

Sodowsky, G.R. (1996). The Multicultural Counseling Inventory: Validity and applications in multicultural training. In G.R. Sodowsky & J.C. Impara (Eds.) Multicultural assessment in counseling and clinical psychology (pp. 283-324). Lincoln, NE: Buros Institute of Mental Measures.

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I. Overview:

Multicultural training (MCT) has taken up the challenge of preparing counselors to help clients from a multicultural, multiethnic, and diverse socioeconomic society. The diversity of the US society requires counselors to revise/relearn the help-giving process in order to be effective. Since the late 1980s, MCT has been a component of the professional mandates of the American Counseling Association and the American Psychological Association and, as such, has been included in universities and professional schools advanced degree curricula. Philosophically, MCT seeks respect for differences in cultural groups, with a goal of peaceful integration by the 21st century. MCT has spawned a political/advocacy mission to end under-representation, racism, and inequity in US institutions.

Toward these ends, the Multicultural Counseling Inventory (MCI), a self-report measure was developed to: 1) offer philosophical support to MCT and to 2) present a robust instrument to measure multicultural counseling competencies.

II. Instrument Development: Background, Expectations of MCT

A. Expectations of MCT

- Responsibility of the individual counselor to be competent in multicultural intake, assessment, & counseling
- Ability to work with a diverse population subsequent to MCT training is a reasonable expectation
- Requirements of MCT: Make available: prerequisite knowledge, skills and applications
- MCT includes experiential learning:
 - Self-monitoring of cultural reflexivity
 - Cultural reflexivity: defined as reflective evaluation of one's views of culture, race and professional discipline and practice
 - Cultural reflexivity: related to MCT
 - Cultural reflexivity: helps the counselor to be respectful of the differences with a minority client & seek to eliminate bias in treatment

- Differences include: age, race, ethnicity, national origin, religion, language, socioeconomic status
 - Different does not mean: deficient, deprived, disadvantaged
 - Counselors have a moral and ethical obligation to achieve cultural reflexivity
 - Failure to achieve cultural reflexivity =cultural oppression =violation of maintaining client’s integrity
 - Recognition of & distance from power , privilege, racism, and silent consent for racism required from the counselor
 - Provision to the client: hopefulness, affirmation, consent & sharing
- MCT requires understanding of strengths of “differences” and not strive for achievement of homogeneity of performance, behavior, motivation
 - Reconceptualize differences as strengths
 - Recognize differences stem from a groundedness in one’s origins, socialization &/or varied experiences
 - Differences are immutable aspects of one’s worldviews
 - Differences are mutations of the biculturally driven acculturation and ethnic identity processes & reflect minority coping strategies for survival
- MCT addresses that “White culture serves as a foundation for counseling theory, research, and practice” [Katz, 1985]
 - Western psychological theories depend heavily on:
 - Low-context abstractions [eg ego, intelligence]
 - Cause and effect relationships [schedules of reinforcement]
 - Linear analytic thinking [interval scales in assessment]
 - Deductive and inductive reasoning
 - Contrasts with collectivistic cultures [70% of world population]
 - E.g. Asian cultures think contextually or cyclically,
 - Repeat the thoughts of sages,
 - Find causes in historical events or the supernatural
 - Are field dependent
 - Find motivations in their religions
 - Therefore, clinicians must be aware that behavioral manifestations (of the client) are interpreted by clinicians within the context of the clinician’s Euro-American value-based paradigm
 - Even conversations about culture and mental health are within the White framework & how the client compares with the average white person
 - Inclusion of the minority client’s family, support systems should be included – US psychologists tend to view human nature as individualistic
- Multicultural counseling needs to expand the epistemology of counseling

B. Dimensions of Multicultural Counseling Competencies

- Two main literature sources:
 - Education and Training Committee of APA’s Division of Counseling Psychology (Division 17) [Sue et al. 1982]

- Professional Standards Committee of the Association for Multicultural Counseling and Development [Sue, Arredondo, McDavis, 1992]
- 3 Broad dimensions of minimal characteristics of a culturally skilled counselor
 - Skills [covering the behavioral domain]
 - Cultural self-awareness and other-awareness
 - Knowledge
- 3 Specific counselor characteristics:
 - counselor's awareness of their own assumptions, values, and biases
 - counselor's understanding of the worldview of the culturally different client
 - counselor's development of appropriate intervention strategies and techniques
- Emphasis on interaction of counselor and client worldviews may correct a limitation of MCT [too skill focused]
- 4th counselor characteristic proposed:
 - multicultural counseling relationship [Sodowsky et al. 1994]
 - independent of counselor competencies proposed by Sue et al.
- Summary: 4 competency areas with permeable boundaries
 - **Skills:**
 - i. Counselor developing appropriate intervention strategies and characteristics that within the worldview of the client [*counselor knows how not just knows that cultural differences exist*]
 - ii. Counselor's ability to match interventions with the expectations of the client
 - iii. Counselor interface with client's natural support system
 - iv. Counselor uses standard instruments with caution and considers need to be flexible and creative [*e.g. may need to change the system, not the client*]
 - **Cultural Self-Awareness and Other-Awareness**
 - i. *Intrapersonal awareness*: systemic examination of own beliefs and attitudes through introspection, self-monitoring, and reflective self-evaluation
 1. Awareness of the influence of one's own sociocultural characteristics
 2. Cultural competence is achieved when one can step outside one's own culture , a self-monitoring action
 - ii. *Exposure-oriented awareness*:
 1. working with minorities, participating in sensitivity training, integrating client's natural support system into intervention strategies
 2. awareness of the negative impact of racial & sexual stereotyping and of discrimination
 - **Knowledge**
 - i. Multicultural pedagogical competencies are required to be culturally effective
 - ii. Knowledge of racial and cultural variables (e.g. racial identity, ethnic identity, acculturation, worldviews, sociocultural influences, value

differences) and the influences on clients during conceptualization of the problem, intervention strategies and goals

- iii. Knowledge of sociocultural characteristics that distinguish between and within cultural groups
- iv. Honoring folk belief systems that are an integral part of the client's psychological being
- v. Use of a psycho-historical approach to assessment: view biographical and clinical data in context (of history, politics, & individual factors)

- **Multicultural Counseling Relationship**

- i. Counselor models multicultural attitudes and behaviors
- ii. Develops within oneself positive racial or ethnic identity
- iii. Shows adjustment by accommodating mainstream counseling theory and practice to diversity needs
- iv. Creates a bicultural-multicultural counseling relationship process
- v. Fosters positive racial or ethnic identity and collective self-identity in minority clients
- vi. Communicates respect, shows personalized perceptions and knowledge
- vii. Displays empathy
- viii. Tolerates ambiguity
- ix. Demonstrates reciprocal concern

- *Counselor trustworthiness was considered to be significantly more important than client-counselor similarity.*

III. The Multicultural Counseling Inventory (MCI)

A. Two Initial Studies

- The Problem: "None of the major instruments commonly used for counseling process and outcome research presently include a component for assessing multicultural competence
- Neither the CERS [Counselor Effectiveness Rating Scale] nor the CRF [Counselor Rating Form] has a component for assessing multicultural counseling competencies.
 - Although each has been used in racial/ethnic minority studies
- CART [Cultural Attitudes Repertory Techniques] - used for self-examination of counselor's personal subjective constructs regarding different cultures.
 - Does not assess how multiskilled the counselor is in working with minority individuals
- CCCI-R [Cross-Cultural Competency Index – Revised], the MAKSS [Multicultural Awareness – Knowledge-Skills Survey], the MCAS [Multicultural Counseling Awareness Scale] only include 3 factors proposed by Sue et al to achieve multicultural counseling competencies
- MCI – [Multicultural Counseling Inventory]

- self report measure, based on the constructs proposed to achieve multicultural counseling competencies + the multicultural counseling relationship
- underwent developmental procedures different from those of the other scales
- developed empirically , using exploratory factor analysis [EFA], confirmatory factor analysis [CFA] and tests of factor congruence across the two samples
- Samples: student trainees (n=115) and experienced practitioners (n=839)
- Format: mailed, responses were anonymous
- MCI Results:
 - EFA & CFA – moderate, to moderately high internal consistency reliabilities and moderate interfactor correlations
 - 3 multicultural counseling competencies (skills, awareness, knowledge) were comparable in substance to Sue et al 1982
 - inclusion of the multicultural counseling relationship acknowledged by Sue et al, limited acknowledgement by MCT

FYI: My understanding of Factor Analysis (at best, limited) is: that the objective of CFA is to determine whether or not the items designated in eg) Factor 1 actually load onto the factor. If they do, they will be highly correlated with each other, and not with items loading onto other factors. Therefore, you need to determine the amount of intercorrelation within the items .

- MCI Instrument
 - 40 self-report statement, rated on a 4 point Likert scale [1=low]
 - comprised of 4 factors:
 - multicultural counseling skills (11 items) [Factor 1]
 - 5 items eg) use of non-traditional methods of assessment
 - 6 items eg) observing congruence, using concise reflections
 - multicultural awareness (10 items) [Factor 2]
 - eg) suggesting proactive multicultural sensitivity and responsiveness
 - multicultural counseling relationship (8 items) [Factor 3]
 - eg) counselor’s trustworthiness, comfort level, worldview
 - multicultural counseling knowledge (11 items) [Factor 4]
 - eg) culturally relevant case conceptualization & treatment strategies
 - *See table 1 for summary of item contents, loadings on the four factors, related psychometric information.*
 - Results of Study 1 (local) indicated a moderately high correlation amongst the 4 factors
 - In Study 2 the correlation amongst the 4 factors was even higher than in study 1
 - For study 1 and 2, the evidence of high inter-scale correlations with CCCI-R, MAKSS, MCAS [ie validation of the scale] & evidence of general credibility-effectiveness scales in the counseling literature led the authors to investigate

whether there was a higher order factor accounting for the correlations among the factors

- The local (study 1) and national (study 2) were highly correlated with each other
- A number of analyses, supported by the literature, were undertaken with study 2:
 - A unitary factor analysis
 - A 2-factor model
 - A 4-factor model
 - A 3-factor model
 - A 4-factor model w/ a higher order model
 - A 3-factor model w/ a higher order model
- Two higher order (or second order) models were conducted for both the 3- and 4-factor models, to determine if a higher order model accounted for the high correlations
 - Step 1: proposed separate factors (other first order factors)
 - Step 2: proposed one independent general factor (ie a second order factor)
 - Each item was viewed as an indicator of a first order factor (eg Skills) then each first order factor was examined to assess whether there was a higher order factor
- Is the MCI a unitary or multidimensional model?
- 4-factor oblique model appeared to have the best fit with the data
 - As measured by: goodness of fit index (GFI), the ratio of the chi-squared GFI to degrees of freedom, root-mean-square residual, normed index of fit, significant t values for all standardized loadings.
- A 4-factor model w/ a higher order model was the second best fit
- **Conclusion: there are 4 relatively specific factors (indicated empirically) & there is some evidence to suggest a general multicultural competency factor that reflects counselor's evaluations of themselves as multicultural counselors.**
- Study 1 – additional analyses
 - MANOVA – 2 groups (n=82 in each group)
 - One group with <50% minority clients
 - One group with >50% minority clients
 - Followed by ANOVAs using full scale MCI as dependent variable, and the work groups as the independent variable

- Results indicate that actual experience with minorities may improve multicultural sensitivity, outreach, advocacy, & enhanced multicultural client-counselor relationship
- Content analysis of open-ended questions indicated a match between the themes of the responses and the 4 factors
 - Except the opinion that clients were all treated equally, in direct contrast to the premise of MCT

B. Use of the MCI to Evaluate Counseling Training: Studies 3 and 4

- No overlap between the participants in studies 1,2 & 3,4
- Objective of study 3: determine if MCT could be related to the outcome of perceived competencies of students by administering MCI before and after a multicultural competences course.
- N=42 second year master's & doctoral students
- Repeated measures multivariate test ($p < .001$)
- Significance obtained on 3 other repeated measures t tests
- No significant difference for the Multicultural Counseling Relationship factor
- Although no control group was used to account for temporal, environmental changes, information obtained was important to the author
- Objective of study 4: whether the counselor using culturally consistent counseling tasks (perceived to be significantly more credible) would be evaluated as being more culturally competent than the counselor using culturally discrepant counseling tasks.
- Video-taped sessions using an actor (white male) as counselor and a student/client (male Asian-Indian), both were unaware of study's objective
- In scene 1, the role play included culturally-based concerns of the client (changing his major that had been selected and approved by his parents & family)
- Scene 2 was varied – one intervention was culturally consistent, while the other was not
- Attempts were made to control all extraneous variables (setting, counselor's body language & level of enthusiasm)
- Methods: master's and doctoral students enrolled in a discussion group on multicultural competencies
- n=38, divided into 2 groups
- one group (n=18) viewed the culturally consistent session & rated the counselor they viewed on the MCI
- the remaining 20 viewed the culturally inconsistent session & rated the counselor they viewed on the MCI
- Data analysis: MANOVA to test differences between the subscales for each group – significant at $p < .001$
- ANOVAs on each factor and a t test on the full scale were all significant at $p < .001$

- Conclusion: results of study 4 support the hypothesis that the MCI might be able to show a relationship between perceived multicultural counseling competencies and perceived counselor credibility (as measured by a credibility measure)

IV. A Prediction Model for Multicultural Training (MCT) and the Multicultural Counseling Inventory (MCI)

- MCI is being researched nationally & internationally
- MCI is being investigated for use in clinical, academic and educational settings
- MCI appears to be a promising tool for the evaluation of training and for process and outcome research in help-giving services
- Study 5 – research into the MCI’s relationship with predictors
- Methods – mailed questionnaire to 300 psychologists, interns, graduate students, counselors
- 67% response rate
- Certain demographics appeared to be related to subjects’ self-reported competencies:
 - Western, Eastern, Southern participants reported higher competency than those in the Midwest & Mountain regions on 3 of the factors: multicultural skills, awareness & relationship
 - No difference was reported for multicultural knowledge
 - American racial and ethnic minorities, as well as international subjects reported higher scores on all the factors/subscales than their white colleagues
 - MCI correlated with MAKSS at $r=.68$
 - Attributing blame, rigidity, intolerance for ambiguity did not correlate with MCI or MAKSS
 - Correlations with social desirability and cultural political correctness (CPC) were low, at $r=.27$ and $r=.19$ respectively [the two measures correlated with each other at $r=.32$]
 - Social desirability (SD) accounted for 7% of the variance in the MCI instrument
 - MCT and multicultural life experiences were hypothesized to be related to the MCI; SD was not expected to be related to MCI
 - Hypothesis that cultural political correctness and sense of inadequacy in social situations (SOCINAD) would affect MCT rather than MCI
 - Hypotheses tested by a structural equation model
 - Lisrel 7 analysis used
 - Very strong goodness-of-fit indexes were indicated for the hypothesized model of study 5
 - MCT and MClife may be related to multicultural counseling competencies, as measured by MCI
 - CPC & SOCINAD were weakly negatively correlated ($r=-0.19$ and -0.223) with MCT, nonetheless, it was suggested by the authors that these processes would not facilitate MCT
 - Conclusions:
 - Validity of MCI demonstrated through correlation with MAKSS

- Low correlations with racist attributions to African Americans, rigidity, and intolerance for ambiguity suggest that these constructs are conceptually different than the MCI
- Using MCI as the dependent variable, two significant components of the MCT model: training and multicultural life experiences

V. Conclusions

- MCI instrument is a self-report instrument, designed to measure multicultural counseling competencies
- A series of 5 studies were conducted in the development and validation of the instrument
- Development of the MCI utilized exploratory factor analyses for a local sample (study 1) and a national sample (study 2)
- MCI was administered to students before and after MCT (study 3)
- MCI was administered to students exposed to one of two videotaped sessions (one was culturally consistent, the other was not) (study4)
- Relationship of MCI and other measures (MCT, CPC, etc) studies are underway (study 5)
- A conceptual model of the structural relationships of MCT with MCI showed good fit with actual data
- MCI is a psychometrically robust instrument, measuring distinct , yet interrelated dimensions
- MCI has potential for measuring multicultural training processes by formulating training objectives in measurable terms
- Conduct of therapy/counseling without cultural consideration is considered unethical by APA
- Study of multicultural counseling competencies will provide a more complete and balanced perspective to the scientist-practitioner approach of education in professional psychology