-racial supervision. While Williams Kapten (2020) included her learning progress, and, later on, positive supervisory relationship with her White supervisor, her emotional experiences are consistent with

findings of many existing researches for supervisees of color (Cook & Helm, 1988; Duan & Roehlke, 2001; Fukuyama, 1984; Hird et al., 2001; Jordan et al., 2012; Pendry, 2011).

In the White supervisor and supervisee of color dyad, the supervisee is often regarded as the "expert" of their culture, where all the cultural differences were attributed to the supervisee's cultural background solely (Schroeder et al., 2009). Such one-sided cultural focus can lead to under-or overemphasis on cultural differences and negatively impact the supervisory relationship (Lawless, 2001; Schroeder et al., 2009). Multiple studies found that supervisees of color who experience culturally unresponsive events during supervision, also report higher emotional distress in response to those events, when compared to their White peers (Schroeder et al., 2009). It is recommended that as supervisors notice their students becoming noticeably withdrawn in supervision, they may need to consider whether they have been responsive to cultural issues in supervision and create more openness and support for cultural discussion (Estrada et al., 2004; Fukuyama, 1994; Schroeder et al., 2009).

Another critical factor in cross-racial supervision is the supervisor and their supervisee's racial identity development and acculturation process. Particularly, due to the power position of the supervisor, the supervisor's racial identity level will most likely determine the course and depth of racial and cultural discussions in supervision (Chang et al., 2004; Hird et al., 2001). As race refers to a sense of identification with a collective group based on the perception of a shared common racial heritage, racial identity is the compass that impacts an individual's feelings, thoughts, and behaviors with one's racial experience (Cook, 1994). Individuals' racial identity can fluctuate over time due to

contextual factors, which is a revolutionary process (Cook, 1994). Helms and Carter (1990) suggest that there are six statuses of White racial identity: contact, disintegration, reintegration, pseudo-independence, immersion-emersion, and autonomy. Atkinson et al (1998) presented a similar racial identity development process for persons of color with five statuses: conformity, dissonance, resistance and immersion, introspection, and integrative awareness (Chang et al., 2004). There are also racial identity models that are more focused on specific racial and ethnic populations such as Asian Americans (Kim, 1981), or multiracial youth and adolescents (Poston, 1990).

Racial identity status is found critical in clinical supervision due to its impact on supervisory working alliance and the emotional bond and development of multicultural competence for both supervisor and supervisee (Chang et al., 2004). Based on the matching of supervisor and supervisee's racial identity status, there are three possible racial identity interactions between supervisor and supervisee: parallel, cross-progressive, and cross-regressive (Chang et al., 2014). In a parallel relationship, the supervisor and supervisee exhibit similar racial identity status, therefore, the supervisory relationship and cultural discussion may remain at the same status or create a supervision environment for both supervisors and supervisees to enhance their cultural and racial awareness. One potential risk of a parallel relationship at lower racial development status is that neither supervisor nor supervisee shows a strong awareness of cultural and racial issues. In this case, the depth of cultural discussion is limited during supervision, which can inhibit learning opportunities for supervisee and quality of care for clients with different cultural identities (Chang et al., 2014). Williams Kapten (2020) also discussed the parallel

28

relationship in the client-supervisor-supervisee triad, where cultural discussion in supervision provides opportunities to enhance a supervisee's multicultural perspectives in case conceptualization and provide more culturally appropriate intervention.

Cross-progressive relationship refers to the supervisory dynamic where the supervisor is at a more advanced status than the supervisee, who demonstrates higher cultural sensitivity and responsiveness and is capable of providing a safe learning environment during supervision to enhance the supervisee's cultural and racial awareness (Chang et al., 2004). Self-disclosure can be a good strategy for a supervisor to demonstrate multicultural competence, invite cultural discussion, and enhance the supervisor's self-awareness, understanding of racial dynamics while also promoting the multicultural knowledge and skills of their supervisee (Chang et al., 2004). Openness, honesty, and empathy are considered appropriate and positive in establishing trust in cross-progressive supervisory relationships (Fukuyama, 1994).

Lastly, a cross-regressive relationship occurs when the supervisee is at a more advanced status than the supervisor. While multicultural awareness should be a life-long journey and not anyone can achieve complete competence in cultural issues, the cross-regressive dynamic and power imbalance between supervisor and supervisee often lead to negative events in supervision and poor working alliance (Chang et al., 2004). In this situation, it can be difficult for the supervisor to provide a supportive environment for the supervisee's professional and personal growth in multicultural competence and orientation, as supervisors themselves might not be aware, insensitive, or even defensive

to engage in discussion related to culture and race (Chang et al., 2004; Owen et al., 2016).

It is recommended that supervisors educate themselves in racial identity development models in understanding their own and their supervisee's racial identity status, which can inform cultural discussion being had to be more in-depth and effective in enhancing cross-racial competence (Atkinson et al., 1998; Cook & Helms, 1988). By accurately assessing their own and their supervisee's racial development status and multicultural competence, supervisors are more likely to facilitate learning in supervision and provide quality care for clients (Chang et al., 2004).

Cross-National Supervision

Cross-national supervision refers to the analysis of contents, processes, and outcomes in supervision, where cultural differences between supervisors and supervisees include their nationality and perceived national identity. This may include supervisors or supervisees who hold immigrant, refugee, or international student backgrounds (Falender et al., 2021). Though the supervisory dynamics discussed above are also applicable in understanding cross-national supervision, the uniqueness of cross-national and international experiences has brought more attention to psychotherapy and supervision research (Attia, 2021).

Common barriers in cross-national supervision include culture, language, and credibility (Attia, 2021; Qi et al., 2019). Due to cultural differences and unfamiliarity with cultural contexts, individuals with international backgrounds also reported having limited knowledge regarding the counseling profession as a field in the U.S., and a lack

of visibility of the profession (Attia, 2021; Falender et al., 2021). As cross-national background can apply to many cross-cultural situations in clinical supervision, the current study will focus on the population of international students and further discuss international students' experience in supervision.

International Students in Clinical Supervision

The population of international students has continued to grow in the past two decades and become an important segment of U.S. university enrollment. International students have been recognized as one of the most important resources to enhance globalized education and multicultural learning environments (Ng & Smith, 2001). Similarly, the recruitment of international students in counseling-related programs promotes a positive learning experience. International students contribute to the diversity of counselor-preparation programs through cross-cultural interactions in the classroom and beyond (Ng & Smith, 2009).

Within the whole population of international students, students whose home culture and first language are vastly distinct from the U.S. are more likely to experience difficulties and cultural shock (Nilsson, 2007; Nilsson & Anderson, 2004). Specifically, international students from Confucianism-influenced countries (e.g., China, Korea, Japan, and Singapore) have communication patterns and interpersonal relationships that are strikingly divergent from the typical U.S. students (Yum, 2011). Thereby, it entails additional efforts by counselor educators and supervisors to meet international students' needs and such divergences are critical in supervisory and therapeutic relationships (Nilsson & Anderson, 2004).

31

Compared to domestic students who were born or raised in the U.S, international counseling trainees (ICTs) were found to report stress related to academic performance, language proficiency, cultural adjustment issues, financial distress, and immigration status (McKinley, 2019). Ng and Smith (2009, 2012) conducted a series of studies examining perceptions and experiences of ICTs in counseling and related programs. They found that ICTs, particularly those from non-Western countries, tend to experience greater levels of cultural adjustment concerns when compared with other international students. ICTs also encounter relationship difficulties in their learning environments and clinical settings from their colleagues, instructors, supervisors, and peers (Ng & Smith, 2009). It can be challenging for ICTs to advocate for their needs due to cultural differences, power differential, and ICTs can be easily viewed as "not fitting in " with their peers in the program (Ng & Smith, 2009, 2012). Some ICTs experience disregard, minimization, and discrimination by their peers, faculty members, supervisors, and clients (Ng & Smith, 2009; Smith & Ng, 2009).

As for future directions to support ICTs, Fu (2015) identified whiteness and color-blindness as major training and supervisory issues. Thus, it is critical to highlight cultural responsiveness in supervision as it increases cultural awareness and opportunities to explore one's own racial anxieties. Ng and colleagues used a mixed method to develop an internationalization competence checklist that can be used as a pragmatic guide for U.S. counseling programs. The checklist includes six domains including international representation, curriculum, counseling practice, research considerations, competency evaluation, and environment (Ng et al., 2011).

Due to the uniqueness of international students' experience and the complex intersectionality of cultural identities, the need for providing culturally appropriate training and supervision for this cultural sharing group has grown and received more attention in international supervision issues. Common factors that contribute to ICT's experiences in their education and training experience consist of acculturation process, westernized assessments, and language proficiency (McKinley, 2019; Ng et al., 2011; Nilsson, 2007; Nilsson & Anderson, 2004).

Acculturation Process

As international students arrive in a new host country, they are likely to experience acculturation challenges. International students share the unique challenges of crossing global boundaries for education and career opportunities (Wang et al., 2012). Common stressors for international students include second language anxiety, education stressors, social stressors (e.g., cultural shock, social isolation and alienation, financial concern, and racial discrimination and prejudice), and immigration status sustaining (Chen, 1999; Ng & Smith, 2001). To sustain immigration status, international students must maintain a required number of credit hours, which can add one more academic stressor (Ng & Smith, 2001). The potential change of immigration policy is another potential stressor. One recent example is proposed litigation to set fixed terms for student visas during COVID-19. This proposal increased collective anxiety and a sense of uncertainty to international students on top of the global pandemic (Department of Homeland Security, 2020; Redden, 2020).

In understanding the acculturation process, earlier models emphasized the recovery of cultural shock after entering a new cultural context as well as features including cultural learning and social support, identity development. Whereas newer models highlight the complexity of the acculturation process and international students' potential to adapt within the cross-national transition (Wang et al., 2012; Wang et al., 2015). For example, the Cross-National Competence (CNCC) model represents key competences of cross-national cultural awareness, knowledge, and skills and identifies contexts factors that affect one's development of CNCC (Heppner et al., 2012). Following the foundation of the CNCC model, Wang et al (2015) examined the distinct trajectories of 221 Chinese international students self-reported cultural intelligence (CQ) and found factors that significantly predict the CQ trajectories. These factors include the international students connectedness with mainstream society, anxiety, perceived language discrimination, and family support. Other significant predictor factors for a better acculturative adjustment pattern include higher self-esteem, positive problem-solving appraisal, lower maladaptive perfectionism prior to the acculturation process, social support, and positive coping strategies (Wang et al., 2012). These factors can contribute to international students' education and overall experience in the U.S., including one's professional training.

The predictive factors of positive acculturation also present similar impact on international trainees' professional competence and experience in multicultural supervision (Gatman et al., 2001; Nilsson & Anderson, 2004). Nilsson and Anderson (2004) found that international students in psychology doctoral programs who were less

acculturated to the U.S. culture reported lower self-efficacy in their counseling skills and

lower supervisory alliance. On the other hand, trainees with higher levels of acculturation

may facilitate the trainees and supervisors to initiate multicultural discussion (Qi et al.,

2019). Such discussion can create more space for both supervisor and supervisee's

cultural identities to be addressed and promote satisfaction with supervision (Mori et al.,

2009).

Westernized Assessments

Quality assurance is considered a critical function of supervision, where

supervisors are often held responsible for the supervisee's practice in cases of malpractice

(Polychronis & Brown, 2016). Supervisees were held accountable to provide quality

client care and their counseling skills and professionalism are assessed in clinical

supervision (Falender & Shafranske, 2004). Similar to many other mental health fields,

most of the supervision literature is dominated by Western countries and the majority of

the psychotherapy theory and guidelines are established based on Western culture. Thus,

current supervision models might not be able to reflect the intersectionality and diverse

aspects of supervision through the lens of enlightened globalization (Killian, 2001; Ng &

Smith, 2009). There is a gap in current literature in understanding international

supervision and how to modify current clinical supervision models to ensure more

applicability with international populations (McKinley, 2019; Nilsson & Anderson,

2004).

Supervisor's cultural responsiveness is influential to their assessment and

evaluation of the supervisee's performance (McKinley, 2019; Nilsson & Anderson,

2004). In one study, McKinley (2019) used case vignettes in her study to provide examples of overlooking cultural issues in supervising international students and their impact on ineffective intervention and negative events. Falendar et al (2021) also found that international students from a collective cultural background (e.g., China), often receive corrective feedback on their confidence and assertiveness without multicultural consideration and cultural discussion in supervision. Such feedback can be invalidating for supervisees and be unresponsive to cultural issues that occur in clinical supervision.

Language Proficiency

Language is a critical factor that impacts how international supervisees comprehend the framework of counseling and supervision (Garrison et al., 2022; Lau & Ng, 2012). It requires a code-switching process for English-as-a-Second Language (ESL) supervisees to interpret and communicate information in supervision as well as how they present counseling skills and case conceptualization (Li et al., 2018; Ng & Smith, 2009, 2012). However, in most cases, ESL supervisees' English proficiency was perceived from a deficit lens and areas of improvement rather than a strength of multilingualism (Garrison et al., 2022).

Many ESL international students reported feeling conscious of their accent in speaking English or received feedback concerning their language proficiency in supervision (Garrison et al., 2022). Individuals with lower multicultural awareness or appreciation of the difference between self and others may perceive accented counselors as being less expert, less trustworthy, and not as attractive compared to a counselor who speaks "standard" accent (Ng & Smith, 2009). Thus, internally, ESL international

students often experience self-doubt and fear of being seen as incompetent by their

colleagues and supervisors. Externally, ESL international students may face

microaggression, exorcism, and internalized racism about their accents (Garrison et al.,

2020; Li et al., 2018; Qi et al., 2019). Such phenomena are present in clinical settings,

where supervisors and organizational leaders need to address them to create a more

supportive working environment for international clinicians (Li et al., 2018).

Overall, limited studies have addressed the challenges international trainees face

in their training process and clinical supervision. Most existing international students

studies tend to cluster similar cultures (e.g., European international students, Chinese and

Taiwanese students) together to increase the generalizability of the findings (Wang et al.,

2015; Wang & Mallinckrodt, 2006). While this approach can increase a broad

understanding of the international student populations, it likely overlooks the intersection

of transnationalism (Yao et al., 2019). Thus, the current study aims to investigate the

subgroup of Taiwanese international students and their lived experiences in clinical

supervision.

Taiwanese International Students/Trainees in the U.S.

According to the Institute of International Education (IIE), the total population of

Taiwanese international students in the U.S. was approximately 24,000 for the 2019-2020

school year (IIE, 2020). Taiwan is the fifth leading place of origin of U.S. international

students, following China, India, South Korea, and Brazil. Within the population of

Taiwanese international students, about 31% of students are enrolled in undergraduate

programs, 39% are partaking in graduate studies, 23% are here with their Optional

Practical Training (OPT) visa, and the rest of the students enrolled in non-degree

programs. Most Taiwanese international students major in Engineering and Business and

Management, which is consistent with the data with the international students as a whole

in the U.S. Approximately 5% of students chose Health Professions and Education as

their field of study, which consists of Counseling and Clinical Psychology programs (IIE,

2020).

In recognition of the sociopolitical and historical differences, international

students from China and Taiwan are often studied together due to the shared cultural

heritage such as Confucius and Taoist culture (Wang & Mallinckrodt, 2006; Wang et al.,

2012; Wang et al., 2015). Taiwanese and Chinese international students are often taught

to be compliant and withhold expressing their thoughts or asking questions in classroom

or training settings. These characteristics can be easily viewed as lacking confidence or

assertiveness when the supervisors are not familiar with the cultural difference (Hsu &

Huang, 2017; Wang & Mallinckrodt, 2006). In social interaction, Chinese and Taiwanese

international students often experience challenges adjusting to the U.S. norms of social

conversations and can be perceived as shy due to cultural values such as humbleness and

emotional restraint (Wang & Mallinckrodt, 2006). In Ying and Han's study (2006), they

examined the impact of personality, acculturative stressors, and social affiliation to

cultural adjustment of 155 Taiwanese students in the U.S. and found that affiliation with

Americans partially mediated the effect of extroversion on functional adjustment,

supporting the effectiveness of accommodation. Findings also suggest that women

enjoyed more intercultural relationships than men (Ying & Han, 2006).

Altogether, there is limited literature that is devoted to international students'
experience in clinical supervision and merely any international students studies
specifically focused on the Taiwanese international student subgroup. With the rising
focus of advancing quality data of the AAPI and Pacific Islander populations in higher
education (Nguyen et al., 2014), current study targets to gain a better understanding of
the subgroup of Taiwanese international students in the U.S. and their lived experiences
in clinical supervision. By paying close attention to the unique cultural background of
Taiwanese students, future supervisors and educators can be more informed about the
needs of Taiwanese trainees and provide more culturally responsive intervention in
supervision.

Purpose of the Present Study

With the goal to empower the sharing of Taiwanese international student stories,
the gap in the literature compelled the author of this paper to design a qualitative research
project. The current study aims to gain a deeper understanding of the lived experiences of
Taiwanese international students in clinical supervision. I plan to utilize an interpretative
phenomenological analysis (IPA) approach to obtain qualitative data from semi-
structured interviews (Smith & Osborn, 2007).

The research questions of the current study are:

1. What are the lived experiences of Taiwanese international students who receive
   clinical supervision in the clinical/counseling psychology field in the U.S.?

2. What is the nature of the supervisory relationship between Taiwanese international students and their supervisor(s) in cross-racial and/or national supervision?

3. How does Taiwanese international students' acculturation process impact their experience in clinical supervision?

CHAPTER TWO: METHOD

With the intentionality of gaining a deeper understanding of Taiwanese international students' lived experiences in clinical supervision, a qualitative method was used to explore and describe the experiences of a group of Taiwanese international students who received clinical supervision in the U.S. (Creswell & Poth, 2018; Heppner et al., 2015). A qualitative study provided an in-depth exploration and created a space for Taiwanese international students as trainees in the U.S. to share their lived experiences and voices, which might not always be emphasized in their training (Lewis, 2015; Creswell & Poth, 2018).

Interpretive Phenomenological Analysis & Philosophical Assumptions

The focus of phenomenological psychology is a "return to the things themselves" (Langdridge, 2007, p.4). Phenomenology aims to focus on an individual's perception of the world that they are in and what it means to them (Langdridge, 2007). The goals of phenomenology strongly align with the purpose of the current study in exploring the lived experiences of Taiwanese international students in clinical supervision and providing an opportunity to make meaning of their lived experiences (Creswell & Poth, 2018).

Most previous studies with international students clustered similar cultures (e.g., Canadian and European international students, Chinese and Taiwanese students) together to increase the generalizability of the findings (Wang & Mallinckrodt, 2006). Whereas, in phenomenological studies, participants are carefully selected to ensure they have experienced the phenomenon in question (Creswell & Poth, 2018). This is particularly relevant for Taiwanese people due to the lack of international recognition for Taiwanese culture and nationality related to the political climate between China, Taiwan, and the U.S. (Chen, Kastner & William, 2017). Thus, phenomenology's focus on exploring an individual's perception of a phenomenon allows the researcher to gain a deeper, nuanced reflection on Taiwanese international students' experiences (Creswell & Poth, 2018).

The process of understanding cross-cultural supervision can be complicated due to the complexity of cross-cultural communication and the power differential between supervisors and supervisees (Chopra, 2013). Many factors can impact an international student's experiences, including individual/personality traits and characteristics of the immersion experience (Wang et al., 2012). The active reflection on one's immersion experience also significantly influences individuals' cross-cultural competency and the perceived experiences in clinical supervision (Wang et al., 2012). Lastly, the interaction between supervisor and supervisee's cultural identity development may also impact the cross-cultural supervisory relationship (Chopra, 2013). As the process of understanding the process of cross-cultural supervision can be confusing, Interpretive phenomenological analysis (IPA) is an appropriate approach to guide the research process. IPA involves a double hermeneutic as it integrates participants to "make sense" of their lived experiences

as well as the researcher's attempt to understand participants' personal and social worlds (Creswell & Poth, 2018). Therefore, IPA can be a useful methodology to assist participants in making meaning of their experiences through an interpretative analysis process (Langdridge, 2007).

Positionality Statement

As a Taiwanese international student myself, I first came to the U.S. for my master's degree in 2011 and then returned to Taiwan to complete my licensure as a master's level counselor. My training experience has been across the U.S. and Taiwan, and I have worked with numerous clinical supervisors from both countries. Throughout my training experience, I find supervision a critical learning opportunity in my professional growth including clinical skills, case conceptualization, and professional identity development. I also find many of my supervisors to significantly impact my personal growth through the mentorship embedded in the supervisory relationship. Therefore, the effectiveness of clinical supervision has been a research interest of mine and I have a strong passion for understanding the experiences of being in clinical supervision throughout my career.

In reflecting on my experience as an international student in my master's and doctoral degrees, I noticed that my racial and cultural identity has brought different perspectives to my clinical work and supervision. As I lived in the U.S. for a longer period of time, my English proficiency improved, and I became more familiar with the U.S. context regarding systematic issues and racism. My cultural awareness around my gained identities as a person of color, psychologist of color, international student, and

immigrant has also increased. As a psychologist's cultural and racial identities are strongly associated with their clinical work, it seems inevitable for the discussion about diversity issues to occur in my clinical supervision. The complexity of power and privilege dynamics within the supervisory relationship along with many other contextual factors that impact the quality of supervision motivates me to gain a deeper understanding of international student's experience in clinical supervision.

The identity of international students is often underemphasized in current literature regarding clinical supervision and multicultural education; the unique experiences of cross-national adjustment, language code-switching, and racial identity development can be easily overlooked. There are moments in my clinical supervision when I feel my identity as an international student is invisible in my supervisor's eyes and the challenges I face as an international student are invalidated. When connected with other international students who shared similar feelings in clinical supervision, I realized that I am not alone, and it brought me hope and joy. In the meantime, it also aches my heart that this experience is continuously happening to generation after generation of international students, each going through the process and struggle of finding our voices.

As I have a strong passion for advocating for international student populations, I also recognize that my own experiences in clinical supervision may increase the potential challenges of this study. The process of bracketing my personal experiences in clinical supervision can potentially be emotionally activating and difficult because the interpretation of the data always incorporates the assumptions that the researcher holds about the research topic (Creswell & Poth, 2018). Also, how I make meaning of my lived

experience might not apply to all international students; everybody has different experiences in their acculturation process. My values with the emphasis on self-reflection and social justice issues can potentially impact the way I frame the interview questions and interpretation of the data. For example, graduate school can be exacting for individuals, where some people might not have the capacity to explore meaning in their clinical supervision and acculturation process. While self-introspection is a strong value of mine, my privileged identity can increase more mental space for me to emphasize the issues in question. Therefore, as my personal experiences can be an instrument of the research, it will be highly important for me to be attuned to my own bias and assumptions in response to the research questions. I might find that I am unaware of aspects of the experiences of other international students, which are crucial to include in this study.

Participants

Six Taiwanese international students (n=6) were interviewed for this study. IPA studies are often conducted with smaller, focused groups of participants, as the goal is to obtain details about the perceptions and understanding of a particular group through an idiographic mode of inquiry (Smith & Osborn, 2007). The norm for student projects of IPA is five to six participants in consideration of the time-consuming nature of the analysis process (Langdridge, 2007). Thus, having six participants in this study allowed sufficient in-depth engagement with each participant as well as a detailed examination of similarity and difference, convergence and divergence of the phenomenon in question (Smith & Osborn, 2007).

All recruitment materials were approved by the IRB at the University of Denver. Participants who completed the semi-structured interview were compensated $20 with Target gift cards for their participation in this study. Selection criteria include individuals, who are a) 18 years of age or older; b) self-identify as a Taiwanese international student during the course of training, c) currently enrolled in an institution pursuing a doctoral-level clinical or counseling psychology degree, or currently a postdoc fellow in the U.S. and d) have engaged in at least two clinical practicum/internships as trainees where they received regular clinical supervision throughout their training in the U.S.

It is important that participants demonstrate a deeper understanding and reflection of their clinical supervision and their cultural adjustment process to answer the research questions of this study (Heppner et al., 2015; Creswell & Poth, 2018). Jibson and colleagues (2016) broadly divided clinical supervision into inpatient and outpatient settings, which differ in such qualities as the depth of experience of the trainees, duration of oversight, and frequency of contact. In consideration of the difference in supervision qualities above, doctoral students who have finished at least two practicums were considered more suitable for this study, with the assumption that individuals who have multiple clinical supervision placements were more likely to gain deeper insight regarding the quality of their supervision. For doctoral students who had a master's level degree in clinical or counseling fields, they might also be able to compare their clinical experience and supervision across master's and doctoral levels. Therefore, doctoral students who had a master's level degree and had completed at least one advanced practicum also met the inclusion criterion for this study (Jibson et al., 2016). Lastly, due

46

to the duration of the doctoral program, doctoral students who have completed more than one clinical practicum are likely to reside longer in the U.S. They may demonstrate more familiarity with the social and historical context in the U.S. to further reflect on their acculturation process (Wang et al., 2012).

Considering all the factors mentioned above, this study focused exclusively on the clinical supervision experiences of doctoral students, as it was expected that doctoral students have a more advanced understanding of their acculturation process across their graduate studies (Wang et al., 2012; Wang et al., 2015). Limiting participation to doctoral students in APA-accredited clinical and counseling psychology programs created a more homogenous sample, where participants demonstrated similar competencies and had similar training requirements due to the evaluation and accreditation processes of the American Psychological Association (Smith & Osborn, 2007).

Additionally, individuals were excluded from participation if they reported not having a primary supervisor throughout their practicum placement due to consideration regarding the depth of their supervisory relationship (Jibson et al., 2016). I considered the difference in phenomena in clinical supervision between trainees who received supervision from multiple supervisors without an embedded supervision schedule versus trainees who met with their primary supervisors regularly throughout their practicum. The distinction between the two formats of clinical supervision concluded my decision to only include participants who received regular clinical supervision with primary supervisors in their practicum placement (Jibson et al., 2016).

Procedure

Demographic Questionnaire

Participants were invited to complete a Qualtrics questionnaire that inquired about their contact information, education, and cultural background as well as their training experiences (e.g., how many supervised clinical practicum/internships have participants completed), and supervisory experiences (e.g., how many supervisors have participants received supervision regularly). This information ensured that participants demonstrated a deeper understanding to answer the research questions of this study (Heppner et al., 2015; Creswell & Poth, 2018). Statements regarding participants' rights were included in the demographic questionnaire. Contact information was used to invite participants to complete the semi-structured interview and distribute gift cards.

Recruitment

Following IRB approval, the study was advertised on social media platforms and organizations of Taiwanese and AAPI psychology organizations (e.g., Taiwan Psychology Network). As I am also in the community of Taiwanese international students, I personally reached out to peers and colleagues who knew or had worked with Taiwanese international students to recommend suitable participants through snowball sampling. After reviewing the responses from the demographic questionnaire, I scheduled a five to ten minutes screening call to confirm prospective participants' eligibility for the study by briefly inquiring about their demographic information and how they identify as Taiwanese international students. The screening calls also allowed opportunities for prospective participants to ask questions about the study. Once participants' eligibility

was confirmed, I proceeded to schedule an interview time with them over the phone followed by a reminder email with a consent form for review and a Zoom meeting link for the semi-structured interview.

In selecting participants, I sought to invite individuals who had experienced the phenomena in question deeply, meaning they had partaken in clinical training and worked with primary supervisors. Furthermore, I aimed to diversify the sample in the type of doctoral program, current year of study, years of clinical experience, duration of stay in the U.S. as well as intersecting identities including age, gender, sexual orientation, and marital status. By creating a diverse pool of participants, this study included more contextual factors that were critical to participants' perceived experience in supervision.

Selected participants were invited to participate in a semi-structured interview conducted via Zoom. A reminder email was sent to participants a day before the interview to avoid no-shows and scheduling conflicts. I inquired about participants' access to technology and offered support when needed. During the semi-structured interview, as participants signed into the Zoom meeting, I greeted participants and reviewed participants' rights including informed consent and confidentiality. After that, I reiterated the purpose of the current study and reminded participants that the interview process will be recorded and transcribed for data analysis. The interview protocol was designed and written in English, considering that selected participants were familiar with the terminology being used in the interview protocol based on their doctoral studies/training and English proficiency. An electronic copy of the interview protocol was presented to participants at the beginning of the interview for review using the

screening sharing feature to provide a semi-structured inquiry of the interview. The

protocol facilitated the interview to be more centered around the phenomenons in

question yet retaining the nature of the semi-structured interview. By presenting the

interview protocol in only one language, English, participants were able to review the

interview questions in a short period of time, as opposed to reading both English and

Mandarin versions of interview protocols.

The interviews were conducted in the participants' preferred languages; Four

were conducted in English and two were in Mandarin. During the interview, I followed

the interview protocol and asked follow-up questions to facilitate participants clarifying

or elaborating their stories as needed. After the interview, I debriefed each participant and

checked in with them to ensure there were no lingering activated emotional reactions

post-interview. I confirmed their preferred email addresses to receive the gift cards and

encouraged participants to reach out to me or the research advisor if concerns arose.

The following interview questions were formulated based on the clinical

supervision and international student literature, consultation with experts, a pilot study,

and my self-introspection.

1. Pick one or multiple supervisors across the years and share some basic

   demographic information about them. Are there any patterns in supervisors'

   demographic information (e.g., mostly white or BIPOC? Same gender? Age?)

2. Describe the overall experiences of your clinical supervision in the U.S. so far.

   Possible prompts: Tell me about some of the most positive/challenging

   experiences you have had in supervision.

3. Describe your supervisory relationship with your supervisor(s). You can start with the supervisor who had the most impact/was critical for your development – how is your supervisory relationship with them?

   Possible prompt: How comfortable do you feel when sharing about yourself and your clinical work with your supervisor? How understood do you feel by your supervisors?

4. What kind of multicultural issues have arisen, if at all, within your relationship with your clinical supervisor?

   Possible prompt: What kind of multicultural issues, if at all, have arisen in your clinical work with clients, or maybe between you and your supervisor(s)?

5. Describe your acculturation process in the U.S. and how that has impacted your clinical work and experiences in supervision.

6. How, if at all, have your supervisors addressed your identity as a Taiwanese international student in clinical supervision?

7. How does your clinical supervision experience impact your growth as a psychologist?

   Possible prompt: How confident do you feel now as a counseling/clinical psychologist? How is that related to your clinical supervision?

8. How do your clinical supervision experiences impact your personal growth?

   Possible Prompt: What do you know more about yourself through clinical supervision?

9. Looking back, what might be helpful to make your clinical supervision experiences more satisfying?

   Prompt: What do you think your training program can do to better support you in your clinical supervision experience?

Debriefing Questions

1. How was it talking about your experience?

2. How are you feeling now, having talked about this?

3. Do you have any questions for me?

4. Is there anything else you would like to talk about?

Transcription

All interviews were video-recorded and transcribed. All identifying information was removed from the transcript including program names, training sites, and other information that might reveal the participant's identity. Participants and individuals mentioned (e.g., supervisor/colleague names) were replaced with pseudonyms. Transcriptions, recordings, and any other data were kept in password-protected and encrypted files. Files were coded based on the order of the interviews rather than any other identifying information. As the interviews were conducted in participants' preferred language, the interviews were transcribed based on the language being used in the conversation. Illustrative quotes that are included in the findings were presented in English and I used the back-translation process to ensure the accuracy of interpretation. Back-translation is commonly used and highly recommended in the help profession and in research (Chen & Boore, 2009). In the study, quotes in Mandarin were translated to the

target language, English, by me and then translated back to Mandarin. The equivalence

between English and Mandarin was evaluated to ensure the findings of the current study.

Moreover, to achieve comparability of meanings, it is important to consider cultural

factors and how language is used in context (Chen & Boore, 2009). While using myself

as an instrument in the back-translation process, I consulted with colleagues who speak

Mandarin and English fluently and are familiar with both cultural contexts to ensure

conceptual equivalence.

Data Analysis

I utilized the interpretative phenomenological analysis (IPA) approach to interpret

qualitative data from semi-structured interviews (Smith & Osborn, 2007). This

methodology first required me to immerse myself in the data, reading and rereading the

interviews and becoming more familiar with it. I annotated interesting or significant

statements made by the respondent (Smith and Osborn, 2007). In this stage, I jotted down

initial reactions and thoughts in response to the data (Smith & Osborn, 2007). In

reviewing the transcripts, significant statements were highlighted and organized in a

spreadsheet, where I coded the statements in response to the interview questions that

were most fitted and clustered statements in different categories and themes based on

broad units of information. The codes and categories were identified through

horizontalization; some statements were deleted to better capture the themes and organize

information while some of the themes were clustered together, or emerged as

superordinate concepts (Creswell & Poth, 2018).

The broad units of information are also called meaningful units of themes (Creswell & Poth, 2018). In this stage, I reviewed the themes that were interpreted from all the transcripts and connected them into clusters in response to the three research questions. The next stage was to produce a table of the themes, ordered coherently (Smith & Osborn, 2007). Themes were combined to create a description of Taiwanese international students' lived experiences in clinical supervision in the U.S. by including both "what" and "how" their lived experiences happened (Creswell & Poth, 2018).

Validity and Trustworthiness

In order to ensure the trustworthiness of this study, I used the criterion for trustworthiness across research paradigms and designs including social validity, subjectivity and reflexibility in qualitative research, adequacy of data, and adequacy of interpretation (Morrow, 2005). To meet the criteria above, I utilized the member-checking technique to explore the credibility of the results (Birt et al., 2016). Synthesized Member Checking addresses the co-constructed nature of knowledge by providing participants with the opportunity to engage with, and add to, the interview and interpreted data (Birt et al., 2016). The participants were provided with a transcript of their own respective interviews as well as a brief write-up about the findings of the overall study to check for accuracy and resonance with their experiences. The invitation to the member-checking process was voluntary and not part of the required protocols for this study. I inquired about participants' willingness and desire to engage in member checking after the semi-structured interviews. For participants who showed a desire to engage in the member-checking process, a follow-up email was approximately 4-6 weeks after the

interview with their interview transcripts. Participants were encouraged to provide feedback including, but not limited to their initial reactions, thoughts, and feelings about the data (Birt et al., 2016).

For researchers who also have similar personal experiences related to the research questions, Creswell and Poth (2018) suggested authors "bracket" themselves to identify personal experiences with the phenomenon and partly set them aside to focus on the experience of the participants in the study. Because I also hold the identity of a Taiwanese international student in the psychology field, I was mindful of potential bias that may impact on interpretation and analysis of this study. Through the research process, I sought consultation from other researchers and peers with experience in conducting qualitative research within one's cultural identity and community to remain accountable and maintain the validity of the study. I also reflected on my personal experiences in response to the interview questions to mitigate the potentially deleterious effects of preconceptions that may impact the research process (Creswell & Poth, 2018). The reflection process included composting an autoethnographic essay that highlighted pivotal events and supervision experiences that were impactful for my professional and personal growth along with the acculturation process. The essay was edited and reviewed with my committee member who provided feedback and guidance regarding how the writing and reflection process may have impacted the research process of the current study.

CHAPTER THREE: FINDINGS

The current study aims to gain a deeper understanding of the lived experiences of

Taiwanese international students in clinical supervision. This chapter includes the

findings from the six semi-structured interviews and the emergent themes that captured

the essence of lived experiences of the group of Taiwanese international students in

clinical supervision.

Participants

Six self-identified Taiwanese international students (n = 6) were interviewed for

this study. Three participants were enrolled in clinical psychology programs, and the

other three were in counseling psychology programs. During the time of the interview,

the duration of stay in the U.S. ranged from four to nine years, and the year of doctoral

training ranged from one to five years. One of the participants was completing the

predoctoral internship and five participants at the time of the interviews were engaged in

doctoral clinical practicum placements. Participant demographics and pseudonyms are

shown in Table 1.

Table 1 Participant Demographics

Name *	Age Range	Other Racial/ Ethnic Identities	Gender	Type of Doctoral Program	Year of Doctoral Training	Duration of Stay	Preferred Language
Chen/1	Late 20s	N/A	F	Clinical, PsyD	1	7	English

Hu/2	Late 20s	N/A	F	Clinical, PhD	2	9	English
Kao/3	Early 40s	N/A	F	Clinical, PhD	4	4	Mandarin
Lin/4	Late 20s	White	F	Counseling, PhD	5	9	English
Tsai/5	Early 30s	N/A	F	Counseling, PhD	5	6	Mandarin
Wang/6	Early 30s	N/A	M	Counseling, PhD	4	8	English

* Pseudonyms are used to protect participant identity and privacy

Themes

Thematic analysis is the principal analytical approach used with Interpretative Phenomenological Analysis (Langdridge, 2007, p. 110). The analysis focused on making sense of the participants' lifeworld through reading and re-reading the transcription to find the primary themes of the lived experiences in question. While these themes were interpreted through analysis, it is important to strike a balance in order to present the unique voices of all participants while extracting the essence of their experiences. Efforts were made to achieve the balance by clustering, re-ordering, and restructuring the themes to continue checking the thematic analysis and how it presented the findings from the interviews. Descriptions of each theme, transcription quotes, summaries, and analytic comments are included to demonstrate the nuances and divergences of the themes along with contextual factors that contributed to participants' experience in supervision.

Data were analyzed for each participant by first coding their key statements in response to each interview question and further forming categories, thereby creating themes that respond to the three research questions of this study. Analysis led to the surfacing of four primary themes: (a) layered power differential, (b) invisibility, (c) language salience in acculturation, and (d) humanizing practices.

Figure 1 Presentation of Themes

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                    ┌─────────────────────────┐
                    │  Experiences of Taiwanese │
                    │ International Students in Clinical │
                    │       Supervision        │
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        ┌──────────────┬───────────┴─────────┬──────────────┐
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│ Layered Power │ │  Invisibility │ │   Language   │ │  Humanizing  │
│  Differential │ │              │ │  Salience in │ │   Practices  │
│               │ │              │ │ Acculturation│ │              │
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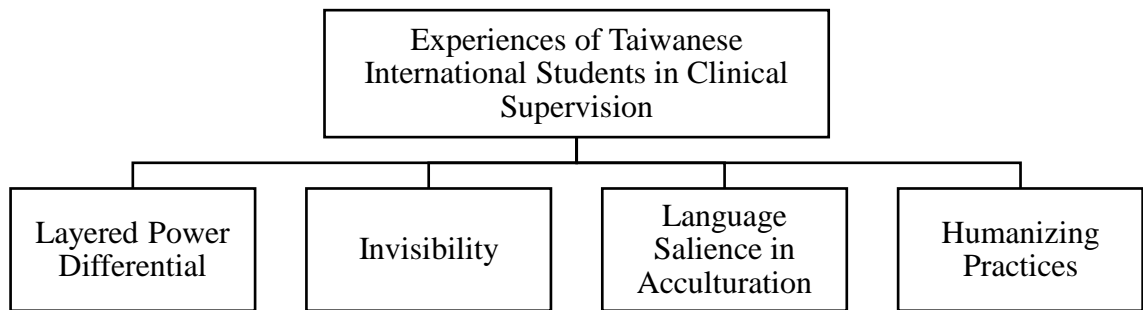
Theme One: Layered Power Differential

All six participants shared experiencing the power differential in supervisory relationships. The power differential can result from various cultural and contextual factors including race, ethnicity, age, years of clinical practice, and evidently the supervisor's role and responsibility to evaluate supervisee's competence and performance, where supervisors can be viewed as an authority figure due to the evaluative component in supervision. When the power differential was unaddressed, it often led to emotional distress, where participants reported feeling uncomfortable, stressed, anxious, frustrated, intimated, vulnerable, and powerless in supervision. Chen shared during the interview:

> I was really stressed for a long time. Like, I kind of felt powerless because she is my supervisor and I'm under her license. So, at the end of the day, she has all the say in what's going to happen…. I just feel really powerless. I'm stuck; if you're in a job, you can like quit. But I can't quit because this is what I want to do in the future. So it is really hard to be stuck with her.

58

Participants also found their cultural background as Taiwanese international students brought a unique facet to the power differential due to their upbringing and cultural values. One participant used the term "Asian root" to identify the virtue of "Zun Shi Zhong Dao (尊師重道)" meaning the tradition of "honoring the teachers and respecting their teaching." This belief was deeply rooted in Taiwanese culture, where a teacher is considered the "second parent" of the student. There is a saying in Mandarin: "Even if someone is your teacher for only a day, you should regard him as your father for the rest of your life (一日為師，終身為父)" that highlights the virtue of respecting teachers and the importance of the role of teachers because they bring a significant impact on one's growth, knowledge, and success. Students are expected to respect and obey the teacher as an authority figure and meet the standard to serve as a "good student." The teacher-student mentality transfers to the supervisory dynamic where the supervisor teaches and evaluates supervisee's performance, creating a power differential between supervisors and Taiwanese supervisees. One presentation that demonstrated the teacher-student dynamic is Taiwanese international supervisees' choices when referring to their supervisor by their first name or their title. Tsai shared:

> Growing up, we are taught to respect our teachers. So, no matter which supervisor I work with, I expect myself to be a very very good supervisee. I respect my supervisors very very much. They are my teachers and I always refer to them as Dr. who and who.

Tsai further revealed how she approached a supervisor about her hesitation to call her by her first name and initiated a cultural discussion in supervision:

I told my supervisor I wanted to share something really interesting with her, something that she might never think about before. She is a white woman, about 35 to 40 years old. I told her that even though it was natural for people to call each other by their first name, it is challenging for me. I explained my cultural background, and how I had always been used to calling my supervisors Dr. so and so. This demonstrated my respect towards her. It will take me some time to get used to calling her by her first name. And her reaction was to thank me for sharing this with her because she has never thought about or encountered this issue. She told me I can use whichever way feels most comfortable to address her…. I also noticed how changing the way you address your supervisor actually brought a little bit of influence on our relationship; When you can call your supervisor by their first name, you then feel easier to get closer to them and see them as a senior colleague rather than just an authority figure.

Another participant, Wang shared a similar sentiment and elaborated on how the power differential affected his supervisory relationship:

I think growing up in Chinese culture, in the Taiwanese context, a teacher is an authority figure. You don't talk back. They tell you what to do and you follow. You don't question them…. I think that sort of carried over in a supervisory relationship. I just look at [supervisors] as someone that I cannot cross. I cannot tell them how I really feel… [supervisor name] has asked me to call him [his first name] for years. But he stopped asking because I just always call him Dr. XXX…. I have so much respect for him. I just don't feel like calling him [his first

name] will give him the same respect. When I respect a supervisor, I also put myself in a position to view them highly.

Along with the cultural values that contributed to the power dynamic in supervisory relationships, participants identified that, in the U.S. context, being a Taiwanese international student can mean holding multiple marginalized identities due to race and ethnicity, immigration status, and English proficiency. Participants disclosed they had to navigate the layered power differential and systematic barriers in supervision by "testing the waters" to assess if it is safe to be authentic and to engage in cultural discussions with their supervisors when such discussions can be anxiety provoking. Supervisors who exhibited cultural curiosity and openness as well as interest in knowing more about supervisees' cultural backgrounds and identities made participants feel more comfortable disclosing their feelings and experiences authentically. Kao voiced, "They [supervisor] do not seem to be interested [to learn more about cultural issues]. Then I just feel 'meh!' I then don't feel safe bringing up issues of diversity with them, especially race and ethnicity."

Another participant, Lin, shared similar sentiments when assessing whether she felt comfortable sharing her biracial and bicultural identities in supervision and how those identities show up in her clinical work.

I sense the vibes and I would tiptoe a little bit and see how open they [supervisors] are, how receptive they are, and how interested they are to get to know me as a multicultural being and my cultural identity.

61

Tsai also shared whether and how she decided to bring up multicultural issues

with her supervisor or not. She stated:

First of all, [supervisor] has no interest at all. She does not seem to want to bring

up this topic [multicultural issue] at all. Second, I think based on my

understanding of her and our relationship, bringing it up will likely not help much

because she has no curiosity about my cultural background. I will have to explain

to her what happened. It will feel like I am finding excuses for myself and I do not

like that feeling. So I did not bring it up with her.

The marginalization of identities as Taiwanese international students also

manifested in participants' doctoral programs and practicum/internship sites, where all

six participants shared the experience of being minoritized as the few, if not the only,

person of color, international student, Asian, and/or Taiwanese in their workplace. Lin

shared her reflection on the intersectionality of her marginalized identities:

At the beginning of my training, I wasn't sure about my identity as an

international student, a non-native English speaker, and also as a beginner

clinician. These are the intersectionality of marginalized identities. I feel like that

identity [beginner clinician] itself can be quite anxiety provoking, not to mention

adding on top of those two layers that I just mentioned.

In reflecting on the intersectionality of their identities, participants shared candid

examples and stories about what it means to be a Taiwanese international student in the

U.S. context. All six participants reported experiencing some extent of minority stress,

where they felt the pressure to work harder than their peers to prove their worth and

secure future career opportunities. Though the stress had subsided for some participants at a later training stage due to increases in self-efficacy, it is evident that the struggles stemming from limited support from peers, supervisors, faculty, and community members can be emotionally distressing for participants. Hu described her experiences as an international student and racial minority during her course of training in the U.S. as alienating and lonely.

> I always have to work so hard. I always have to do everything myself. I always have to figure it out, and I have [figured it out], which is why I'm here. But at the same time, I'm like "come on guys! Somebody give me a hand!" This feels very lonely. And it's lonely when I talk to my family in Taiwan because they don't really know what it's like here… It's like "oh people back home don't even understand." So, I'm just stuck between here and there. And sometimes it feels like I'm nowhere.

The isolation and loneliness Hu reported illustrated the additional psychological distress international trainees faced during their acculturation process while managing expectations for clinical training, course work, research, and other demands in graduate school.

Kao shared her reflection as an Asian therapist working with predominantly white clientele and how increases in anti-Asian crimes in the U.S. impacted her clinical training:

> At my practicum site this year, my clientele is predominantly white and it is a new experience for me because I worked with mostly minority groups before. This

year, including assessment, therapy, and supervision, I completely entered a white

space. In the beginning, I had to overcome a lot of [difficulties]. I feel like I don't

know how to help [clients]. I wondered "Am I enough?" In addition, after

COVID-19, I have worries about how I will be perceived. "Will people accept me

as an Asian therapist? Will they [clients] want to work with me?" When I brought

it up in supervision, my supervisor was honest with me and responded "I don't

know how to help you" because [she] is not Asian.

The layered powerful dynamic also showed up within the Asian community. In

particular, the historical contexts and political climate between China, Taiwan, and the

U.S. were explicitly salient for many Taiwanese international students. Several

participants shared increased insight about their Taiwanese identity upon their arrival to

the U.S. as they continued reflecting on the spectrum of political standpoints around the

nationality of Taiwan. However, such reflection and cultural discussions were often

overlooked in supervision. When asked about whether she discussed her Taiwanese

international student identity and related political issues in supervision, Kao responded:

Most of the time I just reflect on it by myself. Because I feel like having to

explain it to people with no background information [about political issues in

Asia] can be really exhausting. I would think to myself that when I have the

energy to explain, I will do that. But most of the time, I do not have the energy.

Participants noted that the political tension between China and Taiwan were

rooted in complex historical and political contexts, where they found a diversity of

standpoint and a spectrum of beliefs in the Taiwanese and Chinese communities.

Participants' experiences conversing with their Chinese peers and colleagues also differed. However, the political climate between China and Taiwan was often considered "unspeakable" due to the sensitivity of the issue and "maintaining harmony (和諧)." The lack of discussion led to a sense of uncertainty, where participants found it difficult to gauge people's political standpoints. Some participants confided in the interviewer regarding the dilemma of wanting to stay true to their beliefs yet worried about themselves and their family's safety if they continued to vocalize and express their political views openly. One participant stated, "Because my [family member] is still in China, I am always fearful that if I say something to Chinese people, what if they report that to the government and something happened to my [family member]."

For participants who reported fear and safety concerns, they also mentioned feeling triggered by the outburst of the Ukrainian War. One participant disclosed struggles during the Ukrainian war and shared the issues in group supervision:

She [supervisor] was really helpful when the Ukrainian war was happening and I told her I'm feeling pretty stressed because it feels like Taiwan is Ukraine. So, I was going through a really hard time. Because she's from the Middle East, she has a lot of exposure to the Israeli and Palestinian conflict. So, she kind of understands that stress and was really understanding during that time…. I was not sure if I should share with the group because it's my personal stuff. But she encouraged me to say it because my colleagues are going to run into Chinese or Taiwanese clients sometime down the line. So, it's really important for them to know.

With Chinese international students being one of the largest populations of international students, there is a high likelihood of interactions and collaboration between Chinese and Taiwanese clinicians. Several participants expressed concerns about navigating the complex dynamic in the workplace and having limited resources and guidance to support participants to manage the power dynamic. Kao shared the introspection of her self-identity as Taiwanese upon her arrival to the U.S. and her goals to embrace the diversity of belief systems and values within Taiwanese and Chinese communities:

> I believe that a more rounded self-identity needs a lot of exploration and integration, and it is very influential on our mental state. So, in this process, I questioned myself "What does it mean to be Taiwanese?" As a therapist-in-training, I also learned to be more vocal about my being Taiwanese…. Another part of the integration for me which I am still learning, is to recognize that for Chinese people, who were raised in a different belief system, how do I work with them and embrace the diversity? Also, in Taiwanese and Taiwanese communities, how do we embrace the spectrum [of political standpoints]? I asked myself "Do I have the capacity to hold the difference?"

Kao named the struggle Taiwanese people face when choosing a future workplace in the U.S., where we are likely going to be a minority due to the social and political context:

> I seriously thought about whether [the political climate and tension] will impact where I choose to work in the future. I feel like for Taiwanese, I either go to a

predominantly white space and be a minority there or, if I choose to go to a workplace where I can provide Mandarin services and work with more Asian populations, I would still be a minority there. This is a real issue. Hmm, maybe not so much of an issue but it is our reality. Either place I choose [to work in] entails a unique type of challenge for Taiwanese people.

Theme Two: Invisibility

Participants were encouraged to share how their Taiwanese international student identity was addressed in supervision, if at all. Most of the participants disclosed only a few encounters when supervisors initiated conversations about their Taiwanese international student identity in supervision. All six participants detailed how they had to observe and decide whether it is safe or appropriate for them to bring up their culture. The lack of discussion led to participants feeling unseen and invisible because a salient part of their identity was not taken into account in the supervisory relationship.

When asked about how her identities were brought up in supervision, Chen put her feelings in simple words, yet her testimonial carried the weight of undeniable invisibility. She said, "It's really hard to feel seen… There is always more work to explain yourself." Hu also shared a similar testimonial and further described what feeling invisible meant to her experiences and her identity:

I definitely feel like the Taiwanese international student part of my identity is not taken into account. Part of me sometimes feels really invisible to other people… People think that things are easy for me because I do things efficiently, but they don't understand how much work I put in. And all of the sacrifices that I've made

67

to be here… So, in that way, it all feels like it's invisible. Even though I, as a

person is not invisible but my real self and my experience as the self are invisible.

When reflecting on the potential reasons why their supervisors did not address

their cultural identities in supervision, participants voiced that it appeared that most of the

supervisors had limited knowledge about Taiwan in general including the geographic

location, Taiwanese culture, and the historical context and ongoing political tension

between China and Taiwan. Chen voiced the following:

It [Taiwanese identity] only came up when I talked about the [Ukrainian] war. No

one brought it to me. And I don't think people are aware of the conflict between

China and Taiwan. I have a classmate who's from Hong Kong and people always

try to put the Hong Kongese guy and the Chinese guys together, but they don't

really know there could be tension around that. Because they don't know, they

probably [thought that], like, all Asians are the same to people who don't know

about history.

On top of the stressors other international students often experience, many

participants identified current events related to Taiwanese identity and political climate

that had brought a significant impact on their well-being and sense of safety in their

training environment. Events mentioned during the interview that were triggering or

anxiety-provoking for participants included the Hong Kong protests from 2019 – 2020,

the Taiwanese presidential election in 2020, the Ukrainian War, and the Orange County

shooting in a Taiwanese church in 2022 — which again was rarely brought up or

addressed in supervision unless participants initiated the conversation. When supervisors

68

did check in with participants, it was a critical moment for supervisees to build a deeper connection:

> My case conference leader because she's Japanese American. She is more aware of the history of Asia. And when the shooting happened in southern California a couple of weeks ago, she was the only person who came to me and said, "I thought of you and I know you've been struggling with this." That was really touching to me… She was the only person who brought it up without me trying to bring it up first. So, it just feels like okay like "Of course, a Japanese American is able to see that! What about the other people?"

Participants also provided candid examples and stories about how their needs as international students were overlooked in their course of training and supervision. Supervisors seemed to have limited awareness of international students' needs in general. Many participants shared that their Taiwanese international student identity was only brought up for logistical manners such as renewing the Curricular Practical Training (CPT) status to sustain their student visa. As may be expected, most of the supervisors were not familiar with the student visa issues and related work limitations and post-graduation immigration processes such as applying for the Optional Practical Training (OPT) status and H1B work visa.

Kao shared her observation about the lack of awareness related to national identity and international status in her training experience:

> We [the supervisor and Kao] usually talk about it when I need to renew my CPT. I will tell her I need a letter from her because I need to update my CPT…Usually,

it is when there is a practical need like this, we would sort of talk about it

[Taiwanese international student identity], no other time. I feel like people in our

field do not have much awareness about international identities and status. People

do not know much about how international students have to jump through hoops

to complete this program.

Another participant, Wang, had worked as a licensed professional counselor prior

to returning to graduate school for his doctoral degree and had gone through multiple

stages of the immigration process for his student visa and work authorization. His

testimony shows the significance of visa issues for Taiwanese international students in

job searching and how he navigated conversations related to immigration status with

supervisors.

That [visa] is the most important thing when we're looking for a job. So when I go

to a job interview, talking to future supervisors and they ask me "Do you have any

questions for us?" I will ask a couple of clinical questions to show them "I know

what I'm doing." But I also asked questions about visa issues, and I ask about this

process. You can tell the difference when they are also previous international

students. You just feel like they get you. They have an idea of what to do. And for

the supervisor that will have no experience working with international students. It

was very telling. You can just tell right away.

When navigating the complicated immigration U.S. systems, many participants

experienced the pressure that they were expected to "figure everything out" and

advocated for themselves to have their needs met with limited support from the campus

and their training programs. This expectation was often normalized for participants where they shouldered the responsibility to educate others about the immigration process. This is a unique facet of acculturation stress that was unknown to supervisors who were generally born and trained in the U.S.

While most participants expressed understanding their supervisors' unfamiliarity with international status and the immigration process due to life experiences and exposure, they also identified the immigration process being one of the primary stressors in their acculturation process for individuals who planned to practice psychology and reside in the U.S. post-graduation. When such major stressors were not understood and acknowledged by participants' supervisors, who often served the role to guide trainees' professional identity development and mentor, it created a gap between the supervisor alliance for supervisees to feel seen and supported. Lin voiced her perspective about the process of "figuring it out by herself":

> I feel like it [needing to figure it out on her own] was normalized for me from the very beginning. I was put in a position where I have to do that from day one. So I just really normalize all this process. I would feel so surprised if someone were to take care of me. I would be like "What? You actually know about that [student visa and immigration process)?" ... The good part of this is that I don't feel victimized, I don't feel bad about it, because that's my norm, and I just do it.

Another phenomenon participants called for when their Taiwanese international student identity was not addressed in supervision was supervisors treating participants the same way they treated domestic trainees. This could range from colorblindness, where

71

supervisors made invalidating or dismissing comments and disregarded cultural contextual factors that interfered with participants' training experiences, to supervisors simply treating Taiwanese international students the same as their domestic peers to be "equal." How this "equal treatment" was perceived differed among participants.

Lin detailed an encounter between her and a supervisor when she disclosed anxiety related to English proficiency, which raised a sense of uncertainty about how her supervisor regarded her Taiwanese identity.

I was just really a little bit nervous about seeing clients because English is not my first language. I'm worried about my accent and the way I say things. I'm just worried. I'm intimidated. Then she [supervisor] said "Well, you don't want your client to see through this. You don't want them to feel like you are incompetent." That's basically what she said. I feel like she dismissed that piece of my cultural identity – that I am not from America; I am from Taiwan. That response gives me a feeling that she's not interested in knowing more. She is not interested to know who I am, and she does not necessarily see my Taiwanese identity as a strength. Maybe she does not see that as a weakness, she probably sees it as "Oh, you don't speak typical American accent English." Maybe she probably sees that as a weakness, but again that's my guess. I don't know that for sure. But I think the bottom line is she saw my Taiwanese identity as something neutral. Like "Oh, I don't care. Like, as long as you work efficiently as a clinician, why would I care?"

When asked about how the lack of discussion about her cultural identities impacted the supervisory relationship, Hu described the complex dynamic between

invisibility, racism, and the lack of connection to how she perceived her professional

identity in the training system:

> I think a lot of my supervisors have a good impression of me. They think I'm
>
> hard-working. They think I'm on top of things. Sometimes I thought is this being
>
> reinforced by the fact that I'm Asian? I am like the model minority myth. But I
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> wouldn't ask them about it. I think they will react like "Are you saying I'm
>
> racist?" …. I think they feel like oh she'll be okay, she will be able to do this
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> without checking with me to see if I actually feel Okay. Then that part of my
>
> identity is even more invisible. It's like people would think oh! It's [Hu]. She's
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> just like everybody else. But not really! It feeds into that lack of connection for
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> me and it feels like okay! I guess me as a person doesn't really matter. Your
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> identity doesn't really matter as long as you can be like a good therapist. This
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> sounds like commodification, like capitalism. You are worth what you produce.
>
> And not like who you are as a person.

Participants expressed an understanding of how their supervisors' training

experience, cultural competence, and positive intention contributed to the cultural

discussion they had, or not, in supervision. However, participants also noted that the

missed opportunity to have richer cultural discussions could have been beneficial for their

personal and professional growth. It is noteworthy that lacking cultural-targeted

discussion related to participants' discussion did not always lead to experiences of

invisibility. It appeared that strong supervisory relationships buffered the negative impact

of the lack of discussions when participants felt seen by supervisors in other aspects of

their supervisory relationships. How participants perceived equal treatment and lack of cultural discussions differed due to many factors including the strengths of the supervisory working alliance, and supervisees' values about acculturation and professional competence.

Tsai spoke about her experiences about her positive experiences in supervision, despite the lack of discussion about her identity and multicultural issues:

I don't think we ran into any challenges related to multicultural issues in our supervision. Hmm, maybe this is a good thing. Maybe this is also something we could've worked on more… I think the way he [supervisor] treated me, who is an international student, was no different than how he treated other American students. I do not feel like because I am a minority and I am an international student, he then treated me differently. I did not feel that way at all. But I guess he did not really pay attention to this part. He wouldn't specifically ask how my identity as Taiwanese impacts my work. I do not remember him mentioning anything about it.

When asked if she thought it was a missed opportunity for cultural discussion and how her experience was working with this supervisor, Tsai elaborated:

I didn't feel particularly disappointed or anything. I think he was truly a wonderful supervisor, who was very protective of my feelings. So, in the one and half years that we worked together, I did not encounter any challenges that were brought up due to my different cultural identity. With other supervisors, yes. But magically, with this supervisor, not so much (challenges related to cultural differences). So we didn't really have to address it or handle any issues.

74

Theme Three: Language Salience in Acculturation

      All six participants identified as English non-native speakers, with English as their second or third language. Yet, the primary language spoken in their graduate program and clinical training was English. With talk therapy and clinical training heavily relying on verbal communication, English proficiency became a salient aspect of participants' acculturation process because it was their daily communication and an avenue to express their own self-identity and professional identity in the new host culture. Oftentimes, Taiwanese international students as a language minority were viewed from a deficit lens with a language barrier despite their multilingual language skills.

      Several participants noted that language diversity was not addressed in their training experience, and they were held to the same standard as their English-native-speaking peers to communicate and provide mental health services effectively. Participants disclosed anxiety about their accents and ways of speaking English and how this might be an obstacle to being seen as a competent therapist and supervisee. Participants found that it took time and effort to regain their confidence and self-efficacy. Tsai reflected on how English proficiency connected with her confidence, which gradually became better in her third year of the doctoral program:

      To be honest, when I first came to the U.S., it was quite challenging because I was still in the early stage of the cultural adjustment process and my English was not so good. A lot of times, it is not like I couldn't understand or comprehend, it was more so I couldn't express myself accurately. So sometimes it was really frustrating, and I did not feel very confident about myself. After some time, I feel

like my overall confidence and how I have adjusted to this culture had gradually become better. It was probably around the third year of my doctoral program, I felt like it has become a little bit better than before.

Tsai further provided an example of the struggles she faced in group supervision at an earlier stage of her doctoral training and identified how positive self-talk was a protective factor for her to overcome acculturation stress. She voiced:

Whenever it was time for group supervision, I would feel the stress coming…. I just wanted to disappear, but I couldn't. So, I just had to stay there and stick it out. For the counseling session tape review, I couldn't really understand what they were talking about 100%. And then you were expected to give sandwich feedback without repeating each other. It was very challenging! Sometimes you just did not know what to say and you ended up rambling. And then I feel guilty about it. Maybe not so much guilt but chagrin. I would think that in my peers' eyes, I am probably a very "meh" psychologist. I would worry about how others perceive me. And I had to keep talking to myself positively and encourage myself such as "You can do this, and it will all get better gradually and slowly."

Though the struggles mentioned above could be distressing and harmful to participants' confidence and self-esteem at times, it was difficult for participants to open up and share their experiences with their supervisors, especially when their identities and international background were viewed from a deficit perspective. This disconnection inhibited participants from gaining support and showing up as their authentic selves in supervision. When asked about factors that inhibited her from opening up about her

76

struggles or seeking support, Tsai pointed out that her "pride" and "not wanting to lose face" were part of the reasons why she chose to "keep it to herself."

> I think it was because of pride. As I said earlier, I was very conscious about whether I shared not-so-good feedback [in group supervision] and how others might perceive me. So, I started to feel more embarrassed and found it difficult to disclose things about myself that are not good enough. When I shared things like this, I would just stay at a superficial level and not go in-depth, or I wouldn't even ask if they [domestic peers] can help me with something…. I just didn't want people to know about these not-so-positive things or parts of me that were vulnerable. I would just carry the weight myself and keep it to myself…. In the past, I cared a lot about not losing face. It was very important for me. But I think I have improved a lot.

Wang echoed the experiences of "less than" and highlighted the importance of trust and safety in supervision when facing language anxiety.

> When you already feel like this identity [Taiwanese international student] was seen as a shortcoming, you wouldn't want to bring it up yourself to give people an opportunity to see you as "less than", right? So, I tried to stay away from [talking about] that identity. But when I have that sense of safety and trust, I can bring that forward and talk about how that impacts my work.

When participants chose to share their struggles related to language and acculturation with their supervisors and peers, they often received reactions such as "You are doing great already!" and "I am already so impressed with your English." Though

participants recognized the positive intention of wanting to empathize with or comfort them, the impact of such compliments could feel empty for participants. In many cases, these statements were invalidating or could be received as microaggressions.

Lin detailed an example of processing her fear to speak English in staff meetings with her primary supervisor. She voiced her insecurity about other staff members perceiving her as the "quiet Asian girl" and judging her capacity based on her verbal contribution in meetings. Lin asked, "Would people see me as awkward or incompetent if I don't speak up?" and noted it was invalidating and confusing for her when people were not willing to acknowledge the "ugly truth" of the existing stereotypes towards Asian students associated with a lack of confidence and assertiveness. The confusion felt very similar to the experience of microaggressions where she questioned "if this is all in my head?" and "Did this [judgment] actually happen?" Lin described her supervisors as "frank and compassionate" by acknowledging the "ugly truth" with validation followed by encouragement for Lin to "not feel forced to speak up yet if something comes up for you [Lin], don't refrain yourself from speaking. Just be yourself." This feedback became a pivotal moment for Lin to gain more acceptance of her language identity later in her professional development and acculturation process.

The anxiety concerning English proficiency also stemmed from the prevalent English superiority complex – "English is better" in Taiwan. Born and raised in Taiwan, Kao went through the public education system, where English was heavily emphasized in the academic curriculum and nationwide examinations. Nowadays, English is listed as a major subject in the official curriculum beginning in third grade, and many undergraduate

and graduate programs require their students to pass standardized English tests (e.g., TOEIC, TOEFL) to graduate. Kao spoke about her frustration with the internalized beliefs and non-English-native speakers being apologetic about their English proficiency:

> In Taiwan, people believe that we have to know how to speak English, we have to learn English, and English is better. My point of view is that why do we have to feel inferior? I wish we could embrace our strengths more. We have a lot of strengths and why do we feel like we are less than others if we don't know something? I have frustration like this. And I know that I also internalized beliefs like this [English superiority] ….. I used to be like that [apologetic about my English skills], like saying "sorry, sorry" all the time [laughed]. I mean, I still struggle with that…. For clinical work, I still want to be more fluent [in English] so I can express myself and communicate clearer and more effectively. So, this is also my struggle.

The English superiority appeared to transfer to participants' roles as Taiwanese international students and trainees in the U.S. context. Lin also felt the pull of needing to master English to be seen competent as a clinician. She regarded English proficiency as a sign of her acculturation. She said:

> I feel like English is some tool that we really wanted to master, to show our mastery in this field. And it is an empowerment to speak strong English, like fluent English, to have strong language ability. So, I feel like that is part of the acculturation process.

The language salience in acculturation was present beyond participants' ability to communicate with verbal and written language. It also reflected Taiwanese international students' communication styles, thinking patterns, and shifts of worldview when transitioning from an environment where they were in the race and ethnic majority group to the U.S. where they held multiple marginalized identities. Wang shared he was constantly reminded of his international student identity by supervisors and colleagues with comments related to his English proficiency despite his change of visa status. Wang initially held an F1 student visa during his master's degree and transitioned to a work visa later in his career. He applied for his doctoral program as a permanent resident. He pointed out a phenomenon when supervisors tended to "default to language barriers" when they felt "stuck" in communicating or connecting with international supervisees.

> A lot of the time, they [supervisors] don't understand our thinking process. For example, I see a lot of Asian international students when they talk about cases, it's more like storytelling. You don't necessarily start with the [key] issue first. That's how we talk, that's how we write Chinese compositions, like "qi cheng zhuan he (起承轉合)" – ［the four steps in the composition of an essay, introduction, elucidation of the theme, transition to another viewpoint, and summing up.] But English writing is not like that…. Sometimes when I was talking about a case, I can start to see [supervisors'] eyes wandering because they are having a hard time following the story…. What I hate the most is whenever there is a situation in which we seem to be stuck, a lot of them [supervisors] default to saying, "It's pretty impressive that you are doing therapy in English," as if my English ability

is the reason why we couldn't quite crack what's going on here. That is so

offensive! It's not that [English]! There's something else…. That gap I've been

feeling, sometimes it could be your [supervisor's] lack of understanding, or

maybe the disconnection about [our] worldview. But when you default it to the

language barrier, it's such as missed opportunity [for cultural discussion].

Language anxiety and English proficiency were closely associated with

participants' self-identity in terms of how they expressed their personalities, thoughts,

and feelings in different languages. Many participants disclosed the discrepancy between

the expression of their personalities at the beginning of their stay in the U.S. Participants

felt more like their "authentic selves" when speaking their preferred language during their

early training stage. It took some time for participants to adjust to their "English-speaking

self-identity" and integrated their bi-cultural professional identities as Taiwanese and

psychologists-in-training in the U.S.

Kao shared an example around her comfort level in speaking English and

Mandarin through her training and acculturation process while working with a Taiwanese

supervisor who also speaks fluent Mandarin.

At the time, it was my first clinical training, so I feel like I need to feel very

comfortable speaking Mandarin [in the workplace] because when speaking

Mandarin, I felt more like my authentic self. When I first arrived in the U.S., I

didn't feel like myself when speaking English. So, what is unique is that whenever

I am with her [Taiwanese supervisor] when I had to be myself or be vulnerable, I

also got some "shocking" feedback from her such as "You need to be more

assertive" and "You have low self-esteem." So, I then feel like, ok, I can't [speak

Mandarin] with her, even though [speaking Mandarin] is easier for me.

Kao detailed changes in her self-consciousness when speaking Mandarin in an

English work environment when she started her first doctoral training site. She expressed

worries about how other staff members might perceive her. When asked about the change

of her self-identity related to language through her acculturation process, she said:

I feel like I can now better embrace myself, and my primary language is

Mandarin. I became more comfortable with myself being an English non-native

speaker. I realized that when I am more comfortable with myself, I no longer feel

like I can only speak Mandarin in an environment where everybody is speaking

Mandarin. I feel more at ease now.

Theme Four: Humanizing Practices

All six participants agreed unanimously that supervision was the pivot in

cultivating their professional and personal growth as psychologists-in-training. Through

analyzing the examples participants provided, one of the key elements that contributed to

participants' growth in supervision was humanizing practices. Participants voiced how

meaningful and poignant it was for them to feel seen as whole persons beyond their roles

as student trainees, where their needs and experiences were validated and their well-being

outside of their training was cared for as well. Humanizing practices generated an

emotional encounter that strengthened the supervisory alliance and decreased cultural

barriers in the complicated cross-cultural/national supervisory dynamic.

Hu identified factors that fostered the trusting relationship she had with a

supervisor, a white man in his 70s, and how the trust started with small talk and asking

about Hu's home and family in Taiwan. She said:

> Part of building the trust was he would always ask me about Taiwan and my
>
> family and in a way that he really cared about my background. Nobody else has
>
> asked me about that in my program, even though they know that I'm not from
>
> here. He is the only one who asked me about Taiwan, asked me about my family
>
> and that really made me feel like he saw me as an individual and not as just
>
> another student.

Wang reflected on his previous supervision experience in Taiwan during

undergraduate clinical training and how cultural factors impacted his attitudes toward

supervision. He later grew to embrace the relational focus in supervision, which he

initially resisted:

> I have received supervision in Taiwan, and the supervision was usually very
>
> technical, like "This is what you should be doing." It was less process-
>
> orientated…. So, when I came here, I had the same mentality. I remember [with]
>
> my first supervisor, every time going to him I always had something I wanted to
>
> discuss or ask him about. But he always just asked me "How are you doing, Mr.
>
> [participant name]?" And I found that annoying. I was like why? I'm not your
>
> patient! … When we talked about me, I spent like fifteen, twenty minutes. I have
>
> an hour [for supervision] so it takes up time. So, I really didn't appreciate it, but
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> he later became one of my favorite supervisors. He changed a lot about me and he

made me realize the value of supervision…. He checked in with me, cared about my life, and then helped me realize what was happening to me, which can parallel my work and can impact my work.

Wang further elaborated on how the change of attitude about supervision impacted their supervisory alliance, his professional growth, and career aspirations:

I didn't have that mentality to feel that I should share these [personal] things with my supervisor or advisor. They were someone I know if I have trouble, I will go to, academically. But I never think of them as a resource I can reach out to, to get support. But for the past two and a half years, that had changed…. they were no longer just some authority figures to only go to them for skills, or even lecture you. They become someone who can be there to understand your experience and give you the emotional support you might not see you need. And that's what I see being a good supervisor is - you see their [supervisees] needs beyond what they can see for themselves. And that's the type of supervisor I hope to become.

Beyond the trust and care supervisors fostered in supervision, many participants voiced it felt good to be seen as a whole person and multicultural being through a strength-based lens. Lin identifies as biracial and emphasized that her identity is fluid and "doesn't fit in one box." She shared how her multicultural identities were valued in supervision while facing racism and stereotypes against Asians in her residential area, which she stated had a relatively small Asian and Taiwanese community.

Honestly, racism is horrible here in [city], especially the racism against Asians. And also I feel like people associated negative traits with [Asian], not specifically

with Taiwanese because I don't think they even know where Taiwan is. But it [Asian] is associated with negative traits. But for [supervisor], she really framed my cultural background as something unique and positive, and she values me as a multicultural being and a unique person…. [Supervisor] is genuinely interested in Asian culture, and she has a lot of knowledge of multicultural competence and awareness. And that helps me feel seen as a multicultural being. She is not denying my Taiwanese identity. She's not judging my Taiwanese identity that's different from the "American way." My being different has been validated and acknowledged and not seen as something that is "lesser than."

Participants also reported when their professional skills and competence were recognized by supervisors, it significantly impacted their confidence, self-efficacy, and professional identity. Hu shared a compelling example; despite her supervisor having "no concept" of her Taiwanese identity and international background, Hu felt empowered and encouraged when her potential and strengths were seen by the supervisor.

She [supervisor] definitely did not have as much cultural awareness, relatively [compared to another supervisor of Hu's]. I said "relatively" because we can't know all the cultures. But overall, she has no idea about me as Taiwanese. There was one time when Shanghai was still in lockdown, she saw it on the news and asked me "Is that where you are from?" She has no concept of it. But at least she knew I am from Asia. What I find interesting is that I think she just sees me as me. She sees my strengths and encourages me and empowers me. So, I got a different kind of encouragement from her. I would say, she is a little bit

85

colorblind. But I feel like if you can't see my color, you can see my strengths and potential, then that's ok for me. I feel quite empowered by her.

For Taiwanese international students, being recognized for their competence and progress by their supervisors is particularly meaningful due to the layered cultural barriers participants faced during their graduate studies and clinical training. Tsai shared a poignant experience which she described as "being seen as a sparkling diamond in [her] supervisor's eyes."

All the encouragement and feedback I received from [supervisor] during our work together has been the drive that kept me going. I remember he would write a feedback letter to me by the end of each semester about my performance. And I cried every time I read his letter. It was so heartening! It just feels like Oh my God in your supervisor's eyes, you are a sparkling diamond. And he is genuinely affirming and complementing you from the bottom of his heart. So, whenever I feel down, I would take his letter out and read it again. And then I would feel rejuvenated and empowered once again.

The encouragement Tsai received became the nourishing foundation that formed her professional identity and was able to have moments of "feeling like a pretty good therapist." She reflected on the learning trajectories of her becoming a psychologist and the acculturation process as followed. In Tsai's testimony, she implied this comparison Taiwanese international students often have with their American peers, where participants had to work hard to be in a similar position to other trainees without international background:

Thinking about it [her accomplishment and progress] makes me feel really

moved. As an international student, having gone through all the challenges, with

blood and sweat [laughed], if you ask me to go through that again, I wouldn't do

it. It's so so so difficult. It was not easy at all. And I have come this far, till today.

I feel quite proud of myself to go through all the obstacles and now standing in a

similar position with my American peers. It is amazing!

Another way that made participants feel seen for their professional competence

was to be treated as a colleague beyond the role of student trainee by their supervisor.

This phenomenon was mostly shared by participants who were in more advanced stages

of training and had gone through multiple practicum placements, where participants had

gained more clarity about their counseling style, theoretical approach, and professional

identity. When participants' clinical judgment and perspectives were valued by their

supervisors, supervision became more of a perspective-sharing discussion rather than

solely an evaluative process, where the power differential lessened and eased. Wang

stated, "A good supervisor makes you feel like [supervision] is more like a conversation

between colleagues."

Another humanizing practice in supervision highlighted by participants was when

supervisors cultivated a safe supervisory environment where supervisees' growth was

prioritized. The intentionality and emphasis of supervision were critical for participants'

learning trajectories and professional identity formation. To be more precise, participants

shared the trajectories of their professional development process, where they were more

anxious at the beginning of their training due to limited clinical experiences and being

new to the field. Some participants described this stage as stressful and lack of confidence in clinical work. At the beginner counselor stage, participants centralized their identity as students and were eager to learn from their supervisors by prioritizing their perspectives in case conceptualization.

As participants continued to accrue clinical experiences, they reported gaining more confidence in the role of therapist. In the process, supervisors played an exceptionally important role in participants' professional and personal growth by creating a safe supervisory environment to foster their sense of agency as a clinician. During the interview, participants in their later doctoral training years recognized their transition to decentralize their identity from that of a student trainee to a young colleague.

Lin shared her journey from a timid supervisee who was intimidated by her supervisors, to working full-time as a master-level therapist, and eventually gaining a more egalitarian perspective on clinical supervision later in her training stage.

> At first, I was absolutely timid. I wasn't sure what I was doing. I mean, I'm still not one hundred percent sure about what I'm doing right now, but I'm more okay with that [now]. I feel like that's just a learning curve…. [back then], I always think what my supervisors would think. "Will she think I'm not doing the right thing? Oh my god, did I say the wrong thing?" And also, I think, a huge question mark for me, at the beginning of my training is "Can I be different? Can I disagree with my supervisor?"

Lin then spoke about an experience with another supervisor who provided what she described as a corrective emotional experience where she felt safe to voice herself in supervision:

I feel like my relationship with [supervisor name] was almost like a corrective emotional experience that makes me feel I can feel safe to be myself. [It was] s sense of safety in supervision that I can voice myself and I be different. I can say things and not be worried about being judged or punished if I, said "the wrong thing." I feel like that relationship helped me establish my identity and a sense of agency and competence as a clinician…. [During her first doctoral training practicum], I already worked as a full-time therapist before. At that point, I saw [supervisor's name] from a more egalitarian perspective. I don't see her as Oh, my God! You are my supervisor; you are above me. I saw her more as a colleague, and she saw me the same way. She never thinks she is above me or whatever…. I value that supervisors see me as their colleague. I really like that.

Lastly, when asked about how the safe supervisory environment and supervisors' recognition as a young colleague impacted her professional identity, Lin expressed feeling emotional in reviewing her growth path:

The more I get trained, the more I tend to speak up in my supervision sessions. Especially for my very last practicum at the university counseling center, I saw myself as one of them [staff psychologists]. I really didn't see myself as one of the students…. I saw myself as a future colleague, maybe. If I really have something to say, I will just say it. And I could not imagine me acting like that five years

ago, I could not imagine that…. It's quite emotional [to reflect on her growth],

honestly. I feel like everybody's growth path is different. But I am the person who

experienced that, and I know how I evolved and grow, and that's not always easy.

I got a lot of challenges. I got a lot of support, and then I have a lot of resilience in

me, and then everything worked together and just brought me to who I am today

and where I am today. I think that's a very personal and emotional experience.

Self-disclosure was another contributing factor to the positive experiences

participants reported in supervision. When utilized effectively and appropriately,

supervisors' self-disclosure allowed them to become more approachable, genuine, and

humanized. Participants disclosed when their supervisors were honest and vulnerable

with them, it strengthened the supervisory alliance and they felt more comfortable going

to their supervisors in stressful situations. Hu spoke about a situation when she consulted

with her supervisor about a crisis where her client disclosed severe suicidal ideation.

I went to my supervisor's office and knocked on his door, telling him what was

going on. He came, and he basically [did a] safety plan with her. I got to watch

him diffuse a really, really scary situation. At first, because he was so serious, I

thought that maybe he was mad at me, maybe I didn't handle this right. And we

talked about it in supervision. I was telling him how nervous I felt and how scared

I was, and he said to me "What do you think I felt when you like came in like talk

to me about this" I said, "I am afraid that you will be mad at me." And he said,

"No, I was really scared too." That disclosure was so meaningful to me. He was

being appropriately vulnerable to show me that "it's okay to feel these feelings

90

when your client is expressing suicidal ideations." That was a really powerful

moment for me because it was so human.

Another example that illustrated the power of supervisors displaying humanizing

practices was from Tsai, whose supervisor revisited a discussion with her in supervision

and apologized for potentially disregarding Tsai's observations of the client and case

conceptualization:

> He [supervisor] is someone who would always reflect on himself. There was this
>
> one time, we watched a [counseling session] tape together and discussed what the
>
> client said and how I responded to the client]. He asked curiously whether the
>
> client might have experienced different emotions and shared his different
>
> perspective. In the next supervision meeting, he told me that he re-watched the
>
> tape and thought about it a lot. He told me that when asked the question [about
>
> different emotions], it was not to disapprove of my understanding of the client
>
> because I was the person in the session, and I know the best about what the client
>
> might have been feeling at the moment… This [incident] left a strong impression
>
> on me. It was such a little moment, and I did not feel criticized by him at all or
>
> feel scolded for not doing good enough. I very much appreciated my supervisor
>
> sharing a different perspective with me. But he would respect you very much and
>
> not want you to feel judged or disapproved. He was willing to spend the time to
>
> re-watch the tape and told me about how he felt. He was willing to say sorry to
>
> me if I were to have any uncomfortable feelings in our last supervision meeting. I

91

was so moved. He is an angel! Sometimes I wondered what good have I done to have him as my supervisor. I am so honored to be his supervisee.

Humanizing practices appeared to be the foundation of the supervisory alliance and served as a protective factor against potential conflicts and rupture. All six participants shared a deep appreciation for their supervisors for their care, respect, and feedback to guide them through their journey in becoming good therapists. The care for one another was also described as reciprocal between the supervisor and supervisee. Some participants noted the struggles their supervisors faced. Lin voiced:

I feel like a lot of supervisors are so burnout; they're juggling a lot of things. The workload is a lot on them…. I really value clinicians and psychologists who provide supervision to practicum students because sometimes I think their supervision works feel so underappreciated… They're asked to do so many things. It takes a lot of time to supervise; they have to watch my videos, read my notes, and prepare for supervision. I feel like they need to be appreciated more.

When the interviewer reflected on Lin's compassion for her supervisors, she shared sentiments to highlight the reciprocal dynamic in supervisory relationships: "[when supervisors are cared for], they can care better for me." For trainees to have a positive experience, the responsibility does not solely fall on the individual supervisors or the supervisee themselves; the training agency and system also need to be involved to co-create a positive work environment where staff members can provide better quality care for clients and their community.

In reviewing participants' positive experiences in supervision, there were no patterns about the supervisor's demographic background. Cultural similarity and difference also did not seem to play a significant role in fit between supervisor and supervisee. Kao, who worked with supervisors with both white and BIPOC backgrounds including a Taiwanese supervisor, shared a powerful conclusive statement that highlighted the importance of humanizing practices in supervision:

> Having a similar background does not always mean we will be a good fit. What's most important is whether [supervisors] want to be curious, whether they want to listen, and whether they want to understand or not.

CHAPTER FOUR: DISCUSSION

This study examined the experiences of Taiwanese international students in clinical supervision. Interpretative Phenomenological Analysis was used to extract the phenomenon of participants' lifeworld. The study research questions were: what are the lived experiences of Taiwanese international students who receive clinical supervision in the clinical/counseling psychology field in the U.S.? What is the nature of the supervisory relationship between Taiwanese international students and their supervisor(s) in cross-racial and/or cross-national supervision? How does Taiwanese international students' acculturation process impact their experience in clinical supervision? Six participants were interviewed, and analysis led to four primary themes: *layered power differential, invisibility, language salience in acculturation, and humanizing practices.*

For participants in this study, nationality, immigration status, and the role of student trainee appeared to be three primary salient intersecting identities. Participants' experiences as Taiwanese international students differed before they even entered the multicultural and cross-national supervisory relationships due to the three intersecting identities. This study demonstrated the diversity of the lived experiences of Taiwanese international students and their supervisors.

94

All participants reported power differentials within their supervisory relationship which existed because of the evaluative component of clinical supervision (O'Donovan et al., 2011; Watkins, 2017). Supervisors were expected to serve as a gatekeeper to safeguard professional liability issues and quality assurance, which also contributed to the power differential participants experienced (Polychronis & Brown, 2016). When the power differential was unaddressed, it led to dynamic tensions where participants reported feeling anxious, intimidated, and powerless (Falender & Shafranske, 2017). The power tensions participants experienced in clinical supervision mirrored findings from previous research that highlighted the "emotional rollercoaster" in supervision, where supervisees were in a vulnerable position in the power dynamic (Sommer, et al., 2010). The current study extended the understanding of supervisees' emotional experiences from previous studies by emphasizing the cultural and contextual factors specifically salient to Taiwanese international students due to their intersecting marginalized identities.

Participants described navigating the power differential by assessing whether it was safe to engage in cultural discussion related to their Taiwanese identity and international background in supervision. This finding aligns with previous literature on critical issues in cross-racial supervision, including supervisees' perceptions of their supervisor's multicultural competence (Schroeder et al., 2009). Participants assessd their supervisors' cultural awareness, openness, and comfort level by observing and "testing the water." This perception directly impacted participants' decision to disclose their authentic feelings and experiences as Taiwanese international students in supervision or not. When participants chose to not engage in discussions related to their cultural

identities, it could be considered a missed cultural opportunity in supervision (Owen et al., 2016).

Power differentials and psychological distress related to supervision may exist in any supervisory relationship. However, the intersection of multiple marginalized and vulnerable identities set participants' lived experiences in clinical supervision apart from their domestic and fellow international student peers (Wilcox et al., 2021). As international student trainees, entering training that emphasizes English language could be anxiety-provoking and the heightened psychological distress was particularly evident during participants' early training stage. The description participants provided in this professional development stage was similarly characterized as supervisees in the Level 1 development stage based on the Integrated Developmental Model (IDM) with high anxiety and motivation to advance their professional competence, and low autonomy as a clinician (Bernard & Goodyear, 2019; Stoltenberg & McNeill, 2010).

As participants moved along to the later professional development stage, they continued to learn how to navigate the power dynamic in supervision and gain a stronger sense of agency as psychologists-in-training, where the power differential became less present and bothersome for participants (Stoltenberg & McNeill, 2010). Participants reported that their attitudes about supervisory relationships transitioned to a more egalitarian approach, where they decentralized from their identity as a student or trainee; participants attained more confidence and they moved towards viewing themselves as a young colleague. The learning trajectory could be seen as a parallel process with participants' acculturation process as they integrated their home culture and values with

96

gained U.S. cultural awareness. The findings of the parallel process in participants'

acculturation and professional growth corroborated previous research, which has shown

the correlation between positive acculturation and professional performance. In fact,

positive acculturation was considered a predictive factor of participants' professional

growth and promoted satisfaction with supervision (Gatman et al., 2001; Nilsson &

Anderson, 2004). Participants with higher levels of acculturation were found more likely

to initiate multicultural discussions which further creates more space for both supervisors'

and supervisees' cultural identities to be addressed and promotes satisfaction with

supervision (Mori et al., 2009; Qi et al., 2019).

Many cultural and contextual factors contributed to participants' supervisory

relationships and experiences. Previous research has indicated that students from

Confucianism-influenced countries demonstrated communication and interpersonal

patterns that can be strikingly different from their domestic peers (Yum, 2011).

Participants' experiences supported these findings and highlighted values rooted in their

upbringings and Taiwanese cultures such as respect for authority figures and hierarchy in

the educational system. These values influenced participants' expectations and attitudes

toward clinical supervision and how they navigated the supervisory relationships.

However, these cultural factors were rarely addressed in supervision unless participants

initiated the conversations; all participants reported that multicultural issues were rarely

addressed in their supervision. When multicultural issues were brought up, they often

centered around the client and therapist/supervisee dyad and culturally responsive case

conceptualization and interventions. Only a few examples were provided by participants

97

regarding discussions that targeted cultural identities in the supervisor-and-supervisee dyad. Participants' experiences were consistent with current research, where supervisees perceived discussion related to cultural differences occurred infrequently in supervision. In cases where cultural discussions occurred, it was rarely the supervisors initiated them (Burkard et al., 2006; Duan & Roehlke, 2001; Hird et al., 2001).

Participants reported their experiences and needs as Taiwanese international students were often neglected, overlooked, or invalidated during their course of training and supervision. Many supervisors were unfamiliar with the unique cultural background of participants including the social-historical context between China, Hong Kong, and Taiwan. In addition, the immigration process was foreign to their supervisors as most of them were not aware of the requirements for attaining student visa status and the limitation of work authorization during doctoral programs and post-graduation (Ng & Smith, 2001; Redden, 2020). When a salient identity was not seen or addressed by their supervisors, participants felt invisible in their supervisor's eyes as their identities and the experiences related to the identities were not taken into account.

Another identity that was frequently ignored in supervision was participants as language minorities and non-native speakers of English. Consistent with current literature, participants reported stress related to their English proficiency including accents, verbal and written communication with their supervisors and clients (McKinley, 2019; Ng & Smith, 2001). The stress may result from participants' internalized beliefs of English superiority, which was embedded in English language teaching and learning in Taiwan. Specifically, in Taiwan, American English was taught as standard English, and

98

English native speakers with an American accent were regarded to have the greatest prestige (Chang, 2011; Chang, 2016). These beliefs could transfer to the power differential with participants' supervisors and American peers, which negatively impacted participants' self-esteem and self-efficacy. Stereotypes about English accents and perceived discrimination towards English non-native speakers could have also contributed to participants' English anxiety (McKinley, 2019; Nilsson & Anderson, 2004).

Participants stated that supervisors rarely initiated discussions related to language diversity or inquired about participants' identity as language minorities. When language was addressed in supervision, it was often perceived from a deficit perspective or stayed at a surface-level affirmation without further exploration (Garrison et al., 2022). Many participants reported receiving feedback concerning their language skills including grammatical errors or writing styles in clinical documentation or assessment reports and participants' quietness and assertiveness in team meetings (Falendar et al., 2021). While the feedback might have been intended to support participants' professional growth, it appeared to be less effective when supervisors did not demonstrate cultural interest and humility to first understand participants' experiences as ESL learners and international trainees (Burkard et al., 2006; Hook et al., 2013). In addition, it was easier to find validation within the community of fellow international students in understanding participants' language anxiety and difficulties, which further fostered a sense of community, validation, and social support (Wang et al., 2012).

Many factors may have affected supervisors' decisions on whether or not to engage in cultural discussion and inquire about participants' Taiwanese and international backgrounds. Previous studies have shown that supervisors do not feel equipped to navigate multicultural supervision (Burkard et al., 2006; Ellis et al., 2014; Lawless et al. 2001). Supervisors' cultural comfort has been shown to be key to their engagement in cultural discussions with their supervisees (Hook et al., 2013; Watkins et al., 2019). Participants noted that some supervisors appeared anxious about making mistakes or committing microaggression toward supervisees, then treated participants with more politeness and less authenticity. These factors created barriers to cultivating supervisory working alliances, which can be one of the most robust elements of positive supervision (Watkins, 2017).

As seen in Hook and colleagues' study (2013), supervisors' racial identity development stage was considered a critical factor for how multicultural issues were addressed in supervision. In reviewing the list of supervisors participants provided, the majority of the supervisors were white women throughout their course of doctoral training. However, the positive supervision experiences participants brought up were with a pool of fairly diverse supervisors in age, gender, race, ethnicity, and immigration backgrounds. This group of Taiwanese international students tended to conceptualize their supervisors' behaviors in addressing multicultural issues or not through the MCO framework – whether their supervisors had cultural awareness and comfort to discuss multicultural issues, rather than outwardly naming how they perceived their supervisors' racial identity stage (Watkins et al., 2019). As this study focused on supervisees' lived

100

experiences and did not include supervisors' perspectives, current findings diverged in the salience of impact related to supervisors' racial identity stage; current findings consisted of evidence that may imply supervisors' racial development stage as some supervisors were reported to be born, raised, and trained in areas that were less diverse in the U.S. and presented to be less reflective on their own cultural identities. Yet again, participants of the current study framed the characteristics as supervisors having limited cultural awareness and being sheltered in their own cultural group environments.

The choice to not engage in discussion related to participants' cultural identities can also relate to the supervisor's theoretical approach. Participants noted supervisors who adhered to cognitive and behavioral psychotherapy theories tended to cultivate more structures and instructions and were less likely to inquire about or disclose personal issues in supervision (Bernard & Goodyear, 2019; Thomas, 2010). The benefit of the psychotherapy-based supervision model is to provide more in-depth learning regarding the theoretical approach through case consultation and live interaction in supervision (Thomas, 2010). However, when supervisors and participants were not matched and both parties did not share somewhat similar therapeutic beliefs, it created tension or unmet needs in supervision that decreased participants' satisfaction with supervision.

Lastly, the lack of cultural discussion related to Taiwanese international students' identities could result from color blindness, which was identified as one of the major issues in current clinical training and a supervision trend in the mental health field (DeSouza, 2021; Fu, 2015). Researchers suggested that color blindness should be understood as a racial ideology, which is defined as a collection of beliefs and

101

understanding about race and the role of race in social interaction and provides an international framework for social life (Bonilla-Silva, 2003; Doane, 2017). Colorblind racial ideology is based on the beliefs that race no longer matters and denies that racial barriers keep oppressed groups from pursuing social and economic success (Doane, 2017). Racial color blindness was found in the therapeutic and supervisory encounters as well. Supervisors who endorsed high levels of racial color-blind ideology were more likely to deny the existence of racism and present nonracist counterarguments when multicultural issues occurred in supervision (DeSouza, 2021). Another presentation of colorblindness beliefs was to treat all participants "equally" including overlooking and dismissing the challenges they faced as Taiwanese international students. The equal treatment was perceived differently by participants as some found their multicultural identities being dismissed and invisible, and some reported it was empowering to know that they were treated the same as their domestic peers.

Though there were many cultural barriers to cross-national supervision, all participants agreed that supervision was key to their professional and personal growth and positive experiences in supervision cultivated that growth. The positive experiences involved supervisors expressing care for participants beyond their role as a trainee, offering emotional support, and modeling authenticity, vulnerability, and self-disclosure appropriately in supervision, which humanized participants and their lived experiences (O'Donovan, 2011). Such humanizing practices were key to cultivating strong supervisory working alliances (SWA) and led to participants' higher perceived effectiveness of supervision (Watkins, 2014, 2017). Participants' reports also reflected

102

previous studies that examined the parallel process between SWA and the therapeutic alliance in client work. When participants experienced empathy, unconditional positive regard, trustworthiness, and genuineness, they were more likely to demonstrate those characteristics with their clients (Bell et al., 2016). Many participants reported their alliances with supervisors they have strong connections with extended after the formal supervisory relationship had ended and transformed into mentorship. These participants described their supervisors as role models and career aspirations to become effective supervisors themselves to pass on the nourishing supervising experiences to future trainees.

Findings also indicated that SWA served as a buffer to the negative impact of participants' unmet needs in supervision. For example, many participants noted that targeted cultural discussions were rarely addressed or initiated by their supervisors. However, when participants perceived the SWA was strong enough in other aspects, it minimized the negative impact of the lack of cultural discussion. These experiences highlighted the protective and facilitating function of SWA in cultivating positive supervision experiences.

Implications for Practice

Psychology programs often recruit international students as they value the multicultural perspectives international students can bring to enhance cross-cultural interactions (Ng & Smith, 2009). However, according to participants' testimonies, there was a discrepancy between the recognition international students received for their contribution to diversifying the training environment and the support they received from

their faculty, advisors, and supervisors. Participants reported they were expected to navigate the power dynamic in supervision while managing ongoing stressors related to immigration and acculturation. The lack of understanding and awareness regarding international backgrounds continues to impact generations of international students and the mental health field is in need of systematic and organizational change (McKinley, 2019).

Participants had a number of ideas about what would have enhanced their satisfaction with supervision and training experiences. First of all, training programs should increase awareness about international backgrounds. The multicultural education participants received was mostly rooted in the U.S. cultural context; diversity issues related to immigration, cross-national adjustment, and language proficiency were often overlooked in training curriculum and classroom discussions (Chen, 1999; Ng & Smith, 2001). It would be helpful for training programs to include international psychology in coursework and informal educational events to provide international students a foundation to make meaning of their cross-cultural experiences and raise domestic students' understanding of their peers. Events such as program-wide international student orientation, pre-practicum seminars, and affinity spaces can also offer socio-emotional support for international students to adjust to the U.S. training environment and prepare for cross-national supervision. Ying and Han (2006) suggested that acculturative stressors were the most important factor in Taiwanese international students' functional adjustment. It is important to address acculturative stressors as soon as Taiwanese students arrive in the U.S. and utilize domestic peers, advisors, and supervisors to

facilitate the transition process. When resources are offered in response to international students' needs proactively, it can lessen barriers to the power differential in the training environment and further improve training outcomes (Constantine & Sue, 2005).

In regards to participants' Taiwanese identity, there appeared to be a significant gap in the supervisor's awareness of the cultural background. Positive experiences that were brought up by participants highlighted humanizing practices in supervision. Many participants noted that simply being asked about Taiwan including the geographic location, climate, and official language as well as supervisees' family in Taiwan could have a positive impact on the supervisory working alliance. The association between supervisors' cultural interests, acknowledgment of cultural differences, and positive supervisory working alliance have also been highlighted in the literature (Burkard et al., 2006; Constantine, 2003). When supervisors initiate conversations related to supervisees' salient identities, these efforts can demonstrate cultural curiosity, openness, and care and further strengthen supervisees' trust in the supervisory relationships (Inman & Ladany, 2014; Pendry, 2012; Watkins & Milne, 2014). Supervisors who familiarize themselves with the historical-cultural context of Taiwan can lift the burden of Taiwanese supervisees shouldering the responsibility of educating their peers and supervisors (Lawless, 2001; Schroeder et al., 2009).

As for implications for current and future Taiwanese international students, participants identified protective factors including internal and external resources that supported their acculturation process and overall growth including positive self-dialogue, confidence, and social support. The protective factors brought up by participants

overlapped with factors that significantly predict international students' cultural

intelligence (CQ) trajectories and positive acculturation experiences (Wang et al., 2012).

Cultural intelligence (CQ) was conceptualized as multi-faceted abilities and

competencies an individual acquires to adjust and function in different cultural settings

and to interact with culturally diverse others (Earley & Ang, 2003). CQ was found

positively associated with international students' psychological, behavioral, and

performance outcomes (Wang et al., 2012). Therefore, to cultivate a supportive

environment within and beyond supervisor relationships, Taiwanese international

students are encouraged to continue expanding their CQ and identifying protective

factors for their well-being such as practicing self-compassion and acknowledging their

accomplishments internally or within their trusted community.

      This study offered an opportunity for a group of current Taiwanese international

students to amplify their voices, which can potentially increase the visibility for future

Taiwanese international students to feel seen and to make meaning of their own

experience in supervision. During the debriefing process, many participants expressed

validation and comfort as a result of talking about their experiences in the interviews.

Participants voiced that the interview questions helped consolidate the connections

between their specific identities and how those identities affected their training

experiences and acculturation process. One participant stated she felt more "hopeful" to

bring up cultural discussions with her current supervisor, which she did not see as

appropriate before the interview because "it is just not part of the culture here [their

doctoral program]." The motivation brought on to this participant can be considered as

catalytic validity of the current study, which re-oriented and energized participants during and after the research process (Lather, 1991; Moje, 2000).

Researchers suggested that supervisors continuously monitor the quality of supervisory relationships and alliances to proactively communicate with supervisees (Ellis, et al., 2015; Watkins et al., 2019). For supervisors, who are in a position of power, taking a more active role and tracking the development of SWA, and intervening when appropriate would also lift the burden on supervisees to cross the power differential and provide feedback to their supervisors, which can be extremely anxiety-provoking (Inman & Ladany, 2014). In addition, previous studies suggested that it is beneficial to increase awareness of the relationship between color blindness and inequity. It was also encouraged that formalized instructions and support should be provided for supervisors to model how to engage in discussions exploring how race and racism shape our lives and enter therapeutic space (DeSouza; 2021; Doane, 2017).

Limitations and Future Research

This study utilized the IPA framework, which suggested having a smaller sample size to capture a more nuanced understanding of a phenomenon. Thus, the small sample size of this study should not be considered a limitation of this study. In fact, the homogeneity of the sample may have enabled a deeper understanding of nuanced experiences in IPA studies (Smith & Osborn, 2007). The homogeneity of the sample was reflected by participants' racial and ethnic identities, gender, and clinical training, where the sample of this study is a group of six international students who self-identify as Taiwanese and are enrolled in a doctoral clinical or counseling psychology program. For

racial and ethnic identity, as expected in response to the eligibility requirements, five participants identified as Asian and Taiwanese, whereas one participant identified as biracial. The fluidity of the participant's biracial identity enriched the nuance of the findings and how she navigated race in supervision. Lastly, five of the six participants were women. This discrepancy among genders reflected the composition of the counseling and clinical psychology field, both in higher education and the workplace; during the recruitment process, most of the prospective participants who completed the demographic survey were women. The multiple shared cultural identities created homogeneity within the samples and enabled a deeper understanding of participants' lived experiences in clinical supervision.

Although the sample was relatively homogenous, there were heterogenous elements as well in regard to variations among participants in their age, duration of stay in the U.S., years of clinical experience and doctoral program, and other intersecting identities. The variation in areas mentioned above presented the diversity and nuance of Taiwanese international students' experiences and increased heterogeneity of the study. Increased heterogeneity may impact the findings of the study. For example, the duration of stay in the U.S. ranged from four to nine years; three participants completed their undergraduate in the U.S., and the other three participants came to the U.S. for their graduate degrees. Participants who came to the U.S. later in their lives reported rather different acculturation and identity formation processes, which further impacted participants' professional and personal growth during training and supervision. Participants' life roles beyond their professional identity also brought the uniqueness of

their lived experiences. For example, one participant is married and her role as a parent and how she hopes to raise her child as Taiwanese is closely associated with her values and racial identity formation along with her professional development and clinical training experiences.

Overall, current findings reflected the unique and complex lived experiences of this group of Taiwanese international students with both similarities and differences within the group. Potential limitations included intersecting identities besides participants' role as Taiwanese international students such as gender, sexual orientation, and age, which were not addressed in this study and the interview process. These intersecting identities could also be contributing factors to the privilege and power dynamic in participants' supervisory relationships.

Concerning the limited literature that targeted the subgroup of Taiwanese international students, it would be beneficial to conduct further research with a larger, more diverse sample to gather data that are more rounded in response to the intersecting identities within and beyond participants' nationality, immigration status, and roles as trainees and students. Increasing the heterogeneity of the sample would gather further nuance in the lived experiences in question. It could further increase the transitivity of research findings to inform readers, training directors, and clinical supervisors to improve training programs and supervision as they gain more understanding of Taiwanese international students' needs. For example, literature suggested that young Asian women exposed to Western culture tend to be more interested in cross-cultural interactions and may acculturate faster than their male counterparts (Ying & Han, 2006). On the other

hand, Asian men in the U.S. contexts face unique issues including gendered racism, hegemonic masculinity, and stereotypes that could negatively impact individuals' self-esteem and identity development (Chan, 2001; Eng, 2001). By including gender and other backgrounds as one of the salient identities in question, future studies may provide more in-depth findings about how intersecting identities interact with Taiwanese international students' acculturation process and supervision outcomes.

More qualitative, quantitative, and mix-method research is needed to bridge the gap in the current literature. There have been studies examining international counseling trainees and their experiences in clinical supervision, however, most researchers used the term international student broadly without specifying the cultural differences within the international backgrounds. In addition, many studies clustered international students in subgroups based on cultural or linguistic similarity, which likely increased the transferability of research findings. However, it also missed the opportunity to tune into diversity among the subgroups. The findings of this study indicated the uniqueness of Taiwanese international students' experiences and the need for culturally specific supervision.

One direction to consider for future research is to include supervisor perspectives and their experiences supervising Taiwanese international students. Duan & Roehlke (2001) compared different perspectives on the cross-racial supervisor-supervisee dyad. Their findings signified the discrepancy in cultural awareness between white supervisors and minority supervisees, which was consistent with participants' testimonies as they were often expected to initiate cultural discussions in supervision and were regarded as

the expert on their home culture and related multicultural issues. Following the framework of IPA, this study examined participants' personal experiences detailed and was concerned with the individual's personal perceptions rather than creating objective statements of the event itself (Smith & Osborn, 2007). Participants shared points of view in the supervisor-supervisee dyad based on their observations of supervisors' behaviors and attitudes and assumptions of supervisors' internal processes. By including supervisors with approaches such as interviewing pairs of supervisor-supervisee, future studies may be able to provide a more dynamic illustration of the relationships between Taiwanese international students and their supervisors that is missing in this study.

Another direction to consider for future studies is to examine the impact of different supervision formats. The interview questions of the current study did not specify whether the inquiry was focused on individual or group supervision, considering most doctoral psychology trainees likely received supervision in both formats in their doctoral training. By leaving the interview questions more open-ended, it allowed participants to select the most salient or relevant experiences to share in response to the interview questions. Few participants noted the change in communication when they switched to virtual during the global pandemic of COVID-19. One participant mentioned noticeable changes in their supervisory dynamic due to limited non-verbal cues such as body language as well as awkward pauses in conversations during videoconferences. The participant expressed uncertainty about their perceptions of the supervisory relationship due to barriers brought on by virtual supervision, on top of anxiety stemming from language proficiency and the evaluative functioning of supervision. It is worth examining

111

the contextual factors of supervision in future studies as the mental health field has diversified ways of communication and telehealth has become a new norm.

Researcher Reflections

This research project was rooted in my passion for counseling education, clinical supervision, and a desire to further understand the lived experiences of my community: Taiwanese international students. Reflecting on my learning trajectories in becoming a psychologist, my journey started in Taiwan during my undergraduate studies, and I have encountered many supervisors who deeply impacted my beliefs, values, and competencies of psychotherapy. Many pivotal moments in supervision shaped me as a person beyond my professional identity. There were also negative experiences in that I spent hours and hours ruminating on the supervisory alliance and interactions, hoping to make sense of my experience and find my narratives. The self-dialogue deepened my goals to gain a more rounded understanding of the complex multicultural processes in cross-national supervision and to amplify Taiwanese international students' voices.

Through interviewing participants and hearing their stories, I found myself feeling validated and connected with this group of Taiwanese international students. In debriefing, participants also expressed that through conversing with another Taiwanese international student and articulating their thoughts and feelings in the interviews, they deepened understanding of their supervision experience; it was a transformative experience to acknowledge and affirm their struggles, strengths, and resilience. As we unpacked difficult experiences about supervision in the interview, I utilized immediacy to check in with participants' reactions as they reviewed the challenges they faced. One

112

participant stated, "I feel validated that we're having this conversation because I don't get to talk to people about this, and this is part of my identity. I feel good."

The testimony above provided further evidence for the catalytic validity of this study, where I sought to create a collaborative and close research relationship that validated and brought positive change to participants and the community in this research project (Lather, 1991; Moje, 2000). The research relationship was cultivated through my attempts to demonstrate active listening, authenticity, and responsiveness to participants' emotions while holding openness and curiosity to different perspectives and narratives that I was unaware of. The closeness of cultural identities participants and I shared brought an opportunity for participants to feel more comfortable sharing their lived experiences openly and authentically in the interviews, which was also evidenced by participants' self-report in debriefing indicating that the conservations we shared in the interview were meaningful for them. I felt honored to hear participants' stories, yet wished participants had other spaces to confide their intersecting identities as Taiwanese international students and psychology trainees.

Recognizing how closely this study connected with my personal experiences, I paid attention to my biases and reactions brought up during the interviews and data analysis process. The closeness of the cultural identities I shared with participants led to my sufficiency in coding and interpreting data to capture the phenomenon following the IPA framework (Smith & Osborn, 2007). Meanwhile, I engaged in memo-writing, journaling, consulting with faculties, and dialoguing with fellow Taiwanese counselors and supervisors to process my emotional responses as a Taiwanese researcher. Instead of

113

aiming for objectivity or neutrality as a researcher, I strived to balance utilizing myself as an instrument of the research and integrating insight to enrich the findings extracted from research data (Creswell & Poth, 2018).

This study was personally meaningful and furthered my racial and professional identity formation. Hearing participants share their views about their Taiwanese identities was particularly empowering and brought up a range of emotions. Due to the historical and political contexts, it was often uneasy for Taiwanese, including myself, to speak about the political oppression and lack of recognition for our nationality. One incident that occurred during my recruitment process confirmed the fear and struggles Taiwanese students confronted related to the political tensions between China and Taiwan. A Taiwanese counselor and close friend of mine distributed recruitment materials for the present study on a social media platform for Asian mental health providers. Another member of the group who identifies as Chinese commented that issues related to Taiwan were triggering for them and proposed an alternative term for "Taiwanese international student" that should be used to be more culturally aware and sensitive. This incident heightened my determination to offer a space for Taiwanese international students to share their stories and amplify their voices in this study. As a Taiwanese researcher, I was in a privileged position to have access to the data collected by a group of Taiwanese international students, and meanwhile, I also experienced the psychological stress participants expressed when speaking up about our Taiwanese experience openly. Concerning personal investment in the study and passion for the population in question, I

114

strive to present the findings with diligence by emerging myself in the data and at the same time, paying close attention to my emotional reactions, bias, and limitations.

As I ended the project and left the participants I had bonded with throughout the project, mixed feelings emerged, and it took me some time to comb through them. It was truly a transformative experience to witness the nuanced lived experiences within my community and the resilience each participant held in sharing their stories. In the meantime, after the interview, we all returned to the environment where the lived experiences happened. It was hard to feel somewhat disappointed that our training environment continued to project external stressors on generations of Taiwanese international students, and how minimal the power of our voices was in comparison to the flawed system. I would like to believe that my study can be impactful for our field, yet this study is only the start of my journey to continue advocating for international students, students of color, and other marginalized groups in different aspects of my career as a psychologist. In this journey, while there is darkness and sadness, there is also light and happiness. This study sought to make meaning of the nuance of human experience, and it was also my core belief about growth, resilience, and psychotherapy.

Altogether, I hope this study can offer more visibility of Taiwanese international students' needs during their course of training in becoming a psychologist. I hope that the process of story-sharing and meaning-making amplifies the experiences that were overlooked in higher education and training programs (Creswell & Poth, 2018). This study illuminated challenges Taiwanese international students face in clinical supervision as well as the accomplishment, strengths, and resilience participants attained through

115

their lived experiences. I hope that this research also offers some ideas for future supervisors on how to care for Taiwanese international supervisees with humanizing practices, curiosity, and compassion.

Conclusion

This study is the first to focus on Taiwanese international students' lived experiences in supervision in a qualitative method. It offered a nuanced view of how Taiwanese international trainees navigate supervisory relationships in the process of their acculturation and professional identity with their intersecting identities. Participants shared in-depth reflections about the challenges they confronted when their unique cultural identities were often overlooked in supervision, where a salient part of themselves became invisible to others and dismissed. As they progressed in their course of training, the parallel process of their professional growth and acculturation further supported their professional identity formation process as a psychologist in training. The humanizing practices they received in supervision became a nourishing foundation, that participants will be able to pass on to future trainees. This study provided directions for supervisors when working with Taiwanese international students to offer more culturally responsive supervisory interventions and support. I hope to amplify participants' voices and resilience and inspire more inquiry into multicultural supervision of Taiwanese international students and other students of color.

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APPENDIX

Appendix A: Demographic Questionnaire

Introduction

Hi, my name is Joey Hsiao. Thank you for your interest in my study. The purpose of this study is to learn more about Taiwanese international students' experience in clinical supervision. To see if you are qualified to be a part of the study, I first need to ask you a few general questions.

Initial Screening Questions

Do you self-identify as Taiwanese? [If no, thank participant and screen out]

Do you currently hold an F1 or J1 visa and are enrolled in an institution pursuing a doctoral-level degree in clinical or counseling psychology, OR
currently hold an OPT visa as a pre-doctoral intern in the U.S.? [If no, thank participant and screen out]

Have you engaged in at least two master or doctoral-level clinical practicums in the U.S.? [If no, thank participant and screen out]

Background and Contact Information

Your participation in this research study is voluntary. If you decide to participate in this research study, you may withdraw at any time. The following questions allow me to know you and your cultural identities. You can choose to leave blank or check "prefer not to say" if you do not wish to answer some questions. Thank you!

Preferred pronoun: □ She/Her, □ He/Him, □ They/Them, □ Other: _____ , □ Prefer not

to say

Phone number: _____   E-mail:

_____

Preferred methods of contact: □ Email, □ Phone   Preferred language:

_____

Ethnic/Cultural Background: (□ Hokkien/Han, □ Hakka, □ Indigenous/Aboriginal Groups

□ New Immigrant, □ Other 其他: _____

Nationality: _____ Citizenship:

_____

Visa status: □ F1, □ J1, □ OPT, □ Other: _____ Current Location:

_____

Age: _____ Educational Background:

_____

Gender: □ Man, □ Woman, □ Non-binary, □ Other: _____, □ Prefer not to say

Sexual orientation: □ Heterosexual or Straight, □ Gay or Lesbian, □ Bisexual, □ Other:

_____,

□ Prefer not to say

Marital status: □ Single, □ Cohabitating, □ Married, □ Widowed, □ Divorced, □

Separated,

□ Prefer not to say

Types of doctoral program: □ Counseling Psychology, □ Clinical Psychology / □ Ph.D., □

Psy.D.

Is your program APA-accredited? □Yes, □ No   Current year of study:

_____

Duration of your stay in the U.S.: _____ years _____ months

Number of master-level practicums/internships completed: _____

Number of doctoral-level practicums/internships completed: _____

Number of clinical supervisor(s) you have had during your clinical training experiences

who you worked regularly with (e.g., having weekly individual supervision meeting):

_____

Appendix B: Interview Protocol

1. Pick one or multiple supervisors across the years and share some basic demographic information about them. Are there any patterns in supervisors' demographic information (e.g. mostly white or POC? Same gender? Age?)
2. Describe the overall experiences of your clinical supervision in the U.S. so far.
   Possible prompts: Tell me about some of the most positive/challenging experiences you have had in supervision.
3. Describe your supervisory relationship with your supervisor(s). You can start with the supervisor who had the most impact/was critical for your development-- how is your supervisory relationship with them?
   Possible prompt: How comfortable do you feel when sharing about yourself and your clinical work with your supervisor? How understood do you feel by your supervisors?
4. What kind of multicultural issues have arisen, if at all, within your relationship with your clinical supervisor?
   Possible prompt: What kind of multicultural issues, if at all, have arisen in your clinical work with clients, or maybe between you and your supervisor(s)?
5. Describe your acculturation process and how that has impacted your clinical work and experiences in supervision.
6. How, if at all, have your supervisors addressed your identity as a Taiwanese international student in clinical supervision?
7. How does your clinical supervision experience impact your growth as a psychologist?
   Possible prompt: How confident do you feel now as a counseling/clinical psychologist? How is that related to your clinical supervision?
8. How do your clinical supervision experiences impact your personal growth?
   Possible Prompt: What do you know more about yourself through clinical supervision?
9. Looking back, what might be helpful to make your clinical supervision experiences more satisfying?
   Prompt: What do you think your training program can do to better support you in your clinical supervision experience?

Debriefing Questions
1. How was it talking about your experience?
2. How are you feeling now, having talked about this?
3. Do you have any questions for me?
4. Is there anything else you would like to talk about?

Appendix C: Participants Recruiting Email

Dear _____,

I hope this email finds you well! My name is Joey Hsiao, and I am a Doctoral Student at the University of Denver. I am currently working on my dissertation about Taiwanese international students experience in clinical supervision. The purpose of the study is to gain a deeper understanding of the unique cultural background of Taiwanese international students and provide an opportunity to make meaning of their lived experiences in clinical supervision.

I am seeking individuals to interview, and participants will receive a $20 gift card as compensation for their participation in this interview. Please find attached a flyer with more information about the study and a link to an eligibility questionnaire where individuals may sign up for the study.

Thank you,

Joey 'Chiao-Yin' Hsiao, M.Ed.
Doctoral Candidate, Counseling Psychology
Morgridge College of Education
University of Denver