

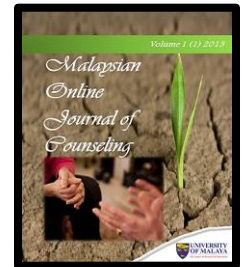
## THE RELATIONSHIP BETWEEN MALAYSIAN COUNSELORS' MULTICULTURAL COUNSELING COMPETENCE AND CLIENT SATISFACTION

Voon Siok Ping & Rafidah Aga Mohd Jaladin (Ph.D)<sup>1</sup>,

### ABSTRACT

The study investigated Malaysian counselors' self-perceived Multicultural Counseling Competence (MCC) and its relationship with clients' satisfaction. A total of 104 participants (52 counselor-client dyads) completed the survey. Of the 52 dyads, 26 were registered and licensed counselors in Malaysia (professional counselors) and another 26 were internship students (paraprofessional counselors). The Multicultural Awareness-Knowledge-Skills-Survey-Counselor Edition-Revised (MAKSS-CE-R) and Client Satisfaction Questionnaire-8 (CSQ-8) were the primary measures utilized. Main findings revealed that there was a significant positive relationship between counselors' MCC and client satisfaction,  $r = .418$ ,  $p = .002$  and there was no significant difference between professional and paraprofessional counselors on MCC and client satisfaction. Future directions in research based on the limitations of current study and implications for counseling were discussed.

*Keywords:* Multicultural Counseling Competence, Professional Counselors, Paraprofessional Counselors, Counseling Dyads, Client Satisfaction.



(1)

Department of  
Educational Psychology  
and Counseling,  
Faculty of Education,  
University of Malaya,  
50603 Kuala Lumpur,  
Malaysia.

Corresponding Author:  
rafidah\_aga@um.edu.my

## INTRODUCTION

Malaysia is a culturally diverse country, especially in term of ethnicity and religion. With about 28.3 million people, Malaysia consist of 67.4% Malays and indigenous groups, 24.6% Chinese, 7.3% Indians and 0.7% others (Malaysian Department of Statistics, 2010). According to the Malaysian Population and Housing Census 2010, Islam was the most widely professed religion in Malaysia with the proportion of 61.3%. As a multi-racial nation, other religions embraced were Buddhism (19.8%), Christianity (9.2%), Hinduism (6.3%), Confucianism, Taoism and other traditional Chinese religions (1.3%) and others (0.4%). The counseling field is one of the domains that has been influenced by the diversity and demographic changes. Nonetheless, despite being a multicultural society, it is argued that the counseling services in Malaysia seem to reflect the low degree of cultural and social integration (See & Ng, 2010) and the Malaysian counseling profession has overlooked the importance of addressing culture and diversity in mental health practices (Aga Mohd Jaladin, 2013).

In providing counseling services to a population practicing diverse aspects and levels of cultural, religious, language and other socio-economic activities, counselors in Malaysia need to be aware of, sensitive to and have an understanding of cultural norms and differences as well as expectation of the populations they deal with. In other word, the cultural diversity of Malaysians has almost made it impossible to ignore the importance of being a multiculturally competent counselor. Pedersen (1997) stated that counselors are increasingly confronted with pressure from culturally different climates that challenge them within the field of counseling. Additionally, the importance of cultural variables in all counseling has been acknowledged (Marsella & Pedersen, 1981). Therefore, it is vital for counselors to be multiculturally competent (Sue, Arredondo, & McDavis, 1992) when providing counseling services to diverse populations. However, there is still a dearth of understanding of and research in multicultural counseling competency (MCC) among counseling professionals in Malaysia.

Sue et al. (1992) proposed a 3 (characteristics) x 3 (dimensions of MCC: (a) beliefs and attitudes, (b) knowledge and (c) skills) matrix model to conceptualize MCC. According to the model, a culturally skilled counselor is one (1) who is actively in the process of becoming aware of his or her own assumptions about human behavior, values, biases, preconceived notions, personal limitations and so forth; (2) who actively attempts to understand the worldviews of his or her culturally different client without negative judgments; and (3) who is in the process of actively developing and

practicing appropriate, relevant and sensitive intervention strategies and skills in working with his or her culturally different clients. Although the model seems popular in the multicultural counseling literature, most researchers tend to conceptualize MCC to include three core components: (1) multicultural awareness, (2) knowledge, and (3) skills (e.g., D'Andrea, Daniels, & Heck, 1991; Khawaja, Gomez, & Turner, 2009).

Recently, a qualitative interview study with 12 professional counselors in Malaysia, highlighted the challenges and barriers faced by Malaysian counselors in dealing with culturally diverse clients (Aga Mohd Jaladin, 2013). The study found five emerging themes to summarize the challenges and barriers encountered by the respondents and these include:

1. Challenges related to counselors' characteristics;
2. Challenges related to clients' characteristics;
3. Challenges related to presenting issues;
4. Challenges related to third-party characteristics; and
5. Challenges related to characteristics of specific contexts.

Of particular importance to the present research is the most reported category of counselors' perceived incompetence in multicultural counseling practice (Aga Mohd Jaladin, 2013). However, in 2011, Aga Mohd Jaladin conducted a nationwide survey and a semi-structured interview on 508 registered practicing counselors in Malaysia. Results from surveys revealed that counselors, as a group, perceived themselves to be multiculturally competent ( $M = 3.55$ ,  $SD = .34$ ). This conflicting finding highlights the need to further explore the perceived MCC of Malaysian counselors, perhaps by using a slightly different approach. After all, the MCCs have been conferred as a necessary and helpful ingredient for practitioners to successfully working with culturally and linguistically diverse populations (Aga Mohd Jaladin, 2013; See & Ng, 2010; Sue et al., 1992). However, a basic question remains unanswered: Do counselors who possess these competencies evidence improved counseling outcomes with clients across culture?

Indeed, clients are the consumers of therapy. One of the ways for counselors to identify the efficacy of the services they provide is through client evaluations. Particularly, client satisfaction has been identified as a primary outcome measure for evaluating mental health services. Furthermore, the evaluation of services is often considered to be incomplete and biases toward health care providers'

own perspectives when clients' reports of satisfaction regarding therapeutic services are not considered (Gaston & Sabourin, 1992; Larsen et al., 1979; Paulson et al., 1999, as cited in Constantine, 2002). Thus, measuring client satisfaction would be an effective way to corroborate the accuracy of counselors' perceived MCCs. In multicultural literature, there is a dearth of multicultural studies examining the client satisfaction within a cross-cultural counseling dyad. The lack of conclusive research findings regarding the usefulness of counselors' MCC also warrants further research.

The multicultural counseling competencies represent one evolutionary step in the movement towards equal treatment and greater inclusion of minorities in the mainstream society. Although those currently being trained as counselors are more likely to have experienced significant multicultural educational experiences and training, they are lacking information about their level of multicultural knowledge, awareness, and skills and the effects of multicultural training (Pope-Davis, Reynolds, Dings & Ottavi, 1994). Counselor trainees, who lack actual life and training experiences with diverse individuals outside of their mainstream social encounters, may experience uneasiness and discomfort in multicultural counseling situations (Kitchens-Stephens, 2005). On the other hand, professional counselors may be expected to experience less intellectual and emotional discomfort when engaged in cross-cultural counseling. It is then valid to ask whether professional counselors who have completed the graduate level counseling course perceive themselves as being more multiculturally competent than those who have not completed the course. Is there any significant difference between professional and paraprofessional counselors in serving culturally different clients? Researchers who actually assess the current level of multicultural competencies among counselor trainees are vital to the edification of the next generation of counselors so that they are multiculturally competent. This study represents one attempt to measure the progress of multicultural competence in the counseling field by comparing professional and paraprofessional counselors.

Fuertes and Brobst (2002) conducted an exploratory study investigating client satisfaction with counseling. They found that clients' ratings of their counselors' multicultural competence explained a significant amount of the variance in client satisfaction beyond clients' ratings of their counselors' expertness, empathy, trustworthiness and attractiveness. The study was clearly significant in attempting to connect process and outcome variables as they associate to the evaluation of therapists' general and multicultural counseling competence.

Another study of therapy dyads on therapist multicultural competency (TMC) was carried out by Fuertes and colleagues (2006). The study illustrated that significant positive relationships were evidence between client ratings of TMC and therapist empathy, ratings of TMC and of the working alliance for both client and therapist, clients' combined ratings of therapist expertness, attractiveness and trustworthiness and therapists' ratings of their TMC and ratings of TMC and satisfaction, for both clients and therapists. Would similar findings emerge in a study conducted in Malaysia, using Malaysian samples to constitute counselor-client dyads?

The purpose of the study was to investigate the relationship between Malaysian counselors' self-reported MCCs and client satisfaction by using a dyad approach. This study was designed to answer the following research questions:

1. What is the Malaysian counselors' self-reported MCC as measured by the Multicultural Awareness-Knowledge-Skills Survey-Counselor Edition-Revised (MAKSS-CE-R: Kim, Cartwright, Asay & D'Andrea, 2003)?
2. What is the clients' satisfaction regarding counseling services they received as measured by Client-Satisfaction Questionnaire-8 (CSQ-8: Attkisson & Larsen, 2006, 2011)?
3. Is there a significant relationship between counselors' self-reported MCC and client satisfaction?
4. Is there any significant differences between professional counselors and paraprofessional counselors in term of
  - a) Self-reported MCC?
  - b) Client Satisfaction?

## **METHODOLOGY**

### *Design*

A quantitative correlational study was used to investigate the degree to which counselors' MCC is related to client satisfaction. Two scores, i.e. MAKSS-CE-R scores and CSQ-8 scores, were collected from the counselor-client participants (counseling dyads). The data were collected at one time from a single group of participants.

### *Participants*

A total of 104 participants (52 counselor-client dyads) completed the survey. The 52 counseling dyads were recruited for the present study by using purposive sampling. The 52 counselors consisted of 26 professional counselors and 26 paraprofessional counselors. Only registered and licensed counselors in Malaysia were recruited for professional counselors whereas paraprofessional counselors involved currently enrolled counseling internship students at their respective internship sites. For client participants, only those who over the age of 18 and had at least 3 counseling sessions with the counselor were included. The third session was selected as a point for data collection because at this point in counseling, enough time had passed for the clients to be able to make valid assessments of their counselor and the counseling session. Also, the third session seemed early enough in counseling to provide with the ratings from clients who might otherwise discontinue their counseling session (Fuertes et al., 2006).

### *Measures*

Two measures were used in the study. These are:

1. MAKSS-CE-R (Kim et al., 2003).

The MAKSS-CE-R is designed to provide a measure of an individual's level of MCC based on Sue et al.'s (1992) model of cross-cultural counseling competence. The MAKSS-CE-R is divided into two sections: demographic items and 33-item on MCC. The MAKSS-CE-R consists of three subscales: Awareness (10 items), Knowledge (13 items), and Skills (10 items). Three different 4 point Likert scales are used to measure the responses on the MAKSS-CE-R (Awareness subscale, 1= very limited, 2 = limited, 3 = fairly aware, 4 = very aware; Knowledge subscale, 1 = very limited, 2 = limited, 3 = good, 4 = very good; Skills subscale, 1 = strongly agree, 2 = disagree, 3 = agree, 4 = strongly agree),

with higher score representing greater competence. The MAKSS-CE-R provides a “total multicultural counseling competence” score as well as awareness, knowledge and skills subscale score. The MAKSS-CE-R scores can be divided into four quartiles (1) Poor, (2) Fair, (3) Good and (4) Excellent self-reported competence. Table 1 showed the interpretation for the MAKSS-CE-R total score and each of the MAKSS-CE-R subscales (Kim et al., 2003).

Kim et al. (2003) have found that the MAKSS-CE-R to be a reliable and valid measure of multicultural competence. The MAKSS-CE-R reported coefficient alphas of .80, .87, .85, in term of the reliability, for the scores across two separate samples on the Awareness, Knowledge, Skills subscales respectively and .81 for the entire 33-item scale (Kim et al., 2003). It is the shortest (33 questions) self-report MCC instrument and easily administered.

Table 1  
MAKSS-CE-R Interpretation

|                      | Self-reported MCC Level |           |           |           |
|----------------------|-------------------------|-----------|-----------|-----------|
|                      | Poor                    | Fair      | Good      | Excellent |
| MAKSS-CE-R Awareness | < 32                    | 32 – 34   | 35 – 37   | 38 – 40   |
| MAKSS-CE-R Knowledge | < 44                    | 44 – 46   | 47 – 49   | 50 – 52   |
| MAKSS-CE-R Skills    | < 32                    | 32 – 34   | 35 – 37   | 38 – 40   |
| MAKSS-CE-R Total     | < 120                   | 120 – 123 | 124 – 127 | 128 – 132 |

The MAKSS-CE-R has gone through revision, thus, it has addressed previous limitations in the original measure. The availability of a psychometrically improved and shorter version of the MAKSS total and subscales is useful to researchers studying multicultural counseling competence (Kim et al., 2003). In the current study, the Cronbach alpha coefficient was .88. This is consistent with reliabilities reported in previous studies. Positing the cultural context of Malaysia and the complexion of the Malaysian society, the MAKSS-CE-R was slightly modified for the scope of this study. The word of Item No. 8, “In counseling, clients from different ethnic/cultural backgrounds should be given the same treatment that White mainstream clients receive” was changed into “In counseling, clients from different ethnic/cultural backgrounds should be given the same treatment that Bumiputra mainstream clients receive.”

For the demographic section, a few items such as religious/spirituality affiliation, language, marital status, sexual orientation, status of disability were added. Besides, counselor's name, registration number and years of practicing counseling were included to ascertain that participants are registered and licensed counselors and are actually involving in counseling. Permission for use of the MAKSS-CE-R was granted.

## 2. CSQ-8 (Attkisson & Larsen, 2006, 2011).

The CSQ-8 is a self-administered questionnaire which takes only 3-8 minutes. It is about self-report statement of satisfaction with health and human services (Attkisson, 2012). It comprises 8 items scored on a 4-point Likert scale with higher score indicating higher satisfaction. The rating scale uses four anchors of varying types to evaluate the dimensions of client satisfaction. For instance, "How satisfied are you with the amount of help you have received?" the response options are "1 = Quite dissatisfied, 2 = Indifferent or mildly dissatisfied, 3 = Mostly satisfied, 4 = Very satisfied", and "Have the services you received helped you to deal more effectively with your problem?" which has the responses "4 = Yes, they helped a great deal, 3 = Yes, they helped somewhat, 2 = No, they didn't help, 1 = No, they seemed to make things worse." Scores for each item range from 1 to 4, for overall score, sum item responses, range from 8-32, higher score indicates higher satisfaction. The CSQ-8 has no subscales and reports a single score measuring a single dimension of overall satisfaction. In various studies, the internal consistency of the CSQ-8, as measured by coefficient alpha, ranged from .83 to .93, with values of .86 and .87 in two of the largest samples (Attkisson, 2012). The CSQ-8 is employed due to the major strengths of this instrument which include its utility as a standard measure, excellent reliability and internal consistency, acceptability to clients and services providers (Attkisson & Greenfield, 1996, 2004; Attkisson & Pascoe, 1983; Attkisson & Zwick, 1982; Greenfield, 1983; Larsen et al, 1979; Nguyen et al., 1983, as cited in Attkisson, 2012). The CSQ-8 scale is available in various versions and languages (Attkission, 2012). Permission to use the CSQ-8 was granted.

### *Procedures*

Web-based survey (i.e. Google Docs) was utilized as the major source of data collection. According to Heppner, Kivlighan and Wampold (1999), there are a number of advantages to use web-based



survey as a means of data collection. First and foremost, mail surveys are relatively inexpensive and additional money can be saved through the use of web-based surveys that avoid postal fees. Additionally, web-based research gives the researcher the opportunity to collect data on his or her own without the need for additional staff. Moreover, the dissemination of surveys via the web can reach farther than surveys that use face to face approach. Furthermore, Granello and Wheaton (2004) highlighted some advantages of using online data collection. First, data entry is facilitated and it lowers the chance of researcher error in keying in responses. Likewise, online data collection tools, like the one utilized here (Google Docs), allow data to be transferred directly into statistical analysis packages (e.g. Statistical Package for the Social Science, version 17.0; SPSS 17). Second, there is ever more societal acceptance of computer use for data collection, especially with college educated individuals (Granello & Wheaton, 2004). In sum, the web-based survey was suitable for the current research for the reason that it is an easier and convenient way to collect data from geographically dispersed counselors in Malaysia. Besides, it allows participants to have ample time to answer questions. Web-based design is also appropriate for this study's use of university intern students since every one of them has institute email account and they tend to have more familiarity with computers.

To assist in the dissemination of questionnaires, a listing of the registered and licensed counselors throughout Malaysia was obtained from the Malaysia Board of Counselors while a listing of currently enrolled counseling program internship students was obtained from institutions' counseling program director. The registered and licensed counselors and internship counselors-in-training were electronically mailed an email containing (a) a cover letter explaining the study and (b) two links to the questionnaires to be accessed via Google Docs. Once the counselor-participants received the cover letter with the links to the survey, they accessed the consent information and chose to participate or not. Those who agreed to participate were requested to access to the link of the survey (for counselor) and invited one of their clients who had at least 3 sessions with them to complete another set of questionnaire by accessing to another link provided (for client).

There were 2700 registered and licensed counselors participants provided by the Malaysia Board of Counselors. However, over hundred emails were undeliverable leaving approximately 2000 participants who were potential participants in the study. The low response rate of the study was due to the time constraint in completing this research. The data collection period only took two and a half months which was set from the mid of January 2013 to March 2013. In addition, it was hard

to invite clients to be involved in the study. Clients seemed reluctant to voluntarily take part in the research, which asked them to provide information about themselves as well as their perception toward their counselors' services. Some counselors also chose not to participate because they said they wanted to protect their clients.

## RESULTS

### *Demographic*

The 52 counselors-participants comprised 26 (50%) professional counselors and 26 (50%) paraprofessional counselors. They were 11 (21.2%) males and 41 (78.8%) females. The age range for the sample was 21 to 56 years, with the mean age of 28.56 (SD = 7.94). They came from various states but mostly from Selangor (n=10, 19.2%), Kuala Lumpur (n=8, 15.4%), Pahang (n=5, 9.6%), and Kelantan (n=5, 9.6%). The ethnicity compositions were 35 (67.3%) Malays, 12 (23.1%) Chinese, 4 (7.7%) Indians and 1 (1.9%) Bumiputra. In term of their religion, participants reported that 37 (71.2 %) were Muslims, 6 (11.5) were Buddhists, 4 (7.7) were Christians, 2 (3.8) were Hindus, 2 (3.8) with other religion and 1 (1.9) has no religion. They were mostly single (71.2%), heterosexual and abled counselors who spoke Malay (n=35, 67.3%), followed by Mandarin (n=10, 19.2%), English (n=3, 5.8%) and other language (n=4, 7.7%). In term of their educational level, 39 (75%) held Bachelor's degree and 13 (25%) held a master's degree. Their practicing experience in counseling field was ranging from 1 year to 29 years, with the mean year of 4.15 (SD =5.16).

For the 52 client-participants, 12 (23.1%) were males and 40 (76.9%) were females. Their age range was ranging from 18 to 39 years old with the mean age of 23.4 (SD = 5.29). Overall, 31 (59.6%) participants were Malays, 15 (28.8%) Chinese, 1 (1.9%) Indian, 4 (7.7%) Bumiputras, and 1 from other races. They were mostly single (92.3%), Muslims (61.5%) and their household income status were mostly below RM3500 (86.5%). Their reported sexual orientation was heterosexual and with no disability condition. Most of the participants spoke Malay (n=35, 67.3%), followed by Mandarin (n=13, 25%), English (n=2, 3.8%) and other language (n=2, 3.8%). Of the sample, more than 23 (44.2%) completed previous education up till Pre-University or Diploma level. Table 2 provides a summary of the participants' demographic background.

Table 2  
Summary of Demographic Information for Participants

| Demographic      | <u>Counselor-Participant</u> |           | <u>Client-Participant</u> |           |
|------------------|------------------------------|-----------|---------------------------|-----------|
|                  | M (SD)                       | N (%)     | M (SD)                    | N (%)     |
| Gender           |                              |           |                           |           |
| Male             |                              | 11 (21.2) |                           | 12 (23.1) |
| Female           |                              | 41 (78.8) |                           | 40 (76.9) |
| Age              | 28.56 (7.94)                 |           | 23.42 (5.29)              |           |
| <21              |                              | 0 (0.0)   |                           | 25 (48.0) |
| 21-30            |                              | 40 (77.0) |                           | 23 (44.0) |
| 31-40            |                              | 8 (15.2)  |                           | 4 (7.6)   |
| 41-50            |                              | 2 (3.8)   |                           | 0 (0.0)   |
| >50              |                              | 2 (3.8)   |                           | 0 (0.0)   |
| State (top four) |                              |           |                           | No info.  |
| Selangor         |                              | 10 (19.2) |                           |           |
| Kuala Lumpur     |                              | 8 (15.4)  |                           |           |
| Kelantan         |                              | 5 (9.6)   |                           |           |
| Pahang           |                              | 5 (9.6)   |                           |           |
| Others*          |                              |           |                           |           |
| Ethnicity        |                              |           |                           |           |
| Malay            |                              | 35 (67.3) |                           | 31(59.6)  |
| Chinese          |                              | 12 (23.1) |                           | 15 (28.8) |
| Indian           |                              | 4 (7.7)   |                           | 1 (1.9)   |
| Bumiputera       |                              | 1 (1.9)   |                           | 4 (7.7)   |
| Other            |                              | 0 (0.0)   |                           | 1 (1.9)   |

| Demographic               | <u>Counselor-Participant</u> |            | <u>Client-Participant</u> |            |
|---------------------------|------------------------------|------------|---------------------------|------------|
|                           | M (SD)                       | N (%)      | M (SD)                    | N (%)      |
| <b>Religion</b>           |                              |            |                           |            |
| Islam                     |                              | 37 (71.2)  |                           | 32 (61.5)  |
| Buddhist                  |                              | 6 (11.5)   |                           | 15 (28.8)  |
| Christianity              |                              | 4 (7.7)    |                           | 3(5.8)     |
| Hinduism                  |                              | 2 (3.8)    |                           | 1 (1.9)    |
| Other                     |                              | 2 (3.8)    |                           | 0 (0.0)    |
| No religion               |                              | 1 (1.9)    |                           | 1 (1.9)    |
| <b>Marital status</b>     |                              |            |                           |            |
| Single                    |                              | 37 (71.2)  |                           | 48 (92.3)  |
| Married                   |                              | 14 (26.9)  |                           | 2 (3.8)    |
| Divorced                  |                              | 1 (1.9)    |                           | 2 (3.8)    |
| <b>Sexual orientation</b> |                              |            |                           |            |
| Heterosexual              |                              | 52 (100.0) |                           | 52 (100.0) |
| <b>Disability status</b>  |                              |            |                           |            |
| No                        |                              | 52 (100.0) |                           | 52 (100.0) |
| <b>Language</b>           |                              |            |                           |            |
| Malay                     |                              | 35 (67.3)  |                           | 35 (67.3)  |
| English                   |                              | 3 (5.8)    |                           | 2 (3.8)    |
| Mandarin                  |                              | 10 (19.2)  |                           | 13 (25.0)  |
| Other                     |                              | 4 (7.7)    |                           | 2 (3.8)    |
| <b>Educational level</b>  |                              |            |                           |            |
| Primary School            |                              | 0          |                           | 1 (1.9)    |
| Secondary School          |                              | 0          |                           | 12 (23.1)  |
| Pre-University/Diploma    |                              | 0          |                           | 23 (44.2)  |
| Bachelor's degree         |                              | 39 (75.0)  |                           | 14 (26.9)  |
| Master's degree           |                              | 13 (25.0)  |                           | 2 (3.8)    |

| Demographic       | <u>Counselor-Participant</u> |           | <u>Client-Participant</u> |           |
|-------------------|------------------------------|-----------|---------------------------|-----------|
|                   | M (SD)                       | N (%)     | M (SD)                    | N (%)     |
| Practicing year   | 4.15 (5.16)                  |           | No info.                  | No info.  |
| 1-5               |                              | 42 (80.7) |                           |           |
| 6-10              |                              | 2 (3.8)   |                           |           |
| 11-15             |                              | 7 (13.4)  |                           |           |
| 16-20             |                              | 0 (0.0)   |                           |           |
| >20               |                              | 1 (1.9)   |                           |           |
| Household Income  |                              | No info.  |                           |           |
| Below RM1500      |                              |           |                           | 26 (50.0) |
| RM1500-RM3500     |                              |           |                           | 19 (36.5) |
| RM3500-RM5500     |                              |           |                           | 3 (5.8)   |
| RM5500-RM7500     |                              |           |                           | 3 (5.8)   |
| RM 7500 and above |                              |           |                           | 1 (1.9)   |

\* Other states include Kedah (7.7), Perak (7.7), Penang (7.7), Terengganu (5.8), Negeri Sembilan (5.8), Johor (5.8), and Sarawak (5.8).

### *Malaysian Counselors' Self-reported MCC*

To answer Research Question 1, descriptive statistics were computed on the MAKSS-CE-R total and the three subscales scores. The MAKSS-CE-R was scored on a 4-point Likert scale, with higher score representing greater multicultural competence. Table 3 presents information on the descriptive statistics from MAKSS-CE-R and CSQ-8 scores. As shown in Table 3, as a group, the counselor-participants in this study reported poor overall multicultural counseling competence as well as on the three aspects of MCC evaluated by the MAKSS-CE-R subscale (Awareness, Knowledge and Skills). The mean score for Awareness, Knowledge and Skills subscales were 20.19 (SD = 2.72), 35.81 (SD = 7.11) and 26.19 (SD = 5.09), respectively, with a mean of 82.23 (SD = 10.78) for total MCC.

Table 3  
Mean Scores of Counselors' MCC and Client Satisfaction

| Scales/Sub-Scales        | M     | SD    |
|--------------------------|-------|-------|
| MAKSS-CE-R Scales (n=52) | 82.23 | 10.78 |
| MAKSS-CE-R Awareness     | 20.19 | 2.72  |
| MAKSS-CE-R Knowledge     | 35.81 | 7.11  |
| MAKSS-CE-R Skills        | 26.19 | 5.09  |
| CSQ-8 (n-52)             | 28.08 | 3.23  |

### *Clients' Satisfaction*

In term of Research Question 2, descriptive statistics were computed on the CSQ-8 scores. Results (Table 3) showed that, as a group, client-participants reported high satisfaction regarding the counseling services they received, with a mean score of 28.08 (SD = 3.23).

### *Perceived MCC and Client Satisfaction*

To answer Research Question 3, the relationship between counselors' self-reported MCC and client satisfaction was investigated using Pearson product-moment correlation coefficient. The mean scores for counselors' MCC and client satisfaction were 82.23 (SD = 10.78) and 28.08 (SD = 3.23), respectively (refer to Table 4). The analysis revealed a statistically significant positive correlation between counselors' self-reported MCC and client satisfaction,  $r = .418$ ,  $p = .002$ , with high counselors' multicultural counseling competence associated with high client satisfaction. Figure 1 shows a linear positive correlation between the two scores. The correlation coefficient ( $r = .418$ ) indicated that there was a moderate correlation between the two variables.

Table 4  
Mean Scores of Counselors' MCC and Client Satisfaction

|                     | N  | M     | SD    | Pearson $r$ |
|---------------------|----|-------|-------|-------------|
| Counselors' MCC     | 52 | 82.23 | 10.78 | .418**      |
| Client Satisfaction | 52 | 28.08 | 3.23  |             |

*Note.* \* $p < .05$ , \*\* $p < .01$

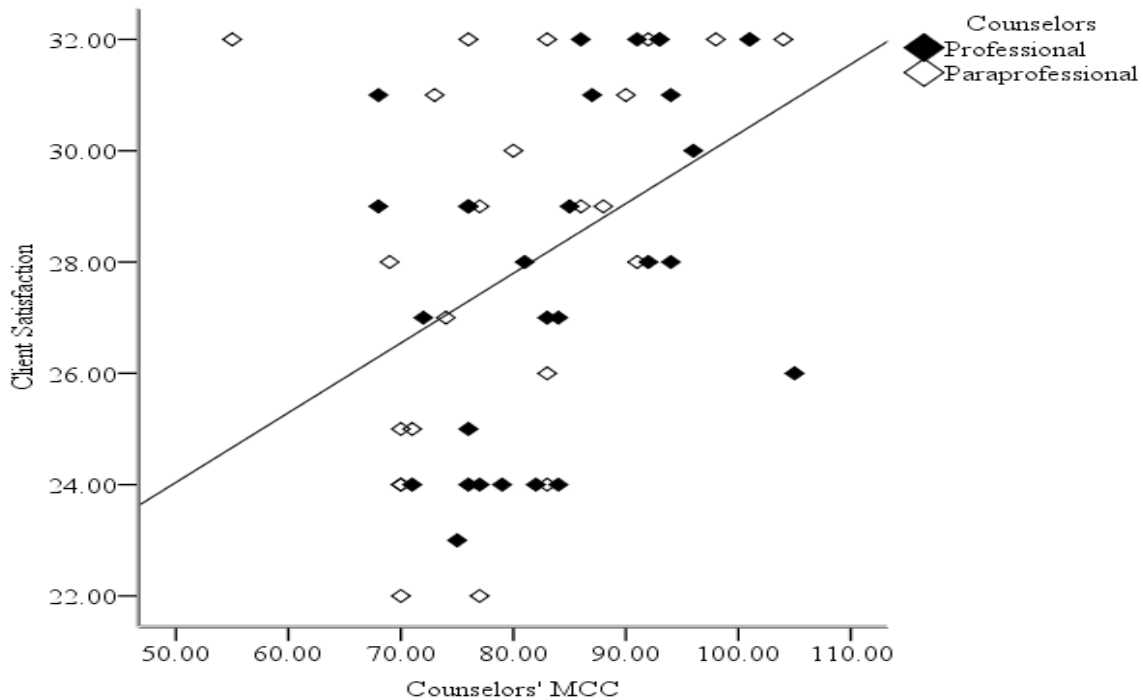


Figure 1. Correlation between counselors' MCC and client satisfaction.

### *Professional vs. Paraprofessional Counselors*

To address Research Question 4(a) and (b), two independent-samples t-tests were conducted to compare the MAKSS-CE-R and CSQ-8 scores for professional and paraprofessional counselors. Table 5 presents results of the compare means tests for these two sets of scores: the MAKSS-CE-R and CSQ-8.

Table 5  
T-test Comparisons of MCC and Client Satisfaction between Professional and Paraprofessional Counselors

| Counselor        | N  | M     | SD    | t-value | P    |
|------------------|----|-------|-------|---------|------|
| MAKSS-CE-R       |    |       |       |         |      |
| Professional     | 26 | 83.69 | 9.93  | .977    | .333 |
| Paraprofessional | 26 | 80.77 | 11.57 |         |      |
| CSQ-8            |    |       |       |         |      |
| Professional     | 26 | 27.73 | 3.05  | -.770   | .445 |
| Paraprofessional | 26 | 28.42 | 3.42  |         |      |

Results revealed no significant difference in MCC between professional ( $M = 83.69$ ,  $SD = 9.93$ ) and paraprofessional counselors ( $M = 80.77$ ,  $SD = 11.57$ );  $t(50) = .977$ ,  $p > .05$  (refer to Table 5). There was also no significant difference in client satisfaction between professional ( $M = 27.73$ ,  $SD = 3.05$ ) and paraprofessional counselors ( $M = 28.42$ ,  $SD = 3.42$ );  $t(50) = -.770$ ,  $p > .05$  (refer to Table 5).

## DISCUSSION

### *Malaysian Counselors' Self-reported MCC*

Surprisingly, the results of the current study revealed that counselors reported poor overall multicultural counseling competence. Nonetheless, counselors reported themselves being most competent in multicultural Knowledge, followed by Skills and Awareness subscales.

The current findings are inconsistent with the nationwide study by Aga Mohd Jaladin (2011) on 508 registered practicing counselors in Malaysia which demonstrated that counselors perceived themselves to be multiculturally competent. The results of the study also contradicts Aga Mohd Jaladin's findings (2011) who found that counselors perceived themselves to be most competent on the Multicultural Knowledge, followed by Multicultural Understanding, Multicultural Skills and Multicultural Awareness subscales (Aga Mohd Jaladin, 2011). [Note: The findings of this investigation are also inconsistent with most of the past studies (Granello & Wheaton, 1998; Holcomb-McCoy & Myers, 1999; Holcomb-McCoy, 2001, Holcomb-McCoy, 2005; Pope-Davis and Ottavi, 1994).] The results suggested that both professional counselors and paraprofessional counselors in Malaysia showed that there are deficiencies in the awareness, knowledge and skills that made them not fully prepared to deal with culturally diverse clients.

The small sample size of the current study may appear to be one of the explanations of the inconsistencies. In the nationwide study by Aga Mohd Jaladin (2011), a total of 508 registered practicing counselors in Malaysia were involved. However, the current study involved only 52 counselors. It is probably that the small sample size that had brought an effect on the findings. Moreover, contradicted to the Aga Mohd Jaladin's Malaysian study (2011) which used a particularly designed questionnaire, the instrument utilized in the present study was adapted from past research. Although the MAKSS-CE-R showed good reliability coefficient for the current study, it was initially developed based on the Western country. Thus, the values and beliefs, presenting style and the English proficiency can also be the issues. Another concern is that the standards and requirements for their MCC in the MAKSS-CE-R may also be stricter and higher due to the



diversification of America. Therefore, the MAKSS-CE-R may not accurately measure the Malaysian counselors' MCC and thus contributed to the poor self-reported MCC of Malaysian counselors.

### *Clients' Satisfaction*

Even though counselors reported poor overall multicultural counseling competence, the findings of the current study revealed that clients reported high overall satisfaction with the counseling services they received.

One explanation may be that clients have the luxury to choose their counselors to work with, whether it is same-sex, race or religion and thus they feel more satisfied with the counseling services they received. Also, it is possible that client view their counselors as more or less competent because of unique client-based variables such as biases (Constantine, 2001, Paulson et al., 1999, as cited in Constantine, 2002) which in turn increased their satisfaction with counseling. Additionally, it is probable that people tend to seek counseling services for self-development and they feel satisfied about it. It is especially true in nowadays' world where most people's psychological need is not met.

### *Perceived MCC and Client Satisfaction*

Accordingly, correlational analysis demonstrated that there was a significant moderate positive relationship between counselors' multicultural counseling competence and client satisfaction.

The results of the correlational analysis indicated that the counselors' multicultural counseling competence are somewhat related to client satisfaction. Taken together, the results suggested that although the counselors' multicultural counseling competence was relatively poor, however, it has an influence on client satisfaction. Client satisfaction increased as their counselors' multicultural counseling competence increased. Generally, the result obtained in this study is consistent with prior research findings which examined the role of multicultural competence in client satisfaction (Fuertes & Brobst, 2002; Fuertes et al., 2006).

However, the results need to be interpreted with cautions. It is good to remember that clients come with problems, feeling vulnerable and may in pain or discomfort; counselors who are willing to work with them will help the client feel at ease by attending to them and listening to them. The climate of respect and acceptance make them feel comfortable. Could these clients have been so

grateful to have someone being there for them that this contributed to their overall satisfaction, rather than the multicultural counseling competence of their counselors? In addition, it is important to consider that client's initial positive attitudes about counseling may play some role in the perceived effectiveness of counseling services and hence positively predict their satisfaction with counseling (Jones & Markos, 1997, as cited in Constantine, 2002). Furthermore, it is probably that other therapeutic variable such as clients' help-seeking behavior, clients' actual motivation for change or counselors' ability to form meaningful and culturally sensitive therapeutic alliances with clients may also influence the client satisfaction (Cepeda-Benito & Short, 1998; Deane & Todd, 1996; Kelly & Achter, 1995, as cited in Constantine, 2002).

### *Professional vs. Paraprofessional Counselors*

In an attempt to further understand multicultural counseling competence and client satisfaction, the research questions asked if there is any significant difference between professional counselors and paraprofessional counselors in term of their multicultural counseling competence and client satisfaction. Contrary to expectation, professional counselors and paraprofessional counselors were found to have no significant difference in terms of their multicultural counseling competence and client satisfaction.

The current findings may perhaps explained by the tendency to stay in the "comfort zone" of both counselors and clients. The low level of cultural and social integration in counseling agencies in Malaysia reinforced the scenario wherein professional counselors have less opportunity to work with culturally diverse clients on account of the categorization of counseling agencies based on specific language and religion in Malaysia.

One reason that there is no significant difference in multicultural counseling competence between professional and paraprofessional counselors may be owing to the fact that counselor development of appropriate intervention strategies takes more time in the real world. It is difficult for professional counselors to improve the multicultural counseling competence, especially the skills domain (D'Andrea et al., 1991).

## **LIMITATIONS OF THE STUDY AND FUTURE DIRECTIONS**

There were several limitations of the current study that need to be taken into consideration. First and foremost, the sample was relatively small. Only 52 counseling dyads were involved in the current study and this sample of 52 subjects was not representative of the population as a whole.

The web survey was utilized as the source of data collection due to the time constraint; yet, the response rate was very low. For future study, the data collection period should be extended. Research assistants should be recruited and assigned to the organizations in order to invite counselors and clients to participate in the study face-to-face. Not only the larger sample could be obtained but helped to increase the sincerity of the research team as well. Moreover, the questionnaires can be completed and collected immediately. Participants can also ask questions instantly if they encountered any problems in completing the questionnaires.

In spite of the attempts to solicit a broad representation of Malaysian counselors, it is to be expected that numerous factors influenced a counselor's decision to participate or not participate in the research. The topic of the study may possibly also have influenced a counselor's decision about participation. Counselors who are more familiar with multiculturalism may have been more likely to involve than those who are less familiar with multiculturalism. Additionally, counselors who involved through web-based survey may have a tendency to select "good" client who are more likely to give good feedback to complete the client-version questionnaire. It is possible that clients viewed their counselors as more or less competent because of unique client-based variables such as rating or response biases (Constantine, 2001, Paulson et al., 1999, as cited in Constantine, 2002).

Another potential limitation of the current study is that clients may have been cued to the research purpose and endorsed responses that may have presented their counselors in a more or less favorable light. Future researchers can overcome several of the hurdles present in the current study by using single-blind method of study to prevent research outcomes from being influenced by the "good participant" effect or bias. In the blinding study, the participants do not know the critical aspects of the research. Researchers and administrators do not tell participants the actual purpose of the study in order to ensure that participants don't bias the results by acting in ways they think they should act.

Future research may need to identify aspects of the counselors as well as the counseling process that are most beneficial in helping clients to address their needs and eventually in predicting their satisfaction with treatment. It may also be good to explore simultaneous client and counselor perceptions of therapeutic processes and the subsequent impact of these processes on counseling outcomes and satisfaction to better understand the effectiveness of counseling.

### *Implications of the Study*

The current research provided straightforward practical implications for multicultural counseling especially the counselors' preparation in the field of professional counseling in Malaysia. Counselor in Malaysia should have a clear understanding of multicultural counseling in which they must understand, respect and appreciate differences in socio-cultural background of a client, beliefs and values. By having clear understanding, counselors are able to avoid multicultural issues such as racism, prejudice, discrimination, stereotyping and ethnocentrism; develop flexibility in thinking and behavior as well as develop culturally sensitive skills, interventions and strategies to adapt professional tasks and work styles to respectfully provide services to individuals through appropriate systems, agencies and organizations.

Multicultural theorists suggest that before one attempt to learn about the other, one must first learn about themselves to in order to avoid assuming that their clients see and experience the world as they do (Pedersen, 2001). Attaining MCC requires that one choose interventions that are respectful of a cultural group's intact beliefs and values (McCormick, 1996; Morissette & Gadbois, 2006). Failure to implement an appropriate degree of self-awareness increases the risk of a number of cultural transgressions within the counseling relationship, such as ethnocentrism and racism.

Counselors in Malaysia usually rely on counseling model or theories, strategy or technique that originated in the West such as United States but work with clients who are culturally different than the West population, moreover, many counselors are trained outside the country; therefore, it is important for counselors to have creativity in the adaptation of skills, knowledge and techniques learnt in order to contribute to the sensitivity, efficiency and effectiveness of services provided. Any model or theory, technique or strategy can never be wholly imported from another culture with expectations of similar results; culturally appropriate modifications will always need to be made.

It is essential to know that counselors learn the most from practical experience rather than from former counseling education in order to be multiculturally competent. Therefore, experiential teaching-and-learning process should be designed by integrating the practical training into the existing curriculum of theory-based counseling programs in Malaysia. Other than the concepts or theories, multicultural counseling course in university should equipped student counselors by having field visit, program, forum, individual and group counseling at related centers or homes to gain hands-on experience in working with culturally diverse clients, ultimately enable students to be better counselors.

Internship is a good starting place, it is important for paraprofessional to go beyond and implement multicultural training and translating multicultural awareness and knowledge into effective skills performance. Self-perceived MCCs may increase more significantly if counselor-in-training are required to spend a certain percentage of contact hours working with clients from different backgrounds than their own. It is also recommended that certain number of contact hours should be allocated in dealing with minority groups for both bachelor and master's counseling programs in order to ensure sufficient exposures and practical experience for trainees in working with minority groups.

Additionally, counselors should place emphasis on continuous education and training pertaining to multicultural competence, especially on the culturally sensitive issue such as religion, sexuality and LGBT. Because counselors' level of MCC associated significantly to clients' satisfaction with counseling services in the current study, it appears that multicultural training may serve an important role in increasing counselors' ability to work effectively with diverse cultural populations. The quality training programs is warranted so that professional and paraprofessional counselors are able to meet their needs effectively when they seek help. Specifically, such training may allow counselors to bridge potential gap between themselves and their clients, and consecutively increase the client satisfaction.

Further, a context-specific instrument should be developed to accurately measure the counselors' multicultural counseling competence in the Malaysian context. To date, there is no standard measurement to assess the level of Malaysian counselors' MCC. A psychometrically sound instrument in measuring counselors' MCC is warranted and it should be designed based on the

ASEAN or Malaysian setting in order to better understanding Malaysian counselors' MCC instead of directly adopting instruments from the West.

In line with the concept of One Malaysia, research on the multicultural counseling in Malaysia is of central importance as to provide an in-depth understanding of issues related to multiculturalism to counselors. More research is needed in order to help counselors further define and improve its purpose and directions, theory and practice as well as training framework. Empirical findings are needed to improve the professionalism of counseling. Counseling professionals and researchers need to work toward shaping the future of multicultural counseling and not rely on the government to classify what is and what will be counseling.

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## **NOTES ON CONTRIBUTORS**

Miss Voon Siok Ping holds a Bachelor's degree in Psychology from HELP University, Kuala Lumpur. She is a Master of Counseling student from University of Malaya who is undertaking multicultural counseling research under the supervision of [to insert second author] supervision.

Dr Rafidah Aga Mohd Jaladin is a senior lecturer at the University of Malaya. She is a registered counsellor with the Malaysia Board of Counsellors, a life-time member of the Malaysian Counseling Association, and a member of various international psychology and counselling associations (e.g., American Psychological Association [APA] and Australian Psychological Society [APS]).

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