Multicultural Career Counseling: A National Survey of Competencies and Practices

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Career counselors' multicultural competence has not been widely investigated. In this study, a national sample of 230 career counselors completed an online survey that included measures of career counseling self-efficacy and multicultural counseling competence. Beyond these self-report instruments, counselors responded to open-ended items that requested specific examples of their actual multicultural counseling practices. Results indicated that counselors rated themselves as multiculturally competent, but those ratings were more closely linked to general career counseling self-efficacy than to external evaluations of their self-reported multicultural counseling practices. Findings also reinforced the importance of training and experience in developing multicultural competence.

Multicultural competencies are essential to effective practice in counseling psychology (Vera & Speight, 2003). Over the past 20 years, there has been increasing attention paid to the mission of conducting research, training practitioners, and developing practice guidelines that better meet the needs of underrepresented and oppressed groups. The development of multicultural counseling skills in helping professionals has been the subject of substantial research and instrument development, and several important models have been developed (Fischer, Jome, & Atkinson, 1998; Helms, 1995; Sue et al., 1998; Trevino, 1996). As a specialty area within the larger field of counseling, career counseling has also recognized the critical importance of cultural competence. Vocational researchers have noted that career counseling was formulated by White scholars (Fouad & Bingham, 1995) and is based on a framework of masculine and Western European values of individuality, self-determination, the centrality of work, separation between work and family, and a linear career development process (Cook, Heppner, & O'Brien, 2002), which may be irrelevant to or in conflict with the values of clients not belonging to dominant groups. Vocational counselors have endeavored to understand and develop models for the ca-

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reer counseling process within a cultural framework (Arthur & McMahon, 2005; Byars-Winston & Fouad, 2006; Fouad & Bingham, 1995; Leong & Hartung, 1997) and have developed multiculturally appropriate interventions (Clark, Severy, & Sawyer, 2004; Hershenson, 2005; Ponterotto, Rivera, & Sueyoshi, 2000). Nevertheless, there is a nearly 100-year tradition of empirically based vocational theories used to conceptualize clients and develop interventions that pays little or no attention to clients' contextual factors and the interaction between the counselors' and clients' experiences and worldviews (Savickas, 2003). More research is needed to determine whether and how these cultural frameworks are used.

In *The Psychology of Working*, Blustein (2006) argued that in every known culture, work is a primary factor in the well-being of people, and in the introduction to this book, Paul Wachtel noted that work is one of the important ways in which dimensions of diversity, such as race/ethnicity, class, and gender, are enacted in today's world. Culturally competent career counselors are in a unique position to support clients in finding and maintaining satisfying work and to help clients who have been traditionally marginalized to cope with workplace issues, such as discrimination or racism. The converse may also be true. Counseling that ignores the cultural context of clients, which may include inappropriate assessment (Fouad, 1995), risks being irrelevant, or worse, harmful to clients (Blustein, 2006; Fouad & Bingham, 1995). Thus, a critical issue for the field of vocational counseling is whether and how multicultural competence is infused into the daily work of its practitioners.

The framework often used to assess multicultural competency in counseling consists of counselors' awareness of their own influences and biases, knowledge of between- and within-group differences in historically marginalized groups, and specific counseling skills (Sue, Arredondo, & McDavis, 1992). Scholars have examined factors that may promote such competence in general counseling. For example, Constantine (2002) found that overall counseling competence was highly correlated with counselors' cross-cultural counseling competence. Sheu and Lent (2007) also discovered that general counseling self-efficacy was related to multicultural counseling self-efficacy, suggesting that confidence in overall counseling abilities may provide some foundation for beliefs about cross-cultural competence. Additional research has indicated that training and experience may play an important role. As specific examples, course work in multicultural counseling (e.g., Constantine, 2001; Toporek & Pope-Davis, 2005) and participation in workshops and supervision (e.g., Pope-Davis, Reynolds, Dings, & Ottavi, 1994) have contributed to changes in counselors' self-reported competence in working with culturally diverse clients. Scholars have also begun to investigate the link between perceived multicultural competence and actual practice (e.g., Hansen, Randazzo, & Schwartz, 2006). Nevertheless, these studies have focused on general counseling, and similar studies have not been conducted on career counseling, leaving many unanswered questions about cultural competence in the field. That is not to say professionals do not recognize the importance of multiculturalism within vocational development. For example, the National Career Development Association (NCDA, 1997) has created a set of competencies for diversity that are tailored to specific tasks in career counseling, such as the ability to develop ways to share information effectively with clients who do not speak or read fluent English.

Unfortunately, researchers have not systematically evaluated career counselors' beliefs about their multicultural competence, their use of multicultural counseling strategies, or the factors that may promote such competence.

Another question that remains unanswered relates to the specific protocols used in individual career counseling. There are commonly used practices within career counseling, which include exploration and often instrument assessment of clients' interests and values, but counselors' practices are not well known and are likely highly variable (Whiston, 2003). Several authors have called for more process research in vocational counseling (Heppner & Heppner, 2003; Swanson, 1995; Swanson & Gore, 2000). In a proposed research agenda, Heppner and Heppner (2003) specifically identified one area of much-needed research as the examination of how counselor characteristics, including self-efficacy and cultural lens, might contribute to variations both in the process of career counseling and in its results.

In an attempt to shed additional light on vocational counseling practices and, more specifically, on the integration of cultural factors within those practices, this study investigated the self-reported multicultural competence of a national sample of career counselors, along with the research team's external ratings of the counselors' use of that competence in descriptions of their daily work. Because of the lack of existing research on this topic, we began with four primary research questions, as opposed to formal hypotheses. We did rely, however, on previous studies from therapy in general linking training, practice, overall counseling self-efficacy, and multicultural competence when formulating these questions.

The first question was multifaceted. Do career counselors believe that they are multiculturally competent in their work with clients? If so, how are multicultural training and experience related both to their self-reported competence and to external ratings of their multicultural counseling behaviors? Second, is there a relationship between self-reports of multicultural competence and external ratings of counselors' descriptions of their actual practices? Third, do professionals who see themselves as culturally competent also have higher levels of overall career counseling self-efficacy? Finally, what are the contributions of training, experience, and overall career counseling self-efficacy to the prediction of self-reported and externally evaluated multicultural competence? The answers to these questions could fill an important gap in the career counseling literature, highlight linkages between theory and practice, and point to the effectiveness of training students and professionals to more fully appreciate clients' contextual factors in all aspects of the career counseling process.

Method

Participants

Study participants were 230 career counselors who were also members of a large, nationwide professional association for career counselors. Of the participants, 51 were male (22.2%), 176 were female (76.5%), and three (1.3%) did not report their gender. Most were Caucasian (78.7%), but some self-identified as African American (6.5%), Latino (4.8%), Asian (2.6%), multiracial (1.7%), Middle Eastern (1.3%), Native American (1.3%), or other (1.7%); three participants (1.3%) did not report their race or ethnicity. (Percentages do not equal 100% because of rounding.) Most participants engaged in career counseling or advising while holding either a master's (67.8%) or doctoral (23.5%) degree; a small number (8.7%) possessed only a bachelor's degree. As a group, the participants had a significant amount of practice experience. Only 15.7% of the sample had less than 5 years of experience, whereas 26.5% had worked in the field for 5–10 years, 26.5% for 11–20 years, 23.9% for 21–30 years, and 7.4% for more than 30 years. The majority of the participants (81.7%) identified their specialty as career counseling, and most worked in a college, university, or community college setting (61.4%). Others reported a primary work setting of private practice (13.5%), K–12 education (4.8%), state or federal agency (4.8%), business and industry (3.9%), or other (9.6%); five participants (2.2%) did not respond to this item. (Percentages do not equal 100% because of rounding.)

An e-mail invitation to participate in the study was sent to 2,977 e-mail addresses. These individuals were in a regular or professional organizational membership category, which are used for practicing career counselors with a bachelor's, master's, or doctoral degree. Because these membership categories matched our desired sample population, no additional exclusion criteria were applied. From our initial e-mail invitation, we received about 100 notices of delivery failure, and it is impossible to know how many others were not delivered, so the maximum possible number of individuals who received our e-mail invitation was approximately 2,800, and the response rate was, at minimum, 8.2%. Nevertheless, a recent published industry report on spam (i.e., unsolicited e-mail) indicated that approximately 72% of Internet e-mail traffic is spam (Radicati Group, 2007), which has increased from an estimated 5% in 2001. As a result, spam-filtering software uses a variety of highly sophisticated techniques to identify and eliminate spam. Some spam-filtering software blocks any e-mails from addresses not currently in the recipient's address book, whereas other software blocks e-mails containing Internet links. Because our invitation was sent from a university account with a link to our survey, rather than the association source, it is possible that many of the invitations did not reach the recipients. As a result, we consider the 8.2% response rate a very conservative estimate of the true response rate. In fact, other authors have highlighted the generally lower response rates to electronic surveys and have pointed out that it may be impossible to establish who actually received surveys with many forms of this research, leading to questions about whether true response rates can be calculated (Granello & Wheaton, 2004). We argue, however, that we obtained a generally representative sample of practicing career counselors because the gender, racial/ethnic, and educational composition of the sample seemed essentially consistent with the national organization's demographic statistics as presented in its 2006–2007 membership report.

Procedure

We obtained permission from a large national organization of career counselors to use its e-mail membership list to send an invitation to participate in the study. A cover letter from the organization president indicating support of the research was included in the e-mail message, along with a description of the study and a link to the investigation's Internet site. If recipients elected to access the website, they first viewed a welcome and description of the study, along with a request for informed consent. Upon indicating their consent, they could link to the survey instruments. Participants were also able to enter their name and contact information to enter a drawing for a $20 gift card. That identifying information could not be linked electronically to survey responses, ensuring the anonymity of research information. Counselors who decided to participate in the study completed the demographic sheet first, followed by the California Brief Multicultural Competence Scale (CBMCS; Gamst et al., 2004), the Career Counseling Self-Efficacy Scale (CCSES; O'Brien, Heppner, Flores, & Bikos, 1997), and seven open-ended items. One e-mail reminder was sent to the entire list of potential participants.

Instruments

Demographic sheet. The demographic sheet gathered basic information about gender, race/ethnicity, highest degree earned, years of counseling experience, professional specialty, and primary work setting. Participants also reported on the amount and perceived quality of their multicultural counseling training using a 5-point Likert-type scale. Finally, they indicated how much experience they had counseling clients from specific groups (e.g., women; lesbian, gay, bisexual, and transgender [LGBT] individuals; persons from specific racial/ethnic groups).

CBMCS. The CBMCS was developed on the basis of a factor analysis of items from four existing multicultural competence instruments: the Cross-Cultural Counseling Inventory–Revised (LaFromboise, Coleman, & Hernandez, 1991); the Multicultural Awareness, Knowledge, Skills Survey (D'Andrea, Daniels, & Heck, 1991); the Multicultural Counseling Awareness Scale–Form B (Ponterotto & Alexander, 1996); and the Multicultural Competency Training Survey (Holcomb-McCoy, 2000). Gamst et al. (2004) attempted to identify the best 21 items from the item pool of existing instruments to form an instrument that could be used to evaluate the multicultural competency of mental health practitioners. Items are rated on a 5-point Likert-type scale, where responses range from 1 = *strongly disagree* to 5 = *strongly agree*, and higher scores indicate greater multicultural competence. Internal consistency estimates for the instrument have been high, with a total score alpha coefficient of .89 obtained with 1,244 public mental health care professionals from California (Gamst et al., 2004). Subscale alpha coefficients in this same study were as follows: .78 for Awareness of Cultural Barriers, .80 for Multicultural Knowledge, .75 for Sensitivity to Consumers, and .90 for Non-Ethnic Ability. Scale development research suggests that the first three aforementioned subscales correspond to the traditional tripartite definition of multicultural competence of awareness, knowledge, and skills emphasized in most multicultural competency scales (Gamst et al., 2004). That is, Awareness of Cultural Barriers measures participants' awareness of the obstacles faced by racial/ethnic minorities, Multicultural Knowledge measures participants' knowledge of cultural subgroups, and Sensitivity to Consumers asks participants to rate their skills with various client groups. The fourth factor, Non-Ethnic Ability, adds to existing definitions of multicultural competence by tapping sensitivity to diversity in noncultural dimensions, such as sexuality, disability status, socioeconomic status (SES), and age. For the purposes of the current investigation, the CBMCS author gave permission to modify the instrument to specifically assess multicultural career counseling competence (e.g., assessing knowledge of culture and career development research instead of culture and mental health research). Alpha coefficients in the current investigation were as follows: total score (.85), Awareness of Cultural Barriers (.76), Multicultural Knowledge (.84), Sensitivity to Consumers (.72), and Non-Ethnic Ability (.80).

CCSES. As indicated by its name, the CCSES is a 25-item measure of self-efficacy for career counseling. The instrument yields a total score and four subscale scores. The four subscales are Therapeutic Process and Alliance Skills (TPAS); Vocational Assessment and Interpretation Skills (VAIS); Multicultural Competency Skills (MCS); and Current Trends in the World of Work, Ethics, and Career Research (TWER). Respondents rate their confidence in their ability to perform a variety of career counseling tasks in these domains on a 5-point Likert-type scale ranging from 1 = *not confident* to 5 = *highly confident*. Higher scores are indicative of greater levels of self-efficacy. O'Brien et al. (1997) reported very good internal consistency for the instrument. An initial investigation with 289 graduate students yielded alpha coefficients of .96 for the total score and .93 for the TPAS, .94 for the VAIS, .92 for the MCS, and .76 for the TWER. Further investigation reported in the same article with a sample of 50 graduate students obtained alpha coefficients for the following: total score (.97), TPAS (.93), VAIS (.97), MCS (.94), and TWER (.92; O'Brien et al., 1997). In a test–retest investigation with 33 graduate students, however, the TWER showed a marginal internal consistency reliability of .58 (O'Brien et al., 1997). The lower reliability of the TWER may be due to the small number of items (three) on this subscale. The authors argued that despite the lower reliability, this subscale contributes to career counseling self-efficacy in important ways. That is, this subscale measures counselors' confidence in their ability to integrate current knowledge about the world of work into their counseling. Because such practical work information might be of particular importance to minority clients or low-SES clients who may have more limited work opportunities, we agreed with the authors' position and retained this subscale for the current study. CCSES internal consistency estimates in the current investigation ranged from .65 (TWER) to .94 (total score), with the other subscales falling in between at .87 (TPAS) and .89 (VAIS and MCS). On the basis of our experience with the marginal internal consistency reliability of the TWER, these items should be used with caution.

Open-ended items. Finally, participants responded to seven open-ended items about their multicultural career counseling practices. The items were based on seven career counseling competencies relevant to individual counseling and assessment identified by NCDA (1997). We modified Items 1, 3, 5, 6, 7, and 8 under individual and group counseling skills and Item 1 under individual and group assessment to ask about how professionals would demonstrate these skills in multicultural counseling situations (NCDA, 1997, pp. 3–4). As an example, we asked participants to "Describe how you establish and maintain a productive counseling relationship with clients of different backgrounds." We also inquired about counselors' efforts with clients whose backgrounds were different from their own to identify goals; understand personal characteristics; understand social contextual influences on careers; identify familial, subcultural, and cultural factors important to clients' careers; assess cultural influences on vocational decision making; and consider cultural factors when using formal assessment tools. Participants were asked not only to share information about how they worked with clients from diverse backgrounds but also to provide examples where possible.

Scoring this portion of the survey involved using a coding process to quantify the level of multicultural competence reflected in responses. A numerical code from 0 to 6 was assigned to each participant's set of answers to the seven questions, as long as he or she answered at least four items (n = 179). The response sets were independently coded by the investigators of this study. Half of the response sets were coded by one faculty member (first author) and one graduate student (second author), whereas the other half were coded by another faculty member (third author) and graduate student (fourth author). Discrepancies were resolved via discussion, and one team member (first author) coded all responses, which permitted assessment and discussion of potential dyadic differences in ratings. Furthermore, any responses that were assessed by one dyad as particularly challenging to code were resolved through discussion among the four primary coders. As an additional reliability check, an advanced graduate student (fifth author) reviewed every fifth set of responses. Before beginning the formal process, all four initial coding team members reviewed the criteria and talked about, for example, the types of responses that might fall at different code levels. Team members then separately coded 20 participants' answers and discussed their ratings in an attempt to ensure that everyone would approach the process in a consistent manner.

We developed the coding system by considering Sue et al.'s (1992) definition of multicultural competence. A score of 0 indicated a lack of multicultural awareness, such as stating that one would "listen" or "treat everyone the same." Participants received a 1 or 2 for sharing progressively increasing levels of multicultural awareness (e.g., a code of 1 might be assigned if participants would address cultural issues if the client brought them up; a code of 2 might be assigned if participants inquired about culture routinely or on the basis of what the client presented in session). A 3 or 4 was assigned if the responses demonstrated not only awareness but also multicultural knowledge. A 3 was given when the answers reflected knowledge of a specific cultural group and what that might mean for counseling (e.g., indicating that the participant understood the importance of extended family in Native American cultures and would inquire about family in assessment). A 4 was assigned if responses demonstrated an overall knowledge of principles and practices of multicultural counseling (e.g., discussed components of multicultural competence from the literature). Finally, a 5 or 6 indicated the presence of multicultural awareness, knowledge, and skill, with more sophisticated skills reflected in higher codes (e.g., in the assessment realm, a 5 response could describe checking to ensure that instruments have appropriate norms; a 6 answer could indicate that worldview and the influence of racism are important areas for evaluation). Additional information about the coding system may be obtained from the first author.

Results

Data analysis was guided by attempts to answer the four core research questions. Note that the sample sizes associated with each question and subsequent analyses were slightly different because only a subset (n = 179) of the 230 participants answered four open-ended items. This subset did not differ significantly from the total sample in terms of gender, education, overall scores on the major survey measures (CBMCS and CCSES), amount of multicultural training and experience, or ratings of the quality of multicultural training. To clarify the nature of the sample used in different analyses, however, sample sizes or degrees of freedom are provided in each table.

Research Question 1: Do career counselors believe that they are multiculturally competent in their work with clients? If so, how are multicultural training and experience related both to their self-reported competence and to external ratings of their multicultural counseling behaviors?

To answer this question, we evaluated the amount of multicultural training and experience reported by participants and examined self-reports of multicultural competence from the CBMCS, as well as our external evaluations of the competence reflected in responses to open-ended items about multicultural practices. Correlational analyses were used to explore relationships among these different variables.

The average amount of multicultural training reported by participants can best be described as *some*, with an average of 3.08 (SD = 1.02) on a 5-point Likert-type scale (1 = *none*, 2 = *little*, 3 = *some*, 4 = *frequent*, and 5 = *extensive*). The mean quality rating assigned to that training was 3.34 (SD = 0.97), falling somewhere between *adequate* and *good* on a 5-point Likert-type scale (1 = *none*, 2 = *poor*, 3 = *adequate*, 4 = *good*, and 5 = *excellent*). Beyond formal training, the mean amount of experience indicated by counselors working with members of diverse groups was at least *some* (i.e., mean responses of 3.00 or greater on the aforementioned 5-point Likert-type scale), but experience with LGBT individuals, Asians, Native Americans, and older adults were possible exceptions, with mean scores falling below 3.00 (see Table 1). A Composite Multicultural Counseling Experience score was created to provide a sense of overall multicultural experience by adding the counseling experience ratings provided by participants for each diverse group other than women and men, yielding a range of total scores from 9 to 45. The mean Composite Multicultural Counseling Experience score for the sample was 26.97 (SD = 5.40).

Results from the CBMCS provided the most direct answer to whether counselors perceived themselves as multiculturally competent. Mean total and subscale scores on this instrument were above average (i.e., greater than 3.00) on a 5-point Likert-type scale and indicated that counselors viewed themselves as having particular skill in areas measured

TABLE 1

Mean Self-Reported Ratings of Multicultural Experience, Multicultural Competence, and Career Counseling Self-Efficacy

Variable	*M*	*SD*
Counseling experience rating		
Women	4.48	0.68
Men	4.15	0.91
Lesbian, gay, bisexual, and transgender individuals	2.76	0.86
African Americans	3.22	1.05
Asians	2.96	1.05
Latinos	3.07	1.04
Native Americans	2.04	0.92
Multiracial individuals	3.08	0.93
Individuals earning less than $25,000 per year	3.77	1.09
Persons with disabilities	3.04	0.97
Older adults (older than 55 years)	2.90	0.96
Composite Multicultural Counseling Experience score	26.97	5.40
California Brief Multicultural Competence Scale (CBMCS)		
Total score	3.91	0.47
Sensitivity to Counsumers	4.31	0.58
Awareness of Cultural Barriers	4.24	0.59
Multicultural Knowledge	3.35	0.88
Non-Ethnic Ability	3.84	0.65
Career Counseling Self-Efficacy Scale (CCSES)		
Total score	4.26	0.54
Therapeutic Process and Alliance Skills	4.49	0.49
Vocational Assessment and Interpretation Skills	4.32	0.66
Multicultural Competency Skills	3.91	0.79
Current Trends in the World of Work, Ethics, and Career Research	4.06	0.77

Note. *N* ranged from 210 to 229. Participants' counseling experience ratings are based on a 5-point Likert-type scale, where 1 = *none*, 2 = *little*, 3 = *some*, 4 = *frequent*, and 5 = *extensive*. The Composite Multicultural Counseling Experience score was created by adding the counseling experience ratings for each group other than women and men. The CBMCS scores are based on a 5-point Likert-type scale ranging from 1 = *strongly disagree* to 5 = *strongly agree*, with higher scores indicating more multicultural competence. The CCSES scores are based on a 5-point Likert-type scale ranging from 1 = *not confident* to 5 = *highly confident*, with higher scores indicating greater levels of self-efficacy.

by the Sensitivity to Consumers and Awareness of Cultural Barriers subscales (see Table 1). Participants' multicultural career counseling competence was also estimated by coding counselors' responses to the seven open-ended items. The distribution of codes from 0 to 6, with 0 indicating no evidence of multicultural awareness and 6 reflecting multicultural awareness, knowledge, and skill, was as follows: 0 (24.6%), 1 (20.7%), 2 (11.2%), 3 (8.9%), 4 (13.4%), 5 (14.5%), and 6 (6.7%). The majority of participants (56.5%) were rated at levels that would, at best, indicate advanced awareness of diversity and multicultural counseling, but not specific multicultural knowledge (codes of 3 or 4) or skill (codes of 5 or 6).

The relationship between training and experience and both self-reported (CBMCS scores) and externally rated (coded responses) multicultural counseling competence was explored using bivariate correlations. Small to moderate relationships were discovered between the CBMCS total score and amount of multicultural training, training quality, years of counseling experience, and the Composite Multicultural Counseling Experience score (all at $p < .01$; see Table 2). Externally rated multicultural counseling practices, on the other hand, showed significant, but small to moderate, relationships with amount of multicultural training ($r = .26$, $p < .01$) and the Composite Multicultural Counseling Experience score ($r = .21$, $p < .01$), but not with the quality of training ($r = .10$) or with years of general professional experience ($r = .07$).

Research Question 2: Is there a relationship between self-reports of multicultural competence and external ratings of counselors' descriptions of their actual practices?

To address this question, we examined bivariate correlations between self-reported multicultural competence, as measured by the CBMCS, and external ratings of multicultural counseling practices, as indicated by coded responses to the open-ended items. In this case, statistically significant small to moderate relationships were discovered between coded responses and the CBMCS total score and all of its subscales except Non-Ethnic Ability (see Table 2).

Research Question 3: Do professionals who see themselves as culturally competent also have higher levels of overall career counseling self-efficacy?

With this question, we were essentially examining the relationship between self-reported (CBMCS) or externally rated (coded responses) multicultural competence and career counseling self-efficacy, as measured by the CCSES. Again, correlational analyses were used. CCSES and CBMCS total scores were highly correlated ($r = .67$, $p < .01$), and most of their subscales also showed significant and large relationships with each other (see Table 2). The relationship between career counseling self-efficacy and external ratings of counselors' self-reported multicultural counseling practices was less pronounced, but statistically significant and small to moderate correlations were still discovered between coded responses and CCSES total and subscale scores except for the TWER (see Table 2).

Research Question 4: What are the contributions of training, experience, and overall career counseling self-efficacy to the prediction of self-reported and externally evaluated multicultural competence?

To answer this question, a hierarchical multiple regression analysis was conducted using counselors' self-reports of multicultural competence (CBMCS) and the external ratings of counselors' multicultural career counseling practices (coded responses) as criterion variables in two separate regression models. In the first step of each model, the participants' educational degree, years of counseling experience, and race/ethnicity were entered as a block to control for the effects of these variables. As suggested by Petrocelli (2003), the remaining variables were entered in order of perceived causal priority. Thus, amount and quality of multicultural training were entered as a block in the second step, prior to variables that might be influenced by such training. The Composite Multicultural Counseling Experience score was entered in the third

TABLE 2

Correlations Among Multicultural Training and Experience, Self-Reported and Externally Rated Competence, and Practice

Variable	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1. Coded response	—	.26**	.10	.07	.21**	.31**	.19*	.25**	.29**	.14	.21**	.20**	.17*	.20**	.12
2. Training amount		—	.64**	.15*	.38**	.39**	.22**	.20**	.40**	.22**	.29**	.32**	.12	.30**	.16*
3. Training quality			—	.12	.29**	.35**	.16*	.19**	.29**	.27**	.28**	.29**	.19**	.24**	.16*
4. Years of counseling experience				—	.12	.21**	.06	.06	.15*	.25**	.23**	.20**	.15*	.24**	.18**
5. Composite Multicultural Counseling Experience score					—	.42**	.24**	.11	.36**	.38**	.36**	.32**	.24**	.35**	.31**
CBMCS															
6. Total score						—	.70**	.58**	.74**	.75**	.67**	.60**	.42**	.68**	.53**
7. Sensitivity to Consumers							—	.40**	.46**	.38**	.46**	.41**	.25**	.50**	.34**
8. Awareness of Cultural Barriers								—	.15*	.18**	.16*	.21**	.03	.19**	.03
9. Multicultural Knowledge									—	.35**	.54**	.41**	.33**	.59**	.49**
10. Non-Ethnic Ability										—	.64**	.58**	.46**	.58**	.51**
CCSES															
11. Total score											—	.90**	.78**	.84**	.83**
12. TPAS												—	.62**	.67**	.66**
13. VAIS													—	.43**	.62**
14. MCS														—	.65**
15. TWER															—

Note. N ranged from 163 to 228. Coded response = external ratings of counselors' self-reported multicultural practices; Training amount = participants' ratings of the amount of their multicultural training; Training quality = participants' ratings of the quality of their multicultural training; CBMCS = California Brief Multicultural Competence Scale; CCSES = Career Counseling Self-Efficacy Scale; TPAS = Therapeutic Process and Alliance Skills; VAIS = Vocational Assessment and Interpretation Skills; MCS = Multicultural Competency Skills; TWER = Current Trends in the World of Work, Ethics, and Career Research.

$^{*}p < .05$. $^{**}p < .01$.

step of the regression equation. Finally, career counseling self-efficacy (CCSES total score), which should be influenced by both training and experience, was entered in the fourth and final step of the hierarchical regression analysis.

Table 3 provides a summary of the hierarchical regression analysis for variables predicting self-reported multicultural competence. As an indicator of effect size, R^2 for each step and the total model was examined. The total model accounted for 55% of the variance in CBMCS scores. Counselors' educational degree, years of counseling experience, and race/ethnicity predicted 6% of the variance in CBMCS scores, but only years of counseling experience contributed unique variance. In the next step of the equation, counselors' multicultural training predicted an additional 11% of the variance, but only the amount, not the quality, of training contributed unique variance. The Composite Multicultural Counseling Experience score predicted an additional 10% of the variance, and, in the final step, the CCSES total score contributed another 29%. Thus, years of counseling experience, multicultural training, and multicultural counseling experience had small effect sizes, whereas career counseling self-efficacy had a small to moderate effect size in predicting self-reported multicultural competence in career counseling.

Table 3 also provides a summary of the hierarchical regression analysis for variables predicting the external ratings (coded responses) of career counselors' self-reported multicultural practices. In this case, the total model accounted for only 15% of the variance, a small practical effect, in external ratings. Counselors' educational degree, years of counseling

TABLE 3

Hierarchical Regression Analysis Summary Predicting Self-Reported and Externally Rated Multicultural Competence

	Counselors' Self-Reported Multicultural Competence				External Ratings of Counselors' Multicultural Practices			
Predictor Variable	**Step 1**	**Step 2**	**Step 3**	**Step 4**	**Step 1**	**Step 2**	**Step 3**	**Step 4**
Background factor								
Degree	.12	.07	.13	.04	.12	.07	.10	.08
Experience	.17*	.12	.09	.01	.09	.07	.06	.03
Race/ethnicity	.12	.12	.12*	.09	.11	.10	.11	.11
Multicultural training								
Amount		.21*	.08	.08		.33**	.25*	.25*
Quality		.16	.14	.05		–.12	–.13	–.15
Composite Multicultural Counseling Experience score			.35**	.17**			.17	.12
CCSES total score				.60**				.15
R^2	.06	.17	.27	.55	.04	.11	.13	.15
ΔR^2	.06	.11	.10	.29	.04	.07	.02	.02
F	4.22**	7.84**	11.91**	34.52**	2.07	3.58**	3.67**	3.62**
ΔF	4.22**	12.52**	27.08**	125.00**	2.07	5.64**	3.81	3.04
df	3, 199	2, 197	1, 196	1, 195	3, 154	2, 152	1, 151	1, 150

Note. Degree = educational degree (i.e., highest degree earned); Experience = years of counseling experience; CCSES total score = Career Counseling Self-Efficacy Scale total score.
$^{*}p < .05$. $^{**}p < .01$.

experience, and race/ethnicity as a whole did not contribute significant variance to the external evaluations of multicultural career counseling competence. In fact, the only significant predictor in the model was amount of multicultural training, which, with quality of training, accounted for 7% of the variance. Although the finding was statistically significant, its practical significance is questionable.

Discussion

Multicultural competencies have long been viewed as essential for effective practice in career counseling, with numerous researchers (e.g., Blustein & Ellis, 2000; Flores, Spanierman, & Obasi, 2003; Fouad, 1993) advocating for the provision of culturally sensitive career services. Nevertheless, although increased attention has focused on developing multicultural competence within career counseling, no study has investigated how competent career counselors believe they are in providing culturally sensitive counseling. The purpose of this study was to investigate the self-reported and externally evaluated multicultural competence of a national sample of career counselors.

Our results from bivariate correlations indicated that counselors perceived themselves to have above-average cultural competence, yet their self-reported competence was more strongly related to overall career counseling self-efficacy than to external evaluations of their reported multicultural counseling practices. These analyses also indicated that amount of multicultural training, training quality, years of counseling experience, multicultural counseling experience, and career counseling self-efficacy were all related to self-rated multicultural competence, as measured by the CBMCS. These results seem consistent with existing research on multicultural competence in counseling as a whole, which, for example, has linked overall counseling self-efficacy and multicultural counseling self-efficacy and highlighted the importance of practice and training in the development of cultural competence (e.g., Constantine, 2001; Sheu & Lent, 2007; Toporek & Pope-Davis, 2005). External ratings of counselors' self-reported multicultural counseling practices, on the other hand, were found to be significantly correlated to career counseling self-efficacy, amount of multicultural training, and multicultural counseling experience, but not to the quality of that training or to years of general professional experience. Different variables also served as significant predictors of self-reported versus externally rated competence when examined via hierarchical multiple regression analysis. For CBMCS scores (self-reported competence), career counseling self-efficacy and amount of multicultural training, multicultural counseling experience, and overall counseling experience were all significant, with the CCSES total score easily predicting the largest proportion of the variance. For externally rated multicultural competence (coded responses), on the other hand, only amount of multicultural training functioned as a significant predictor, and its practical significance is in doubt.

These results have important training and practice implications. First, they provide support for the emphasis the field has placed on multicultural training and education. In fact, amount of multicultural training was the only variable that predicted both self-reported and externally rated multicultural competence in the regression analyses in this study. Correlational findings also suggest, however, that such training should include an experiential component. If, as our results indicate, experience with counseling clients from diverse backgrounds is also associated with greater competence, training programs should attempt to ensure that students work with a wide range of clients in their practicums and internships. Such experience may also serve to increase students' counseling self-efficacy, which seems to be related to multicultural competence.

Incorporating an applied or experiential component in multicultural training also seems critical given the discrepancy found between counselors' CBMCS scores and the external evaluations of their self-reported multicultural counseling behaviors, which was one of the study's most surprising and interesting results. It is possible that counselors conclude their training with a sense that they are skilled in providing culturally sensitive services but are not as able to translate that training into effective practice. Although replication of this finding is important, if true, it suggests that going beyond standard classroom instruction, reading, and writing about multicultural counseling is essential. Training programs might consider implementing active, problem-based strategies, such as including role plays in the classroom, having students select assessment tools for mock clients from diverse cultural backgrounds, and asking them to assemble treatment plans for case study clients that involve not only individually focused but also systems-level conceptualizations and interventions. Practicum placements that include opportunities to work with a diverse array of clients also seem to be particularly important, and, of course, careful attention to case assignment would help ensure that students leave their graduate training with substantial experience working with clients from backgrounds different from their own. Finally, these results imply that programs may need to use multiple strategies when assessing students' emerging multicultural competence, such as asking them to describe culturally appropriate career counseling practices and directly observing their work with culturally diverse clients. Such evaluation techniques will help programs to determine whether students can put their training into practice. Overall, programs should carefully consider how they provide and evaluate multicultural training, as well as how best to be accountable for those training procedures.

The results of this investigation also have important implications for practicing career counselors. First, counselors should be aware of the possible discrepancy between their self-assessed cultural competence and their ability to engage in culturally sensitive practice. Even the possibility that such a gap might exist highlights how important it is for professionals to seek consultation and perhaps explore avenues for obtaining an external evaluation of their professional practices with clients from different backgrounds. The findings from this study also emphasize the need for continuing education in the provision of culturally sensitive career counseling. The fact that amount of professional experience was not related to external ratings of multicultural competence was surprising, and it implies that professionals might benefit from continuing education on incorporating culture into the career counseling process. Furthermore, as was the case with graduate-level training, these continuing education opportunities should likely include applied components, such as allowing career counselors to work with case scenarios and to make assessment and treatment decisions about them. It is also important to note that the established link in this study between multicultural counseling experience and self-reported and externally evaluated cultural competence suggests that practitioners will benefit from working with members of diverse groups. Career counselors who do not have the opportunity to work frequently with clients from backgrounds different from their own should, therefore, find it even more important to seek out continuing education opportunities.

Although this research provides some intriguing implications for training and practice, replication is essential. Beyond the need to duplicate this kind of study, some findings are particularly worthy of more in-depth investigation. For example, the discrepancy between self-reported and externally evaluated multicultural competence not only is intriguing but also has more than one potential explanation, including possible measurement issues. Counselors may have struggled on the online survey to accurately describe their counseling practices, the open-ended questions might not have elicited their best responses, and they may not have had the time to fully explain their practices. Future studies might instead involve videotaping sessions, so that multicultural competencies can be directly observed, or having counselors respond to specific clinical vignettes. Those measures of culturally sensitive counseling behaviors could then be compared with self-assessments of competence.

Another result that points to an important area for future research involves self-efficacy. We found that career counseling self-efficacy was related to both self-reported and externally rated multicultural competence. Previous research has demonstrated a relationship between counselor self-efficacy and positive client outcomes, such as increased coping self-efficacy (Heppner, Multon, Gysbers, Ellis, & Zook, 1998). Counselors with higher levels of self-efficacy in general may be able to work more effectively with clients, particularly those from minority backgrounds. Additional research on the role of self-efficacy in multicultural competence is warranted and might lend important insights that could enhance training efforts and improve client services.

In addition to discussing the implications of this research, we should also note some of its potential limitations. First, this study used a web-based self-report methodology, and the low response rate, as well as the usual limitations of self-report, must be considered. More specifically, participants may have been influenced by social desirability, and they may have felt especially uncomfortable disclosing a lack of experience or competence in working with individuals from diverse groups. Researchers have argued that self-report measures of counseling competencies are susceptible to inherent biases because individuals may be less likely to negatively self-report their skills when asked questions related to their competence (Worthington, Mobley, Franks, & Tan, 2000). Participation was also voluntary, and, as such, those who completed the questionnaires may have perceived themselves as more competent than those who chose not to participate. Another limitation is that only 179 of the 230 participants completed the open-ended items that were used to assess externally rated competence. Although more than 75% of the participants completed these items, the group that did complete them may have been different in a dimension not measured from those who chose not to respond. For example, those who completed the open-ended items may have been more eager to discuss and more confident about their practice experiences with diverse clients.

The limitations of the measures themselves must also be considered. The CBMCS is a relatively untested, newer scale. There is also a slight overlap between the CBMCS and the CCSES because the self-efficacy measure includes a Multicultural Competency Skills subscale. The open-ended questions and external coding system from the investigation also have potential limitations. To limit error associated with the coding, we developed the procedure by referring to multicultural guidelines and discussed rating criteria at the outset and at various points throughout the analysis process to minimize subjectivity. Furthermore, several responses were coded by all members of the research team, and we used an additional auditor to safeguard the coding process. As noted earlier, however, it is possible that responses to these questions not only indicated multicultural competence but also reflected participants' ability to articulate their multicultural practices and/or the amount of time they were willing to spend responding to the survey. Furthermore, although counselors' responses were coded by professionals with expertise in vocational psychology, that process was subjective and could have been influenced by the preconceptions of the team.

Despite these possible limitations, this study is among the first to directly examine multicultural competence within career counseling. Although the investigation sheds light on vocational counseling practices and coincides with recent calls for more process research in vocational counseling (Swanson, 1995; Swanson & Gore, 2000), further empirical research is needed to better understand the role of multicultural competence in effective career counseling. As other researchers have suggested (e.g., Heppner & Heppner, 2003), additional investigations of process variables and outcomes of career counseling are also necessary. An important component of this process research is examining perceived multicultural competence and reported culturally sensitive practices.

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