Growth-Promoting Supervision: Reflections From Women of Color Psychology Trainees

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This paper discusses growth-promoting supervisory practices from the perspectives of women of color psychology trainees. Based on three personal narratives, we discuss the unique ways that supervisors invite the multiple salient identities of trainees into the supervisory relationship and engage in a mentorship approach tailored to each trainee. We discuss key themes that emerged across the three narratives: the importance of a supervisor pivoting between the role of the expert and the role of a learner, the value of embracing an attitude of shared responsibility toward promoting trainee growth, and the role of cultural humility in the supervisory relationship. We draw from various theories in framing our work, including Paulo Freire’s theory of conscientização and Atkinson, Morten, and Sue’s (1998) Five-Stage Model of Cultural/Racial Identity Development. We close with situating these impactful supervisory practices within the context of the American Psychological Association’s (2015) “Guidelines for Clinical Supervision in Health Service Psychology.”

Public Significance Statement

This article illustrates growth-promoting supervisory practices from the perspective of women of color psychology trainees. Through personal narratives from the authors, the importance of supervisor-shared responsibility and cultural humility are illustrated. These supervisory practices are situated within seminal theoretical frameworks as well as the American Psychological Association’s (2015) “Guidelines for Clinical Supervision in Health Service Psychology.”

Keywords: women of color, psychology trainees, shared responsibility, cultural humility, cultural identity development
Clinical and research supervisors play a critical role in the development of psychologists-in-training. They are often at the forefront of students’ training experiences and provide direct guidance and feedback to students to facilitate their growth. The American Psychological Association (APA) outlines specific standards of cultural competence recommended for graduate level supervisors. These guidelines serve to optimize the performance of supervisors and ensure the provision of excellent supervision to trainees in the field of psychology. Similar to the multicultural guidelines outlined by APA for ethical practice with clients and research participants in psychology, APA also indicates that as part of their overall competence in supervision, supervisors should strive for multicultural competence in working with psychology trainees. This recommendation seems apt since graduate students of color, representing roughly one third of graduate psychology trainees (APA, 2016), often have unique experiences that can impact their training endeavors.

The narratives that follow were developed by three women of color graduate students who speak about their individual experiences as psychology trainees. From these separate narratives emerged several overarching themes central to the positive supervisory experiences of the trainees. These include: a shared responsibility between trainees and supervisors concerning the growth and development of the trainee; the importance for supervisors to be open and willing to learn and grow in their own journey as supervisors; the impact of creating a safe space for trainees of color; the function of cultural humility in the supervisory relationship; and the use of social justice principles in advocating for the training needs of supervisees.

The first narrative illustrates the process of conscientização, a term coined by Paulo Freire, that speaks to the personal and social transformation associated with the dialectical process of deeply reflecting on one’s social reality and taking action to alter it (Freire, 2000). This critical consciousness calls for individuals to author their own history by critically understanding their environment and their place in it to transform reality and relationships (Freire, 2000; Martín-Baró, 1994). Specifically, the narrative offers evidence of growth obtained through reflection of cultural identities and oppressive forces and the subsequent actions that led to personal and relational change.

Throughout the narratives, we also reflect on our respective stages of cultural identity development in the supervisory process. Atkinson et al. (1998) describe a Five-Stage Model of cultural/racial identity development that is relevant to graduate trainees of color. First, conformity is when an individual predominantly identifies with White culture and is not interested to identify with or learn about their own racial or ethnic heritage. An individual enters the dissonance stage after encountering experiences that are inconsistent with previously held beliefs of their cultural group; this results in questioning beliefs of the majority group and developing initial curiosity about one’s own heritage. The third stage, resistance and immersion, occurs when one deeply explores their own racial or ethnic background to identify a new identity while withdrawing from the dominant culture. As an individual moves toward introspection, they attempt to integrate this newfound racial identity into the dominant culture. The final stage of synergistic articulation and awareness is when individuals can objectively appreciate positive attributes in various groups while retaining their multiple identities from their racial or ethnic background (Uba, 1994). In the narratives below, we discuss how our supervisors inadvertently guided us through these stages of our own professional cultural identity development. We also reflect on how a multicultural orientation informed by cultural humility (e.g., Hook et al., 2016) was used and modeled by each of our supervisors.

**Narratives**

**On Negotiating Space**

As a Black woman, I have had lifelong practice in being conscious of my sociocultural identities and how they align or misalign within various environments and social contexts. Hence, being critically minded has become a natural and necessary framework for my everyday processing and carries into my professional work as a psychologist-in-training. For this reason, I am most drawn to theoretical approaches to counseling and supervision that are culturally informed and acknowledge the impact of systemic oppression as not merely discretionary but primarily relevant to the change and training process. I firmly believe that the training environment is not exempt from systemic oppression and that issues of power and privilege are consistently present whether or not they go acknowledged.

Instances that notably challenged my understanding of myself as a clinician and as a professional are moments that further deepened my awareness of how systemic factors influence both my intervention choices and how and when I choose to use my voice. Personal growth through this type of challenge came to life in one supervisory relationship in particular. This supervisor primarily identified as an existential counselor with experience in relational and emotion-focused frameworks. She was a skilled, culturally humble clinician and supervisor, adept at prompting self-exploration from others in a patient, warm, and thoughtful manner while allowing ample space and time for processing. I already felt close to her, given a shared multicultural approach to others and similar transformative experiences navigating predominantly White school and work settings as women of color. I trusted her so much with my counselor development that I never felt the need to hide any of my perceived clinical shortcomings or struggles from her. I imagine that this trust and mutual respect we had for one another facilitated one of the most influential moments of my training so far.

In one particularly memorable supervision session, held about midway into the training year, my supervisor inquired about my training experiences outside direct client services. As I followed up with her on my progress with outreach, seminars, and didactics, I opened up about my experience in group supervision, primarily my observations about negotiating the space.

**Trainee:** I’ve noticed that I’ve been more quiet than usual during group supervision. I often feel that I do not have as urgent clinical matters as everyone else. Other people seem to need the space more.

**Supervisor:** Well, urgent is a subjective word, and some trainees will always categorize their caseload as urgent. Even if you do not feel you have something pressing, I know that you are still engaged.
in supervision and giving other trainees thoughtful feedback. You deserve that, too. Remember that your development is just as important as theirs. I want to challenge you to bring in more from your own cases even if, from your perspective, you wouldn’t describe them as urgent.

Whereas I have always viewed my propensity to pull back in professional group settings as a tendency to speak only when I have something meaningful to contribute to a conversation, my supervisor challenged me to consider alternative interpretations to this dynamic. She (correctly) noted that whereas I was not taking up much space in group supervision with my own clinical struggles, I was surely providing helpful feedback and supervision to my peers. In a sense, I was giving support without expecting or requesting any in return while denying myself opportunities for my own clinical growth and consultation.

As I reflected on her astute observation, I noted that my supervisor was effectively describing my dynamic in group supervision as a symptom of larger social ills and messaging that routinely tell Black women that their needs are not as significant (to use my own term) as others'. Intersectionality theory aids in explaining this process by positing that Black women face a unique and compounded form of gendered racial oppression that promotes invisibility and erasure (Crenshaw, 1989). And other literature offers evidence that many Black women often feel silenced or invisible in educational settings (Lewis, Mendenhall, Harwood, & Browne Hutt, 2016). I recognized how I was mimicking greater social dynamics despite having structured my whole professional (and personal) identity around identifying and challenging such dynamics to advocate for others. Somehow I was unable to see how I had internalized these messages and was unknowingly playing them out in my own clinical training while not advocating for myself. My supervisor’s observation clarified for me that I was at the introspection stage of my cultural identity development and had not yet achieved integrative awareness as I had previously believed.

At the end of our conversation, my supervisor continued to gently remind me that my own developmental needs were just as important as my fellow trainees’. She encouraged me to utilize group supervision more intentionally, even if I did not believe that my own developmental needs were as urgent. Through the training year, I continued to reflect on her words and became more deliberate with taking up space. I even noticed when similar dynamics occurred within professional group settings and in process groups. I witnessed the familiar cycle of women of color offering support while not necessarily asking for, or receiving, it from their peers. Because I had been challenged by my own supervisor to reflect on this topic, I used this newfound awareness to better intervene and advocate for others. I became a more effective clinician and colleague.

I reflect on this supervision moment fondly because it encapsulates one of the many and subtle ways I was challenged and seen throughout our supervisory relationship. It feels notable to me that this other woman of color, whom I respected and trusted greatly, fully saw me as a person with complex identities that I could not shed before entering the training environment. And from this holistic understanding of me, she made an observation that permeated beyond the surface and prompted more authentic self-reflection on my part. I became much more aware of space—how it is negotiated and who feels entitled to it—and this awareness eventually led to a feeling of empowerment that I hope to continue facilitating with others. My transformation, mainly a deeper analysis of my own internal and external world, can also be interpreted as an expansion of my critical consciousness per Freire’s definition. Freire primarily stressed the process of critical reflection of social inequities and action in fostering personal and social change through consciousness-raising or conscientização (Freire, 2000).

In my narrative, my supervisor fostered reflection by encouraging me to engage in a critical understanding of the process of negotiating space as a Black woman. With this new knowledge and lens, I transformed my social reality both individually and collectively by taking critical action to illuminate my voice and those from other women of color, thus challenging a perceived social inequity.

Cultural Humility in Supervision

Clinical psychology is not a common career choice for many individuals who identify ethnically as South Asian, be it because of stigma regarding mental health issues, lack of awareness of clinical psychology as a profession, limited role models, or for other reasons. To this point, whereas the percentage of Asians in the psychology workforce in the United States has increased in recent years, this segment of the population still made up only 4.3% of the active psychologists in 2013 (APA Center for Workforce Studies, 2015). However, my identity as a South Asian Canadian, and particularly my experience of migrating to Canada with my family, were exactly what influenced me to pursue a profession as a clinical psychologist. I found it fascinating that mental health needs were rarely acknowledged in a process as life-altering as migration, and particularly in more dire circumstances like forced displacement. When researching graduate programs, I searched for a supervisor and a program that understood how my multiple identities—as a first-generation South Asian immigrant drawn to global and community health and social justice work—influenced my research and clinical interests. I was fortunate to find a PhD research supervisor who not only understood this but also encouraged me to leverage my overlapping identities in my training.

When I first started graduate school though, I felt a disconnect between my personal and professional identities. As clinical psychology graduate students, we are taught that the primary goal of training is to ultimately function as independent researchers and clinicians. What often gets lost in this process of training is how our multiple characteristics and experiences influence our trajectory to this point as trainees and onward as clinical psychologists. It takes a supervisor with a particular lens toward self-reflection to assist supervisees to not only find their space but also to feel confident to own that space. In one of our early meetings when we were discussing potential dissertation topics, it was my supervisor who encouraged me to pursue research questions that aligned with my prior professional experiences and personal values:

Supervisor: What are your thoughts about doing a global mental health project for your dissertation?

Trainee: Is that possible? Global mental health research doesn’t seem to align directly with clinical psychology.
Based on my supervisor genuinely taking the time to understand how my personal and professional experiences influenced my interests in global mental health (GMH), she encouraged me to pursue this area of research, despite its nascent stage in clinical psychology, and her own research focus outside GMH. Fast forward four years and I have collected data in northern Sri Lanka for my dissertation and have had the opportunity to work with a team of international researchers. I felt confident pursuing this for my dissertation, mainly because my supervisor shared her own experiences of how she carved out unique research areas and collaborated across departments while being candid about all the associated trials and tribulations. By doing so, she created a space for me to be honest about my interests, even if these were not typical for clinical psychologist trainees.

In this process, my supervisor also helped me advance my professional cultural identity development. Having grown up in a multicultural, metropolitan city, I felt I already identified as someone at the integrative awareness stage of Atkinson et al.'s (1988) Five-Stage Model. That is, on a personal level, I was able to appreciate positive characteristics from various groups while being confident about the multiple identities I carried from my ethnic background (Uba, 1994). However, at a professional level in a field with few South Asians, this was not necessarily the case. When applying to graduate school, I felt strongly about building expertise in cross-cultural mental health, yet once I was immersed in the program, I found it challenging to consistently advocate for this as one of the few voices doing so in the department. It would have been easy at this point to revert to the conformity stage (Atkinson et al., 1988) and pursue traditional clinical psychology research. Early in the program though, my supervisor reflected on the point that my personal identity (i.e., as a South Asian immigrant) influenced my professional identity in GMH work. In these initial meetings, she reminded me that carving out this path would require additional work, such as networking outside clinical psychology, obtaining mentorship from others in the GMH field, and seeking out unique funding opportunities. I had my doubts about whether I was capable of managing this additional work. Yet my supervisor’s confidence in my ability to integrate my personal and professional cultural identities facilitated my process of moving toward a professional identity of integrative awareness. Although reluctant at first, I now feel more confident to not only retain but also to foster my various identities at a professional level.

Based on my supervisor’s ability to see me as more than a clinical psychology trainee, and her encouragement of concrete ways to utilize my various identities, she created a space that felt safe, built trust, and allowed me to ultimately pursue research interests that were aligned with my values. More importantly, I felt confident to occupy space with not just my professional, but my personal identities at the forefront. My supervisor sought to understand how my cultural identity influenced my research interests (Hook, Davis, Owen, Worthington, & Utsey, 2013). In line with the construct of cultural humility, my supervisor adopted a stance that was oriented toward my training needs and leveraged my strengths (Hook et al., 2016). She was also aware of, and transparent about, her limitations in GMH research and helped connect me with faculty members within and outside our department who could support me in this work.

By demonstrating cultural humility in a myriad of ways, my supervisor’s approaches inadvertently modeled for me how I would like to provide supervision in the future. It is true that as trainees we are all developing expertise in a particular area. At the same time, my experience with a supervisor who encouraged me to pursue my passions and veer off the beaten path has meant that I am more certain as a researcher and clinician to support others with nontraditional areas of interest. I have learned that there is incredible value in being a supervisor who is comfortable acknowledging one’s limitations and ensuring your students have the mentoring supports they need (even if you are not the one to provide it). This means that trainees not only learn the value of collaboration but also benefit from expanded and enriched training experiences.

Supervision With an International Student

The role of a supportive and informed supervisor is paramount for all trainees but may be particularly instrumental for international students obtaining their graduate training in the United States. International graduate students in psychology training settings face a barrage of challenges in their pursuit of a degree (Lee, 2013). Most international students do not have access to student loans and are legally restricted in their ability to work while on student visas creating financial burdens that place an incredible amount of pressure on students (Sherry, Thomas, & Chui, 2010). These burdens might even impact the student’s ability to partake in specific training or professional development opportunities. The legal immigration process is perhaps the most arduous and stressful that international students must navigate. In addition to these practical challenges, international graduate students have typically migrated to the United States at an age when they likely have an established cultural identity, developed through their upbringing in their home country. Berry (1997) suggested that when making important decisions and navigating the challenges of their immigrant status, these students often wrestle with decisions about preserving their cultural or national identity and adapting to their host culture.

Throughout my graduate training, I have been overwhelmed with acculturative and practical challenges (i.e., navigating the paperwork and other criteria necessary to maintain legal status in the United States). These requirements have had a direct and major impact on my pursuit of appropriate training opportunities, both at the practicum and internship levels. Recently I was faced with the most challenging of these experiences while in the last few months of my predoctoral internship. I had put significant effort into locating an internship site that would provide me with the specific training opportunities that would be best suited for my career goals and at the same time provide me with the legal and logistical support necessary throughout the training year. I was able to locate such a site and throughout the year was met with compassion regarding these specific needs. My supervisor was quick to respond to requests for additional immigration related paperwork despite the fact that she had no prior experience working as an internship training director for international students. Additionally,
During supervision sessions, she would often provide a safe and empathetic space for us to discuss the variety of challenges that I face as an international student.

Recently I encountered an issue regarding the Student Visa work authorization. This visa allowed me to legally pursue and complete my predoctoral internship while remaining enrolled in my graduate program. However, the academic dates associated with my degree program, unfortunately, did not overlap perfectly with the dates contracted for my internship, and I was at risk of having my work authorization expire prematurely. After being in the United States for 7 years, I was aware that I had experienced at least the first four stages of Atkinson’s cultural identity development and was unknowingly progressing through the final stage of synergistic articulation and awareness. I believe that it was this growth in my cultural identity that allowed me to effectively communicate my needs to my supervisor while maintaining an optimistic outlook on her willingness to assist me, something that likely would not have occurred during my first few years living in the United States. As a result of my outlook in this regard, I immediately made my supervisor aware of this dilemma because it meant that there was a possibility that I would be unable to complete the final training month of my internship. I met with her almost daily to discuss my challenges and she repeatedly assured me that she would do everything in her power to ensure that I was able to complete my training, an assurance that provided me with a great deal of comfort and peace of mind in a time of significant uncertainty.

Supervisor: I can only imagine how stressful this must be for you. I’m certainly not an expert in this area, and I’m not sure how we’ll resolve this, but I’m going to do everything I can. I’ve already been in communication with our Human Resources Department regarding your status. Is there anyone else I can contact to advocate on your behalf?

Trainee: Thank you so much. It might be useful to contact Association of Psychology Postdoctoral and Internship Centers to see whether they have had similar cases in the past.

Supervisor: I’ll contact them right away. How are you coping with all the stress of this?

Trainee: It’s been very stressful but I’m trying to stay focused on my clinical work so that I do not feel too overwhelmed.

Supervisor: Let’s be sure to carve out some time in supervision to discuss some strategies for self care that might be particularly helpful at this time.

Upon reflection, it is apparent that my supervisor was independently advocating for me, acknowledging her own limitations, and empowering me to play an active and equal role in finding solutions to the problem. By adopting the perspective that both of us had equally valid knowledge regarding how best to resolve the problem, my supervisor modeled cultural humility in our supervisory relationship (Hook et al., 2016). This experience fostered deep feelings of trust and appreciation in my supervisor at a time when my own ethnic and national identity were most salient.

Despite her lack of expertise in this area, she consulted with several professionals, including other training directors, my graduate program, and human resources and finally sought out the advice and support of the Association of Psychology Postdoctoral and Internship Centers body. She provided me with constant updates about where she was in the process of resolving the issue, and we collectively brainstormed ideas for how best to approach the situation. Her persistence in this regard, along with the support of my academic program, ultimately resulted in the issue being resolved and my ability to complete the final remaining month of internship. It is paramount to note that despite my supervisor’s lack of knowledge and experience in this area and her genuine interest in my well-being and training, along with her compassion and persistence, resulted in the most favorable outcome. This approach is in tandem with the guidelines for culturally appropriate therapeutic services and techniques provided by Ibrahim and Heuer (2016). In their fifth guiding principle, Ibrahim and Heuer recommend partnering with other organizations and incorporating social justice principles when providing services for immigrants. While not serving in a therapeutic capacity, my supervisor’s actions and responses in this situation indicate that these principles also hold true in the supervisory relationship.

Discussion

In this paper, we have provided an overview of clinical and research supervision experiences from our perspectives as women of color in health service psychology graduate programs. Although based at different institutions and geographically dispersed, common themes of valuable supervision approaches emerged from our independently written narratives. These themes are not necessarily unique or innovative. Indeed, they overlap in various ways with the “Guidelines for Clinical Supervision in Health Service Psychology” (APA, 2015). Our supervisors overtly modeled for us what it looks like when these guidelines are implemented in practice and inadvertently supported our growth in personal and professional cultural identity development through their attentiveness to our salient identities as women of color trainees.

First, what contributed to a positive training experience for all of us is that our supervisors were invested in us, not just as trainees but as whole individuals with our various roles—as women, women of color, trainees, and the intersection of these different identities. Each of our supervisors was able to acknowledge and respond to our unique needs. In the first two narratives discussed in this paper, we described how our supervisors (whether women of color, or not) did not shy away from difficult conversations regarding how we take up space. In fact, these supervisors initiated these discussions. In doing so, they tackled an important part of the power dynamic inherent in supervision, in which they were not only appropriately responsive to our unique needs and interests but also invited discussions about our salient social identities and how these identities influenced our research and clinical training needs, a key facet of culturally humble supervision (Hook et al., 2016). By viewing us as whole individuals, these supervisors created a safe space for us to express our genuine interests, vulnerabilities, strengths, and hurdles as women of color trainees. In turn, this approach facilitated our advancement from introspection to awareness stages (Atkinson et al., 1998).
Furthermore, all three supervisors carried forward the principles of cultural humility in their supervision role, in which they maintained a perspective that was focused on our identities, needs, and interests as trainees. This is directly in line with Domain C, Guideline 1 of the APA’s (2015) “Guidelines for Clinical Supervision in Health Service Psychology”—supervisors value and seek to create and maintain a collaborative relationship that promotes the supervisees’ competence. This guideline emphasizes the role of the supervisor to “(a) initiate discussions about differences, including diversity, values, beliefs, biases . . .; and (b) discuss inherent power differences and supervisor responsibility to manage such differences wisely” (APA, 2015, pp. 37–38). Although in different contexts, each of our supervisors put this principle into practice and demonstrated a critical understanding of cultural humility and social awareness through inviting discussions about trainees’ cultural backgrounds as a key component of supervision (Hook et al., 2016). According to Hernández and McDowell (2010), such supervisory aptitude facilitates the building of trust and safety that is fundamental to encourage growth in contexts of cultural and social differences.

Additionally, our supervisors consistently showed an openness to the student-learner role. In instances when they were not familiar with a particular area (e.g., international student visa regulations, global mental health research, the lived experience of an international student), they showed a willingness to learn from the supervisee and acquire resources as needed, embodying a culturally humble supervision approach (Hook et al., 2016). The importance of this is stated in Domain A, Guideline 3 of the APA’s (2015) “Guidelines for Clinical Supervision in Health Service Psychology”—supervisors endeavor to cooperate with other professionals responsible for the supervisee’s education and training to ensure communication and coordination of goals and expectations. In narratives two and three in particular, our supervisors acknowledged where their knowledge was limited and accordingly sought out resources and collaborated with others across institutions to ensure our training experience was not compromised in any way, thereby embracing a sense of shared responsibility for our training.

Through these narratives, a distinct difference in supervisors’ illustrations of cultural competence was also observed. The first two narratives illustrate examples of the ways in which supervisors utilize advocacy and cultural humility in a manner that is intentional, thoughtful, and strategically growth promoting. However, the final narrative provides an example of a growth-promoting response in which a supervisor’s culturally appropriate behaviors were unintentional—emerging from a natural, instinctive response geared toward the supervisee’s well-being. Both types of responses are essential to culturally humble supervision. The supervisor must intentionally utilize strategic knowledge and resources while at the same time develop instinctive culturally appropriate responses.

Because clinical supervision has been recognized as a distinct core competency in clinical psychology (Fouad et al., 2009; Kaslow et al., 2004), there has been a plethora of literature on the topic, development of guidelines, and a focus on the identification of effective supervision components, including an emphasis on diversity factors and multicultural supervision practice (Falender & Shafranske, 2014). Whereas various definitions of clinical supervision have been proposed, Falender and Shafranske (2004) incorporate the principle of integrity in relationship as a superordinate ingredient in supervision practice. This translates to a focus on values-based practice, in which supervisors are “attentive to values and beliefs across the supervision triad of client, supervisee/psychotherapist, and supervisor; [have an] appreciation of diversity and multiple cultural identities among the same triad; and science-informed, evidence-based practice” (Falender et al., 2014, p. 1031). In reflecting on our individual supervision experiences, it was these metafactors that contributed to a rich learning process for each of us.

It is important to note that such a supervision style, with its focus on getting to know trainees as whole individuals and a willingness to acknowledge limitations and areas for growth, is not without its challenges. A supervisor who incorporates such a values-based practice must be willing to invest time and demonstrate flexibility in their approach. At the same time, our supervisors’ ability to exhibit cultural humility and embody the student-learner role, as well as their initiation of conversations regarding how we occupy space, are precisely some of the key principles outlined in the APA’s (2015) “Guidelines for Clinical Supervision in Health Service Psychology.” In this paper, we have provided three narratives of how our supervisors exemplified these principles and implemented them in practice across various settings. By illustrating our perspective, as women of color psychology trainees, on growth-promoting supervision processes, we hope that our experiences highlight for supervisors and supervisees alike ways in which such ideals can create a discernable positive impact for trainees.

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