Passing As White: The Experiences Of BIPOC Supervisees

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PASSING AS WHITE: THE EXPERIENCES OF BIPOC SUPERVISEES

BY

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Submitted in partial fulfillment of the Requirements for the Degree of Doctor of Philosophy in the Department of Professional Psychology and Family Therapy

Seton Hall University
South Orange, NJ
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The College of Education and Human Services
Professional Psychology and Family Therapy

APPROVAL FOR SUCCESSFUL DEFENSE

Bridget Anton has successfully defended and made the required modifications to the text of the doctoral dissertation for the Degree of Doctor of Philosophy during this Fall, 2021

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Abstract

Cross-racial supervisory dyads are becoming more prevalent due to the increased diversity of graduate students in psychology. However, research has not adequately examined the narratives of BIPOC supervisees who pass as White. People who pass as White might not be seen as a person of color and their identities might be ignored because it is considered invisible. Due to the lack of research on BIPOC supervisees with a passing identity experience within the context of the supervisory dyad, this study explored the subjective experiences of BIPOC supervisees who pass as White in cross-racial supervisor dyads. Furthermore, an exploration into conversations about race and racial identity developmental processes was addressed. This study employed a constructivist–interpretivist research paradigm whereby 12 BIPOC supervisees who pass as White participated in a semi-structured interview that explored their experiences of passing within cross-racial clinical supervision. The data were analyzed using a phenomenological approach in which I utilized coding and generated significant themes after a thorough review of the data. Five themes were highlighted of the BIPOC supervisees’ experiences in cross-racial supervisory dyads: feeling disconnected in supervision, frequency of discussions on race, supervisees’ fear to explore identity development, multicultural competency, and lack of safety in cross-racial supervision. Results showed that BIPOC supervisees with a passing identity displayed resistance to sharing their passing racial identity with White supervisors due to lack of perceived safety within the supervisory relationship. Limitations, clinical implications, and future areas of research are discussed.

Keywords: race, passing as White, cross-racial supervision, qualitative research, BIPOC supervisees
DEDICATION

This work is dedicated to my loving family

Vincent, Maria, Rachel, Kevin Anton
Zachary, Archie & Ollie Anton-Zotollo

In Memory of

Voltairine (Luz) Cueva, Dora Ore, & Demetrio Armijo
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Thank you most importantly to my grandparents, and especially Luz, whose ability to see a brighter future and coming to America for a chance at the American Dream. Their relentless passion and perseverance, I feel every day, and who would be so happy for me, and smiling from ear to ear. Thank you for giving me the world.

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CHAPTER I
INTRODUCTION

Background and Overview

Multicultural competency is necessary for psychologists to work with today’s diverse population. The American Psychological Association (APA, 2017) recognized the important role of diversity and multiculturalism by adopting the *Multicultural Guidelines: An Ecological Approach to Context, Identity, and Intersectionality*. According to the Multicultural Guidelines, there is a need for psychologists to consider how awareness and understanding of identity develops from, and is circulated within, professional psychological practice (APA, 2017). The mission of the Multicultural Guidelines is to set standards for psychologists to incorporate in their practice to help them understand clients’ perspectives of their cultural backgrounds and experiences. The Multicultural Guidelines emphasize psychologists’ ability to recognize and understand their own values and beliefs that influence their perceptions of and interactions with others because we are all cultural beings in the therapy room (APA, 2017). Psychologists are exposed to cultural identity training in graduate school and work alongside mentors in the field. However, researchers have identified generational training gaps, suggesting those who are currently in a supervisor role were trained prior to the adoption of multicultural competencies and likely not necessarily providing culturally competent supervision (Burkard et al., 2006; Inman et al., 2014). An increase in diversity-related courses have been noted since the late 1970s, yet students are still in need of a space to explore personal biases in their training with supervisors (Benuto et al., 2019).

The emphasis on multicultural competency in graduate training is imperative for psychologists to practice ethically. There are multiple models of psychotherapy and supervision
that emphasize multicultural interactions such as the critical events model (Ladany et al., 2005) and the heuristic model of nonoppressive interpersonal development (Ancis & Ladany, 2010). Research supports the need for providing multiculturally competent supervision because of the benefits of multicultural knowledge and learning outcomes (Inman & DeBoer Kreider, 2013). Yet, there is limited research on the potential impact of cross-racial supervision dyads on multicultural competency training for graduate students.

**Cross-Racial Supervision**

In 2013, the APA (2015) reported 83.6% of active psychologists are White. The APA (2016) reported from 2004-2005 to 2014-2015, there was an increase in racial/ethnic minority graduate students with the largest increases seen with students reporting as multi-ethnic (50%), Asian/Pacific Islander (23%), and African American/Black (14%). This fast-changing population in the health service provider psychologists (i.e., providers with a doctoral degree) brings many implications for the psychology profession, especially for psychology supervisors, who are responsible for protecting client welfare and advancing supervisees’ professional development (Bernard & Goodyear, 2014). The phenomenon of differences in racial identity between the supervisor and supervisee is referred to as cross-racial supervision (Estrada et al., 2004; Leong & Wagner, 1994). The supervisory relationship is becoming more intercultural, and it is imperative to consider the impact of BIPOC supervisees’ racial identity within the context of supervision.

**“Passing” Racial Identity**

Cross-racial supervision dyads are becoming more common in the training of professional psychologists due to the increased diversity of graduate students in psychology (APA, 2015, 2016). It is important for cultural issues to be addressed in supervision for graduate students’ learning and development, yet these conversations transpire differently with students...
who have a *passing* racial identity. Passing is defined as someone who “portrays themselves or is regarded by others as a member of a social group other than the one that they belong to, such as race, ethnicity, caste, social class, gender, sexuality, and disability” (Sandon, 2016, p. 5). For example, racial passing can be seen in someone who has the physical appearance to project themselves as belonging to the White racial group, or to be perceived as White (Bennett, 2001; Cruz-Janzen, 2002; Lloréns, 2018; Ool, 2004). An individual may contemplate highlighting their ability to pass as White as a means of achieving social status and the privileges affiliated with being White (Goffman, 1990; Kennedy, 2001). Further, people may present their racial identities differently in public and private spaces according to the demands of the context or situation in response to the discriminatory racial system (Albuja et al., 2018; Ool, 2004). For instance, some ways people of color may disguise their stigmatized identities are: anglicizing their name to camouflage their ethnicity; applying cosmetic make-up; masking accents; and altering personal appearance such as clothes, hairstyles, and jewelry (Kennedy, 2003; Snow & Anderson, 1987). A person’s passing may allow for their appearance to blend into dominant society, yet it does not necessarily mean the person embraces dominant identity or groups.

People of color might be perceived as White or part of the dominant group, even if they wish not to be viewed that way, thus passing by default (Sandon, 2016). This perception of Whiteness can lead to misrecognition for people of color who see themselves as a minoritized group member yet perceived by others as being White (Törngren, 2018). Importantly, people who utilize their passing identity may not feel a complete sense of belonging in dominant White American society, even if they may seem assimilated (Cunningham, 1997; Ool, 2004). People of color with a passing racial identity have to consider the emotional consequences of revealing their stigmatized racial identity when confronted with racist remarks by White people
(Cunningham, 1997). It is easier for people from marginalized backgrounds to conceal their stigmatized identities through passing as White when faced with potential prejudice and racial discrimination (Salahuddin & O’Brien, 2011).

The literature on cross-racial supervisory dyads, however, has not explored this subject extensively with the passing racial identity focus. People who experience a passing identity may be challenged by White people who discount their heritage and by BIPOC (Black, Indigenous, and People of Color) who are suspicious of the fairness of their skin (Cunningham, 1997). It is possible for BIPOC supervisees in a supervisory dyad to experience confrontation with White supervisors who dismiss cultural and racial considerations because of their passing identity. People who pass as White might not be seen as a person of color; their identity might be ignored because it is considered invisible (Sandon, 2016). The concept of passing as White has been studied in the past (Daniel, 2002; Elam, 2007; Kennedy, 2003; Lloréns, 2018) but not in the context of clinical supervision. There is a demand for more research examining cross-racial supervisory dyads with a focus on passing racial identity of supervisees and its impact on future psychologists’ training in multicultural competency.

Racial Identity Process

According to Helms’s (1990, 1995) racial identity development theory, racially marginalized people need to process their feelings, thoughts, and beliefs of internalized racism and biases to other races in order to develop a self-affirming identity. Racial identity development is a multidimensional process consisting of ego statuses pertaining to the feelings, thoughts, and behaviors an individual has of their own race and to other races (Helms, 1995). Also, People of Color Racial Identity Model (Cross, 1971) described the developmental stages that Black people in America work through with the goal of obtaining a psychologically healthy
Black identity (Cross et al., 1991). Moreover, these models are limiting in some ways, and it may be more useful to take an intersectional approach to these developmental processes (Crenshaw, 1991). Psychologists need to develop an active awareness of racism and oppression as part of their racial identity development. Racial identity development can fluctuate along a continuum; studies have suggested the non-sequential development of racial identity influenced by social situations and experiences (Sabnani et al., 1991). Experiences, such as the supervisory relationship, provide psychologists-in-training a unique opportunity to explore their racial identity development.

Research has shown racial identity is a necessary component in enhancing supervisees’ multicultural competency and skills to address the mental health needs of culturally diverse clients as clinicians (Constantine et al., 2001; Haynes et al., 2003; Jernigan et al., 2010; Ladany et al., 1997; Sabnani et al., 1991). A study by Ladany et al. (1997) suggested that higher level of racial identity status of White clinicians was positively correlated with their multicultural competence. Similarly, Constantine et al. (2001) stated clinicians with lower racial identity status were unable to respond to culturally diverse clients with multicultural awareness. These studies suggest the importance of exploring the racial identity of practicing clinicians, which would increase their ability to provide culturally competent services to clients.

Supervisors can help lead supervisees through exploration of racial identity development stages (Thomas, et al., 2019). According to a recent study by Thomas et al., supervisors who initiated and welcomed difficult conversations regarding BIPOC supervisees’ vulnerabilities and strengths as a person of color, facilitated supervisees’ racial identity development from internalization to internalization commitment stages (Cross, 1991). Subsequently, supervisors who do not address racial identity development within supervision negatively impact the
supervisees’ multicultural competency, supervisees’ ability to conceptualize clients holistically, and the supervisory relationship (Chang et al., 2003; Ladany et al., 1997). However, these studies did not examine the narratives of BIPOC supervisees who pass as White.

Identity Work and “Passing”

Snow and Anderson (1987) stated that identity work encompasses a person’s ability to perform a desired identity by actively creating, presenting, or sustaining one or more identities. For example, people can actively participate in gender passing by “engaging in or concealing specific behaviors or aspects of their appearance” (Rood et al., 2017, p. 705). Specifically, for transgender and gender-nonconforming individuals, research has highlighted the importance of adapting and/or concealing aspects of their gender expression for personal safety against high rates of victimization and violence (Graham, 2014). Similarly, people of color who practice racially passing as White are performing their identity and actively engaging in a protective factor against racism (Lloréns, 2018). Passing may be both active and non-active, and sometimes people engage in passing as a protective factor when it feels unsafe not to pass. BIPOC supervisees who pass as White may experience a different progression in their racial identity development within a supervisory context.

Cunningham (1997) suggested that light-skin Black participants’ racial identity development was different from darker skin Black individuals because of their unique experiences passing as White. Light-skin Black participants reported issues of color prejudice within the African American community, beginning as early as childhood and adolescence. For example, light-skin Black individuals had to justify their Black identity to both White and Black people. Both the society and individual actively shape one’s racial identity. Khanna and Johnson (2010) stated that people of color’s identity work can be seen in their engagement of a variety of
strategies to present their preferred racial identity to others. Harris (2018) found that a person’s skin tone was identified as an important factor that influences their ability to be perceived by others as White. Moreover, biracial people who pass as White may have the option to decide to pass or not to pass, which may be influenced by their racial identity status (C. Brown & B. Brown, 2014). The present study is focused on how BIPOC supervisees construct and develop their roles in their passing racial identity within a cross-racial supervisory dyad.

**Statement of the Problem**

A supervisor’s responsiveness to cultural issues, such as race and ethnicity, facilitates the development of multiculturally competent psychologists (Ladany et al., 1997). Cultural responsiveness in supervision can be defined as a supervisor’s responsiveness to acknowledging the existence of and demonstration of knowledge for the supervisee’s ethnicity and culture within the supervisee’s cultural context (Burkard et al., 2006). The supervisee’s perceived experience of supervisors as culturally responsive or unresponsive is a topic well researched in the multicultural competency literature. Although most of the research suggests supervisors are responsive to cultural issues, there is a discrepancy between White supervisors and BIPOC supervisors (e.g., African Americans, Asian Americans, Latinx Americans, Native Americans). Supervisors of color are credited as more culturally responsive in therapy compared to their White colleagues (Pope-Davis et al., 2003; White-Davis et al., 2016; Zhang & Burkard, 2008); yet, about 83% of practicing psychologists identify as White (APA, 2015; United States Census Bureau, n.d.). The lack of cultural and racial diversity in practicing psychologists limits the ability for psychology graduate students to experience supervisors of color during clinical training.
Knox et al. (2003) studied the phenomenon of how, when, and why therapists discuss race in the therapeutic relationship. Their findings proposed that the early lived experiences of therapists of color are uniquely different, influencing their approach to discussing race in therapy. For White therapists, their early lived experiences included fewer interactions with cross-racial individuals, thus allowing them to remain unaware of the existence of race in the therapy room. White therapists reported greater discomfort discussing race in cross-racial supervisory dyads compared with therapists of color. Yet, there are no studies on the topic of cross-racial supervision and BIPOC supervisees’ experience of racial dialogues when a supervisee is able to pass as White. BIPOC supervisees reported negative experiences relating to their race in cross-racial supervisory dyads (Burkard et al., 2006; Knox et al., 2003), such as experiencing racial microaggressions (Constantine & Sue, 2007; Hedin, 2018; Sukumaran, 2016). Furthermore, BIPOC supervisees who pass as White may not overtly react to racist statements made by their White supervisors in order to hide their minority status. However, they may endure constant anxiety about being discovered as a member of a minority racial group (Gatewood, 1990; Romano, 2016). The discussion of race in supervision may be more heavily affected within cross-racial supervisory dyads with BIPOC supervisees with passing racial identities.

Negative racial experiences can still occur with non-White supervisors and BIPOC supervisees, however, because the ability to discuss race and culture is influenced by one’s own attitudes and beliefs about race/culture (Helms, 1990), not by the color of a person’s skin. Jernigan et al. (2010) argued for reliance on a person’s racial identity rather than relying on categorical demographic descriptors (e.g., race) to explain cross-racial supervisory dyads. Typically, supervisors hold more power in the supervision relationship (Bernard & Goodyear,
2014; Frawley-O’Dea & Sarnat, 2001; Murphy & Wright, 2005; Sarnat, 2006); thus, they should remain attuned to the racial dynamics in supervision (Green & Dekkers, 2010). White supervisors might assume a BIPOC supervisee is an expert on race based on demographic descriptors (Hess et al., 2008; Jernigan et al., 2010), which can present a challenge for BIPOC supervisees who have not explored their own racial identity. Alternatively, White supervisors might not explore multicultural issues with BIPOC supervisees because the supervisees are able to pass as White. Presently, the literature is absent on the reasons that BIPOC supervisees who pass as White avoid telling their supervisor they are a person of color. Additionally, the discussion of race and/or racial identity development may not be readily approached by White supervisors in cross-racial supervisory dyads with supervisees passing for White, impacting the supervisee’s clinical training and racial identity development. Awareness and discussion of one’s own racial identity is imperative for BIPOC supervisees’ and mixed-race folks who pass as White’s professional development and multicultural competency as future psychologists.

**Purpose of the Study**

The purpose of this study was to explore the subjective experiences of BIPOC supervisees who pass as White in cross-racial supervisory dyads, particularly their perception of race dialogues with their supervisors. Moreover, multicultural competency has been prominent in the literature in recent years; thus, the study further explored how psychology graduate students studying health service provider programs, specifically clinical and counseling psychology, experience conversations of race and other cultural issues within supervision. Additionally, this study explored the perspectives of BIPOC supervisees who pass as White and how these conversations impact their relationship with their supervisors, specifically with White supervisors. Also, an exploration into the racial identity development processes of BIPOC
supervisees who pass as White was addressed to further examine the cross-racial supervisory dyad. Likewise, this study sought to understand the relationship, if any, between the racial identities of BIPOC supervisees who pass as White and their individual agency to withhold that they are a BIPOC person. Lastly, this study explored the perspectives of BIPOC supervisees who pass as White regarding ways to strengthen the relationship between both their supervisors and the clients they serve. Given the lack of empirical literature on the topic, this study qualitatively explored the subjective experience of BIPOC supervisees passing as White.

**Research Questions**

This study addressed the following questions:

1. How does passing as White in cross-racial supervision dyads influence the conversation of race dialogues in supervision?

2. How do cross-racial supervision dyads impact multicultural competency training for BIPOC supervisees who pass as White?

3. How is the identity work for people who pass as White (e.g., associated privileges with racial passing in a variety of situations) influenced within the supervisory relationship?

4. How does the racial identity of both, the BIPOC supervisee who passes as White and their White supervisor, impact the cross-racial supervision dyad?

5. What factors/interventions could strengthen the relationship between the supervisors and BIPOC supervisees who pass as White?
Significance of the Study

Extant research has focused on various issues related to multicultural competence in supervisory dyads, such as cultural issues, cultural empathy, and multicultural counseling self-efficacy (Ancis & Marshall, 2010; Inman & DeBoer Kreider, 2013). These studies often provide implications for multicultural competency in supervisory dyads without examining the topic of race in cross-racial relationships. As a result, the impact of racial differences between supervisors and supervisees is unclear. There is a need for cross-racial supervision given the lack of representation of BIPOC supervisors; thus, BIPOC students have and will continue to work with White supervisors (Brooks & Steen, 2010). Based on Hird et al.’s (2004) study, White supervisors spent less time discussing cultural issues in supervision compared to BIPOC supervisors because of feeling less culturally competent; however, the supervisees’ perspective was not discussed. Additionally, passing as White is an important experience to explore because of the research suggesting the significant impact of racial categorization in social perception and subsequent microaggressions (Tran et al., 2016). Tran et al. found that multiracial people appraised racial identification questions as negative when experiencing feelings of discomfort and frustration by defining the inquiry as offensive or intimidating.

The clear need for multicultural competence in the field of psychology has led to an increase in multicultural counseling instruction in graduate training (Ancis & Ladany, 2010; Gatmon et al., 2001). Training programs doubled their cross-cultural courses (Bernal & Castro, 1994), and the APA mandated culturally competent behavior in their Ethical Principles of Psychologists and Code of Conduct in 2002 (O’Donohue, 2016). However, there has been little focus within the academic research around the supervisee’s perspective on racial dialogues within the supervisory relationship. Thus, this study addressed the gaps in the literature by
shedding light on the perspective of BIPOC supervisees, particular to their view of the supervisory relationship with a White supervisor. Also, this study was interested in how BIPOC supervisees who pass as White construct and develop their roles in their racial identity narratives. The current literature is similarly absent on people of color’s experience in supervision who avoid telling their supervisor they are a person of color because they can pass as White. Therefore, this study sought to understand BIPOC supervisees who pass as White’s racial identity development. BIPOC supervisees who pass as White’s racial identities were assessed to possibly provide insight into their perspectives on racial dialogues with their White supervisors.

This study specifically focused on how BIPOC supervisees experience cross-racial supervision and their views on how to improve relations with White supervisors. Separate from prior research that has examined cross-racial supervisory dyads with the focus on multicultural topics, this study seeks to illuminate BIPOC supervisees’ perspectives and thereby contribute to the field of multicultural competency through identity formation and identification. In addition, this study sought to bridge the gap between the supervisor’s perspective and supervisee’s, particularly in cross-racial supervisory dyads. This study used a phenomenological, qualitative approach to explore BIPOC supervisees’ perspectives and experiences.
CHAPTER II

REVIEW OF THE LITERATURE

Introduction and Theoretical Framework

The purpose of this chapter is to discuss the theoretical framework of this study. Also, this chapter will offer a review of the relevant literature. The proposed study is a phenomenological inquiry (Creswell, 2007; Moustakas, 1994) of the subjective experiences of BIPOC supervisees working with a White supervisor. Within qualitative research, the objective is discovery oriented, but it is imperative to acknowledge the guiding theoretical frameworks that are present in the researcher’s perspective. As such, the literature on clinical supervision, multicultural supervision, supervisory relationships, culturally responsive supervision practices, race, cross-racial supervision, multicultural competency, race dialogues, ethnic/minority racial identity model, White racial identity model, passing as White, and identity processes are reviewed. These theories form the foundation for the research questions addressed in this study.

Clinical Supervision

Clinical supervision provides the foundation for training of psychologists. A primary goal of supervision is to enhance the development of supervisees’ professional competencies and science-informed practices, monitor the services provided, ensure client welfare, and act as a gatekeeping function for entry into the profession (APA, 2014; Association for Counselor Education and Supervision [ACES], 2011). Supervision is a continuous process that involves the “observation, evaluation, feedback, and facilitation of supervisee self-assessment, and the acquisition of knowledge and skills by instruction, modeling, and mutual problem solving” (Falender & Shafranske, 2004, p. 3). Supervision guides the profession by providing a space to
convey necessary skills, to teach the profession’s values and ethics, to protect clients, and to monitor supervisees’ readiness to be accepted into the profession (Bernard & Goodyear, 2009).

Successful clinical supervision can enhance the supervisory relationship, increase supervisee’s counseling knowledge, encourage supervisee growth and independence, increase multicultural competencies, and enhance therapeutic outcomes (Falender et al., 2014; Inman et al., 2014; Kemer & Borders, 2017; Ladany et al., 2013). Also, supervision is an important requirement for licensure, accreditation of graduate training programs, and training of psychologists (Bernard & Goodyear, 2004). The present study is focused on learning about the supervision experiences of BIPOC supervisees in clinical and counseling psychology doctoral programs.

For the purpose of this study, supervision is defined as a setting in which a clinician educates and provides training in psychotherapy theories, methods, and skills for clinicians who treat clients (Alfonsson et al., 2017). The goal of supervision is to “increase the supervisees’ psychotherapy competence and ultimately improve treatment outcomes and patients’ well-being” (Alfonsson et al., 2017, p. 4).

**Multicultural Supervision**

Multicultural supervision occurs when supervisors and supervisees reflect and consider various cultural factors with clients from diverse backgrounds (Ancis & Marshall, 2010). Falender et al. (2014) defined a multicultural framework for supervision, which models openness, self-awareness, and the integration of values, beliefs, and biases with culturally diverse clients and their social contexts. Through this collaborative and supportive environment, supervisees are more likely to be vulnerable, reveal uncertainties, and accept suggestions and feedback (Ancis & Marshall, 2010). Also, supervisees’ confidence in their ability to provide
therapy to clients can increase with supervisors who discuss multicultural topics in supervision (Kissil et al., 2013; Vereen et al., 2008).

Ancis and Ladany (2010) provided six domains important in managing supervisors’ culturally competent practice: supervisors should (1) be active in their own awareness of personal values, biases, and worldview; (2) assist supervisees’ awareness of personal values and beliefs; (3) promote multicultural client conceptualizations; (4) monitor supervisees in utilizing culturally appropriate interventions with clients; (5) attend to multicultural processes in supervision; and (6) evaluate supervisees’ multicultural competencies. Furthermore, Soheilian et al. (2014) supported Ancis and Ladany’s (2010) model of multicultural supervision by emphasizing the importance of supervisors’ abilities to attend to multicultural discussions and guide multicultural processes in supervision. Soheilian et al. examined the relationship between supervisors’ multicultural competent interventions and supervisees’ implementation of interventions with clients. The findings suggested that supervisors who facilitated the exploration of specific cultural issues influenced supervisees to modify their treatment approach. Notably, supervisors more readily discussed issues related to ethnicity and religion/spirituality yet minimally addressed issues related to socioeconomic status and sexual orientation. The authors’ findings support the significant impact of multicultural-competent supervision on multicultural-competent counseling.

**Components of Multicultural Supervision**

Multicultural supervision can be described as follows: supervisors explicitly address race and culture as relevant aspects of trainees’ personal and professional development, and supervisors and supervisees attend to racial and cultural influences on the supervision dyad (Ancis & Ladany, 2001; Arthur & Collins, 2009; Constantine, 1997). Research highlights the
supervisor’s responsibility to initiate discussion surrounding cultural issues, including race (Sato, 2014). Supervisors’ attendance to multicultural issues in the supervisory process allows for supervisees to practice multicultural competency and/or explore their own identity development (Westefeld, 2009). Supervisors guide supervisees’ discovery of cultural identities, assumptions, and biases through the discussion of race and culture (Tummala-Narra, 2004). Thus, it is essential for supervisors to be aware of the cultural dimensions within the supervisory relationship.

Recently, authors suggested that the discussion of multicultural issues in supervision should include topics focused on intersecting identities (i.e., race, ethnicity, gender, socioeconomic status, sexual orientation, etc.) within sociopolitical context of privilege and oppression (Falender et al., 2014). Yet, these multicultural topics may not be readily explored by supervisors. Supervisors’ lack of awareness of their own cultural identities, including racial identity, have harmful effects on the supervisees’ growth (Falender & Shafranske, 2014). For example, Burkard et al. (2006) conducted a qualitative study that explored BIPOC supervisees’ experience with culturally responsive and unresponsive supervision in a cross-racial supervisory dyad. They found that in culturally unresponsive supervision, BIPOC supervisees reported cultural issues were not acknowledged, actively disregarded, or dismissed by their White supervisors. These culturally unresponsive events in supervision impacted the supervisory relationship and client treatment, suggesting that the examination of cultural issues in supervision are pertinent for positive learning experiences for supervisees.

**Supervisory Relationship**

A strong supervisory relationship (i.e., positive, trustworthy, supportive, encouraging, nonjudgmental) is important for effective clinical supervision (Beinart, 2012; Borders, 2014;
Ellis, 2010; Hall & Cox, 2009; Lambie & Sias, 2009). A strong supervisory relationship has positive effects on supervisees, such as higher supervisee self-efficacy (Gibson, et al., 2009; Watkins, 2015), greater willingness to self-disclose during supervision (Mehr et al., 2015; Ofek, 2013; Watkins, 2015), higher satisfaction with supervision (Cheon et al., 2009; Son et al., 2007), and higher supervisee and supervisor racial identity statuses (Watkins, 2015). In contrast, an ineffective supervisory alliance (supervisee perceives the therapeutic alliance unfavorably) in supervision can impact supervisees negatively in numerous ways such as increased stress levels, increased risk of burnout (Gnilka et al., 2012; Watkins, 2015), and decreased willingness to disclose information in supervision (Inman et al., 2014; Mehr et al., 2010).

The relationship between the supervisor and supervisee is identified as a significant positive mediator between supervisor multicultural competence and supervision satisfaction (Inman, 2006). Multiple factors have been identified for a culturally responsive supervisory relationship: supervisors’ openness and attention to cultural issues, recognizing critical significance of diversity, and providing a safe and supportive environment to explore cultural perspectives (Tohidian & Quek, 2017). Amongst all these factors, the critical component is the supervisory relationship, which has an important influence on supervisees’ learning (Kadushin & Harkness, 2014; Ladany et al., 2013; Westefeld, 2009). The supervisory relationship is crucial for supervisees to explore cultural issues, including one’s identity, to provide adequate services for diverse populations. Yet, an individual’s racial identity cannot be removed within supervisory relationships. Thus, exploration of racial identity statuses of both the supervisor and supervisee need to be considered when investigating supervisees’ multicultural competency.
Duan and Roehlke (2001) reported supervisors’ intentions to discuss cultural issues with their supervisees; yet, BIPOC supervisees reported a lack of cultural responsiveness from their supervisors. It is worth noting that supervisors’ intentions to discuss cultural issues are starkly different than a supervisor integrating multicultural issues throughout the entire supervisory relationship. However, it is possible for supervisees to avoid discussions of cultural issues, and supervisors may reciprocate this desire unconsciously by providing a universalist approach in supervision (Tummala-Narra, 2004).

Phillips et al. (2017) examined the perceived depth of multicultural discussions with 132 White and BIPOC supervisees in accredited doctoral programs. Results suggested that discussions of minoritized cultural identities with supervisees of marginalized groups were associated with stronger supervisory relationships. In addition, White supervisors and supervisors of color reportedly demonstrated a lack of discussion on race, racism, and White privilege with White supervisees. This study provides support that supervisors should begin the conversations surrounding race and culture in supervisory dyads.

Ancis and Marshall (2010) investigated counselor trainees’ experiences with supervision and discussions on multicultural issues through Ancis and Ladany’s (2001) multiculturally competent supervision framework. Results indicated that supervisors proactively engaged in multicultural dialogues, and, in turn, supervisees perceived that their supervisors were actively attempting to increase their understanding of their clients and of themselves. Furthermore, supervisees reported that supervisors’ disclosure of their lack of multicultural knowledge positively impacted the supervisory relationship. It is important to note that the study had only four participants, of which three were White. Similarly, another study on supervisees’
experiences of supervision and multicultural interventions stated that supervisors facilitated the exploration of multicultural issues, which, in turn, impacted client work through the supervisee’s modification of their treatment approach (Soheilian et al., 2014). Yet again, the sample included a majority (68%) of White participants (N = 102). Also, current research highlights a discrepancy within the literature on culturally responsive supervision practices. Kemer et al.’s (2018) study explored effective and ineffective supervision in beginning and expert supervisors. Results suggested that early career supervisors significantly emphasized multicultural considerations with supervisees compared to their expert counterparts. Kemer et al. suggested that these findings may be related to academic programs that emphasize multicultural competencies in beginning supervisors’ training.

Chang et al. (2003) reported the interaction of supervisors’ and supervisees’ racial identity status and its impact on the supervisory relationship. The authors developed a model specifically on White supervisors and BIPOC supervisees. This developmental approach to supervision considered the racial identity status of the supervisor and supervisee based on the models by Atkinson et al. (1998), Cook (1994), and Helms (1984). The supervisor’s racial identity status affects how the supervisor conceptualizes client issues, initiates discussions on race with supervisee, and guides supervisee’s racial identity development (Chang et al., 2003). Further research is needed to clarify supervisors’ culturally responsive practices in cross-racial supervisory dyads.

**Cross-Racial Supervision and Multicultural Competence**

The growing diversity of graduate students of color suggests that the supervisory dyad will most likely contain people of different racial backgrounds. The development of supervisees’ culturally responsive skills and multicultural orientation are facilitated in supervision.
Race

The present study uses Carter and Johnson’s (2019) definition of race defined by a person’s skin-color, physical features, and language. For example, individuals choose to identify as White, Black, Asian, Native American, and Latinx. However, some individuals choose to identify as biracial or multiracial, excluding identification with their component races. Hird et al.’s (2004) study defined race based on Helms and Cook’s (1999) two-group hierarchy socioracial system. This hierarchy divides racial groups into minoritized or majority members. This study classified participants as non-White or White based on the majority and minoritized socioracial groups, without intent to dismiss the significance of between- and within-group racial differences. Helms (2007) stated that a person’s race influences one’s socialization as a member of a dominant or oppressed group. Thus, race is linked to how it shapes people’s perceptions, emotional reactions, and behaviors towards one’s racialized self and others in social context.

It is important to recognize the difference between the constructs of race and ethnicity. As mentioned before, race is an assigned descriptor imposed on people based on physical characteristics, such as skin color (Carter & Johnson, 2019). Conversely, ethnicity can be defined as the person’s self-identified culture, beliefs, and cultural traditions (Ford & Harawa, 2010), which influences personal identity and group social relations (Baligamire Bazilazihe, 2008; Ford & Kelly, 2005) that is tied to race and used to distinguish diverse populations (Ford & Harawa, 2010). Moreover, the relationship between race and ethnicity is intersectional. Massey and Denton (1993) suggested societal forces differentially impact specific groups of minoritized people based on the interactions of race and ethnicity.
Cross-Racial Supervision

For the purposes of this study, the definition of cross-racial supervision derives from Schroeder et al. (2009). According to the authors, cross-racial supervision refers to a supervisory relationship with supervisors and supervisees who differ based on one or more cultural variables such as race, ethnicity, gender, class, sexual orientation, language, disability, and/or spirituality. Therefore, cross-racial supervision in this study refers to a supervisor who is White with a supervisee who identifies as a person of color.

Cross-racial supervision focuses on the racial and/or ethnic differences between the supervisor and supervisee, which the supervisor is usually of the dominant group (Constantine & Sue, 2007). The supervision experience of BIPOC supervisees can parallel their racial experience within the racial climate of the larger society, such as American society (Sukumaran, 2016). BIPOC supervisees in cross-racial supervisory dyads have higher sensitivity levels to cultural/racial issues than White supervisors (Schroeder et al., 2009). According to Constantine and Sue (2007), the counseling supervisory relationship is not impervious to racism, even though most White supervisors do not intentionally act in a racist manner toward BIPOC supervisees. Currently, there are mixed results in BIPOC supervisees’ experiences within cross-racial supervisory relationships.

Nilsson and Duan (2007) examined the perspectives of 69 BIPOC supervisees on the relationship between training level, self-efficacy, perceived prejudice, and role difficulties in cross-racial supervisory dyads. The results stated perceived prejudice was correlated with uncertainty of supervisor’s expectations and evaluations of being a supervisee. Similarly, Chan et al. (2015) qualitatively explored the experiences of nine faculty mentors working with 15 ethnic minority doctoral students in counseling and clinical psychology programs. Results suggested
that both mentor and mentee’s relationships were simultaneously shaped by their surrounding environments, such as sociocultural and personal variables. These studies’ findings suggest that the supervisory experience is not isolated from the social contexts in which people of color live.

A qualitative study by Brown and Grothaus (2019) explored cross-racial trust with 10 Black supervisees and 10 White supervisors. BIPOC supervisees reported that their past experiences with White people influenced their ability to trust their White supervisors, such as receiving family messages since childhood that White people are untrustworthy and prior racist experiences with White people. Results indicated that BIPOC supervisees experienced feelings of self-doubt stemming from internal conflicts of certain experiences in the predominately White field of counseling. BIPOC supervisees attributed their feelings of self-doubts to internalized racism, which was defined as not feeling intellectually or clinically equal to White peers. The students faced pressure to suppress their ethnic identity by acting in ways aligned with White cultural standards (E. M. Brown & Grothaus, 2019). Similarly, a phenomenological study explored 19 Black female therapists’ experiences within cross-racial clinical supervision, and the Black female therapists described experiences of direct and indirect racism in supervision (Dupiton, 2019). Black female therapists reported feeling unsafe with their White supervisors because of the supervisor’s White privilege, minimization of racism, and the supervisor’s unwillingness to be authentic within the cross-racial supervisory dyad. The BIPOC supervisees recognized the discomfort of their White supervisors around the topic of race, power, and privilege. Some BIPOC supervisees matched their supervisors’ lack of willingness to discuss race by steering away from being vulnerable in the supervisory relationship. Yet in contrast, some BIPOC supervisees reported constructive encounters with White supervisors such as their
ability to validate and remain present with them, which allowed for the space of further exploration and vulnerability (Dupiton, 2019).

Additionally, E. M. Brown (2018) conducted a phenomenological study on cross-racial supervision focusing on trust factors between 10 Black doctoral students and their White supervisors within the counseling profession. Some Black doctoral students reported that their positive experiences with White supervisors provided a type of corrective emotional experience regarding their cultural mistrust for White people. Participants shared that they held both positive and negative perceptions of White people (i.e., they want to help and they have ill motives) based on messages they received in childhood and that these perceptions were corrected by their experience with a White supervisor. These Black doctoral students reported trusting their White supervisors, which contributed to their psychological, social, and political growth.

Prior research supports the notion that supervisors and supervisees in a cross-racial dyad can build a satisfactory supervisory relationship (E. M. Brown, 2018; Duan & Roehlke, 2001; Dupiton, 2019). Yet, significant differences exist in the efforts of White supervisors and supervisors of color to address cultural differences (Hird et al., 2004; White-Davis et al., 2016). Hird et al. (2004) examined self-reported multicultural supervision competency with 422 supervisors in racially similar and cross-racial supervisory dyads. Out of the 422 supervisors, there were 295 White supervisors/White supervisee dyads, 21 supervisors of color/BIPOC supervisees dyads, 95 White supervisors/BIPOC supervisees dyads, and 31 supervisors of color/White supervisee dyads. Multicultural competency was measured with a mailed researcher-developed questionnaire, a standardized measure, and a demographic form. The authors indicated that White supervisors reported less multicultural competence and discussed cultural issues less frequently compared with supervisors of color. Hird et al. (2004) suggested that White
supervisors may feel less multiculturally competent because they take a universalistic stance and might be concerned about self-serving initiatives, may believe that multicultural issues are unimportant, and may feel inadequately trained. White supervisors discussed racial identity and cultural issues more frequently with BIPOC supervisees than with White supervisees. However, it is important to note the limitation in the study that out of the 422 supervisors recruited, only 126 supervisors were in cross-racial supervisory dyads.

**Multicultural Competence**

Sue and Sue (1999) defined competency as a person’s ability to apply and use a set of knowledge, abilities, and skills necessary to perform tasks in a work setting. Smith et al. (2006) defined multicultural competence as the interaction of knowledge, abilities, and attitudes related to a therapist’s self-awareness, empathy towards the client’s worldview, and culturally appropriate treatment. However, little is known about cross-racial supervision and its impact on BIPOC supervisees’ multicultural competency development.

The current literature highlights the discrepancy in therapists’ multicultural competency within cross-racial counseling dyads. For example, researchers have examined experiences of racially minoritized clients in cross-racial counseling to further understand and address potential challenges and needs. Chang and Berk (2009) conducted a qualitative investigation into the experiences of racial minoritized clients working with White clinicians. Racial minoritized clients described engaging with their White clinicians in race-neutral terms while acknowledging race-related issues in the outside world. Similarly, Chang and Yoon (2011) explored racial minority clients’ experiences with White clinicians and reported that the race mismatch was a barrier to forming a therapeutic relationship because of the clients’ beliefs that their White clinicians would not understand their lived experiences as people of color. Initiating discussions
about race and racism is necessary within the therapy room, and it is a skill that requires practice within clinical supervision. Supervision can influence client outcomes in positive and negative ways, and this is partly due to the fact that supervision is the main avenue of promoting counselor competencies in students (Ladany & Inman, 2012). Thus, cross-racial supervision can be extremely beneficial to a clinician’s development in the field of multicultural counseling to address today’s diverse client population (Constantine et al., 2005).

**Dialogues About Race in Cross-Racial Supervision**

The current literature on addressing the conversation of race within supervision suggests it is both the supervisor’s and supervisee’s responsibility for initiating and maintaining the dialogue surrounding race (Ayo, 2010; Estrada et al., 2004). However, it is crucial to consider the position of power in any relationship, such as the supervisory relationship. Consequently, it is the supervisor’s responsibility to initiate the discussions about race with supervisees (La Roche & Maxie, 2003; Pendry, 2017). Hird et al. (2001) found that BIPOC supervisees felt their supervisors’ intentions to discuss race were well intended yet limited through a dominant-culture perspective. Moreover, the importance of discussing race in supervision is viewed differently by people of color and Whites (Burkard et al., 2006; White-Davis et al., 2016).

Schen and Greenlee (2018) qualitatively examined the dialogues of race within cross-racial supervisory dyads. Both White supervisors and BIPOC supervisees described experiences of fear of vulnerability to initiate the discussion on race. BIPOC supervisees experienced the White supervisor’s silence on discussing race as a form of being complicit with basics of oppression. If the topic of race was discussed, White supervisors reported feeling withdrawn from the supervisory relationship. Yet, BIPOC supervisees felt validated and a decreased sense of anger within the supervisory relationship (Schen & Greenlee, 2018).
Another study of 57 cross-racial supervisory dyads reported that White supervisees and supervisors found having conversations about race within supervision less beneficial compared to supervisees and supervisors of color. Thus, the White supervisors refrained from having direct conversations about cultural factors (White-Davis et al., 2016). This silence on race, racism, and White privilege permits harmful biases to persist in both White and BIPOC supervisees (Schen & Greenlee, 2018). It seems that there are quite a few studies that have explored the impact of racial dialogues, as it pertains to supervisory relationships, but not with supervisees who are passing as White.

**Ethnic Minority Racial Identity Model: Cross’s Model in Cross-Racial Counseling Dyads**

People of Color racial identity model, originally developed as the Nigrescence model of African American identity (Cross, 1971), described the developmental stages that Blacks in America work through with the goal of obtaining a psychologically healthy Black identity (Cross et al., 1991). The Nigrescence model of African American identity described five stages: pre-encounter, encounter, immersion–emersion, internalization, and internalization commitment (Cross, 1971). Cross revised his model (Cross et al., 1991; Cross & Vandiver, 2001) and reduced the number of stages to four, included the concept of race salience, and identified three identity clusters in the pre-encounter stage, two identity clusters in the immersion–emersion stage, and two or more identities in the internalization stage.

The pre-encounter stage describes the three identities with which a person of color can identify: pre-encounter assimilation identity, pre-encounter miseducation identity, and pre-encounter self-hatred identity (Cross & Vandiver, 2001). In this stage, a person of color absorbs the beliefs and values of White culture and de-emphasizes one’s own racial group membership. Within this stage, an individual is unaware of race or racial implications, thus having low
salience in race and racial identity (Cross et al., 1991). The encounter stage is categorized by an encounter with discrimination or racism that causes a shift in one’s identity as a member of a group targeted by racism. Immersion–emersion stage includes two identities with which a person of color can identify: anti-White and intense Black-involvement. In this stage, an individual either chooses to surround oneself with one’s own culture (immersion) and avoid everything White or Eurocentric (emersion), or actively seeks out opportunities to explore their racial background. Also, race and racial identity have high salience in this stage (Cross et al., 1991).

The final stage, internalization, is characterized by a shift in which individuals have adopted one of three identities: Afrocentric, biculturalist, and multiculturalist (Cross et al., 1991; Cross & Vandiver, 2001). Afrocentric identity consists of pro-Black and non-racist orientation. The biculturalist identity integrates a Black identity with a White or other salient cultural identity. The multiculturalist orientation integrates Black identity with two or more salient cultural identities. While race continues to have high salience in this stage, individuals’ levels of comfort with racial identity translate into a commitment to the racial group’s concerns. In total, Cross and Vandiver’s revised model is characterized by eight Black racial identities: three in pre-encounter stage (assimilation, miseducation, and self-hatred as subcategories), two in immersion–emersion stage (anti-White and intense Black involvement), and three in internalization stage (Afrocentric, biculturalist, multiculturalist subcategories). Thus, BIPOC supervisees’ racial attitudes might be an influencing factor with White supervisors. Also, BIPOC supervisees’ reactions to racial dialogue may be influenced by their racial identity, specifically the stage they endorse in their racial identity.

A study by Cokley and Vandiver (2012) suggested further exploration of African Americans’ racial identity through the examination of the construction of one’s racial identity is
necessary. Helms (1990) discussed the differences between racial identity and race, implying the significance of understanding social dyadic processes of racial identity rather than the demographic characteristic of race. This inferred that people’s racial category (e.g., Black, Hispanic, Asian, etc.) based on their skin tone alone, does not reveal how a person thinks and feels about his/her/their race or their level of awareness of their own cultural biases and prejudices. This has practical clinical implications for clinicians in training. For a clinician to effectively explore the racial identity of clients of color, an understanding of racial identity theory is crucial, which could be developed in supervision during graduate school training.

Exploration of racial identity models should be discussed in supervision. Incorporating Cross’s racial identity model with clinical supervision can assist with supervisors’ understanding of their BIPOC supervisee’s racial identity (Cook, 1994; Ladany et al., 1997). Supervisors should explore ways in which a BIPOC supervisee constructs their racial identity (Bhat & Davis, 2007; Lo, 2010). Considering the power dynamic in a supervision relationship, it is recommended for supervisors to remain attuned to the racial dynamic in supervision (Jernigan et al., 2010). However, BIPOC supervisees’ perspectives were not examined in previous studies on the topic of racial identity. It is possible that BIPOC supervisees would have different recommendations for their supervisors, particularly White supervisors, to address the discussion of racial identity in supervision.

Both racial/ethnic minority students and White students view racial/ethnic-minority supervisors as more competent than White supervisors (Bhat & Davis, 2007); supervisees should not assume that a BIPOC supervisor is knowledgeable about issues of race without consideration of racial identity development (Jernigan et al., 2010). Schroeder et al. (2009) suggested that racial/ethnic-minority supervisors’ racial identity may effectively facilitate the supervisee’s
clinical development because of their understanding of the importance of racial and cultural issues. Supervisors’ racial identity influences the supervisory working alliance and supervisees’ multicultural competency (Schroeder et al., 2009). Thus, exploration of racial identity models for both racial/ethnic minority and White individuals is necessary within the context of supervision/supervisory relationships.

**White Racial Identity Model: Helms’s Statuses of Identity Development**

Helms’s (1984; 1995) White racial identity development model conceptualized White racial identity development movement through two phases: abandonment of racism (Statuses 1–3) and development of a nonracist White identity (Statuses 4–6). The five statuses are characterized by a different information-processing strategy (IPS), which reflects certain attitudes, behaviors, and feelings the individual uses to reduce discomfort with race-related issues (Helms, 1995). Helms’s White racial identity development model has been revised; moving forward Helms’s White racial identity model (1995) will be referred to.

The first status, contact status, is categorized by a White person’s blind acceptance of imposed racial categorizations and lack of awareness of themselves as racial beings. The IPS for this status is obliviousness and denial of White privilege (Helms, 1995). Next, the disintegration status is when White individuals experience increased awareness of race and racism leading to confusion about their own group membership due to their conflicting feelings of comfort and discomfort about race. The IPS for this status is suppression of information and ambivalence (Helms, 1995). The third status, reintegration, is defined as idealizing White society and endorsing anti-Black/pro-White beliefs. The IPS for this status is selective perception and negative out-group distortion (Helms, 1995). In the fourth status, pseudo-independence, a White individual experiences a single or series of events challenging their racist views while
acknowledging the role of Whites in perpetuating racism. People in this stage are interested in understanding racial differences between White and minoritized groups but on an intellectual level rather than a deep emotional understanding. The IPS for this status is selective perception and reshaping reality (Helms, 1995). The fifth status, immersion–emersion, is characterized by an exploration of what it means to be White, confrontation of racial biases, and participation in racial activism. The IPS for this status is hypervigilance to racism and reshaping (Helms, 1995). Finally, the last status, autonomy, is characterized by a positive racial group commitment defined by the ability for a White individual to relinquish racial privilege through education and respect of racial/cultural differences and similarities. The IPS for this status is flexibility and complexity (Helms, 1995).

In a study exploring levels of racial identity with White supervisor and White supervisee dyadic relationships, Constantine et al. (2005) found White supervisors with more mature White racial identity schemas are more likely to explore racial and cultural issues in supervision. Additionally, White supervisors with less mature White racial identity schemas were less likely to adequately explore racial and cultural issues in supervision (Constantine et al., 2005). White supervisors who are not racially conscious may negatively impact their supervisee’s clinical experience through their lack of awareness of racial and cultural issues. Constantine et al. (2005) proposed that White supervisors with minimal racial consciousness may dismiss racial issues presented in supervision, misdiagnose presenting concerns of clients of color because of lack of knowledge of cultural issues, and develop ineffective treatment plans for clients of color. Therefore, a well-intentioned White supervisor who fails to recognize their implicit biases may emotionally and psychologically hurt BIPOC supervisees. There are limited studies exploring White supervisors’ multicultural competency within cross-racial supervisory dyads (Chang et al.,
Further research is needed to address the relationship between racial identity development, specifically within BIPOC supervisees’ and White supervisors’ dyadic relationships in the field of counseling and psychotherapy.

Biracial Identity

In 2010, approximately nine million Americans identify with two or more races (Parker et al., 2015); thus, it is important to discuss biracial identity development in the context of this paper. Specifically, biracial is defined by a person whose parents identify as a different race from one another (Stohry & Aronson, 2021). Models for the development of healthy biracial identity were pioneered by Poston (1990) and Root (1990). Root’s model for biracial individuals included five levels: personal identity, choice of group categorization, enmeshment/denial, appreciation, and integration. The first level, personal identity, is distinguished by an individual’s personal identity is not linked with a specific racial group. Choice of group categorization is characterized by an individual’s choice to include both parents’ cultural backgrounds or one of the cultural backgrounds. Level of enmeshment/denial is defined by an individual’s inability to identify with all aspects of their culture, which may lead to negative feelings such as anger and shame. The fourth level labeled as appreciation is marked by an individual’s willingness to broaden their racial group through education and self-exploration. Lastly, integration involves a multiracial existence. Biracial individuals who do not strongly identify with a stable biracial identity or no racial group are more likely to have higher depression scores in comparison to biracial individuals with an integrated racial identity who have lower depression scores and higher self-esteem (Lusk et al., 2010).

Stohry and Aronson (2021) explored the passing as White identity with biracial and multiracial individuals. The researchers highlighted the role in which White supremacy plays in
an individual’s biracial identity development. Stohry and Aronson suggested that biracial individuals who pass as White “can experience privilege while simultaneously experiencing marginalization or exoticism” (p. 5). Furthermore, Albuja et al. (2018) coined the term *contextual racial presentation* (CRP) to “describe identity changes that are influenced by the immediate context” (p. 132). Khanna and Johnson (2010) stated that individuals who present as only one race in specific contexts are not misrepresenting themselves because of theories on biracial identity development, which emphasize that biracial people often identify as full members of both racial groups. This choice to present in various racial groups is based on a choice in biracial individuals’ identity development due to the constant change in their identification across time (Sanchez et al., 2014; Wilton et al., 2013). However, Albuja et al. found that biracial individuals are more likely to encounter racial biases and stereotypes when identifying with one racial group.

**“Passing” Racial Identity and Acting White**

The act of crossing the color line by passing for White has been discussed in the context of race relations in the United States, where “some African Americans saw passing as an escape from a life of misery and degradation and as a viable route to success” (Glass, 2010, p. 71). Between 1880 and 1925, the phenomenon of passing as White emerged, coinciding with the implementation of Jim Crow laws (Daniel, 2002). Passing as White can be a means of achieving social status and a liberating strategy (Kennedy, 2001) associated with the privileges affiliated with being White (Goffman, 1990). Racial passing is understood as the experience in which a person of one race presents oneself as White and adopts specific roles from which they would be barred by dominant social standards (Kennedy, 2003). Furthermore, racial passing is defined as a
person’s ability to pass based on personal skin shade, facial features, and having similar phenotypic approximation to Whiteness (Daniel, 1992; Goffman, 1990).

Notably, racial passing has been studied in Japan with multiracial individuals who have one Japanese parent and one non-Japanese parent. In Japan, people are scrutinized for not being Japanese enough (Fackler, 2015). Törngren (2018) conducted semi-structured interviews with 18 multiracial individuals who racially pass as Japanese. The ability to pass as Japanese allowed these individuals to gain access to certain privileges and choices ascribed to the majority culture. Participants reported their ability to pass was strongly associated with visible phenotypical features and their names. Similarly, this form of racial passing in Japan can be seen in White-majority countries. Goffman (1963) conceptualized that people of color might choose to conceal information about their stigmatized racial identity by passing as White and/or anglicizing their name to cover their ethnicity. People from marginalized backgrounds can conceal their stigmatized identities through multiple ways: arrangement of physical settings, cosmetic face work, arrangement of personal appearance, selective involvement with people/groups, and verbal construction (Kennedy, 2003; Snow & Anderson, 1987). Khanna and Johnson (2010) suggested to qualify as passing, the person’s identity has to contradict how they understand themselves racially. Also, passing as White is linked with high social costs such as separation from family and loneliness (Gatewood, 1990). Multiple studies have suggested the perceptions of people in different racial groups rely on the categorization of people into groups. Concurrently, these categorizations are a precursor to impression formation, intergroup stereotyping, and prejudice (Macrae & Bodenhausen, 2000; Xie et al., 2019). Therefore, understanding passing racial identity is an important concept to further investigate with BIPOC supervisees’ experiences in cross-racial supervisory dyads.
Harris (2018) explored the contextual factors (i.e., socioeconomic status, religion, gender) that influence people of color’s decisions to self-identify as White. Harris suggested that bi-racial Black Americans can only pass for White if they are light-skinned, and they closely resemble European Americans. Similarly, bi-racial Latinos can pass for White based on the lightness of their skin color, yet they are more likely to self-identify with White-only identity because of social networks and socioeconomic status. Harris suggested Latino immigrants desire to self-identify as White “in order to be associated with the privilege that afford upward social mobility” (p. 2077). For bi-racial Asian Americans, those who self-identify as only White were “less likely to report a strong sense of Asian socialization and were more likely to uphold their majority heritage while disparaging their minority heritage than those who identified as Asian White or Asian” (Harris, 2018, p. 2080). Harris’s study highlighted the reasonings behind bi-racial individuals’ choice in passing as White and examined the influences of choice or societal factors.

Black’s (2015) study on the concept of passing as White in bi-racial Asian-White college students found that racial identity is composed of information from both self-perceptions and others’ appraisals and how these views impact individual behaviors. Furthermore, participants in this study engaged in voluntarily passing as White or as Asian under different circumstances depending on the attainability of resources for either passing as White or Asian or to avoid discrimination. Black asserted that “passing is a strategy for which there is some perceived gain” (p. 106). Similarly, Khanna and Johnson (2010) explored the strategies 40 Biracial Black–White people used to pass aspects of their racial ancestries and the individual and structural-level factors that limit the effectiveness of some strategies. The authors concluded that biracial people had agency in asserting their preferred racial identities to others, and they used strategies such as:
verbal identification/disidentification, selective disclosure, manipulation of phenotype, highlighting/downplaying cultural symbols, and selective association. However, this study found a majority of participants described their experiences in which they pass as Black, rather than White. Studies have suggested that people who are lighter skinned are viewed with more positive personality traits and people with darker skin with negative personality traits (Blair et al., 2002; Maddox & Gray, 2002). Furthermore, people may inquire about a person’s racial identification to make sense of bi-racial/multiracial individuals’ phenotypic racial appearance (Johnston & Nadal, 2010). These racial-identification inquiries may force a person with a passing racial identity to disclose their racial heritage or identity, thereby subjecting them to racial discrimination (Salahuddin & O’Brien, 2011; Sanchez & Bonam, 2009). This phenomenon can occur in the supervision context; thus, its importance is relevant.

Cunningham (1997) qualitatively explored the racial identity formation in 11 Black participants who identified as light-skinned. Participants reported marginalized experiences from both people of color and Whites. Light-skin Blacks’ race was viewed as a choice by others because of their ability to pass as White. One participant stated, “I love being unidentifiable…People expose themselves for who they are. I mean, I get to really meet the individual person without any of the stereotypes in their head coming out” (Cunningham, 1997, p. 398). People who pass as White experience situations where racist comments are made and have to decide how to deconstruct racist comments. One participant stated, “I was exposed to more racist comments than darker-skinned Blacks because Whites expect us to receive it, accept it, digest it and support it” (Cunningham, 1997, p. 394). People who pass as White hold the choice to dismantle racist remarks made by Whites. This decision-making process in combatting or ignoring racist remarks leaves people who pass as White feeling frustrated and shameful.
Yet, the experiences of BIPOC supervisees who pass as White in supervision contexts are unknown as well as how they manage their racial identities in day-to-day interaction with their supervisors.

**Identity as a Process: Individual Agency and Identity Work**

The symbolic interactionist framework (Blumer, 1969) states that race and identity happen from a social process with meanings that are created and modified through social interactions with others in society. Both society and the individual are active agents in shaping one’s racial identity. Racial identity salience is a measure of a person’s ability to move along a spectrum of racial identity (Hurtado et al., 2015). At any time, a person with a predisposition to project their race is associated with racial identity salience (King, 2018). Hence, one type of racial performance is racial passing in which people shift their racial identities within and across social contexts to access the privileges and statuses of another (Lloréns, 2018). For example, a person of color who is racially ambiguous can be seen as White and has the ability to use specific words and tones to assist in racially passing as White (Lloréns, 2018). This concept of racial passing endorses the notion that race is “a fluid, arbitrary, and socially-constructed category based on phenotypes” (Törngren, 2018, p. 754).

According to Sveningsson and Alvesson (2003), identity work is defined as the process through which one forms, repairs, maintains, strengthens, or revises the “constructions that are productive of a sense of coherence and distinctiveness” (p. 1165). There are different types of identity work, which include a person’s ability to counteract the perception of risk and opportunity versus perceived identity resources. People consider goals, values, and beliefs when forming their identities (Meca et al., 2015).
Furthermore, for people with a passing racial identity, their identity work may be influenced by the associated privileges with racial passing in certain situations. Törngren (2018) suggested people who can pass as White may experience emotional and psychological difficulties related with misrecognition. Misrecognition occurs when there is a gap in how one sees oneself compared with how one is perceived by others (Törngren, 2018). For people of color who pass as White, misrecognition might occur when they see themselves as minoritized group members, and it conflicts with how others perceive them, such as being White. Misrecognition can be harmful to identity development because of the potential impact on a person’s ability to develop the self-esteem and self-respect, which are necessary conditions for developing an undistorted healthy identity (Martineau, 2012). Notably, Song (2003) suggested the importance of recognizing that people of color who pass as White may or may not have control over their ability to choose to pass, also known as passing by default (Samuels, 2013). Yet, there are no studies to date exploring the identity work of BIPOC supervisees who pass as White.

**Impacts of Racial Identity Development on Multicultural Competency in Supervision**

According to the literature on racial identity status (Atkinson et al., 1998; Cook, 1994; Helms, 1984) in supervision dyads, there are three resulting types of supervisor relationships: parallel, cross-progressive, and cross-regressive (Chang et al., 2003). Parallel supervisory relationships consist of similar racial identity statuses between both supervisor and supervisee in a supervision dyad. Implications of a parallel relationship are: avoidance of discussions of racial and cultural issues within low racial identity status dyads or actively encouraging and promoting discussions of race within high racial identity status dyads (Chang et al., 2003).
In cross-progressive supervisory relationships, the supervisor has a higher racial identity status than the supervisee. Within this supervisory relationship, the supervisor recognizes racial and cultural issues and is willing to discuss these issues with the supervisee (Chang et al., 2003). In a cross-regressive supervisory relationship, the supervisee is more developed in their racial identity development than the supervisor. Supervisee is aware of and raises concerns of racial and cultural issues in supervision. However, because of the supervisor’s lower racial identity status, they may be unaware of racial and cultural issues or provide a stereotypical approach to the scenarios (Chang et al., 2003).

Vinson and Neimeyer (2003) conducted a follow-up study with 44 counseling psychology students from APA approved programs to explore the possible link between multicultural counseling competency and racial identity development. The participants were 31 White students and 13 non-White students (4 African Americans, 2 Hispanics, 3 Asians, and 4 others). Five measures were utilized in the study: Multicultural Counseling Awareness Scale-Form B, either White Racial Identity Attitudes Scale or People of Color Racial Identity Attitudes Scale, Motivation to Control Prejudiced Reactions Scale, and a demographic questionnaire. The authors reported that in White students, higher levels of multicultural knowledge were positively correlated with more advanced levels of racial identity development. Also, White students with lower levels of racial identity development reported lower levels of multicultural awareness and skills. No consistent relationship was found between non-White students’ level of racial identity and multicultural counseling knowledge. Various limitations were noted in the study, including a small sample size of non-White participants and the use of self-report instruments.

Ladany et al. (1997) conducted a study of 116 doctoral and master’s-level counselor trainees, focused on supervisees’ racial identity statuses and their relationship to multicultural
competency. Results suggested that supervisees who perceived their supervisors with advanced levels of racial identity positively influenced their multicultural development. However, similar to Vinson and Neimeyer’s (2003) study, this study lacked diversity in the sample, which comprised 75 White, 20 African American, 11 Asian American, 8 Latino, 1 Native American, and 1 biracial students.

Jernigan et al. (2010) qualitatively explored BIPOC supervisees’ supervision experiences with supervisors of color. The study assessed participants’ experiences discussing topics of race and culture in the supervision dyads. The study focused on six graduate students of color studying in either a master’s or doctoral counseling psychology program. Results showed the supervisory relationship, between supervisors of color’s less developed racial identity status and BIPOC supervisees’ more developed racial identity status, had negative consequences for the BIPOC supervisees’ training experience. Similar racial identity statuses between supervisors of color and BIPOC supervisees reported growth-fostering experiences including discussions of race and challenging supervisees to engage in these racial dialogues. It is important to note one limitation of this qualitative study, which is that the students did not participate in an in-person interview but instead completed the semi-structured survey online.

Another study explored the relationship between racial identity attitudes and multicultural counseling competency with practicing mental health counselors (Middleton et al., 2005). Racial identity development was characterized as high or low based on the five statuses of the White racial identity model (Helms, 1984). The study reported positive correlations between levels of racial identity development and self-perceived multicultural counseling competency. The sample size was 412, but the study only recruited White professionals. Also, the study quantitatively explored the participants’ experiences through three measures: White Racial Identity Attitude
Scale (Helms & Carter, 1990), Multicultural Counseling Inventory (Sodowsky et al., 1994), and Survey of Demographic/Training Data (Middleton et al., 2005). As previously described, supervisor’s ability to provide a space for cultural discussions can be correlated with one’s racial identity awareness. Thus, supervisors in the early stages of their racial identity development may inadvertently harm supervisees’ clinical training. An exploration of supervisees’ racial identity development within cross-racial supervision dyadic relationships is sparse.

**Cultural Humility in Supervision**

The concept of cultural humility has been defined as the “ability to maintain an interpersonal stance that is other-oriented in relation to aspects of cultural identity that are most important to the client” (Hook et al., 2013, p. 354). The importance of considering the role of cultural humility in psychotherapy has been established (Falender et al., 2014; Hook et al., 2013; Owen et al., 2014). For supervision, Hook et al. (2016) proposed a cultural humility model for supervision aimed at supervisors stating that it is essential for “supervisors to be effective and to build strong relationships with culturally diverse supervisees” (p. 153). This model proposes that supervisors attempt to not view their beliefs, values, and worldviews as superior through remaining open to supervisees’ beliefs, values, and worldview and practice self-reflection to gain an awareness of their lack of multicultural knowledge and understanding of supervisees’ multicultural background and attune self to their supervisees in order to understand their experiences. Research has supported that supervisors’ cultural humility lends to the development of a strong therapeutic alliance with supervisees (Constantine & Sue, 2007) and allows supervisees to learn in a culture-friendly space (Inman & DeBoer Kreider, 2013). Additionally, research has suggested that culturally humble supervisors attempt to avoid assumptions that may
be offensive to racial/ethnic minority supervisees, and they attempt to cultivate an interest and curiosity in the supervisee’s perspective (Corey et al., 2010; Patel, 2012; Tsui et al., 2014).

For purposes of this study, Hook et al.’s (2016) cultural humility in supervision model was utilized as a conceptual framework for understanding BIPOC supervisees’ experiences in cross-racial supervision. Hook et al.’s (2016) model suggested that supervisors who adopt a culturally humble perspective will initiate conversations about identity and cultural diversity in supervision. Furthermore, Hook et al.’s (2016) supervision model provided a theoretical framework for interpretation of the supervisory relationship in a cross-racial supervisory dyad. No first-hand narrative or data about the supervisor were gathered.

**Multicultural Competence in Clinical Supervisors**

Supervisor multicultural competence has been defined as supervisor’s awareness, knowledge, and skills with working with culturally diverse supervisees and their clients (Ancis & Ladany, 2001; Crockett & Hays, 2015; Hird et al., 2004). Supervisors display multicultural competence by showing interest in learning about supervisees’ cultural backgrounds and addressing cultural differences (Ancis & Marshall, 2011). Research has suggested that supervisors’ multicultural competence may foster a strong supervisory working alliance (Burkard et al., 2009; Crockett & Hays, 2015). Additionally, studies have associated the development of supervisees’ cultural awareness in supervision with a strong supervisory working alliance (Bennett et al., 2012; Crockett & Hays, 2015). The importance of multicultural competence in clinical supervisors is crucial for BIPOC supervisees’ clinical development.

Clinical supervisors are presented with challenges while engaging in the process of integrating multicultural perspectives into supervision. This is, in part, due to the fact that the structure of clinical supervision and psychotherapy is deeply rooted through a traditional
Western perspective (Sue & Sue, 2012). Research has suggested that supervisors who might not have been trained in multicultural counseling are less likely to engage in cultural discussions and express difficulties with raising racial issues with supervisees (Bhat & Davis, 2007; Hird et al., 2004). A defining feature of multicultural competence in clinical supervisors is their ability to acknowledge their own cultural biases (Bernard & Goodyear, 2014. A multiculturally competent supervisor is more likely to integrate the practice of multicultural literature in clinical supervision with supervisees (Constantine et al., 2001). Moreover, Arredondo and Rosen (2007) stated clinical supervisors need to initiate conversations from a social justice perspective in supervision to enhance supervisees’ multicultural competency and supervision experiences.

A multiculturally competent supervisor continues their training in multicultural competency beyond graduate school. Behrnd and Porzelt (2012) emphasized the importance of supervisors to have an understanding of how marginalized populations are treated within the sociopolitical systems in the United States. The emphasis of multicultural competency as a dynamic learning process has been highlighted in the literature and is crucial for multicultural supervision (Martin & Vaughn, 2007). Also, supervisors are expected to initiate conversations about race and other cultural issues as they promote open-mindedness within the supervisory relationship (Chiu et al., 2013). Multicultural competence in clinical supervisors could be perceived differently among BIPOC supervisees with a passing racial identity and further research is needed.

**Chapter Summary**

There is limited research on how BIPOC supervisees experience supervision with a White supervisor or how they experience racial and cultural issues within the cross-racial supervisory relationship. The literature reviewed in this chapter highlights factors, such as racial
identity development status and perceived multicultural competency, which may influence the supervisory relationship between BIPOC supervisees and White supervisors. Previous literature mentioned in this chapter utilized quantitative methodological approaches, such as Likert-scale questionnaires and standardized measurement scales. Also, limited empirical research has explored supervisees’ or supervisors’ experiences through a qualitative framework. Additionally, there are no studies to date on the experiences of BIPOC supervisees’ passing racial identity within cross-racial supervisory dyads. One goal of this study is to provide insight into BIPOC supervisees’ experiences to develop an understanding of how their cross-racial supervisory relationships may impact mental health clinicians and clients in psychotherapy.
CHAPTER III

METHOD

The purpose of this study was to explore the following with BIPOC supervisees who racially pass as White: (a) experience with a White clinical supervisor, (b) understanding of multicultural competency through discussions of race and cultural issues within supervision, (c) perception of how these racial discussions impact the relationship with their White supervisor, (d) perspective on how to strengthen the relationship between supervisee and supervisor, (e) racial identity development with a passing racial identity, and (f) the passing racial experience. This chapter will describe the paradigm, research design, participants, interview, procedure, and plan for analysis; it will also address issues of validity, researcher reflexivity, and limitations.

Research Design

According to Ponterotto (2005), qualitative methods include procedures to describe and interpret individuals’ subjective experiences in their own words. Qualitative approaches utilize empirical methods such as data collection, analysis, and data interpretation/observations (Ponterotto, 2005). Prior research on cross-racial supervisory relationships focused on supervisors’ perspectives of the supervisory relationship, with minimal attention to BIPOC supervisees’ perspectives. Exploration of BIPOC supervisees’ subjective experiences was stimulated by the interactive researcher-participant dialogue, specifically seen in qualitative research (Ponterotto, 2005). Through a qualitative framework, this study worked from a constructivist–interpretivist research paradigm enabling the interpretation of the participants’ experiences. A constructivist–interpretivist research paradigm assumes multiple and equally valid realities, which are constructed within an individual’s thought process (Ponterotto, 2005).
Within a constructivist–interpretivist research paradigm, the meaning of BIPOC supervisees’ experiences was reviewed in depth with mutual construction between researcher and participants (Creswell, 1998; Morrow, 2005) using a phenomenological approach (Creswell, 2007). Phenomenological methodology is an approach to qualitative research in which data is collected from people who have experienced the phenomenon in order to develop a comprehensive description of the essence of the experience for all (Creswell, 2007; Moustakas, 1994). According to Moustakas, phenomenological methodology is appropriate for studying the cross-racial supervision process because of its reliance on participants’ lived experiences and the significance they made of these experiences. A philosophical assumption of phenomenology emphasizes the researcher’s ability to bracket, or put aside, preconceived theories and attitudes until they are found through the current phenomenon (Creswell, 2007). Also, the phenomenological approach requires exploratory questions on the individual’s experiences with the phenomenon and the contexts/situations that influence the experience. This study utilized semi-structured interviews composed of open-ended questions (Moustakas, 1994) to gather data about BIPOC supervisees’ experiences with cross-racial supervision dyads to further understand the common experiences of supervisees pertaining to their clinical experiences (Creswell, 2007).

**Procedure**

This study utilized a combination of purposeful (Patton, 1990) and convenience sampling to recruit participants. Purposeful sampling in qualitative research allows for the researcher to discover, understand, and gain insight from a specific population (Merriam & Tisdell, 2016). Also, convenience sampling methods were utilized because the participants for this study may be reluctant to share their experiences due to their status of doctoral students. Participants were recruited by posting on the listserv/discussion forums of various professional organizations such
as the American Psychological Association (APA Task force on Race and Ethnicity Psychology Competency Guidelines; Ethnicity & Cultural Diversity; Multicultural Guidelines Task Force Forum), Society for the Psychological Study of Culture, Ethnicity and Race, Eastern Psychological Association, and New England Psychological Association. Doctoral students were encouraged to forward the information to their fellow doctoral students. Participants received monetary stipends of $20 for each completed interview.

Once people demonstrated interest in participating in the study, participants received a screening questionnaire via email to ensure they met inclusion criteria. Potential participants who met inclusion criteria were sent, via email, an informed consent form and demographic form (see Appendix B). Individual interviews were scheduled with the participant after completion of the previously mentioned forms.

A brief demographic form (see Appendix B) was utilized in this study. The demographic form included questions regarding age, gender identity, racial group identity, academic program, previous work with White supervisor(s), self-identifying with a passing racial identity, current job title, length of time working with current supervisor, frequency of supervision, length of supervision sessions, and practicing state. Table 1 (see Appendix C) provides brief demographic information that was obtained from the demographic form.

Within the phenomenological approach, individual in-person interviews were conducted in order to best capture the intimate experiences of the participants (Smith et al., 2009). Both Merriam and Tisdell (2016) and Moustakas (1994) suggested conducting open-ended and less structured interviews in qualitative investigations. Thus, semi-structured virtual interviews were the method of data collection. The semi-structured individual interviews included an interview guide with flexible questions and no predetermined wording or order, thus allowing the
participants to personally navigate the interview adding to the richness of the data (Smith et al., 2009).

I created the interview protocol (see Appendix A) based on the research questions and the literature. On January 30, 2020, the World Health Organization (WHO) declared a pandemic (Wu & McGoogan, 2020), thus in-person interviews were not offered to ensure participants’ safety. Data were collected via virtual, recorded interviews with the 12 participants. Each participant was interviewed once, and each interview ranged from 45 to 80 minutes. Each participant agreed to be audio-recorded.

Each interview took place via Zoom video-based platform, at a time that was convenient for both parties. After the interview, each participant received a check-in about their experience of participating in the interview. The interviews were audio recorded and transcribed verbatim. Data were fully de-identified and stored electronically on a removable thumb drive that was locked up. Interviews excluded identifying information attached to the file, and I viewed it only as needed. The second coder was provided with a fully de-identified transcription of the data for her role in the study; she was instructed and agreed to not share the data with anyone. A copy of the transcript was provided to all of the 12 participants for an opportunity to edit, revise, or add any follow-up comments. New data were not obtained from these participants’ reviews.

During the data analysis/explication process, the second coder and I independently read the transcripts in an effort to become immersed in the data. Then, the transcripts were independently read with each person taking notes on anything of interest in the interviews and remaining open to all potential meanings. Next, the second coder and I discussed initial notes and impressions from the data, specifically identifying differences between notes. For example, the second coder had initial impressions that differed from mine, and we discussed the
differences. Then, the second coder and I independently explicited the data by delineating units of meaning that are seen to illuminate the researched phenomenon (Holloway, 1997). The second coder and I clustered units of meaning and grouped the units of meaning together. Next, the development of themes emerged from the data independently. Then, we discussed our findings together, noting where we agreed and disagreed. Thereafter, we applied these steps to each case. Finally, we independently searched for themes and patterns across the 12 cases, and a final discussion was held to form a final consensus to organize the themes under the phenomenon. Additionally, the auditor investigated the study methods, results, and potential biases.

**Participants**

This study specifically recruited current matriculated graduate students in an APA-accredited doctoral program in counseling or clinical psychology. Participants had completed at least 1 year of clinical placement/externship/practicum and had a White supervisor. Matriculated graduate students in internship placement were considered to attract a larger sample size. A homogeneous sample is required to gain an in-depth understanding of the current phenomenon. This study focused on self-identification of participants as non-White person of color with a passing racial identity (specifically not identifying with the single racial category of White) and engagement in counseling or psychotherapy supervision relationship with a White supervisor. Prior studies excluded supervisors who self-identified as biracial (Black and White); similarly, this study did not include multiracial/biracial supervisors whose one racial background is self-identified as White (Constantine & Sue, 2007). Notably, this study did not ask about supervisor’s self-identity; rather, participants personally identified supervisors’ racial category on the demographic form. Other than the aforementioned inclusion criteria, graduate students not on
clinical experience or who had less than 1 year of clinical experience were excluded from the study.

According to Creswell (2007), a recommended sample size for a phenomenological study is 5 to 25 participants who experienced the phenomenon. Following Creswell’s (2007) recommendation for a study utilizing phenomenological methods, this study sought to include 10 to 15 participants. Twelve individuals expressed an interest in participating. After participants completed the screening questions via email, all students met inclusion criteria and were selected for the study.

Data were obtained from 12 BIPOC supervisees with ages ranging from 24 to 43 years ($M = 29.25$ years, $SD = 4.79$). Three participants identified as White and Hispanic, two identified as Middle Eastern and White, one identified as bi-racial (Filipino/White), one identified as Middle Eastern and Multiracial, one identified as White and biracial (Latinx), one identified as Latinx and Asian, one identified as Italian and Puerto Rican, one identified as Mexican and White Multiracial, and one identified as Hispanic. Eight participants were from the Northeastern region of the United States, one was from the Southeastern region of the United States, and three were from the Midwestern region of the United States. All participants received weekly supervision from their White supervisors for 1 hour. Eight participants identified as psychology externs (pre-doctoral psychology students in their early years of education who engage in supervised clinical experiences), one as advanced practicum therapist (pre-doctoral student in last year of externship), one as full-time student, one as trainee, and one as intern. Six participants were in PsyD clinical psychology programs, three participants were in PhD clinical psychology programs, and three participants were in PhD counseling psychology programs.
Eleven participants identified as female, and one identified as queer/gender non-conforming-genderfluid nonbinary.

**Explication**

The term *data analysis* is not completely in line with the phenomenological approach because analysis means to disseminate into parts and phenomenological inquiry seeks to understand the whole essence of the phenomenon. Therefore, this study utilized the terminology *explication* instead of *data analysis*. Explication means an investigation of the components of a phenomenon while coincidently maintaining the context of the whole (Hycner, 1999). Within a constructivist paradigm, this study examined the experiences of BIPOC supervisees with a passing as White racial identity through a phenomenological approach (Creswell, 2007; Moustakas, 1994). Obtaining these data included each individual interview to be recorded with each participant. The data were then transcribed from each interview audio recording. To ensure confidentiality and protection of participants, all identifying information was removed from the transcriptions, and participants were labeled as Interview I, Interview II, Interview III, and so on. The transcribed interviews were analyzed using methods of the phenomenological approach.

According to Moustakas (1994), five steps are involved aligning with the phenomenological approach: (a) bracketing possible biases and/or events that may influence the interpretation of the participants’ experiences (epoche), (b) reading the entire transcript in the context of seeking a “whole” meaning (horizontalization), (c) rereading the transcript and highlighting meaningful units to the phenomenon (invariant horizons), (d) reflecting on the meaningful units to gain insight (imaginative free variation), and (e) synthesizing the reflections into statements for the phenomenon under investigation (structural description and composite textual description).
Epochen

According to Moustakas (1994), the first step of the phenomenological process is epoche or bracketing, which requires the researchers to set aside their perspectives and experiences as much as possible to assume a fresh perspective toward the phenomenon under examination. I engaged in self-reflection by recalling my own personal experiences as a BIPOC supervisee with a passing racial identity through journaling. As the primary researcher, I have engaged in clinical supervision for 4 years with six different clinical sites. All of my supervisors have been White, and I noticed that my presence was at times misperceived based on certain comments made by my White supervisors. At times, I felt uncomfortable sharing my perspectives on racial dynamics in the clinical relationship because I was unsure of how I would be perceived afterwards. I recognized the conversations surrounding race did not occur as frequently in my supervision in comparison to the supervisory relationships of my peers of color. Through this bracketing process, I reflected on these experiences and set aside any feelings, prior assumptions, and biases from the possible application of these experiences on the present study. Through this process, it was my hope that my personal experiences would not interfere with the authentic portrayal of participants’ experiences.

Researcher Reflexivity

Researcher reflectivity is the awareness of the influence the researcher has on the participants (Maxwell, 2013). Reflexivity is inclusive of the researcher’s experience and experience with the data. Within a constructivist–interpretivist paradigm, researcher reflexivity assists the researcher to understand and be transparent about the potential impact of their unique experiences and assumptions on the research process, including research questions, data collection, and explication (Morrow, 2005). I kept a self-reflective journal (Morrow, 2005) from
the beginning to end of the study to record my experiences, reactions, and any emerging awareness of biases. I included a reflexivity statement for transparency written in first person to support an acknowledgment of biases and interests in exploring passing as White in cross-racial supervisory dyads.

**Phase 1: Horizontalization**

In this phase of analysis, the second step involved exploration of the data from the transcribed interviews and highlighting significant statements from the transcripts that identified the participants’ experiences and feelings related to being a BIPOC supervisee with a passing racial identity in a cross-racial supervisory dyad. At this phase, we highlighted 242 statements (41 from Interview I, 20 from Interview II, 11 from Interview III, 35 from Interview IV, 25 from Interview V, 16 from Interview VI, 18 from Interview VII, 10 from Interview VIII, 21 from Interview IX, 17 from Interview X, 20 from Interview XI, 8 from Interview XII). These statements present BIPOC supervisees perspectives separately with equivalent value. At this point, no grouping of these statements was made, and these statements are considered the basis of the phenomenon that gives it a unique form (Moustakas, 1994).

**Phase 2: Invariant Horizons**

The third step included reducing the number of whole statements by highlighting the meaningful units to the phenomenon. I deleted repetitive, overlapping, and irrelevant significant statements attained from the previous step by concluding the invariant constituents (Moustakas, 1994). By reducing repetitive statements, the remaining significant statements were used to narrate a description of the lived experiences of the participants. I examined these significant statements (180) and organized the statements into categories for a total of 25 subthemes.
Phase 3: Imaginative Free Variation

The fourth step encompassed reflecting on the meaningful units of the participants’ common experiences of the phenomenon to gain insight. The contextual factors that influenced the experience of cross-racial supervisory dyads were considered (i.e., length of supervisory relationship, the number of years in clinical practice) as well as participants’ feelings about the experiences. Moustakas (1994) reported that imaginative free variation assists the researcher to identify structural themes from the textual description through this phenomenological reduction process. I clustered and determined five themes of the BIPOC supervisees’ common experiences in a cross-racial supervisory dyad: (a) feeling disconnected in supervision, (b) frequency of discussions on race, (c) supervisees’ fear to explore identity development, (d) multicultural competency, and (e) lack of safety in cross-racial supervision (see Appendix D). These themes explored the authentic thoughts and feelings associated with being a BIPOC supervisee with a passing racial identity in a cross-racial supervisory dyad for each of the participants. Furthermore, these core themes included verbatim pieces from the interviews.

Phase 4: Structural Description and Composite Textual Description

The fifth step involved synthesizing the meaningful units into core statements/themes for the phenomenon under investigation. These themes explored the authentic thoughts and feelings associated with being a BIPOC supervisee with a passing racial identity in a cross-racial dyad for each of the participants. Furthermore, these core themes included verbatim pieces from the interviews.

Aligning with qualitative explication, I utilized memoing, categorizing strategies such as coding and thematic analysis, and connecting strategies (Maxwell, 2013). This process focused on relationships in the data through coding similarities. Coding strategy involved reading the
data and creating coding categories to sort the descriptive data (Maxwell, 2013). The categories were formed based on areas or issues of supervision in a cross-racial dyad and the passing as White experience. Finally, a composite description of the essence of the phenomenon (Creswell, 2007) focused on the common experiences among the BIPOC supervisees to understand these individuals’ lived experiences working in cross-racial supervision dyads.

**Validity**

Validity refers to the accuracy or credibility of an interpretation; thus, qualitative research addresses possible threats to validity, which may provide alternate ways of understanding the data (Maxwell, 2013). Qualitative research cannot control for possible threats due to the paradigm and approach utilized. However, researchers can identify specific threats to validity to rule out by examining researcher’s bias, reflectivity (Maxwell, 2013), and investigator triangulation (Carter et al., 2014). Triangulation is a “qualitative research strategy to test validity through the convergence of information from different sources” (Carter et al., 2014, p. 545). One source of triangulation is investigator triangulation, which involves the participation of two or more researchers in the same study, such as a second coder and auditor. Thus, this study utilized a second coder and auditor to provide multiple observations and conclusions of the data to offer both confirmation of findings and different perspectives (Carter et al., 2014).

**Trustworthiness in Qualitative Research**

Morrow (2005) identified criteria for trustworthiness for constructivist study: fairness and ontological authenticity. For the present study, we attended to concerns about fairness by examining different perspectives in the data through the use of a second researcher and auditor. Issues of ontological authenticity were addressed through expanding the participants’ constructed meanings. Also, researcher reflexivity was utilized in order to gain a deeper understanding of
how my personal experiences and worldview impacted the entire research process (Morrow, 2005).

Researcher bias includes the theories, beliefs, and perceptual lens through which one perceives the world (Maxwell, 2013). Possible biases that might impact the validity of this study include insider positionality, stereotypes/prejudices, values, and expectations. I am considered an insider because of matriculated doctoral student status in an APA-accredited counseling psychology program and for identifying with a passing as White racial identity as a Latina woman. Also, I have been in multiple cross-racial supervisory relationships during clinical placements in the doctoral program. Considering my insider position, awareness and reflexivity skills are required to continually evaluate my presence during the research process. In addition, I needed to be conscious of self-disclosures surrounding personal supervisory relationship experiences with participants. My values and beliefs about others were examined throughout the study through memoing and consultation from my academic advisor.

Other ways to enhance credibility in the present study were to conduct long interviews (Morrow, 2005). Maxwell (2013) emphasized long-term participation to confirm the observations and rule out random associations. For this study, each interview was approximately 1 hour in length. Also, at the end of each interview, I checked in with the participant to solicit feedback about the interview process to enhance validity. Further, member checking occurred after I had transcribed and coded each interview by sending the interview transcript to each member to offer any comments or feedback (Lincoln & Guba, 1985). During the explication process, I identified discrepant evidence and negative cases of the intended phenomenon. According to Maxwell (2013), examination of supportive and discrepant data is essential when deciding to retain or modify the interpretation of the phenomenon under investigation.
**Personal Reflexivity Statement**

Since my first clinical experience 5 years ago, I have had all White supervisors. I have worked as a school counselor, student assistance coordinator, crisis intervention specialist, and psychology extern. In each role, I have accumulated hundreds of hours learning counseling skills from a White supervisor. Until last year while working at my first externship placement, I did not consider the possible impact of the lack of diversity of my supervisors in my professional development as a psychologist. I have continuously been in school and in-training for years at two different universities. During my years in training for my master’s degree, there was limited focus on multicultural competency and training. Aside from the one multicultural class I had, multicultural supervision/competency was not discussed or highlighted throughout my first few training years. Because of the lack of discussions embedded within my clinical supervision during my earlier years of training, I did not think there was anything missing in my supervision because I was not attuned to what was lacking. Until I entered my PhD program, I was not pushed to expand my worldview in both client conceptualization and my own racial identity. My experience with professors and fellow students who value and emphasize multicultural and racial issues has changed my worldview and perspectives, thus shaping my own research interests and clinical work.

Another important personal reflection that needs to be highlighted here is my romantic relationship, which began at the end of my first year in the PhD program. I am in a committed relationship with a White man who is a part of a very intimate and connected family. Being immersed with my significant other and family vacations, I entered a space of which I have been cognizant, yet not on this intimate level. I became more aware of racial dynamics and people’s perception of me and people’s comfortability to express racial prejudices and stereotypes about
marginalized communities. I was comforted by my significant other stating that these overt racial stereotypes are not applicable or directed to me, yet it felt uncomfortable for me to experience these spaces. I became more aware of my passing racial identity because of the constant message that White people would isolate me from the people of color community. I believe this transformation from being single to entering a serious committed relationship with a White man has propelled me into exploring my own racial identity and the way I present and interact with the world.

During my first-year externship placement, I was having lunch in the supervisee lounge and listening and sharing with other externs about their supervisory experiences, and several issues occurred to me. First, I was not alone in my thoughts about keeping aspects of my cases to myself, fearing discomfort if possibly overstepping my boundary with respect to my supervisor and their expertise. I recall one incident when I had a client who was of the same racial background as mine, and my supervisor made a stereotypical remark of Hispanic people to me. I recognized I had just experienced a microaggression because of feeling frozen and very confused and hurt. After processing the statement and my initial reactions, I realized my supervisor did not see me as a person of color. My supervisor was not attempting to make a rude comment about my race to my face; she was essentially speaking unfiltered and felt comfortable to share her prejudiced opinions about people from a Hispanic background.

I found I was not alone in my experience. Other externs at the center told me stories about their own supervision experiences and being perceived as White. Until my one colleague disclosed she was a person of color (Lebanese and Hispanic), I thought she was a White person. We continued to discuss personal experiences with feeling uncomfortable in White spaces where racist remarks were being made. It was comforting to hear other people’s stories about living
with a passing racial identity. I live with the feelings of guilt and shame when I don’t confront racist remarks in my professional and personal environments. However, I sometimes feel grateful that I am not perceived as a person of color because I am not on the receiving end of harsh judgments. In both instances, I feel invisible and invalidated because I feel forced to have to disclose my racial identity, or I am hyperaware of not letting my minority racial identity be discovered.

In my personal life, I always get asked where I am from or where my ancestors are from. My parents were born and raised in Peru, and I am a first-generation college student. Most of the time, I will receive a shock remark about disclosing my racial identity because people thought I was Italian. This year at my clinical site, my testing supervisor stated, “Well you look Italian, you can certainly pass.” I recognize the power dynamics in a supervision dyad since my supervisor has the power to evaluate my clinical skills to my graduate program. I have wondered why supervisors have not talked about the racial differences between us. At first, I thought it was because they were at a lower stage of their racial identity development. But recently, I wonder if it is because they do not perceive me as a person of color. I started wondering this when one of my supervisors said, “Well she’s Black, so you know, she cares about those race issues.” In this moment, I thought to myself, maybe she doesn’t know I am not White? But how? How is this possible?

Living with a passing racial identity is very difficult when having to confront people about their racist remarks towards people of color when they are said in front of me. Sometimes I am told “Oh you aren’t like them;” “You are basically White;” or “I don’t think of you as one of them.” It is a very uncomfortable experience because I am not White and feel like I do not fit in completely in White spaces, yet I am welcomed in as a White person and people hold
discussions that would not be held in front of a person of color. And in people of color spaces, I also feel separate because I am told repeatedly in my personal life that I do not belong because I can pass as White.

I realized some people of color hold anger towards me because of my passing identity during a social event with classmates. Two classmates of color tried to check-in, and the manager of the restaurant kept saying no reservation was made under my name, which is an anglicized name. When I got to the restaurant and asked for the manager, I was greeted with a friendly welcome, and she brought us to our table. My two classmates told me how the manager told them there was no availability to seat them, and the reservation was nonexistent until I asked. One classmate expressed her anger by expressing to me how it “must be nice” to be me and that “I clearly don’t understand their experiences with racism, you just got treated as a White person.” This incident raised my awareness about how I might be perceived by my clients who are of color. Perhaps they think I am White and do not want to discuss race or cultural issues? Do they present themselves differently to me because they think I could not understand their perspectives because I have a passing racial identity? These questions about my racial identity and my physical appearance have not been discussed in supervision with my supervisors. I have been confronted about my presence in therapy as a woman but not as a person of color. I wonder how my racial identity has been influenced by my supervisory experiences in which the dialogues on race are sparse or nonexistent. In this dissertation, I explored several of these important issues.

Researchers

The second coder is a 29-year-old bisexual, White European woman of Italian descent who is in her fourth year of doctoral study in counseling psychology. Her interests include first-
generation college students, multicultural counseling, and racial identity development. While I have my own unique experience as a Latina woman with a passing racial identity, the second coder is not a person of color and has limited experience in qualitative research. The auditor is a 30-year-old heterosexual, White European woman of Italian descent who is in her fourth year of doctoral study in counseling psychology. By including a second coder and auditor with a different background and worldview in the coding process, it was hoped attention was brought to information I neglected as well as keeping my biases in check.

I and the second coder engaged in discussions and determined the finalized list of themes and domains collaboratively. The second coder was given the space to read the transcripts individually and highlight significant quotes. I and the second coder met virtually to discuss the findings and initial impressions of the interviews. The second coder offered her honest opinions and first impressions of participants’ experiences. Both I and the second coder created a safe space and prioritized the discussion of biases and emotional reactions to participants’ responses and experiences. The second coder was invited to gently confront my biases and assumptions about the participants’ experiences through the virtual meetings. Disagreements occurred through the coding process and navigating the significance of quotes relevant to the research study and while honoring the participants’ experiences. Differences were resolved through the constant recognition of personal biases and being able to set aside personal judgments and attempting to view the participants’ experiences through the context of their worldview. Consensus of disagreements involved having a discussion about differing opinions and considering both the current literature on supervision and participants’ lived experiences before, during, and after the pandemic.
A subtheme that the second coder recognized and brought to my attention was the fluctuating influence of the pandemic’s stress on participants and their perspectives of their experiences in clinical supervision. Additionally, the second coder and I disagreed on the theme *disconnection* because of the prevalence of the concept of trust within the participants’ narratives. The second coder suggested that the loss of trust is one dimension of the overarching theme of *disconnection within the supervisory relationship* of participants’ experiences. I agreed that the concept of trust within the supervisory relationship is a subtheme of another theme that encompasses trust along with other aspects of disconnection that occurred within the supervisory dyad.

Having a second coder who is currently attending classes was beneficial to juxtapose the primary researcher’s perspective of participants’ responses. For example, the second coder shared her experiences with learning about multicultural supervision in class and how the focus of culturally competent supervision has been heavily emphasized in other students’ clinical supervisory experiences. A prominent event that occurred 3 months before data collection was the death of an unarmed Black man, George Floyd, by a White Minnesota police officer. Both I and the second coder discussed the precedent George Floyd’s death had on prevalent conversations about race and other social justice issues within clinical supervision.

The auditor received the transcripts of the interview and the coded themes from both me and the second coder. The auditor read through the coded interviews and agreed with the coded subthemes and themes. No changes or adjustments were made from the auditor’s process.
CHAPTER IV
RESULTS

This chapter presents the research findings. This was a phenomenological approach to a qualitative research study with a purpose to gain a thorough understanding of the experiences of BIPOC supervisees with a passing as White racial identity relative to the following five research questions:

1. How does passing as White in cross-racial supervision dyads influence the conversation of race dialogues in supervision?
2. How do cross-racial supervision dyads impact multicultural competency training for BIPOC supervisees who pass as White?
3. How is the identity work for people who pass as White (e.g., associated privileges with racial passing in a variety of situations) influenced within the supervisory relationship?
4. How does the racial identity of both the BIPOC supervisees who pass as White and their White supervisor impact the cross-racial supervision dyad?
5. What factors/interventions could strengthen the relationship between the supervisors and BIPOC supervisees who pass as White?

Also, five themes emerged from the data: (a) feeling disconnected in supervision, (b) frequency of discussions on race, (c) supervisees’ fear to explore identity development, (d) multicultural competency, and (e) lack of safety in cross-racial supervision.

Theme 1: Feeling Disconnected in Supervision

All participants described a variety of disconnection experiences with White supervisors during their training experiences. Participants highlighted their reluctance to share their passing racial identity with some of their White supervisors if they perceived conversations of racial
identity were not valued. Participants described their fear of sharing their passing racial identity in order to not offend White supervisors when they perceived the supervisor had minimal desire to discuss multicultural topics. For example, one participant described her reluctance to disclose her racial identity with the White supervisor because of the supervisor’s negative attitude towards conversations about race. Meredith, a 27-year-old female Latinx/Asian from Northeastern United States in a PsyD clinical psychology program, stated:

In supervision with my supervisor right now, I remember when she was complaining about the racial diversity seminars and acknowledged that they are important, but also time consuming in a bit of an aggressive irritable tone. I felt upset by this, I could have shared that as a person of color I think these seminars are important, but I didn’t because I was worried about how she might feel and hurting her feelings.

Christina, a 28-year-old White/Hispanic female from the Northeast in a PsyD clinical psychology program, shared similar feelings as she processed her hesitation to disclose her passing racial identity and the fear of being perceived as challenging her supervisor:

I am scared to do that [disclose she is not a White person] because I don’t want them to feel uncomfortable or misinterpret my intentions of bringing it up. Like I would bring up the topic of racial identity for my client’s progress, not because I think they are avoiding the topic, and then I worry that now they are offended.

Seven participants discussed feeling “scared” or “nervous” to disclose their passing racial identity in supervision because of the assumption that their White supervisors may become offended. They actively silence their voice in order to decrease the chance of upsetting their White supervisors. These negative feelings impacted BIPOC supervisees’ relationships with their White supervisors.
BIPOC supervisees reported experiencing conversations with White supervisors who expressed racial stereotypes of their marginalized identity groups and questioned if this was due to the fact that they passed as White. Also, most participants identified their reluctance to confront these racial stereotypes due to the power dynamics in the supervisory relationship.

Alexa, a 30-year-old Middle Eastern and Multiracial female from the Southeast in a PhD counseling psychology program, described the power hierarchy in a supervisory relationship as a deterrent in confronting the stereotype of being a Muslim woman:

I identify as a Muslim woman, and I identify as an Arab Middle Eastern woman. But I don’t cover my hair, and my skin is light. So, I think they signify me as a safe Muslim, or a safe person of color or a safe Arab Middle Eastern person. So, there was one time we were going to go to a restaurant to eat dinner together and do my final evaluation. It was super casual it was my final evaluation of the year and we were walking over from the clinic to the restaurant, it was in the same neighborhood. I guess, I think we passed a woman who had her hair covered, she was a Muslim woman and had a hair covering, and my supervisor at the time was like, ”oh man you know it makes me so angry when I see women who cover their hair?” And I was like why? And she you know, started going on about why you know women, Muslim women are oppressed, or you know need to be free essentially. I didn’t say anything because this is my supervisor you know she is in this position of power over me.

This participant described her awareness of passing as White understanding that her lighter skin tone and lack of hair covering can create an unintentional misrepresentation from White supervisors that she does not identify with other Muslim women. Leslie, a 31-year-old White and Middle Eastern female from the Northeast in a PhD clinical psychology program, shared that she
chose to withhold her racial/religious identity because of potentially being judged by her White supervisor:

While he [White supervisor] seemed pretty open and not racist or anything and culturally very knowledgeable, I was actually very afraid he would stereotype my background because he was aware of my background, which is a very small percentage of people in this country that know our reputation. So, I was leaning more towards being White around him because I didn’t want to come off as the stereotype of my ethnicity and religion.

This participant described the inner conflict that is created for people of color with a passing racial identity when she is not seen as a person of color, but as a White person and could potentially avoid stereotypes that are foundationally racist. Several participants shared their understanding of existing as a person of color with a passing racial identity and “being accepted by the majority culture” (Alexa) and “not having to experience the things that other people of color do” (Jordan, a 27-year-old Mexican and White Multiracial female from the Midwest in a PhD counseling psychology program). Though the BIPOC supervisees may not phenotypically appear as a person of color, they are aware of themselves and their reactions as these responses could potentially dictate consequences that may ensue in supervision. For example, Bethany, a 43-year-old bi-racial queer/gender nonconforming-gender fluid nonbinary PhD counseling psychology student from the Midwest described feeling shame in supervision because her cultural values were inadvertently questioned by her White supervisor:

I think it goes back to that stereotype of being collectivist in a way. But I think I am going to attribute this to Filipino cultural values that you value your family, it is really important, and elders are a place of respect. I think in certain supervision settings, there is
a lack of understanding that I absolutely have to consider my parents’ values and how they will feel about things and no I cannot ignore them. There’s a difference you know in emotional boundaries, but you absolutely have to consider how your family would view you. As a queer person it is particularly an issue and you know so in times both for myself and clients who may have this more of their cultural views and backgrounds, sometimes you are really brought up to think about family first before yourself. There is a kind of shaming of that viewpoint if that makes sense, and I avoid having this discussion. Also, BIPOC supervisees have shared their experiences with feeling misunderstood by their White supervisors because of the difference in cultural values. Leslie stated:

I think supervisors have pointed it out a lot about my time management issues, but that they don’t understand that it is actually more of a cultural thing. I just have to adjust because I am living within a different culture now. But yeah, with supervisors who are a majority of them are White they don’t see it as a cultural difference, but just as something that I need to improve on and that my time management needs to be better in general. They don’t see it from my perspective that it is my culture.

Furthermore, participants shared that their counseling style is heavily influenced by their cultural values, and the lack of discussion on cultural considerations in supervision impacts their relationship with the White supervisor. For example, Alexa stated:

I have felt different because of my cultural values, or even communication styles or way of being. I don’t know if I felt put down, but I felt like out of place sometimes because I come from a collectivistic culture where relationship is everything, and friendliness and hospitality is really valued. I think that has influenced me that I specifically work with couples and families like fairly exclusively up until this point in internship year. They are
making me do things I don’t wanna do, but I know it will be good for me at the end. But primarily I work with couples and families, and I think it is because it connects with collectivist values and cultural values and family being the center zone of life and being really valued. And when I talk about that and I talk about my love of couples, or families or my connections to it, or why I feel so passionate about it or why I want to do that work, sometimes I feel so misunderstood specifically within supervision.

Participants identified the importance of their supervisors taking the initiative to create a space to discuss multicultural topics such as race, in order to build trust within the supervisory alliance. For example, Diana, a 27-year-old White and Middle Eastern female from the Midwest in a PsyD clinical psychology program stated:

The space was never opened, and you would think that in a supervisory experience you would take the first step and learn about trainee. And have open conversations to foster safety and trust, and also just respecting or like, just opening the conversation, well for me it was missing.

Similarly, Francesca, a 28-year-old Hispanic female in a PsyD clinical psychology program from the Northeast stated:

I have personally brought up that I identify with the Hispanic culture, and well, no conversation took place. I do think this experience impacted my relationship with her, I like her, but only on a professional level. I guess I don’t trust her enough to hold my feelings in a space if we discussed race.

Also, White supervisors who did not emphasize multicultural conversations in supervision negatively impacted the supervision experience for BIPOC supervisees. Leslie stated:
I think it sometimes, if the White supervisor doesn’t understand the importance of multicultural sensitivity that it detracts from the experiences of my clients, because the supervision does not end up incorporating any of those factors into any of the work we are doing. So, it detracts from the richness of the work I could have with the patient. The absence of it makes the experience a lot more one dimensional.

Similarly, Christina stated: “She didn’t encourage me into the conversation (about race), nor did she have the dialogue with me. So, I felt like she didn’t care.” These lack of conversations about race continue to fortify the participants’ feelings of disconnection within their cross-racial supervision experience. Additionally, participants wanted the person in the more powerful position to steer the way and the absence of these conversations contributed to the lack of trust in the cross-racial supervisory dyad. This discomfort that the participants experienced in the lack of racial dialogues in cross-racial interaction is directly correlated to their feeling of disconnection.

**Theme 2: Frequency of Discussions on Race and Societal Influence**

Participants acknowledged the prevalence of discussions about race with their respective clients. However, they highlighted discrepancies with the discussion of race within the supervisory relationship and the lack of conversations surrounding their own racial identity. For example, Hailey, a 29-year-old White and Hispanic female in a PhD clinical psychology program from the Northeast stated:

So, in supervision I have noticed that I didn’t have to explore my racial identity development because my White supervisors never brought it up, and I personally never brought it up too. I think if my White supervisors brought it up more like about their own racial identity, then I think I would have been forced to explore my own. But since they
didn’t, I just went along with supervision and didn’t bring up topics that my supervisor didn’t emphasize.

Similarly, Alexa stated she felt uncomfortable about bringing up the topic of race in supervision because her White supervisor did not initiate the conversation about race: “That’s the thing, I don’t even know if race comes up with White supervisors. When I think about it sometimes, I don’t really remember a time when my supervisors have brought up race.” Also, Olivia, a 24-year-old Italian and Puerto Rican female in a PhD clinical psychology program in the Northeast, shared the impact of the lack of discussions surrounding race and racial identity in supervision by stating, “I felt uncomfortable because to me, it showed her values on diversity and it is not the same as mine who is a person of color but who passes as White.” For Jordan, she shared her experience about how her White supervisor broached the topic of race in supervision in an uninviting manner and how it impacted her feelings of comfort within the supervisory relationship:

I was thinking about how it was like to work with me especially as we talked about things related to police brutality. This was around the time when a Black rapper died, so I was talking to my supervisor about it, and she probably thought I was some White lady that doesn’t understand, or maybe doesn’t want to understand, or doesn’t care, or like is unaffected by these things that are going on. But I do not feel that is the case because of the people who are in my life and like my world view in general, I do care. So, I remember having this conversation with her about wishing I could communicate that but also not wanting to be the person who is like “I have a significant other who is a member of the Black community” or something like that, not trying to make it weird. So, we had a conversation about it, and I felt it was a little bit uncomfortable, but it is not like she did
anything it was just all of the dynamics as we were talking about it. Then she made some relation to like how she studied abroad in South America, and how people don’t know that she can speak Spanish, and she often wants to communicate that. I don’t know, it was an interesting interaction a lot of dynamics going on. It was interesting on how the things she did made it weird. I think it was the discomfort where it came from was that it was so different from my first two supervisors from the counseling center. Where it was like, “We are going to talk about these things,” and then I went into this new setting thinking is it taboo, or is it unwelcomed. So, when I would have those conversations it is not like I was saying anything that was odd, or over disclosing I just didn’t know how welcomed it was. I think, yeah, if I had to summarize what that has been like it was uncomfortable.

Notably, participants highlighted the impact of the Black Lives Matter protests that occurred over the summer of 2020 and their influence on the frequency of discussions on race in supervision. Leslie stated:

I think before the movement arose, I think there was less talk about race as it was unconcerned unless it came up. But I think now that it actually has been centered in the conversations from the get-go now with supervisors. Whereas one of my supervisors for example talked about how he prefers we try to find patients from the BIPOC community (Black, Indigenous and People of Color) for a research study for a clinical trial to work with. He is like my supervisor for a clinical trial, and you know talking about how important it is to do that and it is relatively a new concept in supervision that I have noticed is a pattern that is centering the idea of working with the BIPOC community and has been more prominent.
Participants shared feeling empowered to have discussions with supervisors surrounding race because of the Black Lives Matter protests. Monique, a 26-year-old White and bi-racial female in a PhD clinical psychology program from the Northeast, stated:

Recently, throughout my journey I have been more open to bringing it up first actually. I feel more empowered after the racial protests over the summer. I feel that supervisors not only want to discuss it more, but also, they kind of have to acknowledge it. I don’t feel weird bringing it up because now it is necessary to do so and valued.

Similarly, Francesca stated:

So, what really stands out to me is the word confidence. After the recent social protests over the summer, I really feel more comfortable to discuss and ask questions about race. Yet, during these months I also had a supervisor who welcomed these conversations and started the conversations as well. I think the combination of these experiences occurring simultaneously really positively impacted my clinical interaction with my current White supervisor. I really appreciate her honesty to acknowledge that she will be wrong at times, and perhaps pass judgment and she welcomes people to call her out on this by sharing their perspectives.

The participants’ experiences are indicative of the effects of the Black Lives Matter protests and supervisors’ understanding that these conversations about race are necessary. Meredith shared her perceptions on the increased frequency of conversations about race in supervision:

[T]he recent protests have prompted more discussions about race on a systematic level. So, I don’t know if my supervisors honestly value these discussions, but they are enduring it. So, I also think this is a step up because it is better than avoiding the discussion completely or being naïve to it like you cannot be anymore.
The examples provided by these four participants encapsulate the present shift in conversations about race within cross-racial supervisory dyads. Though the participants described their uncertainty surrounding the authenticity of these conversations, the participants have found comfort within supervision to have conversations about race and racial identity.

Participants identified factors that could strengthen the relationship with their White supervisors, such as the supervisor’s willingness to engage in potentially uncomfortable conversations about race and White privilege. Seven of the 12 participants highlighted their desire to engage in more discussions on race, including passing as White. For example, Hailey stated:

I think regarding my White passing identity, I think it is important for me to explore my privileges associated with being White because honestly, I haven’t really acknowledged or want to because I do benefit from them. So, I think my experience with White supervisors have taught me that the relationship could be improved with more uncomfortable discussions on race especially about White privileges.

**Theme 3: Supervisees’ Fears to Explore Identity Development**

Participants shared their awareness of the power dynamics in a supervisor and supervisee relationship, and this hierarchy impacted their comfort in exploring conversations about race. In particular, BIPOC supervisees expressed their feelings of anxiety about hurting their White supervisor’s feelings by bringing up conversations about race. Alexa stated:

[E]thic identity, and also uhm, I would probably feel torn if I should bring up that moment or just let it pass. It is always a decision I am like “Is this person able to hold me in the conversation or hold space in the conversation without being offended?” Or, if I bring it up and they are going to be upset, and then I have to deal with not only me being
upset that it happened, but also them being upset that I brought it up. It is always an internal conversation, like is it worth it, do I talk about it or do I not. I would be anxious, even if I were not to bring it up or continued supervision, it would be on my mind and I would be anxious.

Similarly, Jordan stated:

I was tiptoeing because I didn’t want it to seem like I was trying to shame the staff because they aren’t paying attention to it, or to them like they should have addressed this sooner. So, I am hyper aware of the power differential and not wanting to rock the boat, and not wanting to be like, “Oh she’s going against the status quo, oh she is too sensitive,” or too whatever this kind of thing, like tiptoeing. I didn’t like freely speak about like the way I think or feel about racial things, issues, dynamics, whatever.

Francesca shared her feelings of fear to discuss racial dynamics in supervision because of the lack of emphasis on racial issues among the White staff at her college counseling center and recognition of power differentials between students and supervisors:

Yeah, so during my first externship at a college counseling center, I noticed that all of the counselors were White, and well, blonde. So, I felt fearful to discuss any topics of race because I honestly didn’t think they valued it. I think that is true because they never brought it up. None of my supervisors or fellow White externs brought up conversations about race. I also didn’t either because I took the path of least resistance. So yeah, very uncomfortable to say the least for the entire year.

To juxtapose BIPOC supervisees’ experiences with White supervisors and their perceptions of having a safe space to explore racial identity development and concerns, Diana shared her experience with a BIPOC supervisor:
In supervision, it was just so special to share the experience of being not White with my supervisors of color, and in these relationships, I felt so excited and safe in the sense like I don’t know, like safe with the assumption of safety. I felt invited and I experienced the power of framework and trying to tell my supervisor what my needs are, and how to safely explore my racial identity development.

Majority of the participants were aware of their social position within the ladder of hierarchy and were sensitive to how their identities as a person of color put them in a vulnerable position in relation to White supervisors.

BIPOC supervisees shared that their approach to conversations about race are different with their White supervisors because of their person of color identity. Monique stated:

I think in supervision I really value honesty and transparency in regard to clinical work. But with my White supervisors, I don’t like to bring up the topic about racial identity first. I usually let them take that lead because I am nervous they will view me as that person of color who only thinks about race.

Similarly, Ruth, a 31-year-old White and Hispanic female in a PsyD clinical psychology program in the Northeast stated:

None of my White supervisors brought up the conversations about race. I also was reluctant to bring up these discussions, because I felt that the supervisors did not value these conversations because if they did, they would set time aside to discuss race. Since I do identify as a person of color, I was hesitant to bring up the topic of race because I am worried my White supervisor cannot hold my authentic feelings surrounding race. Sometimes discussions about race can significantly impact me emotionally. So, if my supervisor did not bring up the topic of race first, then I am reluctant to because how can
they help me explore my feelings, and perhaps where I am in my racial identity
development, and maybe like the impact of current events for people of color. And they
do not recognize that these conversations are missing in supervision.

Participants shared these insecurities, and they experienced self-doubts, which they attributed to internalized oppression.

More than half of the participants disclosed the absence of receiving supervision with a BIPOC supervisor. For the participants who had prior experiences with both White supervisors and supervisors of color, they spoke about the differences in power dynamics. Leslie juxtaposed her supervisory relationships with White supervisors and supervisors of color:

I have found that my interactions with White supervisors have a little bit more of a template of hierarchy to it with them. Whereas with supervisors of color, there tends to be more of a spirit of collectivism, or it might be a little less hierarchical in the relationship.

But, with White supervisors it feels more hierarchical to me.

All of the participants spoke about their experience in the predominantly White field of psychology. Notably, both White supervisors and BIPOC supervisees bring certain qualities to supervision, and both contribute to the supervisory process and the exploration of identity development.

Some of the participants described the impact of microaggressions in cross-racial supervisory dyads and increased feelings of anxiety to explore their racial identity in supervision with White supervisors. Alexa stated:

Oh yeah, I would definitely feel anxious, I would feel anxious for sure on bringing it (racial identity) up. And also, it is not always specific to supervisors that I have tried to bring it up, professors or advisors, and it hasn’t gone well. Or cohort mates and it doesn’t
really go well so that certainly does spill over my relationships with supervisors because I just kind of go in assuming it will probably not go over well if I were to bring up any misunderstanding, or comment. Or whatever if they say something, you know, that maybe they didn’t intend it to be hurtful, but it was. Or they didn’t intend it to be a microaggression, but it was. I would just assume it wouldn’t go well, or it would be awkward, or it would, I don’t know. I think it is just easier sometimes to just move on.

These statements signify that White supervisors may inadvertently lay the groundwork for the suppression of people of color’s voices by not creating the space for open racial dialogues. The lack of initiated conversations about racial identity development from White supervisors impacted cross-racial supervision dyads. BIPOC supervisees with a passing racial identity acknowledged the vulnerability to initiate conversations about racial identity and the heavy influence of the power dynamics within the supervisor and supervisee relationship.

**Theme 4: Importance of Supervisor Multicultural Competency**

Participants described the impact of cross-racial supervision on their multicultural development and the influence of their White passing racial identity. Participants disclosed the importance of acknowledging multiple identities supervisees might have, and the lack of these cultural discussions influenced their multicultural competency. Alexa stated:

I am as someone who could be considered as White passing and how that might impact them (future supervisees) in the room and feeling safe with me because maybe they are viewing me as a White person, and that could be making them feel uncomfortable or unsafe. Or that they have to silence themselves similarly to the ways I have felt with White supervisors. So, it has made me very aware of bringing it up and not only wanting to bring it up, or think about it at least, and be aware about it but also to manage myself.
Like if it is brought up, and if there are any feelings of defensiveness within me then I need to acknowledge this is not the place to talk about that. Also, that is not what belongs in this room and to figure that out elsewhere, and to not put any of my emotions on the person who is trying to bring up racial differences in a way that can make them feel scared.

White privilege plays a major role in the lack of racial dialogues within cross-racial supervisory dyads. Each participant provided various accounts of their supervisor avoiding the discussion on race and racism in the field. One of the participants during the interview stated he (White supervisor) “didn’t have much compassion or empathy for my immigrant Mexican client because he couldn’t relate to that experience, so we didn’t discuss the impact of race on his life” (Leslie). The reluctance of White supervisors to dive into racism was impactful on BIPOC supervisees’ multicultural competency. Jordan stated:

I want to be pushed. I feel like being multiculturally competent is like a lifelong learning process. Like you don’t just get to a level and you are done. And so, I would welcome the opportunity to be educated especially by someone in a supervisory position because it could benefit me as a human, and also as a clinician. So, I could imagine if I had different supervisors who talked about these things more, and put an emphasis on it more, that would have further developed my multicultural development.

Similarly, Christina stated:

Well, I think my multicultural work wasn’t enhanced much through my supervision experiences, rather in my coursework or outside didactics. I think though these experiences have taught me the importance to start the conversation of race as a supervisor because
even if the supervisee doesn’t bring it up, doesn’t mean she/he isn’t thinking about it. Rather I have the power to influence the conversation, and I should do so.

Also, participants reported seeking out supervision in addition to their cross-racial supervision in order to receive supervision on multicultural competency concerns. Meredith stated, “So yes these experiences influenced my multicultural competency because I have had to seek out outside resources to discuss racial identity stuff. Also, I plan on incorporating this in the future which I didn’t think of before.” Similarly, Monique stated:

I have had to seek out multicultural training through my program and class supervisors. My on-site supervisors haven’t really been much of some help in my competency with clients of color. I think this is something that is common since most of the available supervisors are White, not many are Black or Hispanics.

**Theme 5: Lack of Safety in Cross-Racial Supervision**

Participants described significant moments in supervision when they felt uncomfortable with their White supervisor because of either racist remarks or undertones and how these moments impacted their ability to trust the supervisor. Some participants reflected on the urgency to seek out supervision from supervisors of color because of racism. For example, Bethany stated:

I could not trust her (White supervisor), I felt very protective of both myself and my clients. Like, I felt she was harmful. So, I felt like I was lucky enough to have another supervisor because I was a therapist for two programs. I would actually go to the other supervisor, who was a BIPOC supervisor, to talk about anything really necessary. Because hers, I just needed to get through this and not be super unprofessional in terms of, because she was so, she was so disrespectful towards the clients. Yeah, and racism was only part of
One participant disclosed that a White supervisor claimed to label supervisees’ racial identities by pointing to them during group supervision, and the participant was incorrectly identified as a White person and not a person of color. The participant shared that although she identifies as a person of color, she may be perceived as White without choosing to pass. This supervisee described feeling incorrectly labeled and the perceived intention of the other person. For this supervisee, this interaction impacted her comfort in supervision. Leslie stated:

I lost respect for her. I didn’t respect the way she interacted with us, and the way she perceived us, or understand us. I thought it was very unthoughtful and unfair, so I lost my respect for her. I actually started to discredit her suggestions about patients too because of that, because there was this insensitivity.

Some participants discussed their supervisory relationships with supervisors of color and the differences in the feeling of safety and security with these supervisors in comparison to White supervisors. Diana stated:

In supervision, it was just so special to share the experience of being not White with my supervisors of color. And in these relationships, I felt so excited and safe in the sense like I don’t know like safe with assumption safety. And I felt invited and I experienced the power of framework and trying to tell my supervisor what my needs are, and how to safely explore my racial identity development.

These three participants’ experiences indicate that valuable support is providing the space for the full self of a person of color supervisee to express who they are freely without being on guard. For BIPOC supervisees with a passing racial identity, the decision to disclose their person of color identity can have negative consequences. For example, Ruth stated:
I realized that she [supervisor] perceived me as White, and I remember thinking I wanted to disclose that I am not 100% White, but I decided not to because I honestly did not want to upset her or make her feel guilty that she mislabeled me.

Participants disclosed feelings of anxiety and fear of disapproval and devaluation from White supervisors if they found out they (supervisees) are not White. Alexa stated:

I am pretty sure people made me out to be a White person, and I almost feel too anxious, like it doesn’t feel safe. Like how I define passing as White in the beginning, was like access to privileges, and safety I think is one of those. And even though maybe I have the ability to pass as White or be seen as a good/safe person by supervisors, that doesn’t always make me feel safe. I don’t think it necessarily gives me the benefits of being White, even though I am White passing. Part of that is there is a worry about being found out. Like are they going to find out I am an Arab, or Muslim, or Middle Eastern person, and will that change the way they interact with me, or will it be weird, or will they say something hurtful. And there is the anxiety of how they are perceiving me.

Most participants shared that they have not disclosed to their White supervisors that they identify as a person of color with a passing racial identity. One participant simply stated, “No I haven’t. I am scared to do that” (Christina). This highlights the importance of creating a comfortable space for BIPOC supervisees to discuss racial identity work.

**Textual and Structural Description**

After I synthesized the meaningful units into core statements/themes for the phenomenon under investigation through the horizontalization, invariant horizon, and imaginative free variation processes, the textual and structural descriptions of the phenomenon were identified by
Acknowledging “what” was experienced (textual) and “how” it was experienced (structural) by participants (Moustakas, 1994).

**Composite Textual**

The cross-racial supervisory experience of BIPOC supervisees with passing racial identity was personified with several themes. Prominent themes that emerged were the disconnection within cross-racial supervisory relationship and difficulties with disclosing passing racial identity. Discussions surrounding race are difficult in any supervisory relationship. There is a need for these discussions to occur to solidify the rapport between supervisor and supervisee. Difficulties with conversations surrounding race are present in the form of lack of discussion, avoidance of discussion, dismissal of discussion, and racist undertones.

Within the experience, there is an urgency to identify ways to improve the supervisory experience. Intervention strategies may consist of White supervisors initiating conversations about race, acknowledging blind spots, and increasing cultural competency. Feelings of anxiety, embarrassment, and apprehension exist within the experience of BIPOC supervisees with passing racial identity. Anxiety and apprehension are present when there is a lack of dialogue surrounding race and racial stereotypes are referenced. Anxiety fosters feelings of wanting to seek out additional supervision and engagement in the avoidance of disclosing passing racial identity. Feelings of embarrassment occur when BIPOC supervisees experience microaggressions. There is feeling of being a burden for BIPOC supervisees to bring up the topic of race/racial identity to White supervisors.

The cross-racial supervisory experience was negatively impacted through the lack of collaborative spaces to discuss both personal and clinical topics. Difference in cultural values and communication styles were not readily discussed in cross-racial supervisory dyads. Also,
structural format of supervision did not foster spaces of cultural dialogues. The power differentials within the hierarchical supervisory relationship were relevant to BIPOC supervisees and their self-doubts on initiating conversations of race and racial identity with White supervisors. In comparison, participants acknowledged the different experiences with White supervisors and supervisors of color.

Regarding multicultural competency, BIPOC supervisees identified the importance to explore their White passing racial identity and their work as counselors. Important aspects of multicultural competency highlighted in the interviews were immersion in cultural discussions, exploration of White privilege, and discussions on societal racism. Additionally, experiences of both overt and subtle racist remarks impacted BIPOC supervisees’ trust within cross-racial supervisory dyads. Perception of cross-racial supervisory dyad as a safe place to explore feelings of discomfort surrounding race was contrasted with BIPOC supervisees seeking out external supervision when feeling unsafe in the cross-racial supervisory dyad.

**Composite Structural**

The experiences related by the participants in the study who were in cross-racial supervisory dyads were structured around a lack of dialogue of race and how missing conversations affected their clinical work and identity development. The lack of conversations surrounding race and other cultural issues was indicated throughout multiple interviews, noting lack of opportunity, dismissal of conversation, and supervisors not broaching the topic. BIPOC supervisees identified that they recognized the lack of conversations about race, and this led to feelings of anxiety, which impacted the supervisory relationship by decreasing the sense of trust within the relationship. Some BIPOC supervisees reported experiencing microaggressions and emphasized the feelings of sadness and confusion surrounding these interactions. These factors,
along with supervisors’ avoidance of discussion on race, influenced BIPOC supervisees’ perspectives of the supervisory relationship by comparing it with experiences with supervisors of color. For example, participants reported feeling that the supervisory relationship with White supervisors felt more hierarchical and structured clinically rather than an open, nonjudgmental space to explore personal concerns and experiences such as within a supervisory relationship with a BIPOC supervisor.

Furthermore, the structure of the supervision with White supervisors did not lend itself well to opening space for dialogues on race and racial identity. BIPOC supervisees reported that their time with White supervisors felt quick and like a “checklist” to meet clinical standards rather than a space to explore identity and conduct identity work. BIPOC supervisees felt the importance of identity work was not relevant based on White supervisors’ lack of discussion of their own identity within supervision. Notably, BIPOC supervisees noted a shift in the narratives on race after the Black Lives Matter protests that occurred in the summer of 2020. Participants described their awareness of increased openness to discuss race and racial identity within their clinical sites, and this influenced their comfortability to bring up topics of race and cultural issues with White supervisors. BIPOC supervisees discussed that they questioned the silence on conversations of race because of their passing racial identity. BIPOC supervisees emphasized their values on these conversations and their desire to explore their racial identity within supervision.

**Essence of the Experience**

Dependent on the information provided by the interviewed BIPOC supervisees and the synthesis from the explication, we determined the essence of their experiences with cross-racial supervisory dyads (Moustakas, 1994). The essence of the experience that captured the meaning
ascribed to the 12 participants’ experiences could be described as cultural awareness on behalf of BIPOC supervisees and cultural neglect by White supervisors. Cross-racial supervision was described by all participants as less multiculturally focused. BIPOC supervisees felt less likely to engage in cultural conversations with White supervisors because of concern about self-serving motives for having cultural conversations and afraid to displease their White supervisor. The relationship dynamics that occurred within cross-racial supervisory dyads were impacted by BIPOC supervisees’ passing identity and the varying degrees of multicultural competence modeled by the White supervisor. BIPOC supervisees were reluctant to disclose their passing racial identity, which, in turn, impacted their ability to explore topics of cultural issues with their White supervisors. The ability for BIPOC supervisees to feel comfortable in the cross-racial supervisory relationship was associated with trust in the cross-racial supervisory relationship. Consequently, this relationship impacted BIPOC supervisees’ abilities to address cultural concerns organically. BIPOC supervisees reported that cross-racial supervisory dyads provided a different experience to supervision, which did not help them develop and grow as culturally competent clinicians. BIPOC supervisees described feeling unheard based on their White supervisors’ avoidance on initiating and discussing cultural issues within supervision. BIPOC supervisees with passing racial identity expressed their desire for a safe place in supervision to discuss cultural issues. For example, Leslie stated, “I want to be pushed…I would welcome the opportunity to be educated” and they viewed White supervisors’ lack of cultural discussions as uninterested in their multicultural awareness.

BIPOC supervisees described their passing as White racial identity as a barrier at times when describing their hesitancy to initiate discussions on race and cultural issues with White supervisors. Supervisees reported feelings of nervousness and fear for disclosing passing racial
identity because of the potential impact on White supervisors’ perspectives of them as a
clinician. The relevance of power dynamics within supervisory dyads heavily influenced
supervisees’ decisions to withhold their passing racial identity from White supervisors. Also,
BIPOC supervisees perceived that it was the responsibility of the supervisors to broach the topic
of race since they assume the position of power.

BIPOC supervisees with passing identity described the phenomenon of adopting a
passive role as a racial minority in a White-dominant culture by reflecting on the ease of being
perceived as White versus being perceived as a person of color. Supervisees described their
awareness of potentially avoiding stereotypes that are racist because of their passing racial
identity, and these feelings influenced BIPOC supervisees’ comfort in disclosing their passing
racial identity. In supervision, BIPOC supervisees reported their concerns about challenging
White supervisors to discuss their beliefs about race and racism because of the possibility of
evoking feelings of frustration toward people of color. Consequently, BIPOC supervisees with
passing racial identity described feeling confused and powerless in initiating these conversations
about race because of their conscious awareness that they are perceived as White unless they
self-disclose their passing racial identity. This, in turn, led to feelings of self-doubt and reticence
among BIPOC supervisees with a passing racial identity who work with White supervisors.

Participants shared their perceptions and experiences of microaggressions in cross-racial
supervisory dyads and their influence on identity work in supervision. BIPOC supervisees
described feeling unsafe to explore their racial identity development because of the lack of
initiation of the discussions around race by White supervisors and the power dynamics within the
supervisor and supervisee relationship. However, the lack of conversation on identity work
prompted BIPOC supervisees to reflect on their racial identities outside of the cross-racial supervisory relationship.

Also, all participants described their personal narrative shift on the importance of self-disclosing their passing as White racial identity when in the role of a supervisor. BIPOC supervisees shared their gained awareness of supervisees’ perspectives within a supervisory relationship and the influence of supervisors’ comfortability for discussions on race and cultural issues. BIPOC supervisees shared the professional benefits of having the cross-racial experiences because it impacted their personal view on how to model and not model multicultural competency for future trainees. BIPOC supervisees described the cross-racial supervisory space as untrustworthy, and this, in turn, increased sensitivity to supervisors’ lack of cultural discussions. By providing a space and trusting relationship, BIPOC supervisees with passing racial identity reported hope for future cross-racial supervisory experiences.
CHAPTER V

DISCUSSION

The purpose of this study was to examine the experiences and perspectives of BIPOC supervisees with a passing racial identity in a cross-racial supervisory dyad. Twelve participating BIPOC supervisees discussed their cross-racial supervisory experiences. Each described their experiences of passing as White in supervision and the significant impact on their personal and professional development. Results showed that specific to BIPOC supervisees with a passing identity, there is resistance to share passing racial identity with White supervisors due to lack of perceived safety within the supervisory relationship. Participants highlighted the significance of having a space to discuss multicultural topics. Furthermore, BIPOC supervisees emphasized their preference for supervisors to initiate conversations about race and other cultural issues due to the hierarchy embedded within the supervisory relationship. It appeared as though the power dynamics within the supervisory relationship mimicked the racial dynamics within today’s sociopolitical climate. The majority of BIPOC supervisees shared their experiences with dealing with microaggressions and subtle racial comments within supervision. Participants acknowledged their reluctance to confront racial stereotypes in supervision because of the power dynamics. In addition, BIPOC supervisees with a passing racial identity highlighted their inner conflict with disclosing their person of color identity due to the fact that they could avoid racial stereotypes by passing as a White person because of their lighter skin tone or other phenotypical characteristics.

Throughout this study, the 12 BIPOC supervisees shared their experiences and interactions that they deemed impactful to their supervision experience. Overall, these uncomfortable and difficult experiences in cross-racial supervision appeared to have powerful
effects for the participants. From the present study, BIPOC supervisees with passing racial identity described their feelings of disconnection in supervision because of the perception that conversations on race were not valued by White supervisors, which is consistent with the current literature on cross-racial supervisory dyads (Burkard et al., 2006; White-Davis et al., 2016). Moreover, results from this study illustrated that it was important to BIPOC supervisees that White supervisors expressed interest in their cultural background. These feelings, in turn, influenced BIPOC supervisees’ training goals for both themselves and future trainees.

Notably, BIPOC supervisees in the present study with a passing racial identity expressed thoughts and concerns about bringing up the topic of race and potentially highlighting that they are a person of color. Harris (2018) found that bi-racial Latinos who pass as White report their skin tone plays a role in their passing racial identity. Furthermore, Harris suggested that Latino immigrants associate with passing as White to gain privileges with social mobility. Eight of the 12 participants self-identified with both Latinx/e and White racial backgrounds. Within supervision, these participants shared their reluctance to disclose their passing racial identity with their White supervisors because of the lack of conversations surrounding race and racial identity development within the cross-racial supervisory experience. BIPOC supervisees who identified as bi-racial individuals expressed their thinking process in examination of the societal factors within supervision, such as the power hierarchy between a supervisor and supervisee. Thus, similar to Harris’s study, participants’ choice in passing as White were influenced by their ability to have a choice in masking their person of color racial identity.

Goffman (1990) defined passing as the ability to pass as White based on skin tone, facial features, and clothing appearance. Participants described the privileges associated with passing as White, such as being able to avoid discrimination based on skin tone and being given the
benefit of the doubt in social situations. Similarly, Black’s (2015) study on the passing as White experience in bi-racial Asian-White college students suggested that the participants voluntarily engaged in passing as White to avoid discrimination. People of color with a passing racial identity may opt to conceal information about their racial identity because of their awareness of the social stigma attributed to people of color groups (Gatewood, 1990; Goffman, 1963).

According to Khanna and Johnson (2010), to qualify as passing as White, a person’s identity has to contradict how they identify themselves racially. All participants were chosen for this study based on their self-identification of identifying as a person of color with a passing racial identity. Gatewood stated that passing as White is linked with feelings of loneliness from family, and some of the participants in this study described these feelings in connection with their passing racial identity. Participants shared the common experience of feeling guilt and shame surrounding the associated privileges with being able to pass as White. Within supervision, participants described their awareness of the lack of conversations about race and acknowledged that they at times remained silent on broaching this topic because of fear of upsetting the White supervisor through self-disclosing they identify as a person of color.

Findings from the present study revealed the negative emotional consequences of BIPOC supervisees due to their White supervisors who expressed racial stereotypes of people of color groups. Not surprisingly, current research has found that supervisory relationships are not immune from racism, which includes both overt racism and racial microaggressions (Constantine & Sue, 2007). BIPOC supervisees with passing identity described silencing themselves and their opposition to these racial stereotypes in fear of being perceived as challenging someone in an authority position. This is consistent with the research on supervisees’ perspectives on power
dynamics in supervision (Copeland et al., 2011; Green & Dekkers, 2010), and the lack of attention to the power differentials may inadvertently silence BIPOC supervisees.

With regard to the concept of cultural humility in supervision, Hook et al. (2013) emphasized the importance for supervisors to attempt to not view their own beliefs as superior. The experiences of the participants in this study suggest that some White supervisors were unaware of the impact of the lack of discussions on race within supervision. A major theme in this study included that some participants perceived that conversations about race and other cultural concerns were not valued in supervision. Several participants expressed their desire for their supervisor to incorporate discussions on race and racial identity into their supervision. This perhaps reflects the differing worldviews of BIPOC supervisees and White supervisors. Specifically, conversations on personal biases, race, racial identity, and discrimination were often omitted or neglected in supervision. Also, several participants reported experiencing cultural ruptures (i.e., microaggressions, overt racist comments) that occurred in supervision. These cultural ruptures subsequently lead BIPOC supervisees to perceive their White supervisors as less culturally competent and, perhaps, even less culturally humbled as suggested by the research on cultural ruptures (Hook et al., 2013). Hook et al. (2013) found that people’s experience with microaggressions in psychotherapy added to their negative perceptions of the therapist’s cultural humility and subsequently led to weaker therapeutic rapport. This present study highlights the role of cultural ruptures in therapeutic alliance formation between supervisees and supervisors.

BIPOC supervisees shared feelings of isolation and lack of trust with White supervisors because of their silence or avoidance on discussions of race or cultural issues. Consequently, participants in this study highlighted that their learning was inhibited due to the lack of culture-
friendly spaces within supervision. For the future of healthcare practitioners, cultural competence and humility training needs to be included more readily into the psychology training and graduate curriculum. It is necessary for healthcare practitioners to provide culturally competent care for diverse populations.

Hook et al. (2013) suggested that culturally humble supervisors attempt to avoid making assumptions that are offensive to BIPOC supervisees. In the present study, several BIPOC supervisees with a passing racial identity shared their experiences with microaggressions associated with their passing racial identity. Some participants contributed supervisors’ insensitive remarks to the presence of their passing White identity and their unawareness of their BIPOC identity. According to the literature, a culturally humble supervisor would attempt to cultivate an interest in supervisees’ perspectives (Corey et al., 2010), yet in the present study participants were not invited by White supervisors to discuss cultural issues or concerns. Notably, White supervisors did not initiate conversations about race and cultural identities within the supervisory relationship. BIPOC supervisees in the present study readily highlighted this experience in a cross-racial supervisory dyad. These findings are consistent with Burkard’s (2006) study, which suggested that supervisees perceived supervisors as less culturally competent due to the supervisors’ lack of awareness or acknowledgment of supervisees’ marginalized identities. Furthermore, Burkard et al. (2006) found that the therapeutic alliance was negatively impacted if the supervisee perceived that the supervisor did not value cultural experiences.

Supervisors’ abilities to adopt a culturally humble stance allow them to bracket their judgments of their supervisees and value their differing worldviews or ideologies. In the present study, a major theme identified was supervisees’ fear to explore their racial identity in
supervision. Several BIPOC supervisees expressed feeling anxious about discussing their racial identity development because of the lack of emphasis on racial issues, which, in turn, highlighted their awareness of their social position within the ladder of hierarchy. BIPOC supervisees expressed feeling uncomfortable to confront White supervisors’ worldviews in order to maintain tranquility within the supervisory relationship. BIPOC supervisees highlighted the influence of power dynamics on their perceptions of White supervisors’ silence on racial conversations. Several participants acknowledged that White supervisors assumed authority figure roles based on their job duty to evaluate supervisees at the end of their clinical placement. It is conceivable that supervisors’ humble expression of their own cultural identities might have eased clients’ comfort and positively impacted the therapeutic alliance.

Additionally, BIPOC supervisees in the present study described the negative impact of microaggressions on their comfort levels in supervision and ability to trust the White supervisor to hold a safe space to discuss cultural issues. These negative feelings, such as anxiety, have been highlighted in the literature on people of color’s experiences with microaggression within cross-racial supervision (Constantine & Sue, 2007; Hedin, 2018; Sukumaran, 2016). In addition, the refusal or avoidance of discussions on race results in BIPOC supervisees experiencing racial microaggressions in cross-racial supervision (Hedin, 2018). Yet, for BIPOC supervisees with passing racial identity, they additionally experience internal conflicts with disclosing their marginalized identity to their supervisor. For BIPOC supervisees with passing racial identity, it may be safer to be viewed as a White person than a person of color who was just subjected to racial stereotypes by an authority figure. These experiences of the participants correlate with the current literature on how supervisors may be unintentionally engaging in racial oppression within cross-racial supervisory dyads (Norton & Coleman, 2003).
BIPOC supervisees highlighted the significant impact of the power differentials within the cross-racial supervisory dyad and on conversations of race and racial identity. BIPOC supervisees described the influence of supervisors not attending to multicultural discussions within supervision by feeling silenced as minorities within the relationship. The current literature on cross-racial supervisory dyads highlighted the importance of supervisors acknowledging existing power imbalances between them and supervisees (Eklund et al., 2014; Hays & Chang, 2003). According to the literature, cross-racial supervisory relationships are more prone to conflict due to power differentials because of the supervisor’s membership in a dominant culture in America (Ancis & Ladany, 2010; Bernard & Goodyear, 2014). In this present study, a significant barrier to having conversations about race appears to be from the lack of comfort in supervisory relationships. BIPOC supervisees reported feeling misunderstood by their White supervisors because of the difference in cultural values. Therefore, it is important for White supervisors to create supervisory relationships emphasizing safety and multicultural discussions within a multicultural supervision framework (Ancis & Ladany, 2010).

Sukumaran (2016) found that the supervision experience of BIPOC supervisees can mimic their racial experience within American society’s racial climate. In May 2020, a 46-year-old Black man, George Floyd, was murdered by a White police officer in Minneapolis, Minnesota, and a video footage of his death was widely circulated in the media, thus prompting Black Lives Matter protests across the United Stated (Buchanan et al., 2020). Furthermore, Barrie (2020) analyzed data derived from Internet search engines and found that George Floyd’s killing “led to a pronounced uptick of interest in racism” (p. 2). Notably, some BIPOC supervisees identified a shift in their confidence levels to bring up the discussion about race preceding the Black Lives Matter protests that occurred during the summer of 2020. Also,
BIPOC supervisees recognized a difference in White supervisors attempting to broach the conversations on race and cultural issues after the Black Lives Matter protests, which, in turn, impacted the supervisory relationship. For people of color, culturally unresponsive supervision is associated with feelings of disregard or feeling dismissed by their White supervisors (Burkard et al., 2006). Some participants disclosed their awareness of the importance of multicultural conversations and initiative to discuss race with their White supervisors after the Black Lives Matter protests occurred. In addition, these participants shared that they questioned the authenticity of these conversations proceeding the Black Lives Matter protests. Nevertheless, BIPOC supervisees acknowledged the importance of having these discussions about race and found comfort within supervision to have these conversations openly.

Participants in the present study reported not feeling supported in their efforts to attempt to explore racial issues. Burkard et al. (2006) explored both culturally responsive and unresponsive cross-racial supervisory dyads. Their study found that BIPOC supervisees who felt comfortable and supported to explore racial topics were in culturally responsive supervision. Studies have reported the significant impact of culturally unresponsive supervision on supervisees’ training and client outcomes (Pieterse, 2018). Some supervisees in this study experienced culturally unresponsive supervision with their White supervisors and thus sought out additional supervision to address discussions about race and ethnicity.

Even though this study did not explore the racial identity statuses of the White supervisors, it is of importance to examine the impact of the BIPOC supervisees’ racial identity status on the working alliance within cross-racial supervision. According to Chang et al. (2003), there are three possible racial identity status interactions between a White supervisor and a BIPOC supervisee: parallel, cross-progressive, and cross-regressive. In this present sample,
BIPOC supervisees’ experiences in cross-racial supervision could be categorized in the cross-regressive relationship. Chang et al. stated that a cross-regressive relationship is defined by the supervisee’s advanced racial identity status in comparison to the supervisor; therefore, the supervisee is willing to discuss racial/cultural issues as they pertain to the supervisory/counseling relationships. As for the supervisor in the cross-regressive relationship, they may be unaware of racial/cultural issues or communicate with the supervisee in a stereotypical way (Chang et al., 2003). Participants in this study reported their desire to explore racial/cultural issues in supervision, and for some, they felt either uncomfortable to bring up the topic or ignored when the topic of race was brought up in supervision. BIPOC supervisees explained their internal dialogue of debating whether to explain to the White supervisor about a racial microaggression that was made or attempt to educate the supervisor on racial/cultural topics. Chang et al. suggested that supervisees in this relationship will “either challenge the supervisor so that the supervisor will seek supervision of his or her supervision or that the supervisee will find racially and culturally appropriate supervision elsewhere” (p. 131). Participants in this study did both; some participants challenged their White supervisors by opening up the dialogue on race and racial issues, and others reported that they sought out external supervision to receive culturally appropriate support.

It is important to acknowledge the context of the past year in which interviews were held during a global pandemic. On January 30, 2020, the World Health Organization (WHO) declared a global pandemic for the coronavirus disease 2019 (COVID-19; Wu & McGoogan, 2020). As of October 2021, there are approximately 242,688,319 global cases and 4,932,928 global deaths (Dong et al., n.d.) and still counting. As a preventive measure, many countries including the United States implemented public health measures such as social distancing and quarantine.
Both social distancing and quarantine strategies include a restriction of movement and limited personal contact with friends, family, and colleagues (Knobler, 2004). Studies have found that quarantine measures increased the risk for depression, anxiety, post-traumatic stress symptoms, and increased anger (Brooks et al., 2020; Hossain et al., 2020). Yang et al. (2021) explored the pandemic’s influence on college students and their health during the COVID-19 outbreak. They found that college students’ learning was not halted; rather, many institutions began offering online coursework. Also, their study found that academic pressures remained, and students are experiencing significant stressors such as “conflicting family schedules, changes in eating and sleeping habits, separation from classmates, and loneliness” (Yang et al., p. 2). Considering all these stressors due to the global pandemic, it is important to acknowledge the potential impact on the participants in this study. Participants shared their adaptation to virtual and remote work during their supervision experiences alongside the constant stress and anxiety that the pandemic presented to them. Some participants shared their increased conscious awareness of racial disparities in health outcomes and access to safe work for their clients of color.

**Limitations of the Study**

The primary limitation of this study is the generalizability of the results, which is characteristic with qualitative research. In most qualitative research studies, the sample size is often small and not randomized like quantitative studies. The goal of a qualitative study is to obtain a significant amount of information from people who have experience with the topic under investigation (Patton, 1990). Thus, the goal of this study was to focus on the cross-racial supervisory experiences of the participants in the study. The findings will not be generalizable to other trainees given the sample size, and it has not been researched very much yet. However, this
study helped to establish a foundation of knowledge on how BIPOC supervisees with passing racial identity experience cross-racial supervision.

Another limitation of this study is that the researcher, the second coder, and auditor are insiders to the psychology doctoral community. Also, I have had cross-racial supervisory experiences and pass as White. With all phenomenological studies, there is potential for researcher bias to influence the study at any point. Since I am a member of the participant group, biases may have been injected into the study (Baker, 2006). These biases were attended to through journaling and memoing throughout the study. Additionally, this insider status may influence participants’ trust and level of disclosure during the interview with me. Participants may assume I understand their experiences because of the insider status, which may influence the amount of information offered.

Participants’ data were collected through self-report, and the possibility of social desirability needs to be considered for the study. BIPOC supervisees may have answered questions in ways that others involved in the study would have answered and what they believe would be acceptable to me. Also, it is important to consider that the supervisor’s racial identity status and stage may be assumed by participants who are being interviewed. Therefore, another limitation of this study is that participants may misidentify their supervisors as White, as no first-hand narrative or data about the supervisor were gathered. Thus, it is possible that White supervisors might have felt the need to attend more to issues of race if they thought their supervisees identified as people of color.

Next, 11 of the 12 participants self-identified as female. It is possible that the results could be different if there were more male participants recruited. Notably, 75% of doctoral psychology students identified as female, and only 25% identify as male (APA, 2020); therefore,
it was expected that mostly female participants would volunteer for the study. The gender of the participants impacts the study’s findings because their experiences and suggestions for cross-racial supervision may be gender-based bias. Future research would benefit from exploring the lived experiences of men and other non-binary individuals to provide another viewpoint of experiences. Furthermore, the primary researcher, second coder, and auditor all identify as female, and gender bias may have been reflected within the data explication phase. However my research advisor identified as male, and this may have countered the gender bias presented in the other three researchers. Future studies would benefit from a more gender-diverse research team to balance out potential gender bias in the data explication phase.

Also, 8 of the 12 participants reported currently living in the same geographic location (Northeast United States). Students from other geographic locations may have different experiences than those from the majority of the participant group. For example, in the Southern part of the United States there are cultural symbols of the segregated South and slave ownership; thus, these dynamics may impact schools and students in the South (Hardie & Tyson, 2013). Therefore, participants in this study from the Northeast may have experienced racial dynamics differently in comparison to the experiences of students from the South, Midwest, Mountain Region, and West. Future research should emphasize recruiting more students from multiple geographic locations to get different perspectives from students in these locations. Moreover, collecting data from several locations can impact the generalizability of the results.

Regarding the interview protocol, the ordering of the questions may have influenced the data collected. For example, there were times when the interview protocol asked BIPOC supervisees to speak about their experiences of race or racism in cross-racial supervisory dyads,
Another shortcoming of this study included the lack of an intersectional approach, which was not factored into the study design, questions, or analysis. The concept of intersectionality can be defined as the examination of interacting variables, not just one variable, such as race and gender that make up individuals’ lives, interpersonal relationships, and systems in which they exist (Davis, 2008). Future research would benefit from an intersectional approach because not all BIPOC supervisees will be fluid in their approaches to clinical supervision. An intersectional approach to the research design and data analysis would examine the power, privilege, and oppression that exists in clinical supervision. Notably, cultural humility and intersectionality has been studied in mental health treatment, and results demonstrated that client outcomes improve (Krumen-Nevo & Komem, 2015).

**Recommendations for Future Research**

This study highlights several possibilities for further research on the experiences of BIPOC supervisees with passing racial identity in cross-racial supervision. As noted in the literature review, the counseling literature lacks empirical studies on BIPOC supervisees with passing racial identity and cross-racial supervision. Further study would provide BIPOC supervisees tools that would assist them in engaging in conversations about race and cultural issues. It is suggested that further research would explore the role of racial identity within the cross-racial supervision relationship as a predictor, as previous research has suggested such a relationship (Bhat & Davis, 2007).

Passing as White has yet to be thoroughly explored as a phenomenon that impacts therapists and BIPOC supervisees. The act of concealing parts of oneself in order to assimilate to
the White culture leads to distress due to the threat of discrimination if marginalized identity is disclosed (Salahuddin & O’Brien, 2011). This study revealed several aspects of passing as White, including using passing as a strategic tool that protects BIPOC supervisees from experiencing emotional effects of racism and feeling accepted by the majority culture. Consequently, due to the limited research of passing as White within the mental health field, this may be expanded to studying BIPOC clients or BIPOC supervisors who self-identified with the passing racial identity to view whether the experience presents differently based on power differences within a relationship. Also, there is an apparent need for more identity research on individuals who pass as White and are White presenting. Studies on identity research with a greater participant pool could address these limitations and highlight an underexplored topic for future investigations. Exploration on racial identity development for individuals who pass as White would benefit from the investigation of biracial and multiracial people, both in the United States and people around the world. Research assessing identity development in relations to early experiences of discrimination and prejudices might facilitate the examination of White passing experience. Further research might also explore the areas of overlap between passing as White and other marginalized identities. Moreover, this present study and other studies should focus more on an intersectional approach to both research design and analysis.

Additionally, future research would benefit from exploration of the impact of the Black Lives Matter protests on the discussions of race within both supervision and the field of mental health. Therefore, further study would be helpful on how to bring awareness to the influence of the Black Lives Matter protests and encourage these conversations surrounding race, which would result in clinicians providing multiculturally competent service to clients. For example, future research would benefit from the connection between racial identity development and
cultural humility with a focus on the impact of Black Lives Matter protests on more readily available conversations on systemic racism.

**Recommendations for Clinical Supervisors**

For most of the participants, they reported that their White supervisors were unresponsive to cultural awareness and power dynamics. These incidents in the participants’ cross-racial supervisory experiences align with prior research that highlight supervisors’ lack of awareness in cultural issues and power dynamics (Constantine & Sue, 2007; Falender et al., 2014). Participants in this study reported negative effects of the lack of conversations about race on the relationship of trust within the supervisory relationship. Also, participants reported feelings of discomfort in bringing up the discussion about race in supervision with their White supervisors. Clinical supervisors could increase the trust with BIPOC supervisees by initiating discussions on race and racial issues.

Participants in this study shared their perspectives about the lack of trust within their cross-racial supervisory relationship. Arczynski and Morrow (2017) studied the importance of establishing trust in clinical supervision through an atmosphere of openness and honesty. They recommended that supervisors acknowledge the power dynamics and hierarchy within the supervisory relationship early in the relationship. Also, they highlighted the relevancy for supervisors to discuss clinical expectations with the supervisee and hold an open dialogue to meet supervisees’ needs. Finally, they suggested that supervisors model vulnerability and honesty through authentically sharing their impressions with their supervisees. These recommendations can be extended to cross-racial supervisory dyads as well.
Conclusion

The purpose of the present study was to investigate the first-person lived cross-racial supervisory experiences of BIPOC supervisees with a passing as White racial identity. The phenomenological design provided some insight into the shared lived experience of what some BIPOC supervisees with a passing racial identity have experienced in supervision with White supervisors. The themes that emerged from this research highlight the discomfort that exists within cross-racial supervision between White supervisors and BIPOC supervisees with a passing racial identity partly because of the lack of safety and trust within the relationship to discuss race and racial identity. Both the supervisory relationship and perceived supervisor multicultural competence impacted BIPOC supervisees’ multicultural counseling self-efficacy. BIPOC supervisees expressed self-doubts regarding bringing up conversations about race and the importance of having these discussions at the potential expense of their own psychological wellbeing.

The results of this study demonstrated that passing as White can be an act of survival that allows BIPOC supervisees to access protection from the trauma of racism. Results from this study indicate that passing can be intentional and/or involuntary, depending on the circumstance. Passing for BIPOC supervisees took the form of gaining access to privileges associated with having lighter skin and more European features. Notably, many individuals in the study did not always intentionally attempt to pass as White yet would do so when the perception of discrimination was present. This suggests that passing depends on the context and situation in which one is living.

The participants of the study were able to identify that they felt uncomfortable to raise their concerns about the lack of conversations about race with their White supervisors due to the
power hierarchy that exists within the supervisory relationship. Moreover, some of the participants described their awareness of the shift in conversations about race and other cultural issues, which emerged following the Black Lives Matter protests. Thus, BIPOC supervisees with passing racial identity gained more confidence and security to bring awareness to the dynamics of race with their White supervisors. White supervisors’ silence on conversations about race were highlighted by the participants of this study, which are significant in understanding how supervisors can act as gatekeepers to either bridge or maintain the division of the cultural gap within cross-racial supervision. Similarly, the rigidity of supervision topics was perceived as less efficacious by BIPOC supervisees.

In summary, this study has expanded the focus of cross-racial supervisory dyads by focusing on BIPOC supervisees with a passing racial identity. Also, this study contributes to a better understanding of how White supervisors broach or avoid conversations about race with students who are perceived as White. Also, this study identified the relevance of further research on this topic of the passing as White experience and provides practical recommendations for supervisors. I hope that this research will provide a foundation for further research on the experiences of both cross-racial supervision and passing as White racial identity.
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APPENDIX A

Semi-Structured Interview Protocol

1. Can you describe what “passing” as White means for you?

2. How has the ability to pass as White impact your racial identity development?

3. Can you explain a time when you were aware of your “passing” racial identity and can you describe your feelings in the moment?

4. Can you describe a time when you avoided telling your Supervisor you were not White? If so, what was that experience like for you?

5. How has your identity work been impacted by your ability to pass as White?

6. How would you describe your clinical interactions with your supervisor?

7. Can you explain a time when you felt uncomfortable with your supervisor concerning the topic of race/ethnicity?

8. How is the topic of race introduced in your clinical supervision experience?

9. Think of some of the stereotypes that exist about your racial group. How has/have your supervisor(s) subtly expressed their stereotypical beliefs about you?

10. How, if ever, have you felt “put down” because of your cultural values or communication style in supervision?

11. Discuss the most memorable situation in supervision when you felt uncomfortable because you perceived the interaction with your supervisor to have overt racial undertones and you questioned if it was because of your ability to pass as White. What feelings came up for you? Please describe the impact of this interaction on your supervision relationship specifically.
12. What impact do you believe that specific experiences of subtle or overt racism in supervision has on you personally? On the supervision relationship?

13. Was racial identity discussed in supervision? If so, who brought it up? Can you describe your supervisor’s reaction?

14. Have you explored your racial identity within supervision? Has your supervisor discussed their racial identity in supervision?

15. How would you describe where your White supervisor is in regards to their racial identity?

16. Have you discussed your experience of passing as White with your supervisor?

17. How do you view your supervisor outside of the supervisor/supervisee relationship?

18. At another time, did you have a BIPOC supervisor and how was this relationship different than your current relationship?

19. What are some other factors that impact your relationship with your supervisor?

20. Can you describe a significant moment when you felt connected with your supervisor?

21. How has this cross-racial supervision experience influenced your multicultural competency? On your work with your clients? On your professional development in general?

22. Is there anything else you would like to share to help with my understanding of your lived experiences?
APPENDIX B

Demographic Questionnaire

Instructions: Please provide a response for each of the following questions:

1. What is your age? __________

2. How do you currently identify your gender?
   - Female ○
   - Male ○
   - Transgender/Trans-man/Trans-woman ○
   - Intersex ○
   - Queer/Gender Non-Conforming ○
   - Other; Please identify ○

3. With what racial group(s) do you identify?
   ____________________________ ____________________________

4. What academic program are you in?
   - Counseling Psychology PhD ○
   - Clinical Psychology PhD ○
   - Other: ____________________________ ○

5. Do you work with a White supervisor?
   - Yes ○  No ○

6. Do you identify with a ‘passing’ racial identity or are perceived as a ‘passing’ identity? (i.e., pass as/for White or non-minority member)?
   - Yes ○  No ○

7. What is your current job title?
   ____________________________________________

8. How long have you been working with your current supervisor?
   ____________________________________________
9. How often do you meet with your supervisor?

Daily ○ Weekly ○ Bi-Weekly ○
Other: ____________________

10. How long do you meet with your supervisor each session?

5-10 minutes ○ 30 minutes ○ 1 hour ○ 1.5 hours ○ >2 hours ○

11. What state(s) are you practicing in?

______________________________________________________________
Table 1

Demographics of Participants

<table>
<thead>
<tr>
<th>Participant</th>
<th>Age</th>
<th>Gender</th>
<th>Race</th>
<th>Academic Program</th>
<th>Job Title</th>
<th>Frequency of Supervision</th>
<th>Length of Supervision Sessions</th>
<th>Practicing State</th>
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<tr>
<td>Bethany</td>
<td>43</td>
<td>Queer/Gender nonconforming</td>
<td>Bi-racial: Half Filipino half white</td>
<td>PhD Counseling Psychology</td>
<td>Trainee</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Central United States</td>
</tr>
<tr>
<td>Alexa</td>
<td>30</td>
<td>Female</td>
<td>Middle Eastern and Multiracial</td>
<td>PhD Counseling Psychology</td>
<td>Intern</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Southern United States</td>
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<tr>
<td>Jordan</td>
<td>27</td>
<td>Female</td>
<td>Mexican, White Multiracial</td>
<td>PhD Counseling Psychology</td>
<td>Full-Time Student</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Central United States</td>
</tr>
<tr>
<td>Diana</td>
<td>27</td>
<td>Female</td>
<td>White/Middle Eastern</td>
<td>PsyD Clinical Psychology</td>
<td>Advanced Practicum Therapist</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Central United States</td>
</tr>
<tr>
<td>Leslie</td>
<td>31</td>
<td>Female</td>
<td>White/ Middle Eastern</td>
<td>PhD Clinical Psychology</td>
<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Northeastern United States</td>
</tr>
<tr>
<td>Monique</td>
<td>26</td>
<td>Female</td>
<td>White/ Bi-racial (LatinX)</td>
<td>PhD Counseling Psychology</td>
<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Northeastern United States</td>
</tr>
<tr>
<td>Christina</td>
<td>28</td>
<td>Female</td>
<td>White (Greek)/ Hispanic (Colombian)</td>
<td>PsyD Clinical Psychology</td>
<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Northeastern United States</td>
</tr>
<tr>
<td>Meredith</td>
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<td>Female</td>
<td>LatinX/ Asian</td>
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<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Northeastern United States</td>
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<tr>
<td>Olivia</td>
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<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
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<tr>
<td>Hailey</td>
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<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Northeastern United States</td>
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<tr>
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<td>Hispanic</td>
<td>PsyD Clinical Psychology</td>
<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
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</tr>
<tr>
<td>Ruth</td>
<td>31</td>
<td>Female</td>
<td>White/Hispanic</td>
<td>PsyD Clinical Psychology</td>
<td>Extern</td>
<td>Weekly</td>
<td>1 hour</td>
<td>Northeastern United States</td>
</tr>
</tbody>
</table>
Sub-themes

Avoidance of disclosing passing racial identity
Loss of trust in supervisor
Felt put down because of cultural values
Racial stereotypes/microaggression
Sought out additional supervision

Supervisor’s intentionality to discuss race
Supervisor’s cultural competency
Supervisor’s values on diversity
Supervisee’s comfortability
Supervisors of color discussed race more
Difference in supervisor’s/supervisee’s intentions
Higher likelihood of disclosures
Impact of Black Lives Matter protests summer

Silence in relation to power dynamics
Avoid asking for help
Suppression needed to survive
Lack of trust in supervisor’s awareness
Power hierarchy within supervisory dyad
Supervisee’s feelings of anxiety to discuss race

Comfortability to explore race
Designating time to discuss identity work
Acknowledging differences
Importance of values reinforced
Transparency of supervisee

Lack of transparency of White supervisors
Differences in communication patterns
Authenticity means vulnerability
Honesty about opinions of clients
Importance of acknowledging blind spots
White privilege and minimization of racism
BIPOC supervisee forced to educate

Themes

Disconnection

Frequency of Discussions on Race

Supervisees’ Fear to Explore Identity Development

Multicultural Competency

Lack of Safety in Cross-Racial Supervision
June 26, 2020

Bridget Anton
Seton Hall University

Re: Study ID# 2020-096

Dear Ms. Anton,

At its June 24, 2020 meeting, the Research Ethics Committee of the Seton Hall University Institutional Review Board reviewed and approved your research proposal entitled “Passing as White: The Experiences of Supervisees of Color” as submitted. This memo serves as official notice of the aforementioned study’s approval. Enclosed for your records are the stamped original Consent Form and recruitment flyer. You can make copies of these forms for your use.

The Institutional Review Board approval of your research is valid for a one-year period from the date of this letter. During this time, any changes to the research protocol, informed consent form or study team must be reviewed and approved by the IRB prior to their implementation.

You will receive a communication from the Institutional Review Board at least 1 month prior to your expiration date requesting that you submit an Annual Progress Report to keep the study active, or a Final Review of Human Subjects Research form to close the study. In all future correspondence with the Institutional Review Board, please reference the ID# listed above.

Thank you for your cooperation.

Sincerely,

[Signature]
Nara Podvey, PhD, OTR
Associate Professor
Co-Chair, Institutional Review Board