

The Experiences of Asian American Supervisees in Clinical Supervision

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INTRODUCTION

Asian Americans (AAs) are often an understudied population (Chen et al., 2020). The AA community is often referred to as “model minorities” and further oversimplified to valuing education (Tran & Birman, 2010). Despite having very different histories and experiences, different Asian ethnicities are seen as a homogenous group, which in turn perpetuates stereotypes and assumptions about AAs.

Only 4% of the psychology workforce identify as Asian while their White counterparts make up 83% of the workforce. With clinical supervision as an essential aspect of clinical training (APA, 2014), it is likely for Asian Americans Supervisees (AAS) to engage in cross-cultural supervision (CCS). Studies on CCS tend to have small samples of AAS or completely exclude AAS (Hutman & Ellis, 2020; Ladny et al., 2017; Urmanche et al., 2021). Further, the rise in anti-Asian racism due to the COVID-19 pandemic warrants further investigation of the experiences of AAS in clinical supervision.

RESEARCH QUESTION

How do AAS describe helpful and unhelpful supervision with white supervisors?



CONTACT

For any questions or comments about this study, please contact PI Kevin Yabes at kyabes@nmsu.edu.

PARTICIPANTS

| Participant | Licensure/Licensure Track | Ethnicity | Sexual Orientation & Gender Identity |
|--------------|---------------------------|--------------------------------------|--------------------------------------|
| “Sampaguita” | APCC | Filipina American | Queer, Femme |
| “Bryan” | AMFT | Korean-Japanese American | Gay, Cisgender Male |
| “Jane” | AMFT | Chinese American | Heterosexual, Cisgender Female |
| “Edi” | LCSW | Filipino American and Afro-Caribbean | Queer, Femme |
| “Sammie” | Psychologist-in-Training | Vietnamese American | Queer, Genderfluid |
| “Flo” | Psychologist-in-Training | Filipino American | Bisexual/Queer, Genderqueer |

INCLUSION CRITERIA

1. Self-identified as Asian American
2. Were enrolled in or completed a graduate-level training program in psychology, counseling, marriage and family therapy, or related field
3. Received clinical supervision for at least one year
4. Received clinical supervision from a White clinical supervisor for at least four months

METHODS

A qualitative study was conducted using the phenomenological research tradition to best capture the lived experiences of participants (Creswell & Poth, 2018). Interviews were conducted by the PI and later transcribed by the PI and a researcher assistant. Member Checks were conducted to increase validity of statements and themes. All six participants were engaged in member checks. Further, member checks were used to ensure the confidentiality of each participant. Coding and data analysis were conducted by a research team using a thematic analysis.

RESULTS

Helpful Supervision Themes

1. **Assistance in Clinical and Professional Growth**
Increasing knowledge on theory, interventions, and business practices
2. **Similarities in Values or Identities**
Shared values/identities helped create a positive supervisory relationship
3. **Viewing the AAS as a Person**
Seeing the AAS beyond a clinician/employee, checking in, and acknowledging Atlanta Spa Mass Shooting
4. **Cultural Humility and Awareness of Power Dynamics**
Acknowledging power dynamics and non-expert status regarding cultural topics

“Him recognizing his whiteness and naming it within our dynamic. So, not forcing me to protect his white guilt or comfort that. But more him just being open about recognizing the power dynamics of him being white, and how that influences the supervision provided to me.”
-Sammie

Unhelpful Supervision Themes

1. **Barriers to Full Engagement in Supervision**
Feeling unheard, being spoken over, or being yelled at
2. **Discrimination Based on Identity**
Assumptions and microaggressions
3. **Unmet Needs**
Wanting more training from supervision and seeking external support
4. **Whiteness Interfering with the Supervisory Relationship**
Observing white fragility and emotionally supporting supervisor

“I think that white fragility comes up and even after sharing with her, ‘You know it did come off as a microaggression that you assumed that it was a cultural thing that I did wrong.’ I think when I’ve given this supervisor feedback a couple of times, she actually will start to cry during supervision, and it makes it really uncomfortable to want to bring up feedback.”
-Sampaguita

DISCUSSION

Given the emergent themes of helpful and unhelpful supervision, supervisory training should place emphasis on teaching supervisors how to identify and address discrimination at various levels (e.g., societal, mental health system, one-on-one). It is important for supervisors and supervisees to hold open conversations regarding cultural topics and the impacts of whiteness on their professional relationship and training (Jendruisina & Martinez, 2019). There is need to ensure that the burden of accomplishing these practices do not fall onto the AAS, but rather, should be worked through as a team effort if conflicts were to arise

LIMITATIONS

Limitations of this study include that most of the participants were trained in Southern California. This similar geographical location likely contributes to regional culture and to training experiences. Additionally, the original interview protocol may not have accounted for intersecting identities such as gender identity and sexual orientation. These limitations should be considered when results from this study are applied to practice and further research should be conducted.