Validation of Multicultural Counseling Competency Scale in Thai Context

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Abstract

This study aimed to validate psychometric properties of the Multicultural Counseling Competency (MCC) Scale in Thai Context. Participants were 401 professional counselors and graduate students in Counseling Psychology and related field. Instruments were the *MCC Scale*, the *Working Alliance Inventory-Short Form (WAI-S)* and the *Social Desirability Scale (SDS)*. the MCC Scale consisted of 47 items and ten components: the awareness of own assumption: belief and attitude the awareness of own assumption: knowledge, the awareness of own assumption: skills the understanding of client's worldview: belief and attitude, the understanding of client's worldview: knowledge, the understanding of client's worldview: skills the developing appropriate interventions: belief and attitude, the developing appropriate interventions: knowledge, the developing appropriate interventions: skills, and the well integration between professional and personal life. Content validity of the Scale was supported by expert panel. The MCC scale was significantly and positively correlated with the WAI-S ($r = .48$) and did not show significantly correlated with SDS ($r = .04$). CFA supported construct of the MCC scale ($\chi^2 = 40.58$; $df = 28$; $p = .059$; $CFI = 1.00$; $GFI = .98$; $AGFI = .95$; $SRMR = .03$; $RMSEA = .04$; $\chi^2/df = 1.45$). And further examined its validity by using the known-group technique (professional counselors with more than three years of experience and fourth-year students in psychology major). The mean scores of the two groups were significantly different ($t = 3.71$, $p < .01$). The internal consistencies of the MCC scale as measured by Cronbach's alphas were.96
Keywords: Multicultural Counseling Competency, Scale Development, Counselor

Introduction

The multicultural concept combines groups of people with diverse cultures, ideas and values about how we would live together as an enormous society. Considering the multicultural structure as proposed by multicultural scholars (e.g. Banks & Banks, 1989), it was found that multicultural groups in Thai society context could be divided into four main categories. One group is people of diverse ethnicity and race, religion, and geography, such as those dwelling in the areas of the border provinces of Thailand and those working in the 14 southern provinces of Thailand, where different cultures, lifestyles, and etiquettes still exist from past culture roots (Dulyakasem, 2008). Another main group is of the people with Exceptionality (people with disability and the gifted). Awareness, knowledge, and understanding about the unique culture of people with disability can scale the wall separating the ordinary from those with disability (Palad et al., 2016). The next main group is LGBT people who have diversity

of gender and sexual orientation, such as gay men and lesbians (Kashy & Kenny, 2000). The last main group is people with diversity of class and socioeconomic status, for example, priests and monks who maintain to a unique lifestyle and use conversational vocabulary and common nouns that differ from those used by ordinary people. Existing literature indicated that the concept of multiculturalism has been increasingly in the spotlight among professional groups in the present Thai society. However, the study of multiculturalism in the field of Counseling Psychology in Thai society is still a new issue.

In the Counseling Psychology area, the multiculturalism issue has been proposed continually since 1990, when the counselor's ethics mentioned multicultural counseling competencies, which were defined as the psychological counselor's attitude, knowledge, understanding, and skills suitable for providing efficient and proper counseling services to multicultural clients (American Counseling Association, 2005). Moreover, Sue et al. (1982), led by Derald Wing Sue, a counseling psychology professor from Columbia University who started the study of multicultural counseling competencies, defined them as a relation between a psychological counseling practitioner and two or more clients with differences based on race and ethnicity, including the components of gender, sexual orientation, social and economic status, and mental and physical ability (Ivey, Fouad, Arredondo, & D'Andrea, 2000). In 1 9 8 2, Sue proposed a model of the multicultural counseling competencies in the Thai society context that covered three components. The first is Beliefs & Attitudes, referring to a psychological counselor's ability to be aware of cultural differences, that is, an individual's values and beliefs, the ability to identify the influences contributing to such individual's values and beliefs, and the ability to self-evaluate the bias one has against various cultures (Sue, Arredondo, & McDavis, 1992) . The second component is Knowledge, which means a psychological counselor's ability to be conscious of cultural matters and sensitive issues that are unique to each culture (Parker, Bingham, & Fukumaya, 1985). The third component is Skills, which means a psychological counselor's ability to make use of appropriate psychological counseling skills that are suitable for clients and would lead to efficiency in counseling processes (Sue et al., 1992). Later, the mentioned main components were developed and became training curriculums that effectively improved psychologists' abilities to work in the context of multiculturalism (Manese, Wu, & Nepomuceno, 2 0 0 1). Furthermore, such main components contributed to a development of a well-known instrument evaluating the multicultural counseling that is still in use today in the West. Hence, this study aimed to develop and validate the multicultural counseling competency scale in the Thai context.

Methods

This paper was a part of the first author's doctoral dissertation. It was approved by the Research Ethics Review Committee (COA No. 187.1/2560). Details of research method are as below.

Participants: 401 counselors and graduate students in counseling psychology program and guidance and counseling program were included in this study. There were 85 participants for initial validate of the scale; 316 participants to further examine its validity and reliability. Finally; 30 fourth-year undergraduates in the Psychology field and 30 counselors with more than 3 years of counseling experiences as a known group were included. All Participants were recruited with a purposive sampling method from a variety of Thai universities which have Counseling Psychology program, Counseling and Guidance program, and university counseling centers nationwide.

Measures: This study utilized a self-administered questionnaire comprising the following three sections:

1. The first part of the questionnaire was designed by the researcher to tap basic demographic information, including gender, age, level of education, etc.

2. The MCC Scale, which was developed by the researcher based on Derald Wing Sue 1982 model of the multicultural counseling competencies and the multicultural qualitative interview in Thai counselor. This 47 items of MCC scale consisted ten components: the awareness of own assumption: belief and attitude (AWAT), the awareness of own assumption: knowledge (AWKN), the awareness of own assumption: skills (AWSK), the understanding of client's worldview: belief and attitude (UNAT), the understanding of client's worldview: knowledge (UNKN), the understanding of client's worldview: skills (UNSK), the developing appropriate interventions: belief and attitude (DEAT), the developing appropriate interventions: knowledge (DEKN), the developing appropriate interventions: skills (DESK), and the well integration between professional and personal life (PPPE). Each item was to be rated from 1 ("*strongly disagree* ") to 5 ("*strongly agree*).

2. The Social Desirability Scale: SDS Form C, developed by Reynolds (1982) and translated into Thai language and revised by Surat, M. (2016), featured 13 items with dichotomous questions asking for a Yes/No response. The total score is 13 with the range between 0-13 (Cronbach's alpha coefficient of the whole scale.87-.88).

3. The Working Alliance Inventory-WAI Short Form. This scale is a self-report instrument developed by Kokotovic and Tracey (1990) and based on the Working Alliance Inventory by Horvath and Greenberg (1986, 1989) , was translated into Thai language and revised by Leangsuksant, T. (2018). This inventory is composed of 12 items. Each item was to be rated from 1 ("*Never* ") to 7 ("*Always*). (Cronbach's alpha coefficient of the whole scale 0.85).

Data Collection: All questionnaires with information of the project and consent form to comply with research ethical standards were administered to participants as part of the convenience sampling. Participants filled out the questionnaire voluntary. The first author was available during data collection to answer questions.

Data analysis: To measure test reliability, the Cronbach's alphas of the scale were calculated. Confirmatory factor analyses were conducted to determine whether the measurement model fit the data well. A Pearson's correlation with the SDS Form C and WAI Short Form were computed to assess concurrent validity.

Results

Item Selection and initial validation.

Content validity by seven expert panelists and internal item quality were the primary criteria that were used to select the items from the original scale (73 items) . Items were selected when their content validity was supported by seven expert panelists. Based on the data collected from 85 experienced counselors and graduate students in counseling psychology and related field,; the items with positive total correlation (CITC) over.3 were selected. As a result, only 47 items were selected. The internal consistencies of the 47-item MCC scale as measured by Cronbach's alphas were.96 (the whole scale) and.67 (AWAT),.82 (AWKN),.59 (AWSK),.72 (UNAT),.87 (UNKN),.72 (UNSK),.86 (DEAT),.83 (DEKN),.88 (DESK),.84 (PPPE) , which indicates that the 10 components had good reliability and that the three subscales had good reliability. Details are shown in Table 1.

Table 1 Mean, Standard Deviation, and CITC of items on 36-item SCS (N=3,362)

Item	M	SD	CITC subscale	CITC total Scale
Component 1: Awareness of own assumption: belief and attitude (AWAT) (α =.67)				
MCC-1	4.41	.58	.41	.53
MCC-2	4.36	.61	.52	.39
MCC-3	4.40	.77	.53	.50
Component 2: the awareness of own assumption: knowledge (AWKN) (α =.82)				
MCC-4	4.52	.63	.46	.59
MCC-5	3.40	.90	.59	.51
MCC-6	3.55	.87	.75	.54
MCC-7	3.67	.84	.70	.54
MCC-8	4.40	.68	.50	.61
Component 3: the awareness of own assumption: skills (AWSK) (α =.59)				
MCC-9	4.24	.71	.43	.53
MCC-10	4.01	.72	.40	.54
MCC-11	3.94	.87	.38	.56
MCC-12	4.41	.68	.55	.58
MCC-13	3.89	.82	.59	.56
Component 4: the understanding of client's worldview: belief and attitude (UNAT) (α =.72)				
MCC-14	4.00	.84	.52	.67
MCC-15	4.28	.92	.39	.43
MCC-16	4.03	.81	.63	.63
MCC-17	4.07	.84	.53	.47
MCC-18	4.66	.54	.43	.50
Component 5: the understanding of client's worldview: knowledge (UNKN) (α =.87)				
MCC-19	4.52	.68	.69	.58
MCC-20	4.33	.78	.65	.60
MCC-21	4.56	.59	.66	.55
MCC-22	4.30	.72	.74	.60
MCC-23	4.28	.79	.63	.54
Component 6: the understanding of client's worldview: skills (UNSK) (α =.72)				
MCC-24	4.33	.74	.61	.62
MCC-25	4.50	.63	.50	.56
MCC-26	4.09	.82	.55	.45
MCC-27	3.76	.79	.37	.59
Component 7: the developing appropriate interventions: belief and attitude (DEAT) (α =.86)				
MCC-28	4.13	.75	.56	.57
MCC-29	4.16	.79	.60	.64
MCC-30	3.39	1.17	.54	.48
MCC-31	4.18	.83	.66	.56
MCC-32	4.20	.82	.65	.53
Component 8: the developing appropriate interventions: knowledge (DEKN) (α =.83)				
MCC-33	4.03	.90	.69	.58
MCC-34	3.98	.86	.66	.53
MCC-35	3.69	.98	.54	.53
MCC-36	3.87	.93	.68	.61
MCC-37	4.38	.74	.54	.61

Table 1 (Con.)

Item	M	SD	CITC subscale	CITC total Scale
Component 9: the developing appropriate interventions: skills (DESK) (α =.88)				
MCC-38	4.41	.76	.74	.59
MCC-39	3.99	.90	.64	.52
MCC-40	4.25	.74	.76	.57
MCC-41	4.12	.83	.75	.56
MCC-42	4.08	.83	.70	.62
Component 10: the well integration between professional and personal life (PPPE) (α =.84)				
MCC-43	4.41	.69	.63	.63
MCC-44	4.40	.72	.74	.59
MCC-45	4.43	.65	.73	.59
MCC-46	4.59	.61	.67	.55
MCC-47	4.47	.73	.64	.61

The 47 items MCC Scale Reliability and Validity Assessment

Reliability Examination. This study examined the validity and reliability of the 47-item MCC in a different sample of 316 professional counselors and graduate students in Counseling Psychology and related field. The findings indicated that the internal consistencies of the scales as measured by Cronbach's alphas were.96 (the whole scale) and.67 (AWAT),.82 (AWKN),.59 (AWSK),.72 (UNAT),.87 (UNKN),.72 (UNSK),.86 (DEAT),.83 (DEKN),.88 (DESK),.84 (PPPE); which indicates that the 10 components had good reliability as shown in Table 1

Construct Validity. Regarding its construct validity, confirmatory factor analysis was employed. Normality assumption was examined by descriptive statistics for normality (by creating a histogram of the scores) It revealed population scores on the 47-item MCC Scale approximate to a normal distribution with no ceiling or floor effects, making the scale suitable for monitoring multicultural counseling competency in population samples and usable to calculate mean scores for the same people at different time periods. Therefore, confirmatory factor analysis was performed. Findings revealed that the 47-item, ten factor model of the MCC scale fit the data very well (χ^2= 40.58; df= 28; p= .059; CFI= 1.00; GFI=.98; AGFI=.95; SRMR=.03; RMSEA=.04; χ^2/df= 1.45). The standardized score for each component is between.62 to.81 with the statistical significance at.001. Every factor score varies with the multicultural counseling competency. It can be concluded from the results of the confirmatory factor analysis that this scale is composed of ten components that are concordant with the theory of multicultural counseling competency (Sue et al., 1992; Sue et al., 1982). The model of the Multicultural Counseling Competency Scale in the Thai context is exhibited in Table 2 and Figure 1.

In addition, construct validity of the 47-item MCC scale was examined by the known-group technique. Participants were 30 fourth-year undergraduates in the Psychology field and 30 counselors with more than 3 years of counseling experiences. The results of *t*-test independent groups analysis indicated that the MCC mean scores of the two groups were significantly different (t = 3.71, p <.01) as shown in Table 3.

Table 2 Correlation coefficients of the 10 components of 47-item MCC scale

Component	1	2	3	4	5	6	7	8	9	10
1. AWAT	-									
2. AWKN	.53**	-								
3. AWSK	.56**	.59**	-							
4. UNAT	.45**	.51**	.69**	-						
5. UNKN	.48**	.49**	.60**	.59**	-					
6. UNSK	.46**	.53**	.58**	.54**	.47**	-				
7. DEAT	.47**	.66**	.56**	.48**	.48**	.68**	-			
8. DEKN	.44**	.38**	.60**	.58**	.60**	.57**	.59**	-		
9. DESK	.48**	.44**	.64**	.64**	.63**	.57**	.52**	.70**	-	
10. PPPE	.52**	.60**	.62**	.60**	.64**	.57**	.57**	.53**	.63**	-
M	4.42	3.92	4.10	4.21	4.40	4.01	3.99	4.17	4.46	4.17
SD	.49	.61	.53	.57	.55	.64	.67	.62	.53	.54

Barlett's Test of Sphericity Aproxx: Chi-square = 1962.96, df = 45
Measure of Adequacy (MSA): Kaiser-Meyer-Olkin Measure (KMO) =.93
**$p <.01$
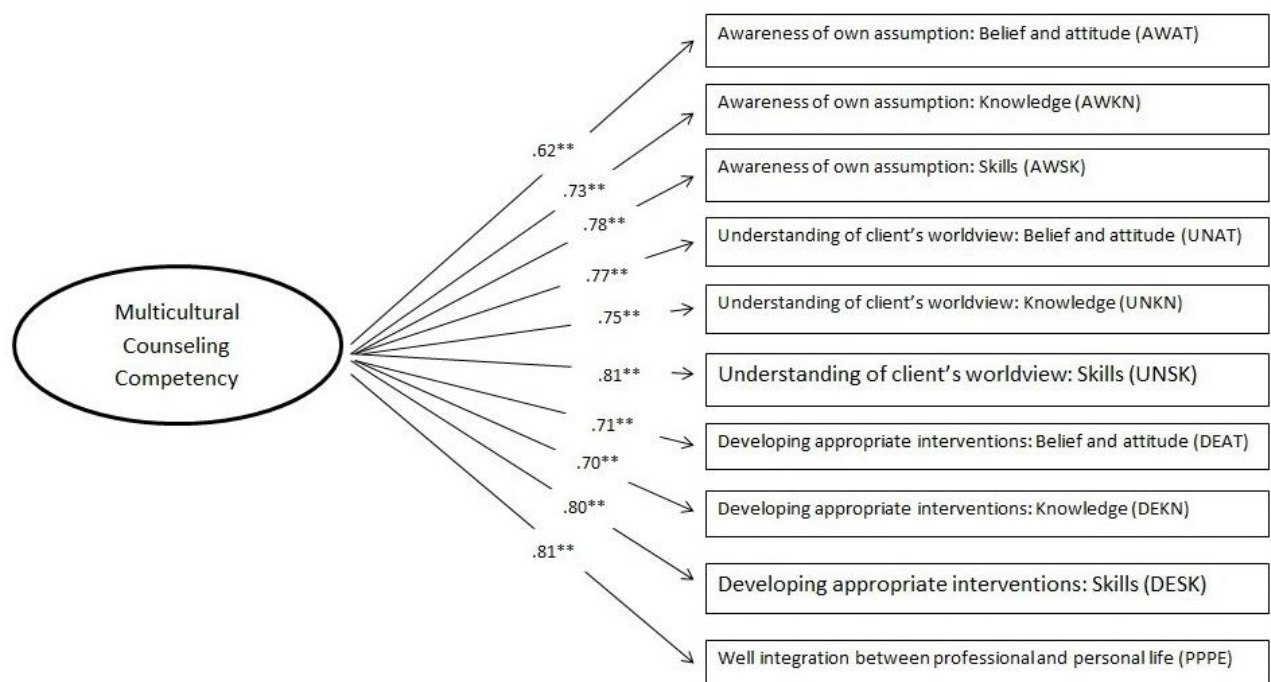
$\chi 2= 40.58$, df= 28, p=.059, CFT = 1.00, GFI=.98, AGFI=.95, SRMR =.03, RMSEA=.04,
$\chi 2$/df= 1.45, **$p<.01$
Figure 1 The model of Multicultural Counseling Competency Scale in Thai Context

Table 3 Mean (Standard Deviation) and *t-test for the two groups*

Group	*M*	*SD*	*n*	*t*	*p* value
Group1 (Fourth-year undergraduates)	178.23	19.00	30	3.71**	<.01
Group 2 (Counselors with more than 3 years of counseling experiences)	196.20	18.50	30		

**p <.01

Criterion Validity: Pearson's correlations with the SDS Form C and WAI Short Form were computed to assess its criterion validity. Findings revealed a moderate positive correlation between a 47-item MCC scale, its subscales and the criterions, as shown in Table 4.

Table 4 Correlation coefficients of the 47-item MCC scale, SDS Form C, and WAI-Short Form

Scale	*M*	*SD*	Min-Max	1	2	3
1. 47-item MCC scale	196.22	21.16	94-235	-	.035	.48**
2. Social Desirability Scale: SDS Form C	7.21	2.34	1-13		-	.21**
3. Working Alliance Inventory-Short Form	69.45	7.75	46-84			-

**p <.01

Discussion

The present study investigated the psychometric properties of the new 47-item, ten component MCC scale to ascertain whether it represented an appropriate assessment of multicultural counseling by a Thai counselor. This was achieved by the initial validation of all the items of the scale in face validity via seven expert panelists, and a good level with the Cronbach's alpha coefficient scores of the whole scale at .96 and of each item of the scale ranging from .67 to .88, which meant that the reliability was at a good level (George & Mallery, 2003). Considering the results from the construct validity examination, which used a correlation analysis between the Multicultural Counseling Competency Scale in the Thai context and the Working Alliance Inventory-Short Form, it was found that the two measures were positively correlated with statistical significance at .01 (r = 48, p <.01, n = 316). This finding supports the previous study conducted by Comas-Diaz (2006), which found that the rapport associated with counselors and counseling providers who used psychological counseling skills and had multicultural competency allowed them to understand other people with cultural differences, and to build trust and confidence in counseling. Consequently, therapeutic rapport and empathy were built. Moreover, the results from the construct validity examination used the correlation analysis between the two measures related to what Vasquez (2007) had studied by using the CCCI-R and the WAI-S. Accordingly, Vazquez found that the counselors and counseling providers who used psychological counseling skills, had WAI-S scores positively correlated to their scores on the CCCI-R, and not correlated to the Social Desirability Scale Form C scores (r = 21, NS). This suggests that, in this scale, the participants did not have the tendency to answer according to social desirability which would cause bias and error of measurement, that is, there was no bias against the scale results at all (Fisher & Katz, 2000).

With regard to the results of the confirmatory factor analysis, the model of the Multicultural Counseling Competency Scale in the Thai context was associated with the empirical data (χ^2= 40.58, df= 28, p=.059, CFT = 1.00, GFI=.98, AGFI=.95, SRMR =.03, RMSEA=.04, χ^2/df= 1.45). Furthermore, the ten observed variables had positive standardized scores and positive factor loadings, where the factor loadings similarly ranged from.62 to.81 each, with statistical significance at.001. Every factor loading varied with the multicultural counseling competency. It can be concluded from the results of the confirmatory factor analysis that that the model of the Multicultural Counseling Competency Scale in the Thai context with ten components associated to the empirical data, possibly because the conceptual scheme of the scale items was developed based on the theory of the multicultural counseling competency (Sue et al., 1992; Sue et al., 1982). Also, the questions in the additional interview about counselor's counseling experience in the Thai context were developed from the theory of multicultural counseling competency proposed by Sue et al. (1982)

Conclusion and Recommendations

The Multicultural Counseling Competency Scale in the Thai context was composed of 47 items in total and appears to possess a good level of validity. However, the limitation in conducting this research was the minimum quantity of approximately 300 people in the samples who were counseling psychologists and officers using psychological counseling skills in the confirmatory factor analysis, which led to not having any opportunity to do an exploratory factor analysis. Therefore, this scale's construct validity should be measured by exploratory factor analysis and confirmatory factor analysis. Moreover, future research might conduct a confirmatory factor analysis comparing the experienced psychological counselors and the inexperienced psychological counselors.

Acknowledgement

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