LEGACY CHANGERS TRAINING INSTITUTE
for Mental Health Equity and Justice
Equipping culturally-responsive helping professionals worldwide

COURSE-PACK OF ACTIVITIES & HANDOUTS

IN ORDER OF USE

The Advanced Clinical Supervisor:

Next Level Tools for Ethical Supervision

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Supervisor Record of Supervision

Supervisee Name: _____

Date: _____

Amount of Clock Time (min.)	SPV Modality: ➢ Individual ➢ Triad ➢ Group *(MAX OF 6)*	Topic(s) (i.e., client review, documentation, clinical research, etc.)	Notes
90	☐ Individual/ Triadic ☐ Group Therapist 1 Therapist 2	☐ Basic responding skills ☐ Building rapport ☐ Client Review ☐ Case conceptualization skills ☐ Clinical Goal Development Discussion ☐ Continuing education opportunities for specialization & improving scope of practice ☐ Counselor self-awareness ☐ Documentation Review ☐ Diagnosis & Medication ☐ Ethical Behavior / Treatment ☐ Marital Counseling ☐ Multicultural considerations ☐ Professional Development ☐ Self-care ☐ Theoretical Orientation ☐ Transference-Counter Transference ☐ Treatment planning ☐ Trusting client resiliency ☐ Working with vicarious trauma / compassion fatigue ☐ Other _____	• Beginning of Sup Relationship. • Initial documentation review (Bill of Rights, Professional Disclosure, Supervision Contract, Supervision Best Practices (ACES), Supervision Informed Consent, Website Links & Resources) • Goals of Supervision

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Date: _____

DATE	Amount of Clock Time (min.)	SPV Modality: ➢ Individual ➢ Dyad ➢ Group *(MAX OF 6)*	Topic(s) (i.e., client review, documentation, clinical research, etc.)
		☐ Individual/ Dyadic ☐ Group	☐ Addictions ☐ Basic responding skills ☐ Building rapport ☐ Client Review ☐ Case conceptualization skills ☐ Clinical Goal Development Discussion ☐ Continuing education opportunities for specialization & improving scope of practice ☐ Counselor self-awareness ☐ Documentation Review ☐ Diagnosis & Medication ☐ Ethical Behavior / Treatment ☐ Marital Counseling ☐ Multicultural considerations ☐ Professional Development ☐ Self-care ☐ Theoretical Orientation ☐ Transference-Counter Transference ☐ Treatment planning ☐ Trusting client resiliency ☐ Working with vicarious trauma / compassion fatigue ☐ Other _____

Client Identifier: ____ New Client or Update	**Demographics:** (i.e. age, ethnicity, etc.)

Individual Therapy? Couples Therapy? Family Therapy? Group Therapy? _____

Presenting Issue:
Clinical Discussion:
Therapist Considerations:
Suggestions/Follow-Up:

Client Identifier: ____ New Client or Update	**Demographics:** (i.e. age, ethnicity, etc.)

Individual Therapy? Couples Therapy? Family Therapy? Group Therapy? _____

Presenting Issue:
Clinical Discussion:
Therapist Considerations:
Suggestions/Follow-Up:

OTHER CLIENTS FROM GROUP:

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CORTEZ

(adapted from ACA Ethics case study)

Your supervisee Cortez is a 1st year post-masters clinician. He has been with you for 7 months. Cortez is a 48-year-old Latino male. He enjoys close family relationships with his father who is 70 years old (lives with him), his younger sister and brother, and his daughters who are 25 and 27 years old. He attends church regularly, but he is not involved in any of the activities provided by the church other than Sunday services.

Today he has brought to you his most recent case. For the last 6 months, he has been counseling a 45-year old African American woman with a presenting problem of difficulty coping with the death of her mother. Her mother and grandmother (who is also deceased) suffered from progressive Alzheimer's disease. Cortez's client revealed to him that she administered a lethal dose of sleeping pills to her grandmother during the final stages of the Alzheimer's, and that she has also caused the death of her mother by withholding cardiac medication. It was then revealed that it is likely she will have to take care of a third relative with Alzheimer's disease, an elderly Aunt.

As you engaged with Cortez to help him determine how to clinically assess this client and update his treatment plan, Cortez indicated he didn't know what to think about the fact that his client aided in the deaths of her grandmother and mother. He believes strongly in familismo, and his spiritual beliefs tell him that this is wrong. At the same time, Cortez feels that his client is not a bad person and did what she did while under tremendous stress and pressure and with feelings of compassion for the deteriorating condition of her mother and grandmother. Eventually he responded to his internal conflict with anger, has begun to question the character of his client, and wonders if he should continue working with her. Cortez is particularly concerned because he is not sure he wants to be part of a situation where he aids in the death of yet another one of her client's relatives.

In the first 3 - 4 months of supervision, you discussed Cortez's struggle to develop and maintain a therapeutic relationship with his client. Cortez often indicated getting stuck knowing what to do to help this client, even though this was well before the most recent revelation. Because of his experience of "getting stuck" he frequently voiced feelings of incompetence. He often seemed to fluctuate between using multiple approaches from Psychoanalytic, to Adlerian, to Gestalt to CBT. This was frequently a discussion in supervision.

At the 13-month mark in your supervisory relationship, you and Cortez again assessed his progress of clinical development to date. You pointed out several ongoing areas of deficiency. Cortez expressed surprise and disappointment that there were so many. He also indicated his disagreement with your assessment.

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Supervisee Assessment Guide

Adapted from Stoltenberg (1981) Integrative Developmental Model (IDM)

(Part 1)

Assess the supervisor approach/role needed by the supervisee		
Teacher *(To instruct)* What evidence suggests this?	☐ Evaluate counseling sessions ☐ Identify interventions ☐ Teach, demonstrate, and/or model intervention techniques ☐ Interpret significant events in the counseling session ☐ Other _____	**Application for Interpersonal Process Recall?** **Parallel Process/Isomorphism?** **What supervisory inquiries would be relevant and why?**
"Counselor" *(To facilitate supervisee self-growth as a counselor)* What evidence suggests this?	☐ Explore supervisee feelings during the counseling and/or supervision session ☐ Explore supervisee feelings concerning specific techniques and/or interventions ☐ Facilitate supervisee self-exploration of confidences and/or worries in the counseling sessions ☐ Help supervises define personal competencies and areas for growth	
Consultant *(To generate data)* What evidence suggests this?	☐ Provide alternative interventions and/or conceptualizations for supervisee use ☐ Encourage supervisee discussion of client problems, motivation, etc. ☐ Solicit and attempt to satisfy supervisee needs during the supervision session ☐ Allow the supervisees to structure the supervision session	

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Supervisee Assessment Guide

Adapted from Loganbill, Hardy & Delworth (1983). Supervision: A Conceptual Model

(Part 2)

Assess the supervisee's stage of development		
Stagnation What evidence suggests this?	☐ Poor initial awareness and insight as to their impact on others (client; supervisor) ☐ High self-focus ☐ Tendency towards black and white thinking ☐ Strong dependency on the supervisor	***Notes***
Confusion What evidence suggests this?	☐ Instability, disorganization, disruption, conflict ☐ Liberated from rigid ways of thinking about clinical application ☐ Ambivalence – fluctuate between feelings of failure and incompetence to feelings of great expertise and ability ☐ Dependent on supervisor with disappointment and anger	***Notes***
Integration What evidence suggests this?	☐ Reorganization, integration, flexibility, new cognitive understanding ☐ Increased awareness and taking responsibility for what is occurring in supervision and in client relationships sense of direction and future ☐ Realistic view of self-acceptance of stronger and weaker areas ☐ More reasonable view of supervisor	***Notes***

Supervisee Assessment Guide

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(Part 3)

Digging deeper to identify critical issues in supervisee development		
Competence What evidence suggests this?	☐ Skills ☐ Technique ☐ Mastery	***Notes***
Emotional Awareness What evidence suggests this?	☐ Knowing oneself ☐ Awareness of Feelings	***Notes***
Autonomy What evidence suggests this?	☐ Sense of Self ☐ Independence ☐ Self-directedness	***Notes***
Theoretical Identity What evidence suggests this?	☐ Theoretical consistency ☐ Synthesized theoretical identity ☐ Conceptual integration	***Notes***
Respect for Individual Differences What evidence suggests this?	☐ Non-Judgmental-ness ☐ Valuing of others *[changed from Acceptance]* ☐ Acceptance of other's perspectives *[changed from Tolerance]*	***Notes***
Purpose & Direction What evidence suggests this?	☐ Setting goals ☐ Direction in Counseling ☐ Appropriate short or long-term goals	***Notes***
Personal Motivation What evidence suggests this?	☐ Personal Meaning ☐ Reward Satisfaction	***Notes***
Professional Ethics What evidence suggests this?	☐ Values	***Notes***

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SAMPLE

Adapted from Loganbill, Hardy & Delworth (1983). Supervision: A Conceptual Model

Supervisee's Name: _____ Today's Date: _____

[] Initial Assessment []Q1 []Q2 []Q3 []Q4

	STAGNATION	CONFUSION	INTEGRATION
8 Critical Supervision Issues	*1……5……10*	*1……5……10*	*1……5……10*
1. Competence			
2. Emotional Awareness			
3. Autonomy			
4. Theoretical Identity			
5. Respect for Individual Differences			
6. Purpose and Direction			
7. Personal Motivation			
8. Professional Ethics			

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CORTEZ' QUARTERLY DEVELOPMENTAL TRACKING SHEET

Complete a tracking sheet for Cortez. Follow the example on the previous page.

[] Initial Assessment []Q1 []Q2 []Q3 []Q4

	STAGNATION	CONFUSION	INTEGRATION
8 Critical Supervision Issues	*1……5……10*	*1……5……10*	*1……5……10*
1. Competence			
2. Emotional Awareness			
3. Autonomy			
4. Theoretical Identity			
5. Respect for Individual Differences			
6. Purpose and Direction			
7. Personal Motivation			
8. Professional Ethics			

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Supervisee Interventions Guide

Adapted from Loganbill, Hardy & Delworth (1983). Supervision: A Conceptual Model

(Part 4)

Quick Review of Cortez's Overall Development	
	Evidence
☐ **Stagnation** ☐ **Confusion** ☐ **Integration**	
Quick Review of Supervision Role & Focus of Interaction	
	Focus, Goals, and Activities?
☐ **Teacher** ☐ **Counselor** ☐ **Consultant**	
Cortez's Critical Issues	
Given your previous assessment, which critical issue(s) would you focus on first? Why?	
☐ **Competence** ☐ **Emotional Awareness** ☐ **Autonomy** ☐ **Theoretical Identity** ☐ **Respect for Individual Differences** ☐ **Personal Motivation** ☐ **Professional Ethics**	
	Stage of Development within each issue chosen? ***(Stagnation? Confusion? Integration?)***
Which intervention(s) would you choose to help Cortez move forward clinically?	
	Justification for Intervention Choice(s)
☐ **Prescriptive Interventions** ☐ **Confrontive Interventions** ☐ **Conceptual Interventions**	

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You are supervising Sherry and Tanisha twice monthly (3 hrs per month) in group supervision. Cortez attends this group once per month as well. Sherry is a 40-year-old, Caucasian, cisgender, female, doctoral student who is completing her required counseling internship (eating disorders specialization) in your group practice. She is fully licensed. Tanisha is a 30-year-old non-binary person of color who has been in the field for 2 years and is in her 2nd year of her associate licensure.

Tanisha is engaged in video-based counseling with a Caucasian 65-year-old male client who can no longer drive due to increased vision impairment. His company retired him 5 years ago during an organizational restructuring. He still has access to benefits through his company. Tanisha is on his plan and had the first availability for seeing him. He has been experiencing heavy depression and has been increasingly verbally aggressive with his wife since retirement. She has given him an ultimatum – go to therapy or get a divorce. Divorce is not what he wants.

During supervision you learn that Tanisha's client has made negative comments about race, age and gender identity, which would be considered microaggressions. While the client does know Tanisha is African-American, he does not know Tanisha identifies as non-binary. It has come out in session that when he was downsized, he was replaced by a younger African-American male who he believes was gay, and also unqualified to replace him. He spoke derogatorily of black men and the LGBTQIA+ community as a whole. As Tanisha described some of his statements, she could tell Sherry was visually uncomfortable and unusually quiet, which made Tanisha choose to leave out some details of the experience.

When you as the supervisor ask Tanisha what her experience is working with this client, your supervisee Tanisha states that she can "handle" the situation and that she does not want her client to feel embarrassed or bad by confronting him about these microaggressions. Cortez verbalized that he thought the client was wrong, and also indicated he would not confront him because of his age.

Until now within supervision, you as the supervisor have not broached the topic of race, ethnicity, gender identity, sexual orientation, age differences, etc. within the supervisory relationships.

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Cross-Culturally Responsive Practice Mindset Development

Clinician Self-Assessment

Using the likert scale below, as we cover the overview of the CCCMDM, give yourself some honest personal feedback on where you really sit with regard to your **cross-culturally responsive-practice mindset** development. **This is a 2-page assessment.**

		Circle your response for each.
	1) Not including today, in the last 60 days I have read books or articles or listened to podcasts about things like discrimination, privilege, marginalization, antiracism/ racism, homophobia, ableism, agism, xenophobia, transphobia, social justice, etc. →	*not at all true……somewhat true……very true……not sure*
	2) I think privilege benefits white people in America. →	*not at all true……somewhat true……very true……not sure*
	3) I think BIPOC experience marginalization. →	*not at all true……somewhat true……very true……not sure*
	4) I think racism is real. →	*not at all true……somewhat true……very true……not sure*
	5) I think institutions like schools, social service and government agencies have racist, phobic, and other discriminatory policies that keep BIPOC and other marginalized groups from experiencing equity and access in this society. →	*not at all true……somewhat true……very true……not sure*
	6) My opinions negative about people unlike me has to do with what I see, not any bias I have. →	*not at all true……somewhat true……very true……not sure*
	7) It's my responsibility to find ways I can fight for equity and access for marginalized groups of people. →	*not at all true……somewhat true……very true……not sure*
What struck you most about the questions and your responses?		
	1) Not including today, in the last 30 days I have read books or articles or listened to podcasts about things like discrimination, privilege, marginalization, antiracism/racism, homophobia, ableism, agism, xenophobia, transphobia, social justice, etc. →	*not at all true……somewhat true……very true……not sure*
	2) In the last 60 days I have talked to 1, but not more than 2 people from a marginalized group about discrimination they have been experiencing. →	*not at all true……somewhat true……very true……not sure*
	3) I believe that while I can change my social circumstances by my own efforts (e.g. SES) it may be more difficult for BIPOC to do the same. →	*not at all true……somewhat true……very true……not sure*
	4) If I recognize social policies and practices that create inequitable opportunity and access for someone in a marginalized group, it's my responsibility to find a way I can contribute to the solution. →	*not at all true……somewhat true……very true……not sure*
	5) If I am not actively contributing to a solution, I am part of the problem. →	*not at all true……somewhat true……very true……not sure*
What struck you most about the questions and your responses?		

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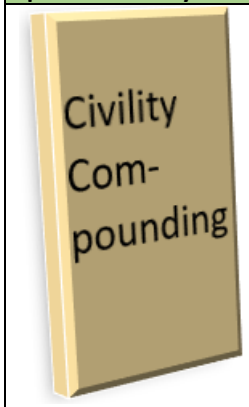
1) I understand the concepts of social group identity and cultural identity. → *not at all true……somewhat true……very true……not sure*
2) I can name at least 2 areas of my privilege and am seeking to learn more. → *not at all true……somewhat true……very true……not sure*
3) I can name at least 2 areas of my marginalization and am seeking to learn more.
4) I am comfortable naming and talking about my intersecting identities. → *not at all true……somewhat true……very true……not sure*
5) I can name and talk about at least 2 areas where I have bias and am seeking to learn more. → *not at all true……somewhat true……very true……not sure*
6) Not including today, I can point to at least 1 time in the last 30 days where I engaged in healthy conversation about <u>my personal</u> privilege, marginalization, intersecting identities, and/or bias. → *not at all true……somewhat true……very true……not sure*
7) When I get uncomfortable talking about privilege, marginalization or bias, racism, etc, I push through regardless of how I feel. → *not at all true……somewhat true……very true……not sure*
8) It is critical for me to listen to and validate the experiences of BIPOC. If I am not doing this, I am showing racist tendencies. → *not at all true……somewhat true……very true……not sure*
9) I am actively seeking to engage in relationships with others from different social / cultural backgrounds and identities who do not look or sound like me. → *not at all true……somewhat true……very true……not sure*
10) It's my responsibility to find ways I can fight for equity and access for marginalized groups of people. → *not at all true……somewhat true……very true……not sure*

What struck you most about the questions and your responses?



1) I understand and can talk about my social group identity and cultural identity. → *not at all true……somewhat true……very true……not sure*
2) I can readily talk and educate others about the history that shapes my privilege <u>and</u> the privilege of others. → *not at all true……somewhat true……very true……not sure*
3) I am concerned about and can readily talk about how my privilege impacts me and others around me. → *not at all true……somewhat true……very true……not sure*
4) I can readily talk and educate others about the history that shapes my marginalization <u>and</u> the marginalization of others. → *not at all true……somewhat true……very true……not sure*
5) I am concerned about and can readily talk about how my marginalization impacts me and others around me. → *not at all true……somewhat true……very true……not sure*
6) When I hear racist ideas, or stereotypes related to race, gender, sexual/ affectional orientation, disability, etc, most of the time I speak up against it. → *not at all true……somewhat true……very true……not sure*
7) I have taken time to identify and acknowledge my personal verbalizations or behaviors that disregard the impact of racism on black, indigenous and other people of color. → *not at all true……somewhat true……very true……not sure*
8) Not including today, I can point to at least 2 times in the last 30 days where I engaged in healthy conversation about <u>my personal</u> privilege, marginalization, intersecting identities, and/or bias. → *not at all true……somewhat true……very true……not sure*
9) I actively engaging in social justice actions that equity and access for BIPOC and other marginalized groups of people. → *not at all true……somewhat true……very true……not sure*

What struck you most about the questions and your responses?

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How might you approach remediation for Jessica?

Jessica
MA-CMHC
EMDR (L1)

- 1.5 years post graduation
- New 24 year old female client
- Dissociative Identity Disorder
- No experience
- Worried she cannot handle dx
- considers herself a generalist

+ 2 months

- ✓ Still seeing client sporadically
- ✓ Attended supervision
- ✓ Receptive to what has been taught in supervision
- ✓ Implements in sessions
- Has not done independent research and reading on DIDtx best practices

- ✓ ***Assess***
- ✓ ***Consult***
- ✓ ***Communicate***
- ✓ ***Develop***
- ✓ ***DOCUMENT***

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How might you approach remediation for Tyler?

Tyler
MA-CMHC

- 1.5 years post grad
- Children & adolescent focus
- Ongoing male client
- "…rubs me the wrong way!…"
- Upcoming family session
- Doesn't know what to do

+ 2 months

- ✓ Family session cancelled by father
- ✓ Has had one session with client that was video taped
- Cancelled two others
- Has not prepared video tape for joint review in supervision

- ✓ ***Assess***
- ✓ ***Consult***
- ✓ ***Communicate***
- ✓ ***Develop***
- ✓ ***DOCUMENT***

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How might you approach remediation for Monique?

Monique
MA-MFT
EMDR (L1)

- 2.5 years post grad
- 19yr old male client
- SI – 1 attempt w/ crisis stab.
- Autism spectrum
- Gender dysphoria

- *Peer consult**

+ 2 months

- Your colleague reports back that Monique has continued to see this client despite recommendation that he be referred.
- Therapist has not connected with supervisor with specific expertise.
- Missed two of last 4 supervision sessions.
- Therapist brought in licensure docs for supervisor signature

- ✓ ***Assess***
- ✓ ***Consult***
- ✓ ***Communicate***
- ✓ ***Develop***
- ✓ ***DOCUMENT***

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How might you approach remediation for Juan?

Juan
2nd Semester Hispanic Intern

- 8 months working with teens under your supervision
- Builds strong rapport
- New Hispanic client
- Completed intake, dx, and tx plan correctly without assistance
- "What direction should I take?"

+ 2 months

- ✓ *Assess*
- ✓ *Consult*
- ✓ *Communicate*
- ✓ *Develop*
- ✓ *DOCUMENT*

- ✓ Counselor competencies
  - ✓ Intervention skills
  - ✓ Assessment techniques
  - ✓ Conceptualization
  - ✓ Tx goals & progress
  - ✓ Report writing & record keeping
- ✓ Boundaries

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Supervisee Assessment Guide

Adapted from Stoltenberg (1981) Integrative Developmental Model (IDM)

(Part 1)

Assess the supervisor approach/role needed by the supervisee		
Teacher *(To instruct)* What evidence suggests this?	☐ Evaluate counseling sessions ☐ Identify interventions ☐ Teach, demonstrate, and/or model intervention techniques ☐ Interpret significant events in the counseling session ☐ Other _____	**Application for Interpersonal Process Recall?** **Parallel Process/Isomorphism?** **What supervisory inquiries would be relevant and why?**
"Counselor" *(To facilitate supervisee self-growth as a counselor)* What evidence suggests this?	☐ Explore supervisee feelings during the counseling and/or supervision session ☐ Explore supervisee feelings concerning specific techniques and/or interventions ☐ Facilitate supervisee self-exploration of confidences and/or worries in the counseling sessions ☐ Help supervises define personal competencies and areas for growth	
Consultant *(To generate data)* What evidence suggests this?	☐ Provide alternative interventions and/or conceptualizations for supervisee use ☐ Encourage supervisee discussion of client problems, motivation, etc. ☐ Solicit and attempt to satisfy supervisee needs during the supervision session ☐ Allow the supervisees to structure the supervision session	

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(Part 2)

Assess the supervisee's stage of development		
Stagnation What evidence suggests this?	☐ Poor initial awareness and insight as to their impact on others (client; supervisor) ☐ High self-focus ☐ Tendency towards black and white thinking ☐ Strong dependency on the supervisor	***Notes***
Confusion What evidence suggests this?	☐ Instability, disorganization, disruption, conflict ☐ Liberated from rigid ways of thinking about clinical application ☐ Ambivalence – fluctuate between feelings of failure and incompetence to feelings of great expertise and ability ☐ Dependent on supervisor with disappointment and anger	***Notes***
Integration What evidence suggests this?	☐ Reorganization, integration, flexibility, new cognitive understanding ☐ Increased awareness and taking responsibility for what is occurring in supervision and in client relationships sense of direction and future ☐ Realistic view of self-acceptance of stronger and weaker areas ☐ More reasonable view of supervisor	***Notes***

Supervisee Assessment Guide

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(Part 3)

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Digging deeper to identify critical issues in supervisee development		
Competence What evidence suggests this?	☐ Skills ☐ Technique ☐ Mastery	***Notes***
Emotional Awareness What evidence suggests this?	☐ Knowing oneself ☐ Awareness of Feelings	***Notes***
Autonomy What evidence suggests this?	☐ Sense of Self ☐ Independence ☐ Self-directedness	***Notes***
Theoretical Identity What evidence suggests this?	☐ Theoretical consistency ☐ Synthesized theoretical identity ☐ Conceptual integration	***Notes***
Respect for Individual Differences What evidence suggests this?	☐ Non-Judgmental-ness ☐ Valuing of others *[changed from Acceptance]* ☐ Acceptance of other's perspectives *[changed from Tolerance]*	***Notes***
Purpose & Direction What evidence suggests this?	☐ Setting goals ☐ Direction in Counseling ☐ Appropriate short or long-term goals	***Notes***
Personal Motivation What evidence suggests this?	☐ Personal Meaning ☐ Reward Satisfaction	***Notes***
Professional Ethics What evidence suggests this?	☐ Values	***Notes***

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Supervisee Interventions Guide

Adapted from Loganbill, Hardy & Delworth (1983). Supervision: A Conceptual Model; Stoltenberg (1981) Integrative Developmental Model (IDM)

(Part 4)

<table>
<tr><th colspan="2">Quick Review of Cortez's Overall Development</th></tr>
<tr><td></td><td>Evidence</td></tr>
<tr><td>☐ Stagnation
☐ Confusion
☐ Integration</td><td></td></tr>
<tr><th colspan="2">Quick Review of Supervision Role & Focus of Interaction</th></tr>
<tr><td></td><td>Focus, Goals, and Activities?</td></tr>
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☐ Counselor
☐ Consultant</td><td></td></tr>
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☐ Autonomy
☐ Theoretical Identity
☐ Respect for Individual Differences
☐ Personal Motivation
☐ Professional Ethics</td><td></td></tr>
<tr><td>Stage of Development within each issue chosen?
(Stagnation? Confusion? Integration?)</td></tr>
<tr><th colspan="2">Which intervention(s) would you choose to help Cortez move forward clinically?</th></tr>
<tr><td></td><td>Justification for Intervention Choice(s)</td></tr>
<tr><td>☐ Prescriptive Interventions
☐ Confrontive Interventions
☐ Conceptual Interventions</td><td></td></tr>
</table>

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SUPERVISEE QUARTERLY DEVELOPMENTAL TRACKING SHEET

Adapted from Loganbill, Hardy & Delworth (1983). Supervision: A Conceptual Model

Supervisee's Name: _____ Today's Date: _____

[] Initial Assessment []Q1 []Q2 []Q3 []Q4

	STAGNATION	CONFUSION	INTEGRATION
8 Critical Supervision Issues	*1……5……10*	*1……5……10*	*1……5……10*
9. Competence			
10. Emotional Awareness			
11. Autonomy			
12. Theoretical Identity			
13. Respect for Individual Differences			
14. Purpose and Direction			
15. Personal Motivation			
16. Professional Ethics			

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Cross-Culturally Responsive Practice Mindset Development

Clinician Self-Assessment

Using the likert scale below, as we cover the overview of the CCCMDM, give yourself some honest personal feedback on where you really sit with regard to your **cross-culturally responsive-practice mindset** development. **This is a 2-page assessment.**

		Circle your response for each.
	8) Not including today, in the last 60 days I have read books or articles or listened to podcasts about things like discrimination, privilege, marginalization, antiracism/ racism, homophobia, ableism, agism, xenophobia, transphobia, social justice, etc. →	*not at all true……somewhat true……very true……not sure*
	9) I think privilege benefits white people in America. →	*not at all true……somewhat true……very true……not sure*
	10) I think BIPOC experience marginalization. →	*not at all true……somewhat true……very true……not sure*
	11) I think racism is real. →	*not at all true……somewhat true……very true……not sure*
	12) I think institutions like schools, social service and government agencies have racist, phobic, and other discriminatory policies that keep BIPOC and other marginalized groups from experiencing equity and access in this society. →	*not at all true……somewhat true……very true……not sure*
	13) My opinions negative about people unlike me has to do with what I see, not any bias I have. →	*not at all true……somewhat true……very true……not sure*
	14) It's my responsibility to find ways I can fight for equity and access for marginalized groups of people. →	*not at all true……somewhat true……very true……not sure*
What struck you most about the questions and your responses?		
	6) Not including today, in the last 30 days I have read books or articles or listened to podcasts about things like discrimination, privilege, marginalization, antiracism/racism, homophobia, ableism, agism, xenophobia, transphobia, social justice, etc. →	*not at all true……somewhat true……very true……not sure*
	7) In the last 60 days I have talked to 1, but not more than 2 people from a marginalized group about discrimination they have been experiencing. →	*not at all true……somewhat true……very true……not sure*
	8) I believe that while I can change my social circumstances by my own efforts (e.g. SES) it may be more difficult for BIPOC to do the same. →	*not at all true……somewhat true……very true……not sure*
	9) If I recognize social policies and practices that create inequitable opportunity and access for someone in a marginalized group, it's my responsibility to find a way I can contribute to the solution. →	*not at all true……somewhat true……very true……not sure*
	10) If I am not actively contributing to a solution, I am part of the problem. →	*not at all true……somewhat true……very true……not sure*
What struck you most about the questions and your responses?		

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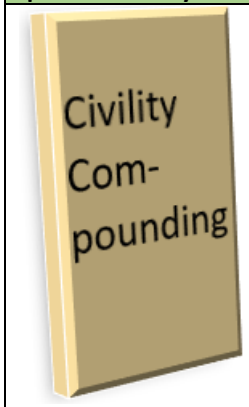
11) I understand the concepts of social group identity and cultural identity. → *not at all true……somewhat true……very true……not sure*
12) I can name at least 2 areas of my privilege and am seeking to learn more. → *not at all true……somewhat true……very true……not sure*
13) I can name at least 2 areas of my marginalization and am seeking to learn more.
14) I am comfortable naming and talking about my intersecting identities. → *not at all true……somewhat true……very true……not sure*
15) I can name and talk about at least 2 areas where I have bias and am seeking to learn more. → *not at all true……somewhat true……very true……not sure*
16) Not including today, I can point to at least 1 time in the last 30 days where I engaged in healthy conversation about <u>my personal</u> privilege, marginalization, intersecting identities, and/or bias. → *not at all true……somewhat true……very true……not sure*
17) When I get uncomfortable talking about privilege, marginalization or bias, racism, etc, I push through regardless of how I feel. → *not at all true……somewhat true……very true……not sure*
18) It is critical for me to listen to and validate the experiences of BIPOC. If I am not doing this, I am showing racist tendencies. → *not at all true……somewhat true……very true……not sure*
19) I am actively seeking to engage in relationships with others from different social / cultural backgrounds and identities who do not look or sound like me. → *not at all true……somewhat true……very true……not sure*
20) It's my responsibility to find ways I can fight for equity and access for marginalized groups of people. → *not at all true……somewhat true……very true……not sure*

What struck you most about the questions and your responses?



10) I understand and can talk about my social group identity and cultural identity. → *not at all true……somewhat true……very true……not sure*
11) I can readily talk and educate others about the history that shapes my privilege <u>and</u> the privilege of others. → *not at all true……somewhat true……very true……not sure*
12) I am concerned about and can readily talk about how my privilege impacts me and others around me. → *not at all true……somewhat true……very true……not sure*
13) I can readily talk and educate others about the history that shapes my marginalization <u>and</u> the marginalization of others. → *not at all true……somewhat true……very true……not sure*
14) I am concerned about and can readily talk about how my marginalization impacts me and others around me. → *not at all true……somewhat true……very true……not sure*
15) When I hear racist ideas, or stereotypes related to race, gender, sexual/ affectional orientation, disability, etc, most of the time I speak up against it. → *not at all true……somewhat true……very true……not sure*
16) I have taken time to identify and acknowledge my personal verbalizations or behaviors that disregard the impact of racism on black, indigenous and other people of color. → *not at all true……somewhat true……very true……not sure*
17) Not including today, I can point to at least 2 times in the last 30 days where I engaged in healthy conversation about <u>my personal</u> privilege, marginalization, intersecting identities, and/or bias. → *not at all true……somewhat true……very true……not sure*
18) I actively engaging in social justice actions that equity and access for BIPOC and other marginalized groups of people. → *not at all true……somewhat true……very true……not sure*

What struck you most about the questions and your responses?

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