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## Trainee Factors Predicting the Perceived Quality of the Supervisory Working Alliance

by Valeriya G. Spektor

Presented to the Graduate and Research Committee
of Lehigh University
in Candidacy for the Degree of
Doctor of Philosophy
in
Counseling Psychology

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### **Table of Contents**

		Page
I.	Title Page	i.
II.	Copyright	ii.
III.	Certificate of Approval	iii.
IV.	Acknowledgements	iv.
V.	Table of Contents	v.
VI.	List of Tables	vi.
VII.	List of Figures	vii.
VIII.	Abstract	1
IX.	Chapter 1 – Introduction	2
X.	Chapter 2 –Literature Review	15
XI.	Chapter 3 – Method	45
XII.	Chapter 4 –Results	59
XIII.	Chapter 5 –Discussion	65
XIV.	References	85
XV.	Figures	109
XVI.	Tables	118
XVII.	Appendix A –Study Measures	122
XVIII.	Appendix B –Statement of Informed Consent	132
XIX.	Appendix C –Recruitment Letter	134
XX.	Appendix D –Invitation to Participate	135
XXI.	Curriculum Vitae	136

## List of Tables

I.	Table 1. Descriptive Statistics of Study Variables	118
II.	Table 2. Correlations among Study Variables	119
III.	Table 3. Parameter Estimates for Target and Alternate Models	120

## List of Figures

I.	Figure 1 – Conceptual Model	109
II.	Figure 2 – Proposed Full Model	110
III.	Figure 3 – Alternate Model	111
IV.	Figure 4 – Endogenous Model: Unstandardized Estimates	112
V.	Figure 5 – Endogenous Model: Standardized Estimates	113
VI.	Figure 6 – Target Model: Unstandardized Estimates	114
VII.	Figure 7 – Target Model: Standardized Estimates	115
VIII.	Figure 8 – Alternate Model: Unstandardized Estimates	116
IX.	Figure 9 – Alternate Model: Standardized Estimates	117

#### Abstract

The supervisory working alliance is an important outcome for supervision success (Ladany, Ellis, & Friedlander, 1999), and it has been proposed that the alliance is influenced by interpersonal, affective, and cultural supervisee characteristics (Bennett, Mohr, Deal, & Hwang, 2013; Bhat & Davis, 2007; Dickson, Moberly, Marshall, & Reilly, 2011). To that effect, the aim of the present study was to examine a proposed model of relationships between trainee ratings of the supervisory working alliance, trainee willingness to disclose in supervision, supervisee shame-proneness, and interdependent self-construal using structural equation modeling. A sample of 201 counselors-in-training participated in the study, and results suggested that the target model exhibited good fit to the data. An alternate model of relationships was also examined and similarly evidenced good fit to the data but did not significantly improve model fit. The following hypothesized relationships were supported: 1) higher interdependent self-construal predicted greater shame-proneness for trainees and 2) greater willingness to disclose in supervision predicted higher ratings of the supervisory working alliance. However, shame-proneness was not a significant predictor of trainee disclosure or of the supervisory working alliance, and trainee willingness to disclose was not found to mediate the relationship between shame-proneness and the supervisory working alliance. Implications, limitations, and future directions are discussed.

#### Chapter I

#### Introduction

Supervision is an established pedagogy used by mental health professionals, serving to promote counselor growth and development as well as to ensure the adequate treatment and care for clients (Bernard & Goodyear, 2009). Consequently, researchers have devoted much attention to aspects that facilitate a successful supervision experience, pointing to the importance of a strong supervisory working alliance (e.g., Ladany & Friedlander, 1995). According to Bordin (1979), a strong working alliance is characterized by (a) agreement on supervisory tasks and b) goals as well as c) a strong emotional bond between the supervisor and the supervisee. The quality of the working alliance may change through the course of supervision as a result of ruptures and/or fortifications of the supervisory relationship (Bordin 1979; 1983). It is important to understand what factors contribute to stronger perceptions of the supervisory working alliance, for existing research has connected positive ratings of the working alliance to satisfaction with the supervision experience (Ladany, Ellis, & Friedlander, 1999; Ramos-Sanchez et al., 2002), lower role-conflict and ambiguity for trainees (Ladany & Friedlander, 1995), and stronger therapeutic alliance in counseling (Patton & Kivlighan, 1997). Accordingly, the present study aimed to gain a better understanding of factors that contribute to the supervisee's perceptions of the supervisory working alliance.

The supervisory relationship is influenced by aspects of the supervisee (Cooper & Ng, 2009; Dickson, Moberly, Marshall, & Reilly, 2011) and the supervisor (Bucky, Marques, Daly, Alley, & Karp, 2010; Ladany, Walker, & Melincoff, 2011), the former being the focus of the present study. Studies have pointed to associations between the

supervisory working alliance and supervisee attachment style (interpersonal factor; Dickson et al., 2011), emotional intelligence (affective factor; Cooper & Ng, 2009), and racial identity (cultural factor; Bhat & Davis, 2007). At the same time, studies typically investigate the influence of one type of supervisee variable on the working alliance at a time, failing to capture the complex influence that cultural, affective, and interpersonal supervisee characteristics contribute to the supervisory relationship (Chen, 2001).

Moreover, researchers have suggested that differences in worldviews (i.e., cultural beliefs) and interpersonal ways of managing disputes between the supervisee and supervisor have the potential to bring about value conflicts in supervision (McCarthy Veach, et al., 2012) that can deleteriously impact the supervisory relationship (Nelson & Friedlander, 2001) and therapists' clinical judgment (Gartner, Hohmann, Larson, & Gartner, 1990). Similarly, scholars have argued that attention to supervisee emotional experience is crucial for the success of clinical and supervisory work (Lombardo, Milne, & Proctor, 2009). Taken together, these findings illuminate the need to devote empirical attention to understanding how interpersonal, affective, and cultural supervisee characteristics relate to trainee perceptions of the supervisory working alliance. In the present study, I aimed to investigate the relationships between the perceived quality of the supervisory working alliance, trainee willingness to disclose in supervision (interpersonal factor), shame-proneness (affective factor), and interdependent self-construal (cultural factor).

#### **Trainee Disclosure and Working Alliance in Supervision**

Trainee disclosure in supervision is an important variable related to the quality of the supervisory working alliance. Empirical research investigating trainee disclosure, defined as the extent to which the supervisee shares information pertinent to supervision with his or her supervisor, has illuminated that most supervisees conceal or withhold information in supervision (Ladany, Hill, Corbett, & Nutt, 1996). Most frequently, non-disclosed material relates to clinical mistakes, negative evaluations of the supervisor, feedback on the supervisory relationship, attraction issues in the supervisory or therapeutic relationship, and personal issues (Ladany et al., 1996; Mehr, Ladany, & Caskie, 2010; Mehr, Ladany, & Caskie, 2015; Reichelt et al., 2009; Yourman & Farber, 1996). At the same time, trainee willingness to disclose has been positively associated with the strength of the working alliance (Callis, 1997; Mehr et al., 2015; Mehr et al., 2010; Pisani, 2005; Walsh, Gillespie, Greer, & Eanes, 2002) and with greater overall satisfaction with supervision (Yourman & Farber, 1996), pointing to the importance of trainee disclosure in promoting a successful supervision experience.

Previous studies have underscored the relationship between trainee disclosure in supervision and the supervisory working alliance (Mehr et al., 2015; Pisani, 2005; Walsh et al., 2002), noting that greater disclosure in supervision corresponds with a stronger perception of the working alliance. However, prior research has treated the working alliance as a predictor of more disclosure in supervision (i.e., Mehr et al., 2015; Gunn & Pistole, 2012). Because causal inferences can only be made within tightly controlled experimental studies and for variables that show a clear temporal precedence (i.e., the predictor occurred before the outcome), existing research, which is predominantly correlational in nature, cannot confirm a specific directional and causal relationship between the two constructs (Shadish, Cook, & Campbell, 2002). Furthermore, given the lack of attention to the predictive role of willingness to disclose on the working alliance, I

proposed that the supervisory working alliance may be an outcome of supervisee disclosure in the present study. This assertion is based on a review of literature that suggests that the alliance is predicated on supervisee openness to explore and discuss sensitive material related to clinical work (Wallace & Alonso, 1994) and that willingness to take risks in supervision is associated with positive supervision outcomes (Norem, Magnuson, Wilcoxon, & Arbel, 2006). Additionally, given that disclosure in interpersonal relationships is associated with being liked (Collins & Miller, 1994), lower disclosure in supervision could hinder the establishment of the rapport necessary for the formation of a strong working alliance in supervision (Bordin, 1983).

Studies testing a predictive path between the supervisory working alliance and disclosure have yielded mixed results. For example, Gunn and Pistole (2012) examined whether the working alliance mediated the relationship between supervisee attachment style and trainee disclosure, and their findings showed that only the rapport factor of the working alliance was a significant predictor of disclosure, whereas agreement on goals and tasks were not. Moreover, prior studies have been limited by small samples (e.g., N < 100; Pisani, 2001; Walsh et al., 2002; Webb & Wheeler, 1998), poor psychometric integrity of newly developed measures used to evaluate disclosure (e.g., the Self-Disclosure of Clinical Mistakes Form (SCMF); Walsh et al., 2002), and overly narrow definitions of trainee disclosure (e.g., of countertransference in therapy; Pakdaman, 2011). Though the present study was non-experimental and could not confirm causality between the two variables, I aimed to improve upon previous literature by investigating an alternative conceptualization of the relationship between the supervisory working

alliance and trainee willingness to disclose. Specifically, I hypothesized that trainee disclosure will predict trainees' ratings of the supervisory working alliance.

#### Shame-Proneness, Trainee Disclosure, and the Working Alliance

Shame is a self-evaluative emotion precipitated by feelings of failure, incompetence, and imperfection (Lynd, 1992; Morrison, 2011). In contrast with guilt, which is an emotion characterized by negative feelings concerning an action that propels the transgressor to confess or repair the damage, shame is more of a passive experience that frequently results in withdrawal or concealment of shameful material (Lynd, 1992). Shame is more intense than guilt, embarrassment, or humiliation, as its focus is on the entire self rather than on a particular action or moment (Ladany, Klinger, & Kulp, 2011; Tangney, Youman, & Stuewig, 2009). In clinical supervision, shame can be triggered by the mandatory evaluative component endemic to the supervisory relationship (Graff, 2008; Yourman, 2003). Essentially, trainees desire to appear competent to their supervisors, as they are evaluated on their performance, but they are also expected to discuss vulnerabilities and face their areas of growth (Hahn, 2001). Exposed to criticism and evaluation, supervisees may experience feelings of shame in the supervisory context. Notably, proneness to experiencing shame has been linked to poor interpersonal problem solving skills (Covert, Tangney, Maddux, & Heleno, 2003), fear of intimacy and selfblame (Lutwak, Panish, & Ferrari, 2002). Thus, shame-proneness may skew the way in which individuals perceive themselves within the supervisory relationship (Claesson, Birgegard, & Sohlberg, 2007), thereby impeding relationship building necessary to establish a strong supervisory working alliance.

Shame is an emotion that develops early in life and is experienced through the duration of the lifespan; however, some individuals are more prone to experiencing shame than others. Tangney, Youman, and Stuewig (2009) define shame-proneness as the "tendency to experience shame ... in the face of failure and transgressions" (p. 195). Specifically, the authors argue that shame-prone individuals may react to transgressions with hostility and withdrawal in an effort to avoid the shame-provoking situation. Because research has suggested that the working alliance is more influenced by dispositional variables rather than states of affect (Patton & Kivlighan, 1997), the present study aimed to understand how the dispositional trait of shame-proneness, rather than a one-time experience of shame, influenced the supervisory working alliance.

To date, two studies have investigated the relationship between shame-proneness and the working alliance in clinical supervision, and findings have been inconclusive. Biloadeau and colleagues (Biloadeau, Savard, & Lecomte, 2010, 2012) conducted longitudinal investigations of shame-proneness and the working alliance, operationalizing shame-proneness as internalized shame (Cook, 1989) in both studies. Whereas Bilodeau et al.'s (2010) study revealed no difference in reports of the working alliance among high and low levels of shame-proneness, their second study (2012) indicated that although trainees with higher shame-proneness tended to rate the working alliance positively at the beginning of supervision, their ratings of the relationship tended to decrease over time.

Though these authors commendably initiated the investigation of shame-proneness and the working alliance in supervision, the studies were limited by small sample sizes and potential threats to construct and statistical conclusion validity (Shadish et al., 2002). For instance, literature surrounding shame-proneness has cautioned

researchers from over-relying on Cook's (1989) definition of internalized shame, as it may be confounded with self-esteem (Tangney et al., 2009). Further, Bilodeau and colleagues did not account for trainee disclosure in their investigations, and it is possible that disclosure confounded the results of their study. Specifically, shame-prone individuals may disclose less in supervision over time than those with lower levels of shame-proneness, and this tendency may impact their perception of the supervisory working alliance.

In multiple studies examining the content of supervisee nondisclosures (Ladany et al., 1996; Mehr et al., 2010; Pisani, 2005), authors found that trainees frequently withheld material associated with a negative self-evaluation (i.e., clinical mistakes or negative feelings about supervisor). Trainees also cited shame as a common reason for nondisclosure (Ladany et al., 1996; Mehr et al., 2010). Given that a natural response to experiencing shame is to hide or defend oneself (Tangney et al., 2009), it is probable that supervisees who are more prone to experiencing shame in the supervisory relationship might choose to omit or conceal shame-provoking information from their supervisors more readily than their less shame-prone peers. Additionally, shame has been linked to lower disclosure for clients in therapy (Hook & Andrews, 2005) as well as for trainees in supervision (Chorinsky, 2003), further underscoring its influence on relational processes. The above findings implicate shame-proneness as an influential force on trainee disclosure; however, no existing studies have directly examined the link between the two constructs. The present study thus hoped to build upon existing literature by investigating whether shame-proneness influenced trainee willingness to disclose in supervision within the present sample of trainees.

Based on the previous research, it is plausible that shame-proneness impacts the perceived strength of the supervisory working alliance by way of trainee willingness to disclose in supervision. Experiencing shame might prompt individuals to withdraw or defend in self-evaluative situations such as supervision (Morrison, 2011; Tangney et al., 2009), and supervisees who experience shame might be less likely to disclose information to their supervisors. In turn, the diminished openness in the supervisory relationship may weaken the working alliance, as there is an association between disclosing and being liked in interpersonal relationships (Collins & Miller, 1994). The interactions among these variables have been examined in one study to date and in a therapeutic context. Hall (1994) sampled 164 therapy clients and found that shame-prone individuals who disclosed less in therapy also reported weaker alliances. A limitation of the study was that Hall categorized shame-proneness and the working alliance, thereby restricting the range of the true variance among the constructs (MacCallum, Zhang, Preacher, & Rucker, 2002). Additionally, the non-experimental nature of the study undermined the ability to confirm whether the working alliance caused lower disclosure in shame-prone clients or if shame-prone clients simply shared less with their therapists and thereby perceived a poorer alliance. In other words, it is likely that lower clientdisclosure may have been the mechanism by which shame-proneness affected the working alliance. Corroborating this assertion, one study (Black, Curran, & Dyer, 2013) found that clients who utilized withdrawal as a response to feeling shame also reported lower ratings of the therapeutic working alliance, although disclosure to therapist was not assessed in the investigation.

Given the lack of clarity in the findings of extant research and the potential parallel processes that could occur in supervision, I hypothesized that greater shame-proneness will predict a poorer working alliance and that this relationship will be mediated by trainee disclosure in the present study. More specifically, a hypothesis of the present study was that the more shame-prone a trainee is, the less she/he will disclose in supervision, thereby perceiving the supervisory working alliance as weaker.

#### Self-Construal, Shame-Proneness, and Trainee Disclosure

Each supervisee comes to supervision with a specific cultural worldview that can impact the counseling and supervision process (Brown & Landrum-Brown, 1995). One such worldview is self-construal, as it guides the way by which individuals construct and experience their sense of self (Markus & Kitayama, 1991). Thus, a final aim of the present study was to examine the impact of interdependent self-construal on supervisee shame-proneness and disclosure in supervision as a way to assess the indirect influence of culture on the supervisory relationship.

Self-construal refers to the "relationship between the self and others, especially, the degree to which they see themselves as separate from others or connected to others" (Markus & Kitayama, 1991, p. 226). An individual with highly developed independent self-construal is likely to perceive him or herself as a unique and separate entity from others, whereas someone with highly developed interdependent self-construal would have a more connected perception of self, emphasizing community engagement and cooperation (Kitayama, Markus, & Matsumoto, 1995; Markus & Kitayama, 1991). Independent self-construal underlies an individual's desire to express him or herself and accomplish personal goals. Alternatively, interdependent self-construal prompts a person

to establish close relationships with others and value group membership (Markus & Kitayama, 1991). Research with diverse populations has indicated that self-construal is a bi-dimensional construct, such that one person can exhibit both independent and interdependent self-construal simultaneously (Singelis, 1994).

To date, supervision research has investigated self-construal in relation to only clinical skills. For example, Constantine (2001) found that after controlling for supervisee race and prior multicultural training experience, independent self-construal predicted lower multicultural conceptualization ability, and the inverse was true for interdependent self-construal. Moreover, Kaelber (2009) noted a significant positive correlation between independent self-construal and empathy in masters' level counseling students. Self-construal is thus implicated in relational and conceptual variables impacting supervisees' work with clients, and it is important for researchers to understand the degree to which self-construal might influence supervisory interactions of counselors-in-training.

Kitayama, Markus, and Matsumoto (1995) proposed that one's interdependent self-construal becomes salient when an individual "experience[s] socially engaged emotions," such as shame (p. 451). Notably, researchers have linked interdependent self-construal to differences in expression of self-evaluative emotions such as shame and guilt in non-supervision samples (Sharkey & Singelis, 1995; Singelis, Bond, Sharkey, & Lai, 1999; Tang, Wang, Qian, Gao, & Zhang, 2008). Findings from these empirical investigations have demonstrated that interdependent self-construal is linked to higher levels of self-conscious emotions such as embarrassibility (Sharkey & Singelis, 1995) and shame-proneness (Luu, 2002; Ratanasiripong, 1997). In light of such findings, it

was hypothesized that greater interdependent self-construal will predict higher shameproneness for counselors-in-training within the supervisory relationship.

Finally, there is a scarcity of research looking at the impact of self-construal on self-disclosure. Two studies have examined the effect of self-construal on guarded selfdisclosure of Asian American immigrants (Barry, 2003; Barry, Bernard, & Beitel, 2009). Barry and colleagues' findings showed that guarded self-disclosure was positively associated with interdependent self-construal for a sample of 170 East Asian immigrants. The researchers' findings suggested that self-construal can provide a lens to understand the degree to which one might be comfortable with self-disclosure. Because effective supervision is predicated on the ability to share information openly and honestly with the supervisor (Falender & Shafranske, 2012), and supervisees are likely to enter the supervisory relationship with differing levels of interdependent self-construal (Chen, 2001), it is important to examine the impact of self-construal on trainee disclosure in supervision. In the present study, I hypothesized that trainees with higher interdependent self-construal will disclose less in supervision. Research connecting self-construal and disclosure is nascent; therefore, the proposed relationship between these variables was investigated as an additional path in the model.

#### **The Present Study**

The aim of the present study was to better understand factors influencing the working alliance in supervision by simultaneously analyzing the impact of interpersonal (trainee disclosure), affective (shame-proneness), and cultural (self-construal), characteristics of the supervisee (Figure 1). Although existing research studies have investigated the relationships between pairs of variables independently, no study to date

has examined the joint impact of these variables. Additionally, though researchers have underscored the importance of cultural variables in understanding interpersonal processes such as shame-proneness and self-disclosure, the impact of self-construal on the supervisory relationship and dynamics has not been examined in supervision literature.

The proposed model. The present study aimed to examine the proposed model of relationships between supervisee self-construal, shame-proneness, trainee disclosure, and the supervisory working alliance (depicted in Figure 1). Accordingly, the proposed model included four paths: (A) self-construal → shame-proneness, (B) shame-proneness → trainee disclosure, (C) shame-proneness → working alliance, and (D) trainee disclosure → trainee working alliance (See Figure 2). It was hypothesized that trainee disclosure will partially mediate the relationship between shame-proneness and supervisory working alliance (Path C). An additional path, (E) interdependent self-construal → trainee disclosure, was tested in an alternate model given the dearth of literature examining a link between self-construal and disclosure (See Figure 3).

Path A: Self-construal → shame-proneness. It was hypothesized that higher interdependent self-construal will predict greater shame-proneness.

Path B: Shame-proneness → trainee disclosure. It was hypothesized that higher shame-proneness will predict lower trainee disclosure.

Path C: Shame-proneness → working alliance. It was hypothesized that higher shame-proneness will predict a weaker rating of the supervisory working alliance, as mediated by lower trainee disclosure.

Path D: Trainee Disclosure  $\rightarrow$  working alliance. It was hypothesized that lower trainee disclosure will predict a poorer rating of the supervisory working alliance.

Path E (Additional path): Interdependent self-construal → trainee disclosure. It was hypothesized that higher interdependent self-construal will predict lower trainee disclosure.

#### Chapter II

#### **Literature Review**

In mental-health fields like psychoanalysis, counseling, and social work, clinicians receive supervision of their clinical duties while in training, at the beginning, and often through the length of their careers. Supervision is considered a "signature pedagogy" of mental health professionals that is more alike than different across the various sub-specialties within mental health, as it has a common purpose of monitoring, supporting, and instructing professionals who provide direct services to clients (Bernard & Goodyear, 2009, p. 1; Inman et al., 2014). Consequently, supervision is pivotal to fostering the development of counseling professionals and for monitoring the efficacy and ethics of therapeutic work. The present study aimed to better understand what factors contribute to facilitative processes in supervision, as successful supervision experiences have been linked to better outcomes for both counselors (Cheon et al., 2009; Marmarosh et al., 2013) and clients (Callahan, Almstrom, Swift, Borja, & Heath, 2009; Reese et al., 2009).

Though supervision has received increased empirical attention in the past few decades, many existing studies are limited in empirical rigor, with methodological concerns that pose serious threats to validity of the findings (Ellis, Ladany, Krengel, & Schult, 1996; Ellis & Ladany, 1997). As such, it is important to build upon existing literature and examine factors that may relate to successful or unsuccessful supervision experiences. Prior to outlining the methods of my study in the following chapter, I aim to present a critical overview of research and theory concerning the supervisory relationship and disclosure in supervision and highlight the strengths and limitations of the extant

literature. I also define the construct of shame-proneness and present relevant literature highlighting the influence of supervisee shame-proneness on counseling and supervision process as well as outcome. Finally, I discuss the impact of culture on the supervisory process and present a review of literature concerning cultural differences in shame-proneness and disclosure. Studies included in the review are limited to psychology-related disciplines and represent literature primarily from the fields of counseling and clinical supervision.

#### Working alliance in Supervision

The supervisory relationship is inherently hierarchical, dynamic, and evaluative (Bernard & Goodyear, 2009). Considering the intimate nature of supervision and its relevance to monitoring clinical work, the quality of the supervisory working alliance is an important factor in facilitating a successful supervision experience (Cheon et al., 2009; Ladany & Friedlander, 1995). The supervisory working alliance was originally defined by Bordin (1979) as the mutual agreement on the tasks and goals of supervision as well as by a strong emotional bond between supervisor and the supervisee. When a supervisory dyad is marked by a strong working alliance, the supervisee is likely to experience a safe, trusting, and warm supervisory environment (Jordan, 2006) and report feeling satisfied with supervision (Cheon, et al., 2009; Ladany et al., 1999). A strong working alliance in supervision relates to lower role conflict and ambiguity for trainees (Ladany & Friedlander, 1995) as well as to trainees' abilities to effectively process sexual attraction issues in supervision (Ladany et al., 1997) and feel greater self-efficacy about their counseling skills (Marmarosh et al., 2013). Of testament to the client-directed benefits of supervision, stronger supervisory working alliance also corresponds with a

client's perception of stronger alliance in therapy (Patton & Kivlighan, 1997). These findings underscore the importance of the working alliance to a successful supervision experience.

According to Bordin (1979; 1983), the supervisory working alliance is a dynamic construct with the ability to change based on positive and/or negative supervisory experiences. As such, the alliance is vulnerable to ruptures and amenable to strengthening depending on the behaviors and characteristics of the supervisor and the supervisee. From the supervisor perspective, prior research has established that supervisory style, intelligence, and attitude are factors that influence trainee perceptions of the working alliance (Bucky et al., 2010; Ladany et al., 2011). Additionally, interpersonal factors such as supervisor self-disclosure (Ladany & Lehrman-Waterman, 1999; Ladany et al., 2011), affective factors such as the supervisor being perceived as emotionally supportive (Daly, 2004), and cultural factors such as the supervisor's stage of racial identity development (Ladany, Brittan-Powell, & Pannu, 1997) influence trainee ratings of the supervisory working alliance. To date, many investigations have focused on the influence of supervisor characteristics on the perceived strength of the working alliance (Bucky et al., 2010; Ladany et al., 1997; Ladany et al., 2011), but given the importance of mutual agreement and fit between the supervisor and the supervisee in the establishment of a strong alliance (Bordin, 1983), it is equally as important to understand how supervisee-specific variables influence ratings of the working alliance. As such, the present study aimed to understand the conjoint influence of affective, interpersonal, and cultural supervisee variables on the perceived quality of the supervisory working alliance.

With regard to affective characteristics, literature suggests that supervisees with greater levels of emotional intelligence, or those characterized by an ability to understand and effectively manage emotions, tend to report stronger ratings of the working alliance (Cooper & Ng, 2002). Scholars have also found that positive affect in supervision is related to stronger perceptions of the supervisory working alliance (Bennett et al., 2013) and that feeling one has control over his or her environment positively predicts supervisee ratings of the supervisory working alliance (Gnilka, Chang, & Dew, 2011). Additionally, proneness to experiencing shame in supervision is related to the diminished quality of the supervisory working alliance (Bilodeau et al., 2012). These findings underscore the important role of supervisee emotional experiences in their perceptions of the supervisory relationship.

The ways in which supervisees interact with and relate to their supervisors also influence their perceptions of the working alliance. For example, prior investigations have established that supervisee attachment style is related to trainee perceptions of the strength of the working alliance (Bennett, BrintzenhofeSzoc, Mohr, & Saks 2008; Renfro-Michel & Sheperis, 2009) and that a supervisee's perception of supervisor's attachment style as secure is indicative of a stronger working alliance (Dickson, et al., 2011). Highlighting further importance of interpersonal characteristics, Kennard, Steward, and Gluck (1987) suggested that positive supervisory experiences are buttressed by supervisee levels of openness to receiving supervisory feedback and suggestions and by greater willingness to disclose in supervision (Mehr et al., 2015). Findings of the reviewed research suggest that it is important to explore the interpersonal dynamics that

each supervisee brings into supervision and how these dynamics influence the trainee's perception of the supervisory working alliance.

Multiple studies have also illustrated that supervisee cultural factors influence the perceived quality of the supervisory working alliance and the supervisory process. For example, prior research investigations have found that supervisees at advanced stages of racial identity development perceived stronger working alliances with their supervisors (Bhat & Davis, 2007), and international students who reported lower perceived discrimination and better English proficiency rated the supervisory working alliance more strongly (Ng & Smith, 2012). Additionally, in a qualitative study investigating value conflicts in supervision, supervisors reported that differences in worldviews engendered value conflicts between trainees and supervisors, which negatively impacted the supervisory process (McCarthy Veach et al., 2012). In sum, cultural variables related to supervisee identities, experiences, and worldviews influence trainee perceptions of the working alliance in supervision.

Results of these studies suggest that trainee perceptions of the supervisory working alliance are predicated on a number of emotional, interpersonal, and cultural variables. Though the reviewed studies have addressed these influences independently, for example by investigating only affective characteristics in relation to the supervisory working alliance (i.e., Cooper & Ng, 2009), no study to date has investigated the conjoint influence of these variables on trainee perceptions of the working alliance in supervision. The purpose of the present study was thus to test a model of relationships among interpersonal (i.e., willingness to disclose), affective (i.e., shame-proneness), and cultural

(i.e., interdependent self-construal) variables of the supervisee and the perceived quality of the supervisory working alliance.

#### **Nondisclosure in Supervision**

The success of the supervisory process is contingent upon the supervisee's ability to divulge relevant clinical and personal information to the supervisor so that the supervisor may understand the trainee and adequately meet her or his needs (Wallace & Allonso, 1994). To this effect, some suggest that conflicts in the supervisory relationship can emerge due to misunderstandings or unclear expectations, and supervisees are advised to clearly express their needs to their supervisors in order to bolster the effectiveness of supervision (Falender & Shafranske, 2012). However, given the evaluative nature of supervision and the sensitivity of topics that may enter discussion, many supervisees withhold information from their supervisors (Ladany et al., 1996; Wallace & Allonso, 1994; Yourman & Farber, 1996). This phenomenon, labeled as "nondisclosure" in the supervision literature, has accrued theoretical and empirical attention in recent years.

Ladany and colleagues (1996) were the first to document the frequency of nondisclosures within the supervisory context. The authors surveyed 108 counselors-intraining who completed quantitative measures of perceived supervisory style and satisfaction with supervision as well as a qualitative measure of nondisclosure content and frequency. The findings suggested that almost all (97.2%) participants in Ladany et al's study withheld information in supervision, with an average of 8.06 nondisclosures per supervisee. Additionally, trainees most frequently chose not to disclose information related to clinical mistakes, negative feelings, personal issues, sexual attraction issues in

the therapeutic or supervisory relationships, and fear of negative evaluation. Ladany and colleagues also found that the content of nondisclosures was associated with satisfaction in supervision and with supervisory style. Supervisees were less likely to disclose information to supervisors who were less attractive and interpersonally sensitive, and withholding information about a perceived poor working alliance was associated with less satisfaction in supervision.

Subsequent studies supported Ladany and colleagues' findings regarding the occurrence of supervisee nondisclosures in both individual and group supervision (Reichelt et al., 2009; Skjerve et al., 2009), though with lower reported frequency in some instances (Mehr et al., 2010; Pisani, 2005; Yourman & Farber, 1996). For example, Yourman and Farber (1996) found that 30-40% of the 92 trainees who participated in their study consciously withheld information from their supervisors. Similarly, Pisani's (2005) study of 71 fist year Masters of Social Work students revealed that 55% of participants did not disclose information about their perceptions of the supervisory working alliance. Pisani also used the same nondisclosure questionnaire as did Ladany and colleagues (1996) and found a higher frequency of nondisclosures related to clinicalmistakes, suggesting that the content and frequency of nondisclosures may vary by developmental level and discipline. At the same time, Mehr and colleagues (2010) investigated instances of nondisclosure during the most recent supervision session and found that 84.3% of supervisees withheld information from their supervisors in their last supervision session. Highlighting the difficulty of even talking about self-disclosure in supervision, Knight (2014) found that 70% of 477 social work trainees did not feel comfortable discussing self-disclosure with their supervisors. Thus, nondisclosure is a

documented phenomenon in supervisory relationships, though the extent of reported nondisclosures may depend on supervisee characteristics and methodological variables in a given investigation.

Qualitative investigations of nondisclosure have allowed researchers to gain a deeper understanding about why trainees withhold information in supervision. Hess and colleagues (2008) conducted semi-structured interviews with 14 doctoral interns from counseling and clinical psychology programs about their nondisclosure in supervision. Two content areas of nondisclosure emerged: clinical issues/mistakes and problems in the supervisory relationship. Interns provided reasons for not disclosing information to their supervisors, such as feeling concerned about the impact of the disclosure on the supervisor's evaluation, not wanting to offend or hurt the supervisor, recognizing the power differential, and experiencing negative feelings, such as self-doubt. Additionally, participants were interviewed about the perceived impact of the nondisclosures on their supervisory experiences. Most prominently, interns reported feeling that withholding information from their supervisors resulted in diminished quality of the supervisory relationship and distancing on the part of the supervisee. Some interns also noted that the nondisclosure affected their relationship with clients in therapy, potentially by way of parallel process (McNeill & Worthen, 1989; Searles, 1955). Hess and colleagues' (2008) study illuminated the complicated nature of nondisclosure in supervisory relationship and suggested that nondisclosures occur in relationships described as both "good" and "bad" by the supervisees, pointing to the importance of examining other factors that may facilitate or inhibit trainees' disclosure in supervision.

**Trainee willingness to disclose.** In addition to investigating why trainees do not disclose information in supervision, studies have attempted to understand what makes trainees able to share information with their supervisors. Given that trainee disclosure in supervision is on a continuum from complete withholding or distortion of information to over-disclosure, it is important to understand what factors might propel trainees to share, versus withhold, information (Wallace & Allonso, 1994). Trainee willingness to disclose is the extent to which a supervisee is willing to share information pertaining to clinical and supervisory work with his or her supervisor (Mehr et al., 2010; Mehr et al., 2015). Results of empirical investigations examining factors that contribute to greater willingness to disclose in supervision have underscored the roles of supervisory style, relationship quality, supervisor's own self-disclosure of mistakes, and the supervisor's theoretical framework in predicting greater disclosure (Walsh et al., 2002; Webb & Wheeler, 1998). At the same time, factors such as trainee anxiety and attachment style have not been found as significant predictors of trainee willingness to disclose in supervision (Gunn & Pistole, 2012; Mehr et al., 2015). Therefore, it is important to better understand which supervisee factors do contribute to greater willingness to disclose in supervision.

**Disclosure and the working alliance.** The extent to which supervisees can share information in supervision is associated with the strength of the supervisory working alliance. The relationship between trainee disclosure and a strong perception of the supervisory working alliance has been documented in multiple investigations, pointing to the importance of examining the two variables together (Callis, 1997; Mehr et al., 2015; Pakdaman, 2012; Webb & Wheeler, 1998). Research has documented that the rating of

the supervisory working alliance is associated with frequency of non-disclosures (Callis, 1997) and that it positively predicts trainee willingness to disclose in supervision (Mehr et al., 2015). Other studies have found that only the emotional bond aspect of the supervisory working alliance significantly predicts trainee willingness to disclose in supervision (Gunn & Pistole, 2012; Pakdaman, 2012). Gunn and Pistole (2012), for example, sampled 480 counselors-in-training and found that the rapport factor of working alliance mediated the relationship between supervisee attachment style and disclosure, such that the supervisee's attachment security to the supervisor predicted his or her disclosure in supervision by way of a strong emotional bond with the supervisor. A similar finding emerged in Pakdaman's (2012) study, such that the rapport factor of the supervisory working alliance was most strongly associated with trainee's comfort in disclosing countertransference reactions to their supervisors. Finally, when trainee disclosure and supervisory working alliance were explored (Mehr et al., 2010), findings revealed that a stronger perception of the supervisory working alliance was associated with lower frequency of nondisclosures and greater willingness to disclose in supervision.

In sum, though researchers have consistently documented a relationship between the supervisory working alliance and disclosure in supervision, the directional nature of the relationship remains unclear due to methodological limitations of existing research. First, many studies have been limited by small sample sizes and non-validated instrument used to measure disclosure (i.e., Callis, 1997). Second, authors have employed narrow operational definitions of disclosure, for example by examining disclosure of only countertransference (Mack, 2012; Pakdaman, 2012) or of clinical mistakes (Walsh et al., 2002). Finally, given that the majority of reviewed studies utilized correlational or

qualitative designs, it is not possible to infer the direction of the relationship between the two variables given the ambiguous temporal order of the two constructs (Shadish et al., 2002).

Thus, in the present study, I proposed that trainee willingness to disclose in supervision may predict his or her rating of the working alliance. Because the working alliance is predicated on supervisee openness and ability to bring relevant material to the supervisor and establish mutually-agreed upon goals (Bordin, 1983), I hypothesized that a supervisee's diminished willingness to disclose would negatively impact his or her perception of the working alliance. I also conceptualized trainee willingness to disclose as a factor influencing the relationship between supervisee shame-proneness and the supervisory working alliance. In the following paragraphs, I reviewed research to support my assertion that trainee willingness to disclose may mediate the relationship between shame-proneness and the perception of the supervisory working alliance, thereby serving as a predictor of the alliance.

#### Shame

Shame is an emotion associated with morality and induced by wrongdoing. It entails painful feelings of inadequacy with a desire to hide, withdraw, or defend the self against such exposure (Lynd, 1992; Morrison, 2011). Feelings of shame develop when a child becomes aware of social rules and restrictions and is confronted with his own failures or transgressions (Lewis, 1992). Reflecting the self-focused nature of the emotion, the development of shame is said to coincide with "turn[ing] the gaze inward" (Morrison, 2011, p. 26). Unlike guilt, which is a moral emotion that typically leads a person to wish to repair the damage and confess his or her mistake, shame is a more

passive emotion that results in concealment, distortion, or withdrawal (Lewis, 1971; Morrison, 2011). Shame is a feeling directed at the whole self and thus can be "the most agonizing of human emotions in that it reduces us in stature, size, and self-esteem..." (Morrison, 2011, p. 23).

When a supervisee enters a supervisory relationship, he or she is faced with a dilemma. On one hand, the supervisee wants to please and connect with the supervisor, thus disclose, but on the other hand the trainee might fear criticism or negative evaluation (Wallace & Alonso, 1994). Because of these conflicting dynamics, supervision can be an innately shame-provoking experience (Alonso & Rutan, 1988; Graff, 2008; Hahn, 2001; Hemlick, 1998; Wallace & Alonso, 1994). To become proficient in providing counseling or therapy, a trainee must use all of his or herself; the trainees' values, personality, and way of relating to others become important (Graff, 2008). Consequently, criticism or negative feedback about one's counseling activities may be heard as a negative evaluation of the self, thereby triggering shame (Graff, 2008; Hahn, 2001). Furthermore, Talbot (1995) suggested that shame may be "unearthed" in supervision in two ways: first, when the supervisee perceives him or herself to not match the expectations of an admired supervisor, and second when vulnerable personal information is revealed in the supervisory context. Thus, theoretical accounts that propose supervision's potential for eliciting shame in supervisees merit further empirical attention.

#### **Shame-proneness in Counseling and Supervision**

Though shame is considered to be a basic human affect (Tomkins, 1962), some people are more disposed to experiencing shame than others (Tangney, et al., 2009).

Tangney and colleagues proposed that an individual's "propensity to experience episodic

shame states in response to failures and transgressions," or one's level of shameproneness, remains stable through the course of his or her life (Tangney et al., 2009, p. 195). Moreover, this disposition is related to important outcomes for both clients and therapists (Livingston & Farber, 1996; Morrison, 1984). Livingston and Farber (1996) found that beginning therapists who were more shame-prone were also more likely to identify with but not feel like they could understand or help a shame-prone client; thus, therapist shame-proneness has potential implications for the therapeutic treatment. Additionally, shame in therapy is considered to be at the root of many alliance ruptures and treatment failures (Livingston & Farber, 1996; Morrison, 1984). Therapist shame can be triggered by client criticism in therapy, the therapist's feeling of helplessness in relation to a client, or the therapist's realization that he or she is attracted to a particular client (Gilbert, 2011; Sarahson, 2005). Therapist shame may be evoked in individual and group therapy (Weber & Gans, 2003), and it is important for therapists to understand and address their experience of shame via personal therapy or supervision (Ladany, Klinger, & Kulp, 2011).

Given that supervision has many dynamic parallels to therapy, wherein a supervisee might unconsciously act out dynamics from the therapeutic relationship in supervision via a parallel process (McNeill & Worthen, 1989; Searles, 1955), it is likely that shame plays an important role in the supervisory relationship. Gilbert (2011) suggested that shame can influence therapists' self-efficacy, emotional state, and clinical skills. Shame may also be evident through countertransference reactions, warranting the need for close supervision on cases that may elicit shameful responses (Southern, 2007). Furthermore, shame is elicited when an individual perceives him or herself to be in an

supervisory relationship (Gilbert, 2000). Thus, it is necessary to better understand how supervisee experiences of shame may have deleterious implications for the supervisory relationship and diminish supervisee willingness to disclose in supervision (Ladany et al., 1996; Mehr et al., 2010; Yourman & Farber, 1996). In this next section, I first address the relationship between shame-proneness and the working alliance, then discuss the association between shame-proneness and disclosure in counseling and supervision, and lastly review existing evidence concerning the relationships among the three variables.

**Shame-proneness and the working alliance.** Prior research has connected the dispositional trait of shame-proneness to less accurate perception of self in interpersonal relationships (Claesson et al., 2007; Covert et al., 2003) as well as to greater fear of intimacy and higher self-blame (Lutwak et al., 2002). Despite this evidence pointing to interpersonal consequences of shame-proneness, to date, only a handful of studies have examined the relationship between supervisee shame-proneness and the supervisory working alliance. Bilodeau, Savard, and Lecomte (2010) conducted a study aimed to examine the role of shame in working alliance agreement between the supervisor and the supervisee. The authors employed a longitudinal design, administering measures of working alliance and internalized shame (shame-proneness) to 31 supervisee pairs across five sessions. Bilodeau and colleagues' findings suggested that supervisees viewed the working alliance differently than the supervisors, such that the supervisors had lower perceptions of the working alliance than did the trainees. Additionally, the authors did not find a relationship between supervisee shame-proneness and their perceptions of the working alliance. However, shame-proneness was dichotomized into "high shame" and

"low shame" groups, and only four supervisees fell in the "high shame" category.

Therefore, the findings were limited by low power of the statistical analyses, and the researchers were not able to examine the existing continuum of shame-proneness among individuals (MacCallum et al., 2002).

The same authors (Bilodeau, Savard, & Lecomte, 2012) sampled 43 trainees participating in a 5-session supervision experience and found that shame-proneness was significantly related to the working alliance. More specifically, trainees with higher shame-proneness tended to rate the working alliance positively at the beginning of supervision, and their rating or the relationship tended to decrease over time, although the trends did not reach statistical significance. Additionally, those who were high on shame-proneness also rated sessions as having lower impact than their peers who were not as prone to experiencing shame.

As Bilodeau and colleagues' (2010; 2012) findings did not support existing theoretical evidence concerning the deleterious effect of shame-proneness on interpersonal relationships, it is important to further examine the link between trainee perceptions of the supervisory working alliance and shame-proneness in order to understand the discrepancy between what is theoretically suggested and empirically found. Though the two studies improved upon existing literature by examining the two variables together, they were limited by a number of factors. First and foremost, Bilodeau and colleagues relied on Cook's (1989) definition of shame-proneness and administered the Internalized Shame Scale as the only instrument to assess levels of proneness to shame (ISS; Cook, 1989). The ISS is a measure of shame-proneness, independent of guilt-proneness, and includes 6 items from the Rosenberg Self-Esteem

scale (RSE; Rosenberg, 1979) that are used as reverse-scored items. As such, researchers have argued that Cook's definition of shame-proneness is confounded with self-esteem (Tangney et al., 2009). This assertion is buttressed by correlations between the ISS and the RSE yielding coefficients up to -.95 (Cook, 1989). Because each of the studies that have investigated shame-proneness in a supervisory context (Bilodeau et al., 2010; Bilodeau et al., 2012; Doherty, 2005) used only the ISS to measure the construct, the construct validity of shame-proneness is compromised in the existing literature. The authors also recruited small samples that likely threatened the power of their analyses and dichotomized shame-proneness instead of treating the variable as continuous. Ultimately, the relationship between shame-proneness and the working alliance should be investigated with greater empirical rigor, which was an aim of the present study.

Shame-proneness and disclosure. There has been limited research investigating the association between shame-proneness and disclosure. Primarily, shame-proneness has been referred to as a possible reason for trainees' nondisclosure in qualitative investigations (Ladany et al., 1996; Yourman & Farber, 1996). For instance, when questioned about the type of material supervisees withheld from their supervisors, participants in Ladany et al.'s study attributed their nondisclosures to negative reactions to their supervisors and/or clients, personal issues, clinical mistakes, and evaluation concerns. Moreover, participants in Hess and colleagues' (2008) study cited self-doubt and other negative personal feelings as reasons for withholding information, and negative feelings (including shame) accounted for 7% of reasons for nondisclosures in Mehr et al.'s (2010) study. Trainees' hesitations to disclose information about sexual attraction in counseling or supervision (Ladany et al., 1997; Pisani, 2005) and their report of

impression management as a primary reason for non-disclosing (Mehr et al., 2010) implicate the possible presence of shameful affect as a reason to diminish disclosure in supervision. Given that shame is experienced as a painful emotion that is triggered by feelings of incompetence and inadequacy and causes one to hide or withdraw (Lewis, 1971; Lynd, 1992), it is reasonable to suspect shame's involvement in a supervisee's diminished disclosure in supervision.

Though no quantitative study to date has directly examined the link between shame-proneness and disclosure in supervision, research in counseling and therapy literature has provided connecting evidence for the two constructs. Hook and Andrews (2005) investigated the relationship between shame and nondisclosure in a sample of 85 clients who received treatment for depression. The authors administered a questionnaire that included a constructed measure of disclosure in therapy, the Experience of Shame Scale (Andrews, Qian, & Valentine, 2002) that measures characterological, behavioral, and bodily shame experiences, and a measure of depression. Seventy-six and 69% of participants who were currently and no longer in therapy, respectively, listed shame as a reason for non-disclosing in therapy. Hook and Andrews found that shame was the most frequently cited reason for nondisclosure in both groups. A similar pattern was found by Macdonald and Morley (2001), who analyzed emotion diaries of 37 clients receiving outpatient therapy and found that 90% of clients' nondisclosures were shame-related. Participants in Hook and Andrew's (2005) study who were more prone to experiencing shame were also more likely to not disclose to their therapists. The relationship between shame-proneness and nondisclosure was also found for clients with different presenting concerns, such as eating disorders (Swan & Andrews, 2003).

At the same time, some studies (i.e., Farber & Hall, 2002) failed to find any significant relationship between shame-proneness and nondisclosure in larger samples of therapy clients (N = 147). Farber and Hall administered the Test of Self Conscious Affect (TOSCA; Tangney, Wagner, & Gramzow, 1989), a scenario-based measure of shame and guilt, as well as measures of the working alliance and disclosure to current therapy patients. The authors' findings revealed no significant relationship between client disclosure and scores on the TOSCA. Farber and Hall did find a significant relationship between client disclosure and the rating of the working alliance, such that clients who disclosed more in therapy also reported stronger perceptions of the therapeutic alliance.

A review of counseling-based studies focusing on nondisclosure and shame-proneness thus presents mixed evidence. On one hand, some studies implicate shame in clinical nondisclosures (Hook & Andrews, 2002; Macdonald & Morley, 2001), whereas other studies refute an association between shame-proneness and nondisclosure (Farber & Hall, 2002). Given that Farber and Hall (2002) utilized a scenario-based measure of shame-proneness and created a disclosure questionnaire for the purpose of their study, it is possible that measurement issues could explain the lack of association between shame-proneness and nondisclosure in the study. By measuring shame-proneness and trainee willingness to disclose with multiple indicators, I hoped to improve upon existing literature and better understand the relationship between supervisee shame-proneness and disclosure in supervision in the present study.

**Shame-proneness, supervisory working alliance, and disclosure**. In both supervision and counseling literature, many theoretical writings address the associations

between shame-proneness, nondisclosure, and the therapeutic or supervisory relationship (Alonso & Rutan, 1988; Graff, 2008; Hahn, 2003; Yourman, 2003). However, there is a dearth of empirical literature on the topic. In fact, results of a thorough literature review yielded only one empirical study that addressed all three concepts together, and the study was focused on clients in counseling versus on supervisees in supervision (Hall, 1994).

In her dissertation research, Hall investigated what factors influenced the extent of client disclosure to their therapists. The author was interested in understanding how clients' ratings of the therapeutic alliance and shame influenced their willingness to disclose in therapy. A total of 164 participants who were either currently receiving mental health treatment or were within six months of termination completed measures of disclosure (created for the study), therapeutic alliance, and a scenario-based measure of shame-proneness (TOSCA; Tangney et al., 1989). Hall categorized the participants in her study by three levels of shame-proneness and working alliance. The researcher found that shame-prone individuals who reported weak alliances disclosed less in therapy, and the reverse was true for shame-prone individuals with strong alliances. There were no statistically significant differences between participants of differing levels of shameproneness in ratings of the working alliance; however, the researcher noted that the mean ratings of the alliance differed at face value for the shame-prone and non-shame prone groups. Thus, Hall provided a first empirical investigation of the working alliance, shame-proneness, and willingness to disclose in therapy, but no quantitative study currently exists in the supervision literature.

The dearth of empirical investigations does not however suggest that the constructs are unrelated. One qualitative study (Chorinsky, 2003) addressed openness in

supervision and how supervisees' openness in supervision related to their experience of shame and their perceptions of the supervisory relationship. Using Consensual Qualitative Research methodology, Chorinsky interviewed 12 pre- and post-doctoral psychology interns and residents about their experience of being open in supervision. Though disclosure was not the main focus of the study, some supervisees provided self-disclosure as an example of their openness in supervision and many defined openness as the ability to be vulnerable with their supervisors. Among factors that facilitated openness in supervision were a strong supervisory working alliance, supervisor characteristics and techniques, as well as supervisee initiative to take risks in the supervisory relationship. On the other hand, findings of the study also showed that supervisees were frequently less open with their supervisors after they experienced shame, which most typically related to their negative self-judgments of their performance.

Chorinsky's (2003) findings suggest a number of possible relationships between shame, disclosure, and the supervisory working alliance. First, the results of the qualitative study suggest that willingness to disclose (or openness) is inhibited by experiences of shame. Second, participants reported that they were more open when they perceived a strong supervisory working alliance. Chorinsky also found that a typical strategy for resolving shame-related issues in supervision involved active addressing of shame by the supervisee; however, the study did not examine whether supervisees of various levels of shame-proneness were able to disclose and work through their shameful experience differently. It is possible that supervisees with high levels of shame-proneness could feel more inhibited by their experience of shame, thereby disclosing less

in supervision. Consequently, this diminished willingness to disclose in supervision may influence the quality of the perceived supervisory working alliance, as shame-prone supervisees might blame themselves and misconstrue how their supervisors (Lutwak, 2002) perceive them. Moreover, shame-proneness might prompt supervisees to withdraw (Black et al., 2013), thereby hindering their perception of and satisfaction with the supervisory working alliance.

To date, no quantitative study has conjointly investigated shame-proneness, working alliance, and disclosure in supervision. Therefore, the first purpose of the present study was to examine the relationships among the three variables and propose that shame-proneness will indirectly predict the strength of the working alliance by way of trainee willingness to disclose. Because existing research has found that shameproneness explains nondisclosure in counseling (Hook & Andrews, 2005; Macdonald & Morley, 2001) and supervision studies focused on trainee disclosure have hinted at the importance of shame (Ladany et al., 1996; Yourman & Farber, 1996), it was hypothesized that greater shame-proneness will predict lower trainee willingness to disclose. Relatedly, because the supervisory working alliance requires the supervisee to be open and active in goal-setting (Bordin, 1983) and use of disclosure is associated with more liking in an interpersonal relationship (Collins & Miller, 1994), I posited that lower willingness to disclose will predict poorer rating of the working alliance. Thus, trainee disclosure will mediate the relationship between shame-proneness and the supervisory working alliance.

## The Impact of Culture

The second aim of the present study was to understand how cultural characteristics of the supervisee impact their levels of shame-proneness and willingness to disclose. Defined broadly, culture is "a set of meanings or information that is nongenetically transmitted from one individual to another, which is more or less shared within a population (or a group) and endures for some generation" (Kashima & Gelfand, 2012, p. 499). Culture influences human behavior, emotions, and cognitions, and is reflected in most aspects of human existence; it influences the way people think, talk, dress, eat, and more (Matsumoto & Juang, 2013). Culture, Hofstede (1998) argues, "is manifested in the verbal and/or nonverbal behavior of individuals," but it is not an individual characteristic (p. 479). Consequently, culture can vary on a national, regional, or individual level (Green, Deschamps, & Paez, 2005). Two people from different countries may thus be more similar than two individuals from the same country, and often cultural differences can even exist within one individual. This study addressed culture not as a set of beliefs and meanings that influence a country or nation on a collective level, but as a set of meanings that influences each person.

Culture influences the way that people see and define themselves (Markus & Kitayama, 1991; Triandis, 1989). Triandis (1989) proposed that the cultural dimension of individualism-collectivism impacts the way individuals relate to themselves and to their communities. Individualism is a cultural orientation towards valuing one's personal goals over the goals of the group, whereas collectivism promotes the value of group or community goals (Triandis, 1989; p. 509). In general, Eastern cultures have been connected with stronger collectivistic values whereas Western cultures have been associated with individualistic values (Markus & Kitayama, 1991; Singelis, 1994).

Individualism and collectivism are cultural, or national level variables first taken from Hofstede's (1980) work on cultural dimensions that describe how culture influences countries. Hofstede's dimensions include individualism/collectivism, power distance, masculinity/femininity, and uncertainty avoidance (Hofstede & Bond, 1984). These dimensions represent syntality, or the stable pattern of characteristics within a nation, rather than personality, or the stable pattern of characteristics for an individual (Hofstead & McCrae, 2004). Following from Hofstede's and Triandis' work, Markus and Kitayama (1991) developed a new cultural construct that is applicable to the individual level, labeled as "self-construal." Because the present investigation aimed to better understand the influence of culture on an individual level, self-construal was the primary variable of interest.

Self-construal guides the way by which people construct their experience of the self. Markus and Kitayama (1991) suggest that individuals with developed independent self-construal are likely to value independence and separateness and to focus on furthering their personal goals. The central tasks from an independent self-construal perspective are thus to achieve uniqueness, express the self, be assertive, and achieve personal goals (Markus & Kitayama, 1991). In contrast, an individual with developed interdependent self-construal sees him or herself as belonging to groups and communities, valuing relationships and connectedness. Personal values and attributes become less important for interdependent-self construal, whereas situational context and other people and relationships become more important. Interdependent tasks include belonging, taking a proper place in society with respect to others, helping others to achieve their goals, and being indirect versus direct (Markus & Kitayama, 1991).

Because independent self-construal concerns the private self, whereas interdependent self-construal is rooted in the public self, scholars have proposed that independent and interdependent self-construal are developed to some extent in each person (Markus & Kitayama, 1991; Singelis, 1994; Triandis, 1989). This assumption aligns with Triandis' (1989) suggestion that each individual is comprised of three selves: the private, the public, and the collective. Consequently, a number of empirical studies have illustrated that self-construals can be primed in different contexts and that bicultural individuals exhibit both types of construals depending on the situation (Dixon & Robinson-Riegler, 2007; Wang, Shao, & Li, 2010). Among individuals of the same national culture, levels of each self-construal can vary by ethnicity (Coon & Kemmelmeier, 2001), religion (Croucher, 2013), and gender (Constantine & Yeh, 2001). Thus, the extent to which an individual endorses independent and interdependent selfconstrual depends on a number of cultural variables. Self-construal is therefore useful for examining individual differences in culture. Though self-construal has not been studied extensively in relation to supervision, some studies have implicated higher interdependent self-construal with higher multicultural conceptualization ability in counselors (Constantine, 2001) and independent self-construal with higher levels of selfreported cultural competence in school counselors (Constantine & Yeh, 2001).

In supervision, the supervisor and supervisee both bring their own cultural values, characteristics, and worldviews (Brown & Landrum-Brown, 1995; Chen, 2001). In order to facilitate a successful supervision experience, it is necessary for the supervisor and supervisee to acknowledge and address how culture influences their personal, relational, and professional work. Proponents of integrating a multicultural lens into supervision

and counseling work have argued that oversimplified categorization of cultural groups (i.e., race, ethnicity, and nationality) do not capture the complexity of culture in an interactional relationship such as counseling or supervision (Chen, 2001). Specifically, Chen (2001) avowed that "to fully understand how the cultural dynamics may facilitate, restrict, or override personal experience in the counseling [or supervision] process, the myriad cultural variables should be considered as contexts where psychological issues and experiences are embedded" (p. 808). One purpose of the present investigation was thus to better understand how the cultural variable of interdependent self-construal influences the supervisee's experience of shame in supervision and whether it impacts the degree to which the supervisee feels comfortable disclosing to his or her supervisor.

Cultural differences in shame-proneness. Though early efforts to understand human emotions have proposed that emotions are universally experienced by individuals from different cultural backgrounds (Ekman, 1970), more current investigations have pointed to the impact that culture has on the experience and expression of affects (Matsumoto & Hwang, 2011; Mesquita, 2003). Matsumoto and Hwang (2011) suggested that different types of emotions are more strongly influenced by biology whereas others are more strongly influenced by culture. The authors classified shame as a universally-recognized emotion influenced by cultural context and stimuli and cited studies that corroborated the universality of shame as well as cultural differences in the expression of the emotion (Fontaine et al., 2006; Ho, Fu, & Ng, 2004; Keltner, 1995). Thus, shame is both universal and culturally-influenced. This idea has been offered by multiple scholars, including Kitayama, Markus, and Matsumoto (1995) who suggested that self-conscious emotions represent "amalgams of component processes that reflect the functional

relationship between... the self and the cultural environment (p. 440)." Therefore, both individual and cultural factors are important in determining the experience of shame.

In fact, studies have illuminated cultural differences in the experience of shameand guilt-proneness (Anolli & Pascucci, 2005; Bierbrauer, 1992; Wallbott & Scherer, 1995). For example, Bierbrauer (1992) found that participants from Turkey and Lebanon exhibited higher level of collectivism and also experienced more shame and guilt in response to norm-violating situations than their German counterparts, who exhibited lower collectivism and higher individualism. A similar finding was documented by Anolli and Pascucci (2005) who found that Asian Indian college students were more prone to experiencing guilt and shame than their Italian counterparts. Wallbot and Scherer (1995) analyzed data of 2,921 participants representing 37 countries and found that shame experiences were more typical in collectivistic than in individualistic countries, based on Hofstede's (1980) classification. Additionally, the experience of shame differed in collectivistic cultures, such that shame lasted for shorter durations, was associated with higher body temperature, and had fewer negative consequences for relationships and self-esteem. Wallbott and Scherer's study suggests that culture influences one's experience of shame, lending support to the final aim of the present investigation.

Self-construal and shame-proneness. A limited body of research exists focusing on the relationship between self-construal and self-conscious emotions like shame, guilt and embarrassability (Luu, 2002; Ratanasiripong, 1997; Sharkey & Singelis, 1995; Singelis, Bond, Sharkey, & Lai, 1999; Tang, Wang, Qian, Gao, & Zhang, 2008; Su, 2011). In general, researchers have proposed a positive association between

interdependent self-construal and higher levels of guilt (Luu, 2002), shame (Luu, 2002; Ratanasiripong, 1997), and embarrassibility (Sharkey & Singelis, 1995; Singelis & Sharkey, 1995; Singelis et al., 1999) across different cultures as well as within one nation. Moreover, cross-cultural and uni-cultural investigations have underscored the variability of self-construal that exists within and between cultures (see Sharkey & Singelis, 1995 or Ratanasiripong, 1997 for examples of uni-cultural investigations and Suu, 2011 for an example of a cross-cultural investigation).

At the same time, there have been few studies utilizing psychometrically sound instruments of self-construal and shame-proneness to test the relationship between the two constructs. For instance, though Singelis and colleagues (Sharkey & Singelis, 1995; Singelis & Sharkey, 1995; Singelis et al., 1999) administered a widely used measure of self-construal (SCS; Singelis, 1994), the authors only measured embarrassibility, which is considered to be a less painful and self-engulfing emotion than shame (Tangney et al., 2009). Other studies investigated the relationship between shame-proneness and self-construal indirectly, focusing on transferred shame experiences (Tang et al., 2008) or responses to shame (Su, 2011) but not measuring shame-proneness specifically. Such findings point to two limitations of existing research: 1) the definitions of shame were narrow and 2) the utilized instruments did not possess adequate psychometric integrity.

Among the few studies that have examined and measured shame-proneness and self-construal, findings did suggest cultural variation in the experience of shame.

Ratanasiripong (1997) studied relationships between acculturation, ethnic background, self-construal, belief in grace, shame, guilt, and depression among a sample of Asian American and Caucasian American Protestants. The researcher found a significant

positive relationship between proneness-to-shame and interdependent self-construal for both groups. In a similar investigation, Luu (2002) focused on shame related to parenting practices of 141 Asian Americans and 156 Caucasian Americans. The author measured internalized shame using Cook's (1988) scale and also included a scenario-based measure of shame-proneness (TOSCA). Findings showed that interdependent self-construal correlated with dispositional shame but not with internalized shame, though this relationship was not significantly different between the two cultural groups. Luu's research thus underscored the relationship between shame-proneness and interdependent self-construal while simultaneously supporting the notion that within-group differences in self-construal may be larger than between-group differences. A similar pattern of results was documented by Rinker (2002) who found that interdependent self-construal mediated the relationship between cultural membership and shame-proneness for Asian American and European American college students. In sum, these findings suggest that interdependent self-construal is related to greater shame-proneness; therefore, the present investigation sought to test a predictive path between interdependent self-construal and shame-proneness in a sample of counselors-in-training.

Self-construal and disclosure. There is a dearth of literature connecting self-construal and disclosure or the willingness to disclose. Moreover, there is currently no known study addressing the two constructs within the context of counseling or supervision. At the same time, theoretical and empirical writings offer a possible relationship between a person's self-construal and his or her willingness to disclose personal information in person (Barry, 2003; Chen, 1995; Suh, Diener, Oishi, & Triandis, 1998) and online (Chen & Markus, 2012). For example, Suh et al. (1998) suggested that

persons from collectivistic cultures do not place as much emphasis on their internal emotional experiences and thereby may not find it as important to share their inner thoughts and feelings with others. Barry (2003) confirmed the previous claim and found that interdependent self-construal was a significant positive predictor of lower willingness to disclose personal information for Asian American immigrants. Moreover, Chen (1995) found college students with individualistic, or independent, worldviews were more willing to disclose personal information relating to opinions, interests, work, financial, personality, and body issues than students with higher collectivistic, or interdependent, values. Collectively, findings from the existing investigations point to an association between interdependent self-construal and guarded self-disclosure; however, this claim has not been examined in the supervisory context. An important aim of the present study was thus to better understand the relationship between interdependent self-construal and willingness to disclose in supervision.

## **Summary and the Present Study**

In summary, the aim of the present investigation was to better understand the relationships among interpersonal, affective, and cultural variables of the supervisee as well as how those variables impact the supervisee's rating of the working alliance (See Figure 1). Because supervision can be an innately shame-provoking experience (Graff, 2008; Hahn, 2001), and shame is an emotion that elicits withdrawal and avoidance behavior (Lewis, 1972; Morrison, 2011), it was hypothesized that supervisees with higher levels of shame-proneness will report lower willingness to disclose in supervision.

Moreover, because previous investigations have linked greater willingness to disclose with a stronger rating of the working alliance (Mehr et al., 2010; Mehr et al., 2015) and

the formation of a strong alliance requires supervisee openness (Bordin, 1983), I predicted that lower trainee disclosure will predict a weaker rating of the working alliance. In this way, the present study hoped to better understand the theoretically implied impact of shame-proneness on the working alliance (Graff, 2008; Hahn, 2003) by examining whether shame-proneness influences the perception of the alliance by way of lower willingness to disclose in supervision.

Finally, because no study to date has examined how the cultural variable of interdependent self-construal relates to trainees' experiences in supervision, a secondary aim of the study was to test the relationships between interdependent self-construal, shame-proneness, and trainee disclosure in supervision. It was hypothesized that higher interdependent self-construal will relate to greater shame-proneness, as supported by existing literature (Luu, 2002; Ratanasiripong, 1997; Rinker, 2002). An additional hypothesis was that supervisees with higher levels of interdependent self-construal will also report lower disclosure in supervision.

## Chapter III

## Method

## **Participants**

Four-hundred and twelve participants accessed the survey. However, the first 73 participants did not receive the complete version of the survey, due to experimenter error, and were thus considered pilot data and not included in further analyses, leaving 339 participants who accessed the full version of the survey. After using listwise deletion to remove cases missing more than 20% of any study measure (Peng, Harwell, Liou, & Ehman, 2006), the reduced dataset contained 203 therapists-in-training. Moreover, I removed responses of two more participants who did not meet the inclusion criteria as they reported having zero supervision sessions with their supervisors at the time of data collection, reducing the final sample to 201 participants (28 men; 168 female; 2 gender queer; 2 "other:" [1 transgender woman; 1 "non-binary"]), whose average age was 28.43 years. Participants identified as European American/White Non-Hispanic (151; 75.1%), Asian American/Asian (15; 7.5%), African American/Black (13; 6.5%), Hispanic/Latino/a (10; 5%), Multi-racial (7; 3.6%), and Native Hawaiian/Pacific Islander (1; .5%). Four participants did not report their race/ethnicity. Eleven participants (5.5%) identified as international students.

With regard to sexual orientation, the majority of men sampled reported being attracted only to women (21; 75%), whereas two male participants reported being mostly attracted to women (7.14%), another two reported being attracted mostly to men (7.14%), and three men reported being attracted only to men (10.71%). For participating women, the majority reported being attracted only to men (106; 63%), one third reported being attracted mostly to men (49; 49.17%), seven women reported being attracted equally to

women and men (4.17%), three reported being attracted mostly to women (1.78%), and another three reported being attracted only to women (1.78%). One participant did not provide a response to the question, and two participants who identified themselves as "other" with regard to gender reported being attracted only to women and equally attracted to women and men (1%).

Participants represented diverse socioeconomic brackets. Over half of the respondents reported earning fewer than \$24,999 (104; 52%), with 12.5% reporting an annual household income (before taxes or other deductions) of less than \$5,000 (N = 25). Conversely, 33.8% of participants reported earning between \$25,000 and \$75,000 (N = 68), and another 14% reported an annual household income of \$75,000 and greater (N = 28). Respondents reported currently completing their program or clinical placement in the Northeast (47; 23.4%), Midwest (56; 27.9%), South (38; 18.9%), and West (56; 27.9%) regions of the United States (four participants did not provide this information).

With regard to academic programs, the majority of trainees reported pursuing a doctoral degree (131; 65.2%), and a third reported pursuing a master's degree (66; 32.8%), having already obtained a Bachelor's (80; 39.8%) or Master's degree (110; 56%). Students represented primarily Clinical Psychology (86; 42.8%) and Counseling Psychology (53; 26.4%) programs, while another 23 (11.6%) students were from Marriage and Family Therapy programs, 18 (9%) from Social Work programs, and the remainder represented other counseling-related fields (19; i.e., School counseling, Counselor Education, etc.). Trainees were in their first (18; 9%), second (61; 30.3%), third (42; 20.9%), fourth (27; 13.4%), fifth (36; 17.9%), or higher (17; 8.5%) years of study. Two participants reported completing post-doctoral training under supervision at

the time of data collection. Given the trainee status of post-doctoral residents and regular supervision components of post-doctoral training, these respondents were retained for further analyses.

Participants reported completing an average of 528 direct intervention hours with a median of 300 hours and were currently training in varied clinical settings, such as College Counseling Centers (70; 34.8%), Community Mental Health Agencies (24; 11.9%), Outpatient Clinics (17; 8.5%), Hospitals (17; 8.5%), Forensic Settings (13; 6.5%), Private Practice (11; 5.5%), Academic Settings (16; 8%), and other sites such as residential substance abuse treatment programs, hospices, etc. (25; 12.4%). Respondents varied with regard to their theoretical orientation of counseling. Most trainees identified with Integrative (47; 23.6%), Cognitive-Behavioral (40; 20.1%), Eclectic (20; 10.1%), Psychodynamic (17; 8.5%), Systems (17; 8.5%), Interpersonal Process (13; 6.5%), and other theoretical frameworks. After removing four outliers who reported working with more than 500 supervisors during the span of their training, potentially misinterpreting the questions, the average number of supervisors was approximately 5.0. Participants reported having met with their current supervisors for an average of 18 sessions at the time of data collection. The majority of supervisors for this group of trainees were female (123; 61.2%), White (164; 81.6%) and held doctoral degrees (148; 74%).

#### Measures

Supervisory working alliance. The supervisory working alliance was measured by the three subscales of the Working Alliance Inventory/Supervision (WAI/S; Bahrick, 1989; Trainee Version). The instrument was created as a modification of the therapeutic Working Alliance Inventory (WAI; Horvath & Greenberg, 1989) and was designed to

measure supervisory working alliance according to Bordin's (1983) definition of the alliance as the agreement on goals and tasks of supervision as well as the presence of a strong emotional bond with the supervisor. The instrument contains 36 self-report items rated on a 7-point Likert scale, with responses ranging from 1(never) to 7(always). The three subscales are Bond (12 items), Tasks (12 items), and Goals (12 items), and higher summed scores on each factor suggest perception of a stronger alliance with the supervisor. Participants were instructed to think of their current or most recent supervisor as they responded to items on this measure.

The WAI/S has been used extensively in supervision research and has accrued sufficient evidence of validity. Specifically, the WAI/S has evidenced predictive validity in studies of supervisee satisfaction (Ladany, et al.,1999) as well as of higher trainee willingness to disclose in supervision (Mehr et al., 2015). Demonstrating discriminant validity, the instrument was also associated with lower trainee anxiety in Mehr's study and with lower role-conflict and ambiguity in a study of 123 counselor trainees (Ladany & Friedlander, 1995). In regards to internal consistency, prior research has demonstrated Cronbach's alpha coefficients greater than .90 for all subscales (Mehr et al., 2015). In the present study, each WAI/S subscale yielded an internal consistency coefficient of  $\alpha = 0.94$ .

**Shame-proneness.** In the present study, shame-proneness was measured by the shame scale of the Test of Self Conscious Affect-3 (TOSCA-3; Tangney, Dearing, Wagner, & Gramzow, 2000). The TOSCA-3 is a scenario-based measure designed to measure cognitive, behavioral, and affective components of shame and guilt. The scale consists of 16 brief scenarios (11 negative and 5 positive) with different response choices,

each indicating one's tendency to respond with shame, pride, guilt, externalization, and detachment. All responses are rated on a 5-point Likert scale ranging from 1 (*Not likely*) to 5 (*Very likely*), and a higher score indicates a greater tendency to respond with a particular affect. An example scenario is: "You are driving down the road and you hit a small animal. (A; Externalization) You would think the animal shouldn't have been on the road. (B; Shame) You would think: 'I'm terrible.' (C; Detached) You would feel: 'Well, it's an accident.' (D; Guilt) You'd feel bad you hadn't been more alert driving down the road." The TOSCA-3 shame score is calculated by summing participant ratings of the shame response for each scenario. Prior studies have evidenced internal consistency estimates such as .83 for the Shame scale and .69 for the guilt scale (Rangganadhan & Todorov, 2010). Only the shame subscale was used for the present study.

To represent the shame-proneness construct with multiple indicators, I created three item parcels. In order to create parcels that provided the most accurate representation of the shame-proneness construct, I performed an exploratory factor analysis, examined the item correlation matrix, and performed an item-level reliability analysis (Little, Rhemtulla, Gibson, & Schoemann, 2013). Results of the exploratory factor analysis suggested a one-factor model, and the scale yielded good internal consistency ( $\alpha = 0.80$ ). The three parcels were then created using the item-to-construct balance approach (Little, Cunningham, Shahar, & Widaman, 2002), which dictates that parcels be created by balancing items with low and high factor loadings. The internal consistency coefficients for each of the parcels were slightly below the typical cut-off of .7 consistent with good reliability (Ponterotto & Ruckdeschel, 2007), Parcel 1 (6 items) =

.48; Parcel 2 (5 items) = .58; Parcel 3 (5 items) = .58; however, the parcels produced satisfactory loadings onto the Shame construct ( $\beta$  = .86 for Parcel 1;  $\beta$  = .73 for Parcel 2;  $\beta$  = .74 for Parcel 3) and were thereby considered to adequately represent shame in the present study.

**Trainee disclosure.** In the present study, trainee willingness to disclose was measured by the Trainee Disclosure Scale (TDS: Walker, Ladany, & Pate-Carolan, 2007) and by the two subscales of the Disclosure in Supervision Scale (DSS; Gunn & Pistole, 2012). The Trainee Disclosure Scale is a 13-item self-report measure that was developed to assess supervisee willingness to disclose in supervision. For each item rated on a fivepoint Likert scale ranging from 1 (not at all likely) to 5 (very likely), participants are instructed to respond to questions in the following format: "For each question, ask yourself how likely you would be to discuss issues of with your supervisor?" At the end, a total sum score is calculated for the 13 items, with higher scores indicating a greater willingness to disclose in supervision. Participants were instructed to think of their current or most recent supervisor as they responded to items on this measure. In terms of validity, the TDS has demonstrated divergent validity (r = -.473) with the number of nondisclosures measured by the Supervisee Nondisclosure Survey (Mehr et al., 2010), and the measure has been implicated in gender-related events in supervision (Walker et al., 2007). The TDS has shown high internal consistency ranging from  $\alpha = .80$ - .89 in previous studies (Walker et al., 2007; Mehr et al., 2010). In the present study, Cronbach's alpha was 0.88 for the TDS.

The Disclosure in Supervision Scale (DSS; Gunn & Pistole, 2012) is a 10-item measure designed to assess supervisee willingness to disclose information related to

Disclosure subscale is comprised of six items relating to supervisee disclosure of client-related feelings and personal information to the supervisor, and (2) the Supervisor Disclosure subscale contains four items related to disclosing information related to the supervisor. An example item from the Client-Personal Disclosure subscale is: "I am comfortable sharing negative reactions to clients with my supervisor." An item on the Supervisor Disclosure subscale is: "I have felt comfortable openly disagreeing with my supervisor." All items are rated on a 7-point Likert scale ranging from 1 (*Never*) to 7 (*Always*), with a higher score indicating greater trainee disclosure. Responses on each subscale are summed to obtain the total scores. Possible responses to the Client Disclosure subscale range between 6-42, and responses to the Supervisor Disclosure subscale can range between 4 and 28. Participants were instructed to think of their current or most recent supervisor as they responded to items on this measure.

Although the DSS is a newly-developed instrument, its items evidence construct validity as they were created by combining items from the Supervisory Questionnaire (Black, 1987) and Ladany et al.'s (1996) qualitative findings about the content of supervisee nondisclosures (Gunn & Pistole, 2012). In addition, the DSS correlated with the supervisory working alliance, further demonstrating the validity of the instrument. The DSS also evidenced good internal consistency estimates for the Client-Personal ( $\alpha$  = .82) and Supervisor Disclosure ( $\alpha$  = .84) subscales for a sample of 116 counselors-intraining in Gunn and Pistole's study. In the present study, the Client subscale yielded a Cronbach's  $\alpha$  of 0.84 and the Supervisor subscale yielded a Cronbach's  $\alpha$  of 0.85.

Interdependent self-construal. Interdependent self-construal was assessed using the Interdependent Self Construal subscale of the Self Construal Scale (SCS; Singelis, 1994). The subscale consists of 15 items, measuring interdependent self-construal on a 7-point Likert scale. Participants rate each item from 1 (*Strongly disagree*) to 7 (*Strongly agree*). An example from an item on the interdependent subscale is: "My happiness depends on the happiness that is around me." Scores were calculated by taking the mean of the items in each subscale, with higher scores on each subscale indicating greater interdependent self-construal.

The SCS was initially validated using a diverse sample of college students from Hawaii (Singelis, 1994), and findings provided support for the two-dimensional structure of the scale as well as for the orthogonal nature of independent and interdependent self-construal (between factor correlations ranging from -.04 to .16). Cronbach's alpha coefficients ranged from .72 to .74 on the Interdependent subscale (Constantine, 2001; Singelis, 1994).

Although a two-factor had been supported by previous research, some studies proposed a multidimensional structure of self-construal. For instance, Hardin, Leong, and Bhaghwat (2004) proposed a 6-factor structure of the SCS, with two factors measuring interdependent self-construal (Esteem for group [8 items], and Relational Interdependence [4 items]). Miramontes (2011) validated the 6-factor structure of the SCS using four data sets with participants from the United States (in addition to analyzing datasets with participants from 6 different countries). His analyses showed that the 6-factor structure of SCS provided good fit to the data in American samples.

Additionally, Miramontes retained only 4 items for the Relational Interdependence and Group Esteem subscales based on the results of a confirmatory factor analysis.

In the present study, both the Miramontes (2011) and Hardin et al (2004) factor structures of the SCS evidenced poor psychometric properties ( $\alpha < .50$ ) and low factor loadings, suggesting that the previously defined factor structures did not fit well with the data in the obtained sample. Thus, I randomly divided the sample into two groups and performed an Exploratory Factor Analysis on one half of the sample (N = 100) and a Confirmatory Factor Analysis on the second half of the sample (N = 101). Results of the EFA initially suggested a three-factor solution; however, the three-factor model contained numerous double-loadings and did not support simple structure. As such, I conducted an EFA constrained to two factors, using Principal Axis Factoring as the extraction method with Promax Rotation. Results of the EFA yielded one factor with 6 items and a second factor with 4 items. Results of the CFA initially suggested that the two factor model exhibited good fit with the sub-sample data,  $(\gamma^2(34) = 37.21, p = .324;$ CFI = .97; TLI = .97; RMSEA = .03; SRMR = .07); however, when testing the two factor SCS structure in the full SEM model, the two-factor model produced a negative error variance (i.e., Heywood case) for the first SCS factor, potentially implying misspecification of the SCS variable (Kolenikov & Bollen, 2012).

Consequently, another EFA analysis constrained to one factor was performed on the second half of the sample. The one-factor model explained approximately 18% of the variance in Self Construal and contained eight items. The one-factor model also exhibited good fit to the CFA sample data ( $\chi^2(20) = 23.31$ , p = .274; CFI = .97; TLI = .95; RMSEA = .04; SRMR = .05), and model fit was not improved by attempts to parcel the factor.

Thus, in the present study, Self-Construal was measured by eight item-level indicators, and the items exhibited good internal consistency ( $\alpha = .74$ ).

Demographic questionnaire. Participants reported their age, gender, ethnicity/race, sexual orientation, geographic region, and socioeconomic status. They also answered questions describing the type (masters/doctoral) and focus (counseling, clinical, social work, etc.) of their graduate program as well as their year in the program. Participants reported the number of supervised clinical hours they completed, the setting in which they received supervision, and number of supervision hours they received. Given that the present study gathered information regarding participants' supervision experience, trainees also reported information about their current supervisor and described the supervisor's credentials (e.g., licensed professional counselor, licensed psychologist, etc.) and demographics (e.g., race, gender).

# Design

The study employed a non-experimental multiple regression design (Heppner, Wampold, & Kivlighan, 2008). Interdependent self-construal was treated as the exogenous variable, and the supervisor working alliance, shame-proneness, and trainee disclosure were treated as endogenous variables.

### **Procedure**

Prior to distributing the study questionnaire, three counseling psychology trainees piloted the survey to assess for face validity of the items as well as for the perceived burden and time demand of the questionnaire. Participants were recruited from counseling-related programs such as Counseling Psychology (Masters, PhD, and PsyD), Clinical Psychology (Masters, PhD, PsyD), Counselor Education (Masters, PhD, EdD),

Marriage and Family Therapy (MFT and DMFT), School Counseling (Masters), and Clinical Social Work (MSW and DSW), including those completing their pre-doctoral internships. Additionally, post-doctoral residents who met the supervision criteria were eligible to participate. Recruitment announcements were emailed to program directors and internship training directors with the request to forward the message to the students in their departments/programs. Training directors were asked to respond to the recruitment emails with the total number of students enrolled in their program. Recruitment emails were sent to more than 1200 training directors, and 107 directors responded, agreed to forward the data, and provided an estimated number of students in their programs. Data from these training director responses were used to calculate an approximate response rate for the present study. Despite the limitation of snowball sampling for calculating an accurate response rate, I utilized this sampling procedure after failing to collect greater than 200 valid responses after three rounds of recruitment through training directors. I was thus only able to calculate an approximate response rate statistic for the study. The 107 training directors who responded affirmatively to the recruitment request estimated a total number of 4,248 students in their respective programs, yielding a response rate of 9.69% based on the 412 participants who accessed the survey following recruitment. The 73 participants who did not receive the full version of the survey were included in the sample size calculation.

Recruitment emails contained a description of the study as well as a link to the anonymous survey, hosted online via Qualtrics.com. I sent two reminder emails, approximately two weeks and one month following the initial round of recruitment, to provide trainees with ample opportunities to participate. Participants were informed that

their participation was voluntary and were made aware of the minimal risks and benefits involved with participating. Once trainees provided consent to participate in the study, they completed study measures online. Study measures were counterbalanced to protect against order effects. Additionally, participants were informed that they may choose to provide their email addresses to receive one of three \$25 gift cards to Amazon.com offered as incentives for participation. The 10<sup>th</sup>, 100<sup>th</sup>, and 200<sup>th</sup> participants received a gift card. Prior to collecting data, I obtained approval from Lehigh University's Institutional Review Board.

# **Data Analytic Plan**

I employed Structural Equation Modeling (Bollen, 1989) techniques using Amos 22.0 Graphics Software (Arbuckle, 2009) to test the relationship between study variables (See Figure 3a for depiction of the target model and Figure 3b for alternate model). Five latent variables were used in the proposed model, with each measured by multiple indicators. The "Shame-proneness" variable was measured by three parcels of the TOSCA-3 shame scale (Tangney et al.,, 2000). "Supervisory Working Alliance" was measured by the three subscales of the WAI/S (Bahrick, 1989), and "Trainee Disclosure" was measured by the TDS (Walker, Ladany, & Pate-Carolan, 2007) and the two subscales of the DSS (Gunn & Pistole, 2012), totaling three indicators. Finally, "Interdependent Self Construal" was measured by eight item-level indicators. To examine whether trainee disclosure significantly mediated the relationship between supervisee shame-proneness and the supervisory working alliance, I tested a mediation model following Brown's (1997) guidelines for mediation in SEM. Finally, in order to compare the fit of the target and alternate models, I performed a nested model

comparison and examined the chi-square difference statistic as well as changes in the goodness of fit indices with the addition of Path E to the structural model.

Treating missing data. After using listwise deletion to remove cases with greater than 20% missing data on any measure (Peng et al., 2006), person-mean substitution was used to treat retained cases (Downey & King, 1998), so that model fit and modification indices could be examined in the present study. One hundred and thirty six participants provided missing responses (> 20% on any study measure) and were removed using listwise deletion. Then, a total of 23 items on 6 scales (TOSCA-3, TDS, DSS Client, WAIS Goal, WAIS Task, and WAIS Bond) were replaced with individual mean values. Personmean substitution is considered to be appropriate for datasets with less than 20% missing data (Downey & King, 1998).

Assessing goodness of fit. To assess the fit of the target and alternative models, the following goodness of fit indices were examined:  $\chi^2$  test, the Comparative Fit Index (*CFI*), the Tucker-Lewis Index (*TLI*), the Root Mean Square Error of Approximation (*RMSEA*), and the Standardized Root-mean Square Residual (*SRMR*). The above indices reflect both stand-alone and incremental measures, and they have been supported for use in counseling psychology research (Martens, 2005). Consistent with prior literature that has established criteria for examining fit indices, I utilized a criterion of 0.95 to establish excellent model fit (Browne & Cudeck, 1993; Bentler & Bonnett, 1980; Hu & Bentler, 1999) and of .90, to establish adequate fit for *CFI* and *TLI* (Weston & Gore, 2006). Additionally, the models were deemed to suggest excellent fit to the data if the *RMSEA* and *SRMR* indices were.05 and below, or adequate fit if the values were between .06 and.08 (Browne & Cudeck, 1993; Hu & Bentler, 1999; Schumacker & Lomax, 2010).

Finally, models were deemed to exhibit good fit if the  $\chi^2$  test was statistically non-significant at the .05 level (Barrett, 2007); however, this particular index has been shown to reject good fitting models in large sample sizes and was therefore examined with caution in the present study (Bentler & Bonnet, 1980; Hu & Bentler, 1999). Consequently, in order for each model to exhibit good fit to the data, all of the goodness of fit indices except for the  $\chi^2$  test must have met the cut-off criteria. The best-fitting model was determined by evaluating the goodness of fit of the five fit indices for each model as well as by assessing whether the alternate model significantly improved upon the fit of the target model.

## **Chapter IV**

### **Results**

## **Preliminary Analyses**

In order to examine any significant differences between participants who provided complete versus incomplete responses, I performed a series of chi-square analyses, comparing the proportion of removed (N = 136) versus included (N = 201) participants among demographic variables and first presented set of measures for the study. There were no significant differences (p > .05) between the groups based on first set of presented measures, gender, race/ethnicity, household income, geographic region, degree pursued, field of study, year in program, or international student status. Similarly, after transforming variables using square root transformation to achieve univariate normality, removed and included participants did not significantly differ on number of direct intervention hours, number of supervisors to date, or number of supervision sessions to date.

Secondly, to assess for confounding effects of demographic variables on main study variables, I performed a Multivariate Analysis of Variance (MANOVA) using demographic variables as independent variables and total scores of main study variables as dependent variables. The per comparison alpha level was set to .001 in order to minimize Type I error. Results of the multivariate analysis suggested that there were no significant differences on study variables based on participant gender, annual income, geographical region, sexual orientation (heterosexual vs. sexual minority), degree pursued, field of study, year in the program, theoretical orientation, and clinical setting (p > .05). However, findings suggested a significant multivariate main effect for race

(dichotomized into White vs. Non-White for the purpose of the comparison), Wilks'  $\lambda = .90$ , F(5, 149) = 2.84, p = .018, and follow-up tests showed that White participants scored lower (N = 151; M = 47.20) than non-White participants (N = 50; M = 52.10) on the total DSS measure, F(1, 594) = 5.42, p = .02.

Additionally, three univariate linear regressions were performed to examine whether study variables were predicted by the number of direct intervention hours, number of supervisors, and number of supervision sessions reported to determine whether participants' prior experience potentially influenced their scores on the measures of interest in the study. Prior to conducting the analyses, the variables were transformed using Square root transformations in order to obtain normal distributions, as they produced skewness and kurtosis values outside of  $\pm$ 0. Following transformations, all variables but the number of supervisor sessions (Skewness = 1.96; Kurtosis = 4.60) produced skewness and kurtosis values of  $\pm$ 0. Curran, West, and Finch (1996) suggest that kurtosis values of  $\pm$ 0. Curran, where the transformed number of supervision sessions variable could be considered normally distributed. Results of the regression analyses suggested no significant associations between study variables and number of direct intervention hours, number of supervisors, or number of supervision sessions ( $\pm$ 0.05).

## **Assumptions of Multivariate Normality**

In accordance with best practices for SEM (Martens, 2005), I examined skewness and kurtosis of study variables, deeming values within the range of -2 to 2 to indicate normality (Lomax, 2001). All variables produced skewness and kurtosis values within the acceptable range, suggesting that the variables were normally distributed. Normal

probability plots were also examined and evidenced linear distributions, in accordance with univariate normality. Furthermore, bivariate scatter plots appeared to exhibit elliptical shapes, supporting bivariate normality of variables. Descriptive statistics of study variables are displayed in Table 1.

### **Model Identification**

Prior to testing model fit, I established model identification using the order condition, Bollen's two indicator rule, and empirical testing. The order condition, which dictates that the number of parameters to be estimated must be less than or equal to the number of sample moments in the covariate matrix, was met in the present study. Because the order condition is necessary but not sufficient for determining model identification, I also referred to Bollen's two-indicator rule (Bollen, 1989), which states that a model may be considered identified if there is more than one latent variable with at least two indicators. The target and alternative models in the present study met Bollen's two-indicator rule, which is sufficient for model identification. To further ensure model identification, the scale of each latent variable was fixed to 1.00. The above evidence and results of empirical identification suggested that the model was identified.

#### **Measurement Model Fit**

Prior to testing the fit of the target and alternative models, I examined the measurement models for each latent variable in the study. Because the measurement model for each latent variable in the endogenous model was just-identified, or contained an equal number of sample moments in the covariate matrix as estimated parameters, model fit could not be assessed, and factor loadings were examined to evaluate the integrity of the measurement models. Each of the three latent variables loaded highly

onto its multiple indicators. Factor loadings ranged from 0.67 (DSS-Supervisors) to 0.97 (WAIS\_Task and WAIS\_Goal), and all factor loadings were significant at the p < .001 level. The Self Construal variable was measured by eight item-level indicators. The model evidenced good fit to the data ( $\chi^2(20) = 30.39$ , p = .064; CFI = .96; TLI = .94; RMSEA = .05; SRMR = .05) and all factor loadings were significant at p < .001 level. Factor loadings for the eight SCS item indicators ranged from .42 (SCS17) to .64 (SCS30). Thus, measurement models evidenced good fit to the data in the present study.

Best practice suggestions for conducting SEM analyses in counseling psychology research also recommend assessing the fit of the exogenous and endogenous models separately prior to examining the fit of the full structural model (Martens, 2005). In the present study, the exogenous model contained only the self-construal variable, and the measurement model evidenced good fit to the data (see above). The endogenous model also exhibited good fit to the data,  $\chi^2(24) = 52.84$ , p = 001; CFI = .98; TLI = .97; RMSEA = .08; SRMR = .05. See Figures 4 and 5 for unstandardized and standardized estimates of the endogenous model, respectively.

## **Mediation Analysis**

In order to assess whether disclosure mediated the relationship between shame-proneness and the working alliance, I examined direct and indirect effects separately. The direct effect of shame-proneness on working alliance was not significant (B = .08;  $\beta = .08$ ; p = .314). When disclosure was added to the model, the path between shame proneness and the working alliance remained non-significant (B = .09;  $\beta = .06$ ; p = .334). Therefore, disclosure did not appear to mediate the relationship between shame-proneness and the working alliance in the present study.

## **Target Model Fit**

Standardized and unstandardized parameter estimates are displayed in Table 3 and in Figures 6 and 7. Results indicated that interdependent self-construal positively and significantly predicts a trainee's level of shame-proneness (B = .48;  $\beta = .43$ ; p < .001) and that trainee disclosure positively and significantly predicts trainee perceptions of a strong supervisory working alliance (B = 1.08;  $\beta = .73$ ; p < .001). Alternatively, shame-proneness was not a significant predictor of trainee disclosure (B = .02;  $\beta = .02$ ; p = .786) or of the supervisory working alliance (B = .08;  $\beta = .06$ ; p = .290). Overall, the target model evidenced excellent fit to the data according to three of the fit indices, and adequate fit according to the *SRMR* index ( $\chi^2(115) = 168.07$ , p = .001; CFI = .97; TLI = .96; RMSEA = .05; SRMR = .06).

## **Alternate Model**

Standardized and unstandardized parameter estimates for the Alternate model are displayed in Table 3 and in Figures 8 and 9. The Alternate model, with the added path from Self Construal to Disclosure, evidenced good fit with the data  $\chi^2(114) = 166.28$ , p = .001; CFI = .97; TLI = .96; RMSEA = .05; SRMR = .06. However, the model did not significantly improve the fit of the data when compared to the target model  $\Delta \chi^2(1) = 1.79$ , p = .181. Moreover, the added path between self-construal and trainee disclosure was not significant (B = -.14;  $\beta = -.14$ ; p = .182), suggesting that self-construal does not significantly predict trainee willingness to disclose in supervision. The paths between interdependent self-construal and shame-proneness (B = .48;  $\beta = .43$ ), as well as between trainee disclosure and perceptions of the supervisory working alliance (B = 1.07;  $\beta = .73$ ), remained significant in the alternate model (p < .001), whereas no significant

relationships were found between shame-proneness and the working alliance (B = .09;  $\beta = .06$ ; p = .284) or between shame-proneness and trainee disclosure (B = .08;  $\beta = .09$ ; p = .358).

## **Model Conclusion**

Overall, both models evidenced good and comparable fit to the data, and the added path between interdependent self-construal and trainee disclosure was non-significant and did not significantly improve the fit of the target model. Therefore, the Target model appears to be the best-fitting model in the present study. Results of structural equation modeling revealed that self-construal significantly predicted shame and that trainee disclosure significantly predicted trainee ratings of the supervisory working alliance. The other structural paths in the model did not reach statistical significance.

## Chapter V

### **Discussion**

The aim of the present study was to better understand what factors predict trainee perceptions of the working alliance in supervision. Given the potential role of cultural, affective, and interpersonal variables on the working alliance (Bennett et al., 2013; Bhat & Davis, 2007; Dickson et al., 2011), structural equation modeling was used to examine relationships among interdependent self-construal, shame-proneness, trainee disclosure, and trainee ratings of the supervisory working alliance. I hypothesized that interdependent self-construal would predict greater shame-proneness, that shameproneness would negatively predict trainee willingness to disclose in supervision and the perceived quality of the working alliance, and that trainee disclosure would positively predict ratings of the supervisory working alliance as well as mediate the relationship between shame-proneness and the perceived quality of the working alliance. An alternate model with an additional path between interdependent self-construal and trainee willingness to disclose was also examined. Findings suggested that both the target and alternate models of relationships among variables evidenced good fit to the data; however, only two of the five hypothesized paths between study variables were supported by the present findings. Specifically, results showed that greater willingness to disclose in supervision predicted higher ratings of the supervisory working alliance for trainees and that higher interdependent self-construal predicted greater shame-proneness. In contrast, I found no significant relationships between 1) shame-proneness and trainee disclosure, 2) shame-proneness and trainee perceptions of the supervisory working alliance, or 3) interdependent self-construal and trainee disclosure. In the following

section, I discuss the current findings in the context of existing research and outline implications, limitations, and directions for future studies.

## **Trainee Disclosure and Working Alliance**

Supporting the present study's hypothesis, trainee willingness to disclose in supervision was a significant predictor of the quality of the supervisory working alliance. More specifically, trainees with greater willingness to disclose also reported stronger perceptions of the supervisory working alliance. This finding is consistent with previous literature that has linked disclosure and the alliance in supervision (Callis, 1997; Mehr, Ladany, & Caskie, 2015; Pakdaman, 2012), bolstering empirical support for the association among the two constructs. Moreover, whereas existing investigations have operationalized disclosure as a consequence of a strong working relationship in supervision rather than its precursor (e. g., Mehr et al., 2015), the present study is the first to conceptualize disclosure as a predictor of the working alliance rather than an outcome.

The current investigation therefore highlights a "chicken or the egg" dilemma concerning the two constructs and begs the question: which one came first, the willingness to disclose or a strong working alliance in supervision? Although it is not possible to determine causality based on this non-experimental study, one cannot dispute the preponderance of evidence linking trainee disclosure and stronger supervisory working alliance. For example, empirical and theoretical accounts of disclosure suggest that persons who disclose more in intimate relationships are also more liked (Collins & Miller, 1994) and that individuals feel more comfortable disclosing to others when there is perceived comfort and strength in the relationship (Mack, 2012). Thus, perhaps there is a bi-directional relationship between trainee willingness to disclose and the supervisory

working alliance, such that supervisees disclose more to supervisors with whom they perceive a strong working alliance and also that the perceived strength of the supervisory working alliance increases with more disclosure in the supervisory relationship.

Considered in context, it seems plausible that when a new trainee enters supervision with openness and does not seemingly withhold information from the supervisor, the supervisor might feel fondly towards the trainee and therefore attend more to the relationship. In response, the trainee might feel safe continuing to disclose to his or her supervisor if the supervisor is perceived to be collaborative, warm, and effective. In future studies, it will be important to empirically examine the nuances of the relationship between disclosure and the working alliance in supervision to determine whether a temporal order in fact exists among the two constructs or whether the relationship is reciprocal and bidirectional.

## Shame-Proneness, Disclosure, and Working Alliance

Shame-proneness and disclosure. Despite conceptualizing shame-proneness as the conduit to low willingness to disclose in supervision, proneness to experiencing shame was not found to significantly predict trainee willingness to disclose in the present study. This finding is somewhat surprising, as empirical and theoretical accounts have proposed a relationship between the two constructs. For example, a number of existing investigations have implicated proneness to experiencing shame as an inhibiting factor to client disclosure in therapy (Hook & Andrews, 2005; MacDonald & Morley, 2001) and one study connected non-disclosure to supervisee openness, which is a related construct to trainee disclosure (Chorinsky, 2003). Theoretically, shame should play a role in supervisee's openness or guardedness in supervision, as shame propels

individuals to hide, defend, and withdraw (Macdonald, 1998), specifically in an evaluative setting like counseling supervision (Graff; 2008; Hahn, 2001). At the same time, existing literature is mixed in suggesting a relationship between shame and disclosure. Farber and Hall (2002), for example, failed to find a relationship between disclosure and shame-proneness in a sample of therapy clients, and no quantitative investigation to date has found a significant relationship between shame and disclosure in a supervision sample.

The lack of empirical support for the relationship between shameproneness and disclosure may be attributed to the way that shame was measured in the present study. The Test of Self Conscious Affect-3 (TOSCA-3) was administered in the current investigation because it is a scenario based measure that does not ask participants to identify shame as a face-valid emotion (Tangney et al., 2000). The scenario-based measurement of shame is beneficial, as one interesting attribute of shame is that shameprone individuals are likely to feel ashamed at their experience of shame and may lack awareness or acknowledgment of the emotion altogether (MacDonald, 1998); thus, utilizing hypothetical scenario measures reduces the defensive bias of adjective checklists and related instruments (Tangney, 2009). However, not all of the scenarios included in the TOSCA-3 may have been relevant to clinical supervision. In particular, there were no supervision-specific scenarios. Participants were asked to think about situations such as how they might feel after hitting a small animal on the road (Item 9), but shame triggered by this situation may not exactly relate to experiencing shame due to feeling incompetent or helpless as a therapist. Although the TOSCA-3 is widely used in psychology research (i.e., Anolli & Pascucci, 2005; Delong & Hahn, 2014), and a previous version has been

administered to counseling trainees in previous studies (i.e., Hemlick, 1998), it is possible that the instrument is not specific enough to capture shame experiences endemic to supervision. I did not find a supervision-specific instrument of shame-proneness to date, but if created, such a scale might be sensitive enough to reveal a relationship between shame-proneness and trainee willingness to disclose in supervision in future studies.

Another plausible reason for the lack of a significant relationship between shame-proneness and trainee disclosure could be that the relationship is indirect, and the two variables are related through a mediator, such as trainee expectations or cognitions. Supporting this notion, previous research has underscored a mediating role of outcome expectations on the relationship between shame-proneness and disclosure in therapy (Delong & Hahn, 2014). Delong and Hahn sampled 312 college students to examine the relationship between shame-proneness, anticipated support from therapist for disclosing, and the likelihood of disclosing to the therapist. The authors used the short version of the TOSCA-3 to measure shame-proneness in their study. Although the participants were asked to think of a hypothetical counseling scenario, the researchers did not know whether participants were actually in therapy at the time. Delong and Hahn found that outcome expectations, or how much support participants anticipated from their therapist in response to the disclosure, mediated the relationship between shame-proneness and disclosure. It is therefore possible that outcome expectations concerning anticipated support from the supervisor for trainee disclosure would mediate the relationship between a trainee's proneness to shame and her or his willingness to disclose in supervision. In fact, previous studies have linked supervisor openness to discussion and supervisory engagement to trainee-labeled effective supervision experiences (Ladany, Mori, & Mehr,

2013), and shame theorists have underscored the healing value of being able to unearth shame within a supportive and validating environment (MacDonald, 1998).

In sum, the relationship between shame-proneness and trainee disclosure is nuanced and complicated. Shame may be activated to varying degrees in supervision, and the association may depend on a number of factors related to the supervisor, the supervisee, and the supervisory context. Consequently, future studies would benefit from utilizing supervision-specific measures of shame and investigating the effect of a third variable on the relationship between the two constructs.

**Shame-proneness and the working alliance.** The hypothesized relationship between shame-proneness and trainee perceptions of the supervisory working alliance was not supported by the present investigation; in effect, results suggested no relationship between the two constructs The failure to find a significant relationship between shame-proneness and the supervisory working alliance is contradictory to findings of previous investigations examining this relationship in supervisory dyads (Bilodeau et al., 2012) and for clients in therapy (Black, Curran, & Dyer, 2013). At the same time, other research has similarly failed to establish a significant relationship between the two constructs (Bilodeau et al., 2010). Despite failing to show a significant relationship between shame-proneness and the supervisory working alliance, the present investigation expands upon existing research by utilizing a different instrument to measure shame-proneness (TOSCA-3) and sampling only supervisees and not supervisory dyads. Below, I discuss plausible theoretical and empirical reasons for the lack of a statistical significant association among the two constructs in the present study.

When evoked, shame can cause individuals to project negative qualities onto others in fear of being discovered as inadequate or unworthy (Gilbert, 2011). As such, the relationship between shame-proneness and the working alliance may differ throughout the course of supervision and may be significant specifically when the supervisee's anxiety and defenses are high (Bilodeau et al., 2012). For example, the impact of shame-proneness on trainee perceptions of the supervisory working alliance may be greatest near mid-term or end-of-semester evaluation sessions or towards the end of supervision when trainees may no longer idealize their supervisors and feel exposed or vulnerable to criticism and performance evaluation (Bilodeau et al., 2012; Hahn, 2001). Because data for the present study were collected from October through January, it is possible that the majority of the participants were in the middle or final stages of their supervisory experiences, rendering them less vulnerable to the effects of shame-proneness on the working alliance.

Moreover, supervisor specific factors such as openness to discussion (Shohet & Wilmot, 1991), commitment to the supervisory process (Bucky et al., 2010) or supervisory style (Ladany et al., 2011) could influence the relationship between proneness to shame-proneness and trainee ratings of the working alliance. If an atmosphere of safety and non-judgment is established, then a supervisee may be able to work through his or her own shame experiences without withdrawing or projecting in supervision, and without compromising the strength of the supervisory working alliance. In contrast, if a supervisee perceives her or his supervisor to be critical or not interested in exploring the supervisee's reactions, then the supervisory environment could trigger shame and withdrawal to a greater degree. It is therefore important to understand how

supervisor factors influence the relationship between shame and the working alliance in supervision.

Finally, the failure to find a significant relationship between shameproneness and trainee ratings of the working alliance in supervision may again be
attributed to measurement issues. The TOSCA-3's dearth of shame-triggering scenarios
specific to supervision and the fact that both constructs were measured by self-report
instruments could explain the non-significant relationship between shame-proneness and
the supervisory working alliance in the present study. For instance, some participants
may not be self-aware enough to identify their propensity to respond with shame or may
be vulnerable to social desirability effects when evaluating their tendency to experience
shame in certain TOSCA-3 scenarios.

Shame-proneness, working alliance, and disclosure. The hypothesis that trainee disclosure would mediate the relationship between shame-proneness and the working alliance was not supported in the present study, and shame-proneness was not significantly related to either variable. Given that the working alliance is a multi-faceted construct (Borden, 1979), it is possible that the relationship between shame-proneness, trainee disclosure, and the alliance is complex and indirect, beyond what was studied in the present investigation. For instance, one study (Black et al., 2013) found that the coping style of withdrawal in response to shame was a significant negative predictor of the therapeutic alliance in a sample of 50 adult mental health clients. Applying these findings to the present investigation, proneness to shame may only be related to trainee ratings of the supervisory working alliance when the trainee responds to feelings of shame by withdrawing and distancing in the supervisory relationship. Thus, perhaps one

reason that trainee disclosure was not found to mediate the relationship between shameproneness and the supervisory working alliance is that withdrawal may not be the only operating drive in trainee non-disclosure.

Supervisees may not disclose material in supervision for other reasons: as a way to be respectful of the supervisor, because they experience perceived constraints on time in the supervision session, if they consider information to be irrelevant to supervision, or due to fear of a negative evaluation from the supervisor (Mehr et al., 2010). Moreover, deeming personal information to be inappropriate to share with a supervisor could reflect more hierarchical power structures in a supervisee's culture (Hofstede, 1980) or higher levels of interdependent self-construal (Suh et al., 1998) rather than shame-proneness Thus, reasons for nondisclosure may reflect cultural issues or differences (Pettifor, Sinclair, & Falender, 2014) or a preference concerning appropriate boundaries in professional relationships (Kozlowski, Pruitt, DeWalt, & Knox, 2014). It is important to understand the context and meaning of supervisee non-disclosure in order to obviate pathologizing certain cultural values or practices. As such, perhaps if future investigations consider specific motivators for non-disclosure as opposed to general willingness to disclose in supervision, a clearer relationship between shame-proneness, working alliance, and trainee disclosure may emerge.

# Self-Construal, Shame-proneness, and Trainee Disclosure

In the present study, I attempted to understand the joint effects of cultural, affective, and interpersonal variables on the supervisory process by studying associations between interdependent self-construal and shame-proneness as well as trainee willingness to disclose in supervision. Findings suggested that higher interdependent self-construal

predicted greater levels of shame-proneness for supervisees, but there was no significant relationship between interdependent self-construal and trainee willingness to disclose in supervision.

The finding that greater interdependent self-construal is a significant predictor of higher shame-proneness in supervisees further extend the existing body of literature pointing to an association between interdependent self-construal and selfconscious emotions such as shame and guilt (Luu, 2002; Ratanasiripong, 1997; Sharkey & Singelis, 1995; Singelis, et al., 1999). Because shame is considered an other-focused emotion, persons higher on interdependent self-construal may be more prone to experiencing shame due to higher preoccupation with how their behavior influences or reflects on others, especially for persons in close relationships with them (Markus & Kitayama, 1991). For individuals with higher developed interdependent self-construal, an individual transgression might feel like a reflection on the person's community or loss of face, thereby prompting a stronger shame reaction. This finding suggests that supervisees who score higher on interdependent self-construal may evidence greater shame-proneness in supervision. Critical remarks by the supervisor, perceptions of clinical mistakes, and the desire to please the supervisor may contribute to higher levels of shame for these trainees, as they may consider a personal mistake to also reflect poorly on their supervisors and threaten harmony, triggering more intense shame experiences. Moreover, supervisees with higher interdependent self-construal may be especially sensitive to comparisons with other trainees, as perceived poorer performance in comparison to others may signal failure to fulfill obligations within the supervisory relationship (Cross, Hardin, & Gercek-Swing, 2011). Unfortunately, there are no other

existing studies of shame-proneness and interdependent self-construal specific to the supervision context to date, so it is not yet possible to describe all the ways in which trainee levels of interdependent self-construal influence the supervisory process.

Alternatively, interdependent self-construal was not found to be a significant predictor of trainee willingness to disclose in supervision. Because so few investigations of self-construal and disclosure exist (Barry, 2003; Chen, 1995; Suh et al.,1998), and none have been conducted in the context of supervision, it is not possible to surmise whether the lack of a significant relationship in the present study can be attributed to theoretical rationale or to measurement issues. In fact, although the relationship was non-significant, it was in the predicted direction, such that supervisees with higher developed interdependent self-construal reported lower willingness to disclose in supervision. Theoretically, supervisees with higher interdependent selfconstrual may place lower emphasis on their inner experiences, thereby disclosing less in terms of personal reactions and feelings (Suh et al., 1998). Moreover, because interdependent self-construal emphasizes community and group harmony rather than uniqueness and separateness (Markus & Kitayama, 1991), personal issues or reactions may be deemed irrelevant or separate from the goal of the group (i.e., providing clinical services to clients; group harmony) and therefore shared less in supervision.

Finally, the poor psychometric properties of the Self-Construal Scale (SCS) in the present sample of trainees potentially compromised the ability to fully understand how the construct relates to supervisee characteristics. Although the SCS is the most widely used instrument of self-construal in psychological research (Cross et al., 2011), a number of scholars have noted problems with its psychometric integrity. For instance, the SCS

has evidenced internal consistency coefficients ranging from .53 (Singelis et al., 1999) to .70 (Singelis, 1994), which are deemed poor to acceptable in psychological research (Ponterotto & Ruckdeschel, 2007). Scholars have also questioned the initial factor structure proposed by Singelis (1994), noting that the researcher's use of exploratory Principal Components Analysis PCA over an Exploratory Factor Analysis in the initial validation of the instrument was not the most appropriate method for identifying latent factors (Hardin et al., 2004). As such, in the present study, I attempted to utilize a two-factor structure of interdependent self-construal, derived by prior factor analyses conducted by Hardin and colleagues (2004) as well as by Miramontes (2011). Unfortunately, neither of the two-factor models fit the present data well in the current investigation, limiting my ability to measure the construct using previously-defined factor structures and resulting in utilizing item-level indicators to measure interdependent self-construal in the analysis.

It is possible that the data from the present sample did not evidence good fit to previously proposed factor structures of the SCS due to differences in sample characteristics as well. For example, Hardin and colleagues (2004) sampled from Asian/Asian American and European American college students and Miramontes (2011) included college students from six different countries in her research sample. The participant sample in the present study was older and more homogeneous than existing investigations, potentially influencing the psychometric properties of the SCS. It will be important to validate the factor structure and included items of the interdependent SCS scale in future studies with supervisee samples.

## **Limitations and Threats to Validity**

Although the present study provided important information to enhance existing literature pertaining to the supervisory process, it was not without limitations. First, because the research was correlational, one cannot infer true causation from the findings, and results may not generalize across outcomes or participant samples. Additionally, although there were no significant differences between trainees who completed the survey and those who did not finish the questionnaire entirely, it is possible that individuals who chose to participate in the study exhibited certain characteristics that prompted them to self-select for participation, potentially compromising the internal validity of the findings. Moreover, the majority of participants in the study identified as White and female. Although these demographics are consistent with current enrollment in counseling and applied psychology programs (APA, 2014), the present findings represent limited perspectives with regard to gender and ethnic diversity. When examining differences between White and Non-White participants on study variables, results of the current study suggested that Non-White participants scored higher than White trainees on one of the willingness to disclose measures (DSS). Because there were far fewer trainees of color (N = 50) compared to White trainees (N = 151) and Non-White groups were collapsed together for the purpose of the comparison, these findings should be interpreted with caution. More research is needed to understand whether any significant group differences exist for trainees of different ethnic and racial groups on report willingness to disclose in supervision. Measurement issues additionally contributed to the limitations of the present study. Specifically, the TOSCA-3 did not include supervision-specific scenarios, and the Self-Construal Scale evidenced poor psychometric properties in the present sample of trainees.

Perhaps the greatest limitation of the current study was that it did not account for the supervisor's perspective. The aim of the study was to better understand trainee factors predicting the quality of the working alliance, yet it is impossible to deny that supervisor-specific factors likely influence the ratings of the alliance as well. The working alliance in supervision is by nature a dynamic and interpersonal variable (Bordin, 1983), so although trainee factors uniquely contribute to the quality of the perceived working alliance, they do not explain the proportion of the variance predicted by supervisor characteristics such as supervisory style (Ladany et al., 2011), attachment style (Dickson et al., 2011), supervisor disclosure (Ladany & Lehrman-Waterman, 1999) or other interpersonal supervisor characteristics (Bucky et al., 2010). Finally, even though using structural equation modeling protects again mono-operation bias (Shadish et al., 2002), all measures in the present study required participants' self-report, and the research findings were thus vulnerable to mono-method bias.

### **Future Research Directions**

The present study builds upon existing investigations by conjointly examining the influence of cultural, affective, and interpersonal trainee characteristics on supervisee perceptions of the working alliance. Moving forward, some overarching recommendations include 1) developing and validating instruments of shame-proneness and interdependent self-construal for use specifically with supervisee samples, 2) investigating whether a temporal order exists in the relationship between trainee willingness to disclose and the supervisory working alliance, 3) exploring how each of the studied variables relates to the supervisory working alliance at various time-points in

supervision and within supervisory dyads, and 4) considering supervisor-specific factors as they relate to study variables. These areas are explicated below.

Specifically, one focus is to understand how supervisee shame-proneness influences the supervisory process. Although there are many theoretical accounts of shame in supervision (e. g., Graff, 2008; Hahn, 2001), only a handful of empirical investigations have studied the construct in samples of supervisees (e. g., Bilodeau et al., 2012). Consequently, researchers may need to modify existing instruments or develop new measures to specifically address shame endemic to the supervision context. Perhaps proneness to shame in supervision would be better measured by items related to feeling worthless when hearing a critical supervisory remark or experiencing the wish to hide when receiving a mid-semester evaluation instead of more general shame-inducing situations.

Similarly, future investigations should aim to utilize a self-construal scale with better psychometric properties in order to parcel out the specific influence of interdependent self-construal on trainee experiences in supervision. Researchers would additionally benefit from studying related person-level cultural variables, such as cultural values (Schwartz, 2011), or universal diverse orientation (Miville, Romans, Johnson, & Lone, 2004) to better how understand how a supervisee's cultural worldview influences the supervisory process. In similar vein, future investigations should aim to recruit more diverse samples in order to understand whether demographic variables such as race, ethnicity, and sexual orientation moderate the relationships among study variables.

Another avenue for future research is to better understand how willingness to disclose in supervision relates to trainee ratings of the supervisory working alliance.

Findings from prior investigations have suggested that trainee perceptions of the working alliance predict supervisee willingness to disclose in supervision (Gunn & Pistole, 2012; Mehr et al., 2015). However, results of the present investigation suggest that willingness to disclose instead predicts supervisee perceptions of the alliance. In working to answer the question of which variable predicts the other, or if the relationship is bi-directional, scholars should utilize experimental or case study designs to establish a temporal precedence. Alternatively, longitudinal investigations may be helpful in illuminating the relationship between disclosure and the working alliance in supervision. Perhaps greater willingness to disclose in supervision leads to the establishment of a strong working alliance, and the perception of a strong working alliance encourages supervisees to keep sharing openly to their supervisors through the course of the supervisory work.

Future research investigations would similarly benefit from examining the relationship among study constructs at various time points in supervision. The working alliance is a dynamic construct (Bordin, 1979), and shame-proneness may impact the supervisory process differently through the course of supervision (Bilodeau et al., 2012). Thus, it is important to understand how interdependent self-construal, shame-proneness, and willingness to disclose in supervision relate to one another and to trainee ratings of the supervisory working alliance in the beginning, middle, and end stages of a supervisory relationship. Moreover, examining relationships among study constructs near evaluation periods may be especially fruitful, as trainees may be triggered to experience shame in anticipation of evaluation (Hahn, 2001). On a similar note, relationships among study variables may differ across different points of a supervisee's training. Beginning therapists may enter supervision with higher levels of anxiety and limited self-awareness;

therefore, shame-proneness and lower willingness to disclose may be especially relevant in early stages of training (Stoltenberg, McNeil, & Delworth, 1998). Because only nine percent of participants in the current study reported being in their first year of clinical training, it is important to recruit larger samples of beginning therapists to understand how training status influences relationships among study variables in future investigations. Ultimately, time may be of the essence when considering relationships among cultural, interpersonal, and affective variables influencing the supervisory working alliance.

Finally, in order to fully understand what influences trainee perceptions of the working alliance in supervision, future investigations should consider supervisor-specific factors. By studying supervisory dyads, for example, researchers may be able to identify relational factors that inhibit or facilitate trainee disclose in supervision, thereby potentially influencing supervisee ratings of the alliance. Similarly, by understanding how supervisees perceive the working alliance in working with supervisors who differ on levels of shame-proneness or cultural worldview, researchers can begin to decipher the mutual influences of cultural, affective, and interpersonal variables on the supervisory process. Additional supervisor factors such as supervisory style (Ladany et al., 2011), perceived intelligence (Bucky et al., 2010), attachment style (Dickson et al., 2011), and other variables may also influence the expression of supervisee characteristics and their influence on the quality of the supervisory working alliance. In sum, to fully understand factors that influence the supervisory working alliance, researchers need to consider contributions from both the supervisor and the supervisee.

## **Implications for Practice and Training**

Findings of the present investigation hold a number of important implications for supervision practice and training. First, with more evidence to suggest that trainee willingness to disclose in supervision is linked with the perceived quality of the supervisory working alliance, findings underscore the importance for supervisors to establish a safe and non-judgmental environment that is encouraging of risk-taking and disclosures. Supervisors may need to show an active interest in supervisee disclosures and work to orient trainees to the supervisee role by modeling appropriate selfdisclosure(Ladany et al., 2001). Supervisor modeling of self-disclosure is especially important, given that existing research has connected supervisor disclosure with positive trainee outcomes such as normalization, gained insight, stronger supervisory relationship, and openness in future supervisory experiences (Knox, Edwards, Hess, & Hill, 2011; Ladany & Lehrman-Waterman, 1999). Supervisees should also be encouraged to reflect about their own proneness to experiencing shame and work to notice impulses to project, defend, or withdraw in supervision. Personal therapy may be especially helpful to support trainees in discovering and understanding their responses to triggered shame.

The present findings suggest that supervisors should consider cultural variables such as interdependent self-construal when assessing supervisee shame-proneness and understanding supervisee needs. Questions about a supervisee's worldview may reveal pertinent information and help the supervisor remain aware to the possibility of triggering shame for the supervisee. A discussion of social identities for the supervisor, supervisee, and client(s) may be especially relevant in this context, as instances of racism may trigger shame and other negative emotional reactions for trainees of color (Carter & Forsyth, 2010). Moreover, because interdependent self-construal is

likely to be more developed in collectivistic cultures such as those in East Asia, Africa, and South Asia (Kitayama et al., 1995; Markus & Kitayama, 1991), supervisors may need to be especially cognizant of shame-based reactions when working with immigrant or international students from collectivistic cultures.

When training new supervisors, educators should emphasize the importance of supervisee characteristics in the establishment of a strong working alliance. Specifically, supervisors should consider how cultural, affective, and interpersonal variables influence the supervisee's perception of the supervisory relationship. To this effect, new supervisors may benefit from learning how to assess the supervisee's perceived comfort in openly disclosing vulnerable information and consider potential obstacles or reasons for non-disclosure. Furthermore, despite the lack of evidence in the current investigation to suggest a relationship between shame-proneness and supervisee disclosure or ratings of the alliance, prior theoretical and empirical accounts suggest that supervisee shame left hidden or unaddressed may hinder the strength of the working alliance and potentially impede the supervisee's ability to effectively utilize supervision (Graff, 2008; Lansky, 2005). Thus, it would behoove supervisors to actively name shame as a potential reaction to criticism or perceived mistake, "unearthing" the emotion and reducing any stigma association with such a reaction. It is necessary for supervisors to remember that supervisees may vary on levels of shame-proneness and willingness to disclose in supervision and that trainees may respond to critical feedback in different ways. Supervisors may therefore need to be trained to tailor supervisor interventions to reflect each supervisee's perceived proneness to experiencing shame and comfort with

disclosing in supervision as well as to consider each trainee's cultural background when formulating interventions.

In sum, the working alliance in supervision is a complicated and multi-faceted construct that is predicted by certain trainee behaviors and characteristics. The present study underscored the importance of trainee willingness to disclose in facilitating higher ratings of the supervisory working alliance but did not provide support for relationships among shame-proneness and disclosure or the working alliance. Moreover, higher interdependent self-construal was related to greater shame-proneness in this sample of trainees, pointing to the importance of understanding how cultural factors influence the supervision process. Ultimately, when entering a supervisory relationship, trainees bring not only their caseload lists and supervision tapes but also a unique combination of cultural, affective, and interpersonal factors that have the potential to influence the success of the supervision. The present study shed some light on how the combination of trainee variables relate to the supervisory process, yet it will be important for future studies to continue investigating factors that facilitate or inhibit the perception of a strong working alliance in supervision.

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Figure 1

Conceptual Model of Proposed Relationships between Study Variables



Figure 2

Target Model

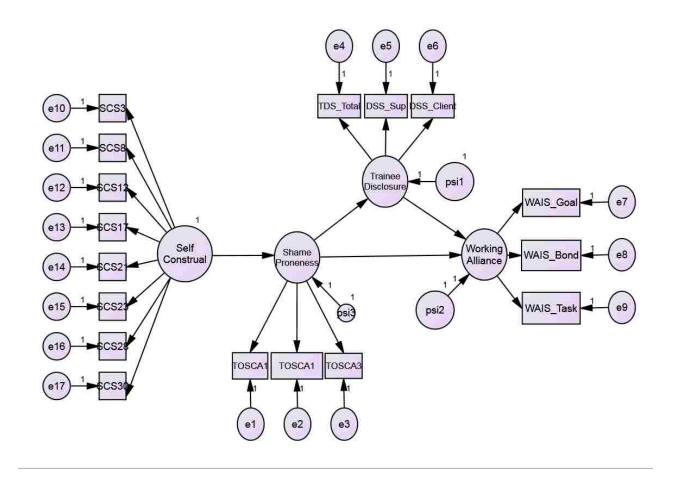


Figure 3

Alternate Model Examining Path from Interdependent Self-Construal to Disclosure

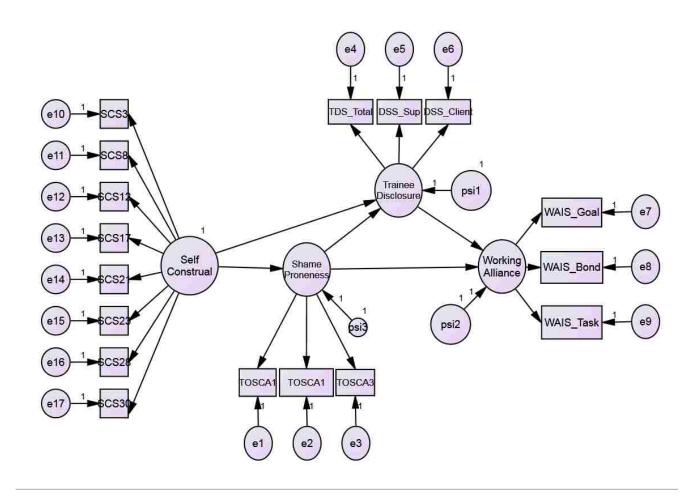


Figure 4

Endogenous Model: Unstandardized Estimates

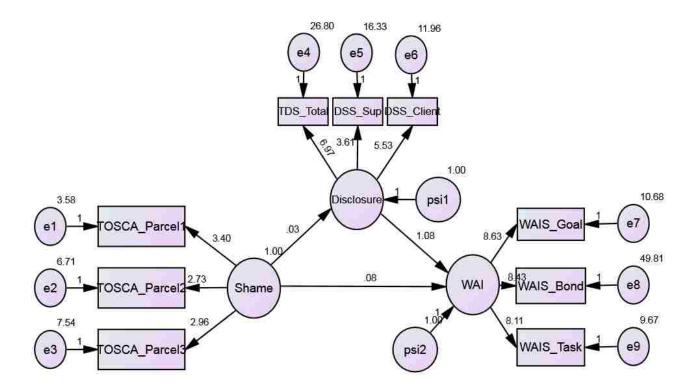


Figure 5

Endogenous Model: Standardized Estimates

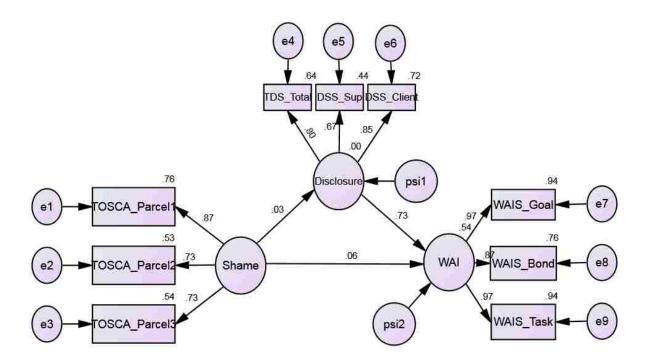


Figure 6

Target Model: Unstandardized Estimates

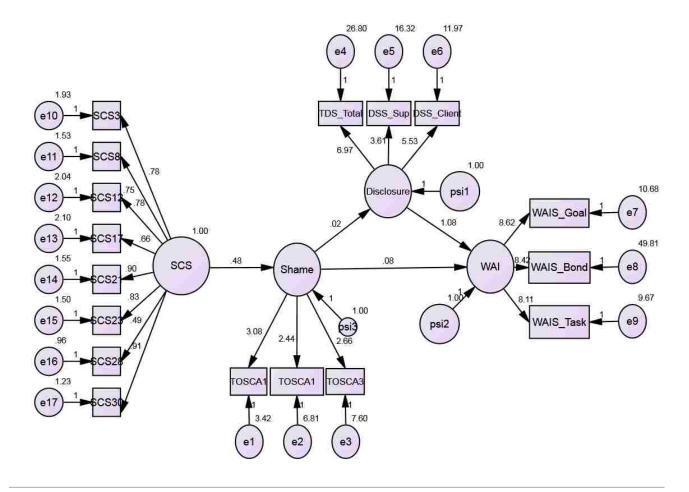


Figure 7

Target Model: Standardized Estimates

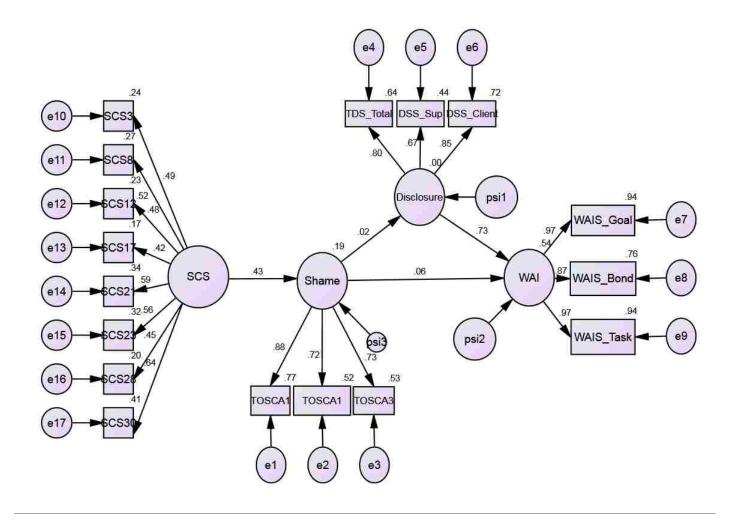


Figure 8

Alternate Model: Unstandardized Estimates

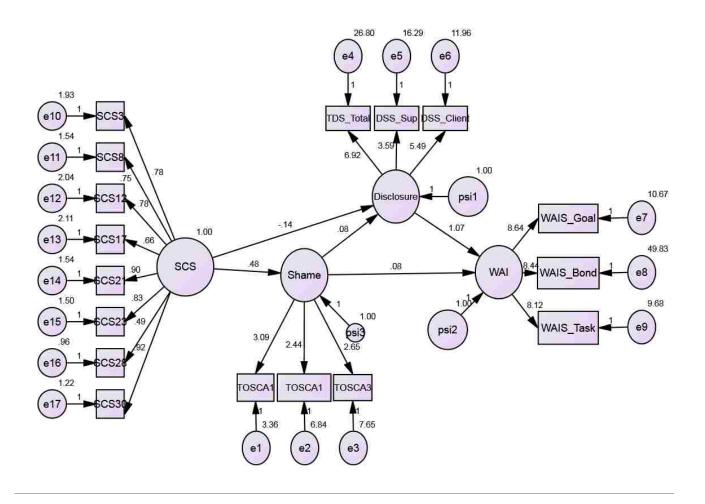


Figure 9

Alternate Model: Standardized Estimates

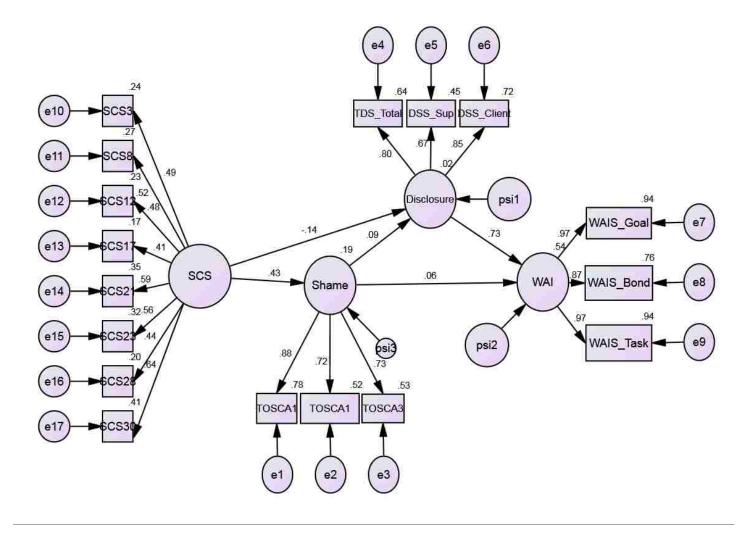


Table 1

Descriptive Statistics of Study Variables

Variable	Mean	SD	Skewness	Kurtosis	Cronbach's
					α
TDS	46.92	8.71	0.79	1.05	0.88
DSS Supervisor	14.90	5.43	-0.09	0.55	0.85
DSS Client	33.60	6.54	-0.89	0.60	0.84
TOSCA (Shame)	46.00	10.05	0.05	-0.41	0.80
WAIS Bond	64.17	14.35	-1.13	0.70	0.94
WAIS Task	66.47	12.42	-0.90	0.01	0.94
WAIS Goal	65.63	13.20	-0.84	-0.10	0.94
SCS	4.68	0.62	-0.26	-0.15	0.70

*Note.* N = 201.

Table 2

Correlations among Study Variables

Variable	1	2	3	4	5	6	7	8
1. TDS	1							
2. DSS	.56***	1						
Supervisor								
3. DSS Client	.68***	.54***	1					
4. TOSCA	.01	08	.04	1				
Shame								
5. WAIS Bond	.60***	.47***	.62***	.01	1			
6. WAIS Task	.53***	.47***	.62***	.04	.84***	1		
7. WAIS Goal	.54***	.48***	.61***	.04	.84***	0.94***	1	
8. SCS	03	13	06	.32***	.07	.07	.04	1

*Note.* \*\*\*p < .001

Table 3.

Parameter Estimates for the Target and Alternate Models

	Target Model					Alternate	Mod	<u>el</u>
Parameter	U	SE	S	p	U	SE	S	p
Self Construal → Shame	0.48	0.10	.43	<.001	0.48	0.10	.43	<.001
Proneness								
Self Construal →					-0.14	14	14	.182
Disclosure								
Shame Proneness →	0.02	0.08	.02	.786	0.08	0.09	.09	.358
Disclosure								
Shame Proneness →	0.08	0.08	.06	.290	0.09	0.08	.06	.284
Working Alliance								
Disclosure → Working	1.08	0.13	.73	<.001	1.07	0.13	.73	<.001
Alliance								
WA→WAIS_Bond	8.84	0.64	.87	<.001	8.43	0.64	.87	<.001
WA→ WAIS_Goal	8.62	0.58	.97	<.001	8.64	0.58	.97	<.001
WA→ WAIS_Task	8.18	0.55	.97	<.001	8.12	0.55	.97	<.001
Disclosure→DSS_Sup	3.61	0.36	.67	<.001	3.59	0.36	.67	<.001
Disclosure → DSS_Client	5.53	0.40	.85	<.001	5.49	0.40	.85	<.001
Disclosure→TDS	6.97	0.55	.80	<.001	6.92	0.54	.80	<.001
Shame Proneness→Parcel	3.08	0.25	.88	<.001	3.09	0.24	.88	<.001
1								
Shame Proneness → Parcel	2.45	0.24	.72	<.001	2.44	0.24	.72	<.001
2								
Shame Proneness → Parcel	2.66	0.25	.73	<.001	2.65	0.25	.73	<.001
3								
Self Construal→SCS3	0.78	0.12	.49	<.001	0.78	0.12	.49	<.001
Self Construal →SCS8	0.75	0.11	.52	<.001	0.75	0.11	.52	<.001
Self Construal →SCS12	0.78	0.12	.48	<.001	0.78	0.12	.48	<.001
Self Construal →SCS17	0.67	0.12	.42	<.001	0.66	0.12	.41	<.001
Self Construal →SCS21	0.90	0.11	.59	<.001	0.90	0.11	.59	<.001

	<u>-</u>	<u> </u>	Mode	<u>l</u>	<u>A</u>	lternate	Mod	<u>el</u>
Parameter	U	SE	S	p	U	SE	S	p
Self Construal →SCS23	0.83	0.11	.56	<.001	0.83	0.11	.56	<.001
Self Construal →SCS28	0.49	0.08	.45	<.001	0.49	0.08	.45	<.001
Self Construal →SCS30	0.91	.10	.64	<.001	0.92	.10	.64	<.001
e1	3.42	.94		<.001	3.36	.94		<.001
e2	6.81	.89		<.001	6.84	.89		<.001
e3	7.61	1.01		<.001	7.65	1.01		<.001
e4	26.81	3.94		<.001	26.80	3.93		<.001
e5	16.32	1.88		<.001	16.29	1.88		<.001
e6	11.97	2.13		<.001	11.96	2.13		<.001
e7	10.68	2.48		<.001	10.67	2.48		<.001
e8	49.81	5.51		<.001	49.83	5.51		<.001
e9	9.67	2.21		<.001	9.68	2.21		<.001
e10	1.93	0.21		<.001	1.93	0.21		<.001
e11	1.53	0.17		<.001	1.54	0.17		<.001
e12	2.04	0.22		<.001	2.04	0.22		<.001
e13	2.10	0.23		<.001	2.11	0.23		<.001
e14	1.55	0.18		<.001	1.54	0.18		<.001
e15	1.50	0.18		<.001	1.50	0.18		<.001
e16	0.96	0.10		<.001	0.96	0.10		<.001
e17	1.23	0.16		<.001	1.22	0.15		<.001

*Note.* U = unstandardized estimate; SE = standard error; S = standardized estimate; p = significance value.

# Appendix A

# Study Measures

A.	De	emographic Questionnaire
	1.	What is your age?
	2	What is your gender?
	۷.	a. Male
		b. Female
		c. Genderqueer
		d. Transgender
		e. Other (please specify):
	3.	What is your race/ethnicity?
		a) African American / Black
		b) American Indian or Alaskan Native
		c) Asian American / Asian
		d) Hispanic / Latino/a
		e) Native Hawaiian or Pacific Islander
		f) Multi-racial
		g) European American/White Non-Hispanic
	4.	What is your sexual orientation?
		a. Only attracted to women
		b. Mostly attracted to women
		c. Equally attracted to women and men
		d. Mostly attracted to men
		e. Only attracted to men
		f. Not sure
	5.	What was your household income, before taxes and other deductions, during the
		past 12 months?
		a. Less than \$5,000
		b. \$5,000 through \$11,999
		c. \$12,000 through \$15,999
		d. \$16,000 through \$24,999
		e. \$25,000 through \$34,999
		f. \$35,000 through \$49,999
		g. \$50,000 through \$74,999
		h. \$75,000 through \$99,999

i. \$100,000 and greater

6.	In what region of the country is your academic program or pre-doctoral internship? (Please use the following information from the U. S. Census as a reference: http://www.census.gov/geo/maps-data/maps/pdfs/reference/us_regdiv.pdf).  a. Northeast b. Midwest c. South d. West
7.	What degree are you currently pursuing?  a. Master's degree (Please specify (e. g., M. A; MSW, etc.):)  b. Doctoral degree (Please specify (e.g., Ph. D.; Psy. D, etc.):)  c. Other (Please Specify)
8	What is your field of study?
0.	a. Counseling Psychology
	b. Clinical Psychology
	c. Social Work
	d. Marriage and Family Therapy
	e. Counselor Education
	f. Other (Please Specify)
0	
9.	What is your highest degree earned to date?
	a. BA
	b. BS
	c. MA
	d. MS
	e. M. Ed.
	f. MSW
	g. MFT h. PhD
	<ul><li>i. PsyD</li><li>j. Other (please specify):</li></ul>
	3 1 3/
10	. What is your current year in your program?
	a. 1 <sup>st</sup>
	b. 2 <sup>nd</sup>
	c. 3 <sup>rd</sup>
	d. 4 <sup>th</sup>
	e. 5 <sup>th</sup>
	f. 6 <sup>th</sup> or more (Please specify)
4.4	
11	. Are you an international student?
	a. Yes

b. No

	nany supervised direct intervention hours do you have to date (in current evious programs)?
experie a. b. c. d. e. f. g. h.	content setting are you currently completing a supervised practicum/internship ence?  College counseling center Outpatient Clinic Community Mental Health Agency Hospital (psychiatric) Hospital (Medical) Forensic Veteran's Administration hospital Private Practice Academic Setting Other (please specify):
14. How n	nany supervisors have you had in total?
a. b. c. d. e. f. g. h. i. j. k. l. m.	s your theoretical orientation in counseling/therapy? Psychodynamic Cognitive Behavioral Cognitive-Behavioral (CBT) Interpersonal Process Gestalt Existential Humanistic Feminist Systems Integrative Eclectic Other: (Please Specify)  The following questions based on your primary supervisor and think of this
person when o	completing the remainder of the survey.
a. b. c. d.	s your supervisor's race?  African American / Black  American Indian or Alaskan Native  Asian American / Asian  Hispanic / Latino/a  Native Hawaiian or Pacific Islander  Multi-racial  European American/White Non-Hispanic
	Datopean Inhoritany with two from Hispanic

17. What is your supervisor's gender?

	a.	Male
	b.	Female
	c.	Genderqueer
	d.	Transgender
	e.	Prefer not to answer
	f.	Other (please specify):
18.	What i etc.)?	s the highest degree that your supervisor has earned? (i.e., M.A., Ph.D.
19.	How n	nany supervision sessions have you had with your current supervisor?

В.	Working Alliance Inventory/Supervision – Trainee Version (Bahrick, 1989; used with
	permission)

The following sentences describe some of the different ways a person might think or feel about his or her supervisor. As you read the sentences, mentally insert the name of your current supervisor in place of \_\_\_\_\_ in the text.

Rate each statement according to the following scale:

- 1. Never
- 2. Rarely
- 3. Occasionally
- 4. Sometimes
- 5. Often
- 6. Very Often
- 7. Always

C. TOSCA-3 (Tangney, Dearing, Wagner, & Gramzow, 2000; used with permission)

Below are situations that people are likely to encounter in day-to-day life, followed by several common reactions to those situations.

As you read each scenario, try to imagine yourself in that situation. Then indicate how likely you would be to react in each of the ways described. We ask you to rate <u>all</u> responses because people may feel or react more than one way to the same situation, or they may react different ways at different times.

# For example:

A. You wake up early one Saturday morning. It is cold and rainy outside.

- a) You would telephone a friend to catch up on news.  $\underline{\mathbf{1}}$ ---2---3---4---5 not likely very likely
- b) You would take the extra time to read the paper. 1---2---3---4--<u>-5</u>

  not likely very likely
- c) You would feel disappointed that it's raining. 1---2---3---4---5

  not likely very likely
- d) You would wonder why you woke up so early. 1---2---3---**4**---5

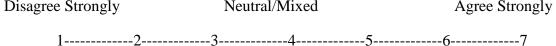
  not likely very likely

In the above example, I've rated ALL of the answers by choosing a number. I chose a "1" for answer (a) because I wouldn't want to wake up a friend very early on a Saturday morning -- so it's not at all likely that I would do that. I chose a "5" for answer (b) because I almost always read the paper if I have time in the morning (very likely). I chose a "3" for answer (c) because for me it's about half and half. Sometimes I would be disappointed about the rain and sometimes I wouldn't -- it would depend on what I had planned. And I chose a "4" for answer (d) because I would probably wonder why I had awakened so early.

1 2 3 4 5
not likely very likely

D. Trainee Disclosu permission)	re Scale (Walker, La	idany, & Pate	-Carolan, 2007; use	ed with	
Please respond to the	e questions based on	your experien	nce with your curre	nt supervisor:	
Under each item then	re is a 5 point scale:				
1= not at all likely	2=fairly unlikely	3=unsure	4=fairly likely	5=very likely	
For each question, ask yourself how likely you would be to discuss issues of with your supervisor?					

E. Disclosure in Supervis	sion Scale (Gunn & Pistole, 2012;	; used with permission)
Please think of your curre	nt supervisor when responding to	the following statements.
Respond to each statemen	t by indicating how much you ago	ree or disagree with it,
choosing the number that	corresponds with your answer usi	ing the following rating scale:
Disagras Strongly	Noutral/Mixed	A area Strongly



# F. Self-Construal Scale (Singelis, 1994; used with permission)

This is a questionnaire that measures a variety of feelings and behaviors in various situations. Listed below are a number of statements. Read each one as if it referred to you. Beside each statement write the number that best matches your agreement or disagreement. Please respond to every statement. Thank you.

1=STRONGLY DISAGREE 4=DON'T AGREE OR 5=AGREE SOMEWHAT
2=DISAGREE DISAGREE 6=AGREE

3=SOMEWHAT DISAGREE 7=STRONGLY AGREE

# Appendix B Statement of Informed Consent

You are invited to participate in a research study about your supervision experiences. You were selected as a possible participant because you are a counselor-in-training who is currently receiving direct supervision of your counseling/therapy work. Please carefully read the following information about the study and use it to make a decision about whether you wish to participate.

# **Background Information**

This study is being conducted by Valeriya Spektor, M. Ed., under the guidance of Arpana G. Inman, Ph. D., at Lehigh University. The purpose of this study is to better understand the relationship between supervisor and supervisee, as this relationship is important to the success of counseling and supervision.

# **Procedures**

You will be asked to complete an online questionnaire about your emotional experiences, your worldview, and your relationship with your current supervisor. You will also be asked to answer some demographics questions. Depending upon your experiences, the survey should take you approximately 30-45 minutes to complete.

# Risks and Benefits of being in the Study

There are minimal risks associated with your participation in this study; however, you may feel emotional discomfort when answering questions about your emotional experiences or if you reflect on a supervisory experience that was unpleasant for you. We anticipate that this potential discomfort will be outweighed by gains of learning new things about yourself and your supervisory experiences. Additionally, you may indirectly benefit by knowing that you are contributing to a study that hopes to further psychologists' understanding of trainee perceptions of supervisory relationships.

# Compensation

There is no direct compensation for your participation in this study; however, you may choose to enter your email address for a chance to receive one of three \$25 gift cards to Amazon.com. Specifically, the 10<sup>th</sup>, 100<sup>th</sup>, and 200<sup>th</sup> participants will receive a gift card.

# **Confidentiality**

All information you provide will be kept anonymous and confidential. Your name or other identifying information will not be entered into the data and no references will be made in verbal or written reports that could link you to the study. If you choose to provide your email address for the incentives, your contact information will not be linked to your survey responses.

# **Voluntary Nature of the Study**

Your participation in this study is completely voluntary. If you decide to participate, you may withdraw from the study at any point or refrain from completing any portion of the study.

# **Contacts and Questions**

If you have any questions about this study, **you are encouraged** to contact Valeriya Spektor (513-675-6342; vgs210@lehigh.edu) or Dr. Arpana G. Inman (610-758-3227; agi2@lehigh.edu). If you have any questions or concerns regarding this study and would like to talk to someone other than the researchers, **you are encouraged** to contact to Susan Disidore or Troy Boni at (610) 758-3021 (email: <a href="mailto:inors@lehigh.edu">inors@lehigh.edu</a>) of Lehigh University's Office of Research and Sponsored Programs. All reports or correspondence will be kept confidential.

If you have read and understood this information and consent to participate in the study, please click "I agree" to begin.

# Appendix C

#### Recruitment Letter

Dear Training Director,

My name is Valeriya Spektor, and I am a counseling psychology doctoral student at Lehigh University currently working on my dissertation under the guidance of Arpana G. Inman, Ph. D. The purpose of my study is to examine what factors are related to a trainee's perceptions of the supervisory working alliance. It is my hope that this research can help to inform supervision practice, training, and research, and I would like to seek your assistance with forwarding this call for participation to the students in your program. I understand that your time is valuable and I appreciate your assistance in this endeavor.

All students who are currently receiving supervision of their clinical work and who have been working with the same supervisor for at least one month are eligible to participate. Students may participate if they are enrolled in masters' or doctoral level programs in counseling-related fields.

If you choose to forward this study, we ask that you respond to this email and provide an <u>estimate of the number of students on your listsery</u> that will receive it, in order to calculate response rate.

Lehigh University's Institutional Review Board (IRB) has approved this study (IRB # 614646-1). If you have any questions you may contact the primary investigator, Valeriya Spektor (vgs210@lehigh.edu), or the research advisor, Dr. Arpana G. Inman (agi2@lehigh.edu). If you have any questions or concerns regarding this study and would like to talk to someone other than the researchers, you are encouraged to contact Susan E. Disidore at (610)758-3020 (email: sus5@lehigh.edu) or Troy Boni at (610)758-2985 (email: tdb308@lehigh.edu) of Lehigh University's Office of Research and Sponsored Programs. All reports or correspondence will be kept confidential. Thank you so much for your time and assistance.

Sincerely,

Valeriya Spektor Doctoral Candidate Counseling Psychology Lehigh University

Dr. Arpana G. Inman
Professor of Counseling Psychology
Chair, Department of Education
Lehigh University

# Appendix D

# Invitation to Participate

Dear Colleague,

I am a doctoral student at Lehigh University currently working on my dissertation under the guidance of Arpana G. Inman, Ph. D. My study aims to examine what factors are related to a trainee's perceptions of the supervisory working alliance. I hope that this research will inform supervision research and practice.

You are eligible to participate in this study if you are currently completing a supervised practicum/internship experience and have worked with the same supervisor for at least one month.

This study has minimal risks and your participation in the study is completely voluntary and anonymous. You will not be required to provide any identifying information except in the event that you wish to be considered for a gift card. If you participate in this study, you have an opportunity to win a \$25 Amazon.com gift card. Specifically, the 10<sup>th</sup>, 100<sup>th</sup>, and 200<sup>th</sup> participants will win a \$25 Amazon.com gift card. Please note that any identifying information you provide for the incentives will not be linked to your responses.

The survey should take you approximately 30-45 minutes to complete. If you would like to participate, please click on the following link to access the survey.

<<Survey Link Here>>

This study has been approved by Lehigh University's Institutional Review Board (IRB# 614646-1). If you have any questions about the study or would like to have a copy of the results once the study is complete, please email Valeriya Spektor at <a href="wgs210@lehigh.edu">wgs210@lehigh.edu</a> or Dr. Arpana G. Inman at <a href="magi2@lehigh.edu">agi2@lehigh.edu</a>.

Thank you so much,

Valeriya Spektor Doctoral Candidate Counseling Psychology Lehigh University

Dr. Arpana G. Inman
Professor of Counseling Psychology
Chair, Department of Education
Lehigh University

# Valeriya G. Spektor

# valspektor@gmail.com

# **EDUCATION**

#### Ph.D. Lehigh University, Bethlehem, PA

Counseling Psychology, APA Accredited, September 2016

**Doctoral Dissertation:** Trainee Factors Predicting Ratings of the Supervisory Working Alliance. Dissertation defended November 12, 2015.

**Doctoral Qualifying Project:** Assessing Global Knowledge in the Short-Term Study Abroad Context: The Importance of Para-communication and Reflection. Paper presented at the 30<sup>th</sup> International Congress of Psychology, July 26, 2012. **GPA**: 4.00

# M.Ed. Received January 13, 2013

Lehigh University, Bethlehem PA

Counseling and Human Services

Degree requirements fulfilled en route to Ph.D.

#### **B.A. Received May 10, 2010**

The College of Wooster, Wooster, OH Major: Psychology Minor: Music

**GPA**: 3. 94

**Senior Independent Study (Undergraduate Thesis):** A Date with Culture: The Role of Personality Traits and Cultural Values in Emerging Adults' Dating Attitudes and Sociosexual Behavior.

#### **AWARDS AND HONORS**

- National Psychologist Trainee Register Credentialing Scholarship (May 2015)
- 2014 Asian American Journal of Psychology Best Paper Award (April 2015; See publications)
- Division 39 (Psychoanalysis) Graduate Scholar Award (April 2014)
- Division 17 (Counseling Psychology) Leadership Academy Participant (Selected Dec 2014)
- Diversity Committee Travel Fund Recipient (for Travel to AWP 2013; March 2013)
- APA Grant for International Conference (for Travel to ICP 2012; May 2012)
- Dean's Endowed Travel Fund Scholarship Recipient (for Travel to ICP 2012; August 2012)
- David A. Leach Memorial Prize in Psychology (College of Wooster, May 2010)
- Psi Chi Regional Research Award at Midwestern Psychological Conference (May 2009)
- George D. Collins Prize in Psychology (College of Wooster, January 2009)
- Phi Beta Kappa (Inducted May 2009)
- Member of Psychology Honor Society (Psi Chi; Inducted 2008)

# MEMBERSHIPS AND PROFESSIONAL SERVICE

- Student member of the Philadelphia Society for Psychoanalytic Psychology
- Student Affiliate of American Psychological Association
  - o Student Affiliate of Division 17 (Society for Counseling Psychology)
    - Member of the International Section
      - Publicity and Membership Chair for the International Mentorship

# Orientation Committee (Winter 2013-Present)

- o Student Affiliate of Division 35 (Psychology of Women)
- Student Affiliate of Division 39 (Psychoanalysis)
- Student Affiliate of the Association for Women in Psychology (January 2013-Present)
  - o Book review for the Jewish Woman's Caucus Book Prize
- Student Representative, Counseling Psychology Program, Lehigh University (August 2014-May 2015)

# CLINICAL AND SUPERVISORY EXPERIENCE

**Doctoral Intern,** Supervisors: Michal Saraf, Psy. D; Leilani Crane, Psy. D August 2015-Present

#### **University of Pennsylvania CAPS (APA-Accredited)**

Full-time position including clinical, outreach, supervisory, administrative and training responsibilities

Provided individual counseling and on-call counselor crisis services to U Penn students Co-facilitated an Interpersonal Growth Group under supervision of a licensed psychologist Provided two hours of triage coverage per-week, including phone and walk-in screenings Provided consultation to members of the U Penn community

Participated in an outreach concentration focusing on international student mental health

Designed and implemented outreach programming focused on international students under supervision

of a licensed psychologist

Received two hours of individual supervision and one hour of group supervision from licensed psychologists

Provided supervision to a master's level psychology trainee weekly for the duration of academic year

Received group supervision-of-supervision for one hour weekly

Served on the Sexual Trauma Treatment, Outreach, and Prevention Team

Consulted with a multi-disciplinary team of psychologists, social-workers, and a psychiatrist Attended five hours of didactic seminars per week on topics related to college student mental health

#### **Graduate Assistant.** Supervisor: Ian Birky, Ph.D.

**Lehigh University Counseling and Psychological Services,** Bethlehem, PA August 2013-July 2015

Twenty-hour per week position with research, teaching, clinical, and administrative duties Provided intake interviews and individual therapy to students utilizing UCPS services

Developed and implemented outreach programming for first-year student orientation

Co-facilitated bi-weekly outreach program (Global Eat and Greet) for international students

Develope an international student support group that ran for 1 semester

Served as a teaching assistant for a sports psychology course

Assisted with preparation of self-study for APA-approval of UCPS' doctoral internship program

Participated in weekly case conference meetings

Crisis Clinician-in-Training. Supervisor: Beth Hollinger, LCSW; Michael Church, Ph. D.
Crisis Services at Wilkes-Barre General Hospital, Wilkes-Barre, PA
Dec 2013-Jan 2014

Spent one practicum day per week at Crisis Services for a two-month rotation

Provided crisis intervention services to clients with a range of presenting concerns

Conducted crisis evaluations for patients utilizing walk-in services at the Emergency Room

Assisted with evaluations for involuntary psychiatric hospitalization (302)

Consulted with a psychiatrist and crisis staff on treatment-planning and medication issues

Coordinated community resources and facilitated referrals for patients utilizing walk-in services

Worked with a diverse population of clients with regard to socioeconomic status and ethnicity

# **Practicum Trainee.** Supervisor: Michael Church, Ph. D.

# First Hospital, Kingston, PA

August 2013-June 2014

Fifteen on-site hours per week for ten months

Provided individual and group therapy to patients at the inpatient psychiatric hospital

Administered, scored, and interpreted assessments of personality, cognitive functioning, and suicidality

Worked with adolescents, adults, and older patients ranging in diagnoses and cultural backgrounds

Received two hours of weekly group and individual supervision from a licensed psychologist Attended treatment team meetings and collaborated with interdisciplinary teams of mental health professionals

# **Doctoral Supervisor.** Supervisor: Arpana Inman, Ph. D.

# Lehigh University, Bethlehem, PA

August 2012-May 2013

Provided weekly live supervision to a Masters level counseling trainee in a community setting Provided weekly remote supervision to an International Counseling Masters trainee in a school setting

Reviewed tapes weekly and transcribed two sessions per semester for each supervisee Provided mid-semester and final evaluations of supervisees

Participated in weekly group supervision of supervision in two seminar courses titled Supervision of Counseling and Supervision Apprenticeship

# **Practicum Trainee.** Supervisors: Amanda Johnson, Psy. D., and Tim Silvestri, Ph. D. **Lafayette College Counseling Center**, Easton, PA August 2012-May 2013

Fifteen on-site hours per week, including two hours of case conference

Received one to two hours of individual live-supervision per week

Provided individual therapy to students utilizing mental health services, including walk-in hours

Participated in the development, administration, and evaluation of outreach efforts Developed and Co-lead an 8-week Eating Disorders group using a DBT framework

# **Practicum Trainee**. Supervisors: Laura Dimmick, Psy. D., and Jennifer Elliot, Ph. D. **Lehigh University Counseling and Psychological Services,** Bethlehem, PA August 2011-May 2012

Sixteen on-site hours per week, including two hours of didactic seminar training

Provided individual therapy to undergraduate students utilizing mental health services

Conducted individual and group Alcohol and Other Drug sessions

Co-lead a mixed-gender undergraduate interpersonal process group for 2 hours per week

Received one to two hours of individual live-supervision per week

Attended a two-hour case conference weekly and presented one case per semester

#### **Peer Counselor**

# Sexuality Support Network, Wooster, OH

Fall 2008-May 2010

Received training in attentive listening and peer counseling techniques from a clinical psychologist

Received education concerning LGBTQ issues from diverse perspectives Was available as peer counselor for students dealing with diverse sexuality-related issues

# **Compeer Mentor Volunteer**

Mental Health Association of Southwest Ohio, Lebanon, OH
Received training in mental health issues and interpersonal skills
Maintained weekly phone contact with a consumer of mental health services in order to provide social support

#### **RESEARCH ACTIVITIES**

# **Dr. Robert Gordon, Private Practice**, Allentown PA 2013-Present

Spring

# Psychodynamic Diagnosis/Countertransference Study research team member

Assisted psychoanalytic researcher and private-practice clinician on study of diagnostic considerations and countertransference for practitioners of different theoretical approaches. Analyzed data and submitted proposal for conference. Currently preparing manuscript for publication.

**University Counseling and Psychological Services,** Lehigh University, Bethlehem, PA **Group Therapy Interactions and Perceived Cohesion research team member** Winter 2014-May 2015

Assisted the director of Lehigh's UCPS and a post-doctoral resident in designing a study of group therapy interactions and perceived group cohesion using the Hill Interaction Matrix and the Group Entitativity Measure. Proposal submitted for IRB review. Findings to be submitted for presentation at a national conference.

**Counseling Psychology Department,** Lehigh University, Bethlehem, PA Fall 2013-Spring 2014 **International Beliefs about Causes of Mental Illness qualitative research team member** 

Collaborated with four advanced doctoral students to code 144 responses collected from international experts in psychology about beliefs relating to the causes of mental illness using Consensual Qualitative Research methodology (CQR). Received training in CQR and met biweekly for a semester to code and analyze data.

Office of International Affairs, Lehigh University, Bethehem PA Summer 2013-July2015

Primary consultant and author of an international student engagement research study

Worked as the graduate assistant for the Office of International Affairs to design a study examining predictors of international student engagement at Lehigh University. Currently analyzing data from over 200 international students and expect to present findings at a national conference and prepare manuscript for publication.

**Counseling Psychology Department,** Lehigh University, Bethlehem, PA Winter 2013-Summer 2013

Supervision Training research team member under the supervision of Dr. Arpana Inman

Collaborated with 6 doctoral students, under the guidance of a doctoral-level psychologist, to

design a study investigating the effect of prior training in supervision on pre-doctoral interns' self-efficacy, multicultural supervision competence, and perceptions of the supervisory working alliance.

**Counseling Psychology Department,** Lehigh University, Bethlehem, PA Winter 2013-Summer 2013

Supervision Meta-Analysis research team member under supervision of Dr. Michael Ellis (University of Albany) and Dr. Arpana Inman

Worked as part of the Quantitative Critique team to code 120 quantitative articles related to supervision in counseling as part of a larger effort to replicate a previous study by Ellis and Ladany (1996) in the *Journal of Counseling Psychology*. Met weekly with research team members to review articles based on experimental design, threats to internal and external validity, and overall empirical rigor.

Counseling Psychology Department, Lehigh University, Bethlehem, PA Winter 2011-Fall 2013 Content Analysis research team member under supervision of Dr. Arpana Inman

Collaborated with faculty member and a doctoral student to develop protocol and coding procedure for a content analysis of psychological literature pertaining to South Asian Americans between 1980-2011 in an effort to classify content areas, review methodological trends, and identify gaps in existing research and implication for future investigations. Reviewed upward of 100 empirical articles and met biweekly to code articles within developed content categories. Ongoing research project is currently in preparation for publication. Research presented at the annual meeting of Asian American Psychological Association on August 1, 2012 and published in *Asian American Journal of Psychology* (See publications).

**Counseling Psychology Department,** Lehigh University, Bethlehem, PA Fall 2010-Fall 2011 **Global Perspectives research team member under supervision of Dr. Tina Richardson** 

Collaborated with graduate students, undergraduate students, and the faculty member to develop a scale assessing study abroad outcomes for short ventures abroad. Preliminary psychometric evidence for a scale assessing global knowledge outcomes for short-term study abroad trips presented at the 30<sup>th</sup> International Congress of Psychology. Currently preparing manuscript for publication (See Research Publications).

**The College of Wooster Psychology Department,** Wooster, OH Fall 2008-Spring 2010

Research assistant on a collaborative project investigating study abroad students' global perspectives and experiences

Worked closely with a professor and director of Off-Campus Study on research concerning the mental health and global perspectives of American students studying abroad. Extensive experience with entering, analyzing, and summarizing data quantitatively (SPSS) and quantitatively (narrative reports). Led to oral presentation at the premier outlet for study abroad education (see below).

The College of Wooster Psychology Department, Wooster, OH Summer 2008

Summer Research Assistant of Dr. Virginia Wickline

Selective program – one of approximately 40 Wooster students chosen for intensive, individual mentoring for 8 weeks. Trained under a psychology professor on a research project regarding international student adjustment at small, liberal art institutions. Collaborated with the Liberal Arts Institutions, Small and Residential (LAIS&R) special interest group from NAFSA: Association of International Educators, to study international student adjustment (psychological, social, and campus specific) at eight small, residential liberal arts colleges across Ohio and across the country. Worked independently on data entry and analysis using SPSS. Analyzed and wrote up the results from 110 international students, including 12-page data summaries for each of the 8 schools and a 40-page summary looking at the group as a whole. Assembled a poster summarizing this research for regional conference, which won a Psi Chi regional research award. Co-chaired a panel presentation and discussion of results at a conference for international education. Co-wrote another article for publication regarding pedagogical strategies that best prepare students for Introduction to Psychology exams.

**The College of Wooster Psychology Department,** Wooster, OH
May 2010

Spring 2008 – Sp

Research Associate of Dr. Virginia Wickline, now of Miami University of Ohio
Helped to create a new 100-item Wickline-Wooster College Adjustment Test (WOWCAT)
measure of college student adjustment with 10 domains (college anxiety, college depression, drug & alcohol abuse, independence, social life, campus involvement, academic life/performance, family relationships, housing, knowledge of campus resources). Survey completed April 2008.
Currently analyzing reliability estimates and validity coefficients to determine the measure's strength, reviewing, and revising (factor analysis). Data was presented at conference; subsequent work will include publication and use of measure in future research. Also collected data regarding White vs. non-White student adjustment at The College of Wooster with 120 White and 70 non-White students. Results presented at conference in May 2010 (see below).

### **RESEARCH PUBLICATIONS**

Inman, A.G., Devdas, L., **Spektor, V**., & Pendse, A. (2014, July 21). Psychological research on South Asian Americans: A three decade content analysis. *Asian American Journal of Psychology*, Advance online publication. http://dx.doi.org/10.1037/a0035633

Wickline, V.B., & **Spektor**, V. (2011). Practice (rather than graded) quizzes, with answers, may increase Introduction to Psychology exam performance. *Teaching of Psychology*, 38(2), 98-101.

**Spektor, V.** *Trainee factors predicting the perceived quality of the supervisory working alliance.* Manuscript in preparation.

**Spektor, V.** *International student engagement as a function of acculturation.* Manuscript in preparation.

**Spektor,** V., & Richardson, T. Q. Assessing global knowledge in the short-term study abroad context: the importance of para-communication and reflection. Manuscript in preparation.

Wickline, V.B., **Spektor**, V., & Edwards, K. *Cultural adjustment of international students small liberal arts colleges*. Manuscript in preparation.

#### OTHER PUBLICATIONS

**Spektor, V.** (2014). Leadership Academy. *Student Affiliates of Seventeen* (Summer 2014). Retrieved from http://www.div17.org/SAS/newsletter/SAS\_Summer\_2014.pdf

**Spektor, V.,** & Siegel, S. (2014). 2014 JWC Award Winner: Invited Presentation AWP March 2015. *Association for Women in Psychology Newsletter* (Fall 2014). Retrieved from <a href="http://www.awpsych.org/index.php/newsletter-archive">http://www.awpsych.org/index.php/newsletter-archive</a>

#### CONFERENCE PRESENTATIONS

- **Spektor, V.,** Luu, L., & Gordon, R. M. (2015, January). *The relationship between theoretical orientation and accuracy of countertransference expectations*. Poster presented at the annual meeting of the American Psychoanalytic Association, New York, New York.
- **Spektor, V.** (2014, August). *Mentee perspectives on the International Mentoring and Orientation Committee: An assessment of needs and impact.* Paper presented at the annual meeting of the American Psychological Association, Washington, DC.
- **Spektor, V.**, & Luu, L. (2014, August). *International students in counseling psychology: Transitioning from supervisees to supervisors-in-training*. Roundtable discussion presented at the annual meeting of the American Psychological Association, Washington, DC.
- Luu, L., & **Spektor, V.** (2014, August). *Finding international voice within the feminist community*. Roundtable discussion presented at the annual meeting of the American Psychological Association, Washington, DC.
- **Spektor, V.,** & Luu, L. (2014, March). *The Crossroads of citizenship and ability: Implications for providing services to international/immigrant college students with disabilities.* Paper presented at the annual meeting of the Association for Women in Psychology, Columbus, OH.
- Wickline, V. B., **Spektor, V.**, & Luu, L. (2014, March). *Classroom "accommodations": Similarities and differences for international students and students with disabilities*. Structured discussion presented at the annual meeting of the Association for Women in Psychology, Columbus, OH.
- **Spektor, V.,** & Luu, L. (2013, March). *Culturally sensitive mentorship of international student women: Challenges and directions*. Structured discussion at the annual meeting of the Association for Women in Psychology, Salt Lake City, UT.
- Inman, A., Devdas, L., Pendse, A. & **Spektor, V.** (2012, August). *South Asian Americans: A three decade content analysis.* Poster presented for the annual meeting of the Asian American Psychological Association, Orlando, FL.
- **Spektor, V., &** Richardson, T.Q. (2012, July). *Assessing global knowledge in the short-term study abroad context: the importance of para-communication and reflection.* Poster presented at the 30<sup>th</sup> meeting of the International Congress of Psychology, Capetown, South Africa. (APA International Conference Travel Grant recipient)
- **Spektor**, V. (2010, April). A Date with culture: The importance of personality traits and cultural values in predicting dating attitudes and sociosexual behavior. Poster presented for the annual meeting of the Midwestern Psychological Association, Chicago, IL.

- Wickline, V.B., & **Spektor**, V. (2010, April). *Practice (not graded) quizzes, with answers, improve introduction to psychology exam performance*. Paper presented for the annual meeting of the Midwestern Psychological Association, Chicago, IL.
- Wickline V.B., **Spektor**, V., Burgess, C., & Kibler-Campbell, A. (2010, April). *College adjustment: Similarities and differences for White & non-White students*. Paper presented for the annual meeting of the Midwestern Psychological Association, Chicago, IL.
- Wickline, V.B., **Spektor**, V., Edwards, K., Schmidt, T., Andrew, M., Onsanit, K., & Ausec, M. (2009, May). *Small residential colleges: Researching international student issues*. Paper and roundtable discussion presented for the annual meeting of NAFSA, Association of International Educators, Los Angeles, CA.
- Wickline, V.B., Twombly, J., Burgess, C., Mitchell, K., **Spektor**, V., Gurnani, A., & Falkoff, S. (2009, May). *Introducing the Wooster-Wickline College Adjustment Test (WOWCAT): Reliability and validity*. Paper presented for the annual meeting of the Midwestern Psychological Association, Chicago, IL.
- **Spektor**, V., & Wickline, V.B. (2009, May). *International student education: Small school big difference?* Poster presented for the annual meeting of the Midwestern Psychological Association, Chicago, IL. (Psi Chi student research award winner)
- DuPlaga, J., Wickline, V.B., & **Spektor**, V. (2009, February). *Using evidence to better understand and promote global learning and development: Use of the Global Perspective Inventory (GPI) in assessment and planning for off-campus study at The College of Wooster.* Paper presented for the annual meeting of the Forum on Education Abroad, Portland, OR.
- Wickline, V.B., DuPlaga, J., Kille, N., Derksen, J., & **Spektor**, V. (2009. November). *Helping hands:A multi-disciplinary/multi-office approach to international education*. Paper presented for the annual regional meeting (Region VI) of NAFSA, Association of International Educators, Cincinnati, OH.

#### INTERNATIONAL/MULTICULTURAL EXPERIENCE

**Office of International Affairs,** Lehigh University, Bethlehem PA June 2011-July 2013; July 2014-July 2015

# **Graduate Assistant**

Twenty-hour per week position with research and administrative responsibilities Worked closely with the Director of International Services and the VP for International Affairs on projects relating to Lehigh's globalization initiative

Member of the metrics task force for the Board of Trustees Global Steering committee Conducted a comprehensive inventory of course offerings incorporating global perspectives Coordinated communications activities for the OIA and supervised undergraduate journalism

# Allentown Literacy Center (Casa Guadalupe) Allentown, PA September 2010-June 2011 ESL Teaching Assistant

Assisted a certified ESL instructor in a classroom of beginner to intermediate level adults Worked with students individually as well as collectively in a classroom setting Worked towards developing lesson plans and classroom presentations Independently planned and presented a class lecture with activities

# Jewish Family Services, Cincinnati, OH

Volunteer/Intern Summer 2010

Worked closely with directors of Resettlement and Holocaust Survivor departments

Tutored new Americans in preparing for the citizenship test

Helped elderly Russian-speaking adults to communicate during audiology appointments

Performed various administrative tasks related to ESL classes and other JFS matters

# **Center for Diversity and Global Engagement** Wooster, OH **Office Assistant**

Winter 09- May 2010

Assisted Office of Off Campus Study, the Ambassadors Program, and the Office of International Student Affairs (OISA)

Assisted with the planning and execution of OISA programming and communication

Organized and conducted inventory of study abroad materials and resources

Assisted with organizing and executing study abroad pre- and post-orientations

Presented innovative ideas about how to better encourage students to think globally

# **International Student Orientation Committee**, Wooster, OH **Member**

Summer 2007, 2008, 2009

Was one of six students who helped to plan and organize the international pre-orientation Interacted extensively with international students

Led discussions and seminars about acclimation to American life

Facilitated small group discussions

Led a variety of activities orientating the students with Wooster

# TEACHING EXPERIENCE

#### **Lehigh University**, Bethlehem PA

Fall 2014

# **Teaching Assistant for Diversity and Multicultural Perspectives Course**

Assisted Dr. Christopher Liang in a semester-long course of 15 masters students

Co-facilitated classroom discussions of diversity issues and led experiential exercises

Graded and provided feedback on weekly reflective journals

Presented two independent lectures on Acculturation and Gender Socialization

# Lehigh University Counseling and Psychological Services, Bethehem, PA

# $Teaching\ assistant\ for\ an\ undergraduate\ Sports\ Psychology\ course$

Fall 2013

Assisted Dr. Ian Birky in a semester-long course of 20 undergraduate students

Maintained class Coursesite and gradebook

Created and graded weekly reading quizzes and assignments

Advised students on preparation of independent research proposals

#### Lehigh University, Bethlehem, PA

Summer 2013

# Part-time Teaching Assistant for Facilitating Healthy Adjustment Course

Assisted Dr. Cirleen Deblaere in an 8-day seminar course comprised of 25 masters' students

Presented an hour-long lecture on supervision in counseling

Observed helping skills role plays and provided feedback to students

# Lehigh University, Bethlehem, PA

Spring 2012

# **Teaching Assistant for Helping Skills Course**

Assisted Dr. Carol Richman in a 3-hour weekly required course of 12 school counseling students

Aided students in practice and understanding of basic listening and intervention skills Coordinated student role-play assignments and provided weekly feedback to groups

Presented lectures on counseling children and adolescents and on cultural aspects in counseling

Held mid-semester feedback sessions with students to reflect on their progress in the course

# Lehigh University, Bethlehem, PA

Fall 2010-Spring2011

# **Graduate Assistant for Dr. Jill Sperandio (Educational Leadership)**

Teaching assistant for Qualitative Research, School Resources Management, Supervision and

Professional Development online courses with graduate students working in international contexts

Facilitated online forum and Eluminate discussions

Provided administrative support for course instructor and maintained Coursesite pages for courses

Aided in grading final exams and providing feedback to students

# Howard Hughes Medical Institute EXROP Program Wessler Lab, University of Georgia, Athens, GA

Summer 2009

Assisted two professors and a graduate teaching assistant in a first-year course entitled: "The Dynamic Genome."

Provided individual attention and instruction to students during lab experiments Helped to verify experiment protocol prior to the commencement of the course

# The College of Wooster, Wooster, OH

Fall 2008

# **First-Year Seminar Teaching Assistant**

Assisted a professor and 18 undergraduate students in a course titled: "New York City and Immigration"

Held office hours to assist students with homework and writing assignments

Led multiple class discussions and developed several lesson plans about immigration experiences

Supervised students on a trip to New York City

### The College of Wooster, Wooster, OH

Fall 2007

# **Introduction to Psychology Teaching Assistant**

Assisted a professor and 50 undergraduate students in an introductory psychology course Recorded daily participation and homework assignments

Presented multiple short lectures (on romantic relationship and Piaget's developmental stages) and developed several lesson plans

Led review sessions before exams

Met with students outside of class for tutoring upon request—reviewed APA formatting and course content

# Cornerstone Elementary, Wooster, OH

October 2006 to February 2008

#### Teacher's Assistant and Ohio Reads Tutor

Worked in a classroom of fifth graders in an economically underprivileged neighborhood Offered individual help to students in reading and math

Had extensive experience with grading, data entry, and lesson planning