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## Problem Resolution in Psychotherapy Supervision: Students vs. Supervisors

Linda Brownell Bresolin  
*Loyola University Chicago*

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PROBLEM RESOLUTION IN PSYCHOTHERAPY SUPERVISION:  
STUDENTS vs. SUPERVISORS

by

Linda Brownell Bresolin

A Dissertation Submitted to the Faculty of the Graduate  
School of Loyola University of Chicago in Partial  
Fulfillment of the Requirements for the Degree of  
Doctor of Philosophy

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1984

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and returned my questionnaire, as well as taking the time often to write comments, as I am fully aware of how busy their days can be.

## VITA

Ms. Bresolin was born and raised in Evanston, Illinois, the daughter of James and Carol Brownell. She attended Evanston Township High School, graduating in 1975. At that time, she matriculated at Bucknell University in Lewisburg, Pennsylvania. She attended Bucknell for one year, transferring to complete her degree at Northwestern University. She graduated with a B.A. in Psychology, with departmental honors, in March, 1979, at which time she took a job as a research associate to the Psychology Department of Northwestern.

In September, 1979, she entered the doctoral program in Clinical Psychology at Loyola University of Chicago. During her studies at Loyola, she held a U.S.P.H. Fellowship, one teaching assistantship, and two clinical assistantships at the Charles I. Doyle, S.J., Center and Day School of Loyola University. She received her M.A. in Psychology from Loyola University in May, 1982. She went on to serve her internship in Clinical Psychology at Ravenswood Hospital, in Chicago, Illinois. Ms. Bresolin is married and lives in Chicago, Illinois.

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## CHAPTER I

### INTRODUCTION

In the course of preparing individuals to do psychotherapy, the bulk of training programs rely on direct transmission of information and skills to trainees through a one-to-one supervisory relationship. Like therapy, supervision has been defined by many people in many ways, but most definitions are similar to the following ones:

Supervision of the psychotherapeutic process is a highly complex function performed by an experienced psychotherapist whose aim is to enable a less experienced psychotherapist to become effective in his task of benefiting his patient (Hora, 1957, p. 769). 007

(Supervision is) essentially a teaching procedure in which an experienced psychotherapist helps a less experienced individual acquire a body of knowledge aimed at a more dexterous handling of the therapeutic situation (Wolberg, 1967, p. 1027).

The elements which seem to be common to all these definitions include a relationship between two individuals who differ in the level of their therapeutic skills, aimed at incrementing the skill level of the less experienced member, with the eventual goal of helping a third party, the clients with whom the trainee is working.

The literature seems to be in agreement that what is being transmitted is not only a body of knowledge, but also a less tangible collection of skills or personal qualities, described variously as

"self-awareness," the "ability to listen with free-floating attention," and "diagnostic acumen" (Fleming & Benedek, 1966; Wolberg, 1967). Further, the supervisor seeks to teach the trainee to plan and carry out specific interventions designed to help the client, either through increased self-awareness or through behavioral change.

In order to perform these functions effectively, a great deal is expected of the supervisor. Wolberg (1967) says that the good supervisor must be an expert psychotherapist, an effective teacher, and able to accept the supervisee unconditionally. Muslin and Val (1980) add that the supervisor must be able to elicit trust and confidence from the trainee through the use of empathic listening. Pierce, Carkhuff, and Berenson (1967) add that the supervisor must demonstrate empathy, respect, genuineness, and concreteness, while being comfortable to engage in self-disclosure and self-exploration in his relationship with his supervisees.

In exchange, the supervisee must be open and self-disclosing with the supervisor, allowing feelings and motivations to be explored within the context of supervision. "Resistances" to this process must be overcome in order to leave the supervisee open to learning and the development of his faculties as a therapeutic tool.

Presupposing these factors, learning develops within the context of a relationship. This special relationship is unlike any other one. Most authors agree that the relationship is not a therapeutic one,

while all agree it is not one of a social nature. " In supervision, we aim at a change in skill, a change in the use of the professional self, while in psychotherapy, we aim at changes which embrace the total adaptive functioning of the individual" (Ekstein & Wallerstein, 1972, p. 92). Some authors characterize the supervisory relationship as a "learning alliance" (e.g., Fleming & Benedek, 1966; Muslin & Val, 1980), a banding together of supervisor and supervisee for the purpose of enabling the trainee to learn to be a therapist.

Given the nature of the qualities considered to be necessary for a good supervisory relationship, it is not surprising that complications arise which prevent optimal learning from occurring. Supervisory conflicts, perhaps best described as disturbances in the learning alliance, occur often in the course of one's training as a therapist. A study conducted by Moskowitz (1981) found that 38.8% of supervisees surveyed reported a conflict with a supervisor which interfered with the learning process at some point in their training experience. When conflicts occur, the theoretical literature agrees that some resolution should be reached in order for the learning process to continue.

There has been very little research into supervisory conflict. Where addressed, writing on this problem is predominantly theoretical in nature. The present study sought to investigate supervisory conflicts, both from the viewpoints of both the supervisor and the supervisee. Trainees and supervisors were asked to discuss various prob-

lems that arise in supervisory relationships, indicating how they feel these problems should be handled by the supervisors and/or trainees involved. Additionally, the participants were asked to discuss good and bad relationships they had actually experienced in supervision, focusing particularly on the crucial problems/benefits which affected their judgements of the situation. Differences in responses were examined between the participant groups, across problem areas, and between what participants felt should happen, as opposed to what actually did transpire.

## CHAPTER II

### REVIEW OF THE RELATED LITERATURE

#### History of Supervision

Supervision as a method of teaching psychotherapeutic skills has its historical roots in the growth of psychoanalysis and psychoanalytic training. Analysts in training underwent a tightly regulated program in which their own personal analysis was followed by a supervisory experience known as "control analysis" (Fleming & Benedek, 1966). In this period of their training, close supervision was conducted of the trainees' work with their analysands, such that the actual analysis was being done, for the most part, by the supervisor. The trainee was merely executing the interventions suggested by the analytic supervisor.

From this beginning, the supervisory model developed to the present system, in which analysts in training work with a series of analysands under a series of supervisors. In this model, the supervisor works closely with the trainees in a manner which allows them to examine the analytic process and the impact of their own dynamics on the on-going course of treatment. This procedure enables the trainees

to develop the ability to evaluate the treatment themselves and to maximize their own self-understanding and therapeutic sensitivity. They learn to formulate their own treatment goals and to coin their own interventions, thereby preparing them to begin their own professional work.

This model and the assumptions inherent in it form the "cornerstone of clinical training" (Moldawsky, 1980, p. 127) in all of the major therapeutic disciplines today. For example, R.J. Langs (1980), a psychoanalytic theoretician, characterizes the process as a "supervisory bipersonal field" (p. 105). In his model, the supervisor and trainee meet at least once a week to review the trainee's therapy sessions. Conditions of confidentiality prevail, and the primary commitment of the supervisor is to the unseen client. The trainee makes a sequential, direct presentation of process notes made shortly after the session by memory, and the supervisor makes interventions directed at what transpired between the client and the therapist-in-training during the therapy hour, based on what he hears in the process notes presentation.

Rice (1980), a contributor to the client-centered discipline, notes, ". . . one of the earliest detailed statements on the supervision of psychotherapy was written by Carl Rogers" (p. 136). In this tradition, trainees again come for regular supervisory sessions with a more experienced psychotherapist, equipped this time with audiotape



recordings of his therapy sessions. Here, the aim of the supervisor is to help the trainee to answer "process" questions, focusing on the self-exploration of the client and on how this process can be facilitated by the therapist.

The third major school of therapy, behaviorism, also uses a supervisory model (Linehan, 1980). Here, the supervisor meets regularly with the trainee and uses his skills to help the trainee acquire desired therapeutic skills and techniques and to extinguish undesirable ones. The trainee is schooled in scientific methodology and relevant behavioral theory and in supervision is helped to learn to "organize and integrate information gained from (therapy) experience" (p. 163). Necessary skills to be acquired include accurate assessment/conceptualization, effective treatment planning, good clinical judgement, and "awareness of the influence of one's own values, beliefs, and characteristic expectations in the treatment setting," (p. 165).

In summary, it can be seen that while the theoretical conceptualization shifts, as does preference for actual teaching techniques, the global model of supervision developed in the psychoanalytic school is evidenced in almost all clinical training conducted today.

## Traditional Supervision vs. the Alternatives

Some research has been done to assess the value of supervision as a means of teaching psychotherapy skills. Lambert (1980), in a review of research done in the area of supervision, concludes that trainees with traditional supervision experiences exhibit increased skill levels more quickly compared to trainees doing therapy without any supervision. More detailed studies have been conducted which compare the effectiveness of traditional supervision, as described previously, to alternative programs which seek to teach psychotherapy skills. The two most comprehensive programs which have been investigated are the micro-counseling movement (Forsyth & Ivey, 1980; Ivey, Normington, Miller, Morrill, & Haase, 1968) and the client-centered training program (Truax & Carkhuff, 1967). Comprehensive review articles written by Lambert (1980) and Matarazzo (1978) provide discussions of these areas of study.

The microtraining program (Forsyth & Ivey, 1980) is a system developed to teach beginning counselors in a step-by-step manner. Specific, concrete skills are presented one at a time. For each skill (e.g., minimal encouragement, paraphrasing), a video presentation modeling the technique is made. Following this presentation, trainees practice the skill in a role-play situation. These exercises are taped, in order to allow for self-observation by the trainees. When a specified level of mastery is achieved (e.g., in a five minute inter-

view, three uses of minimal encouragement), the trainee moves on to a new skill.

Similarly, in the "didactic-experiential therapist training programs" of the client-centered movement (Truax & Carkhuff, 1967), students are given readings on the client-centered skills and techniques. After reading, trainees listen to taped individual therapy sessions, rating the tapes on "accurate empathy," "nonpossessive warmth," and "genuineness." Subsequently, the trainees practice by responding to tape-recorded patient statements. Simultaneously, the trainees tape role-play interviews with each other, which they bring to individual supervision situations. When a certain minimum skill level has been achieved, interviews with real clients are audio- or video-taped for supervision. In the sixth week of the program, the students begin "quasigroup therapy" (Matarazzo, 1978) around their personal and emotional difficulties in their role as therapists. In each case, these systematic programs have been found to be more effective than traditional supervision in teaching certain necessary therapeutic skills and techniques (Lambert, 1980).

Regardless of these empirical findings, the vast majority of psychotherapy training depends a more traditional supervisory model. Most theoreticians who have written about the course of supervision include a period at the beginning of clinical training which is devoted to basic skills acquisition and which employs techniques simi-

lar to the ones advocated by the programs discussed. The argument, it might be inferred, would be that training programs such as the micro-counseling system do not carry clinical development far enough, that there are goals over and above skills acquisition. Thus, while specific skills training approaches may have value in the beginning stages of training, other approaches or techniques may be needed at more advanced stages.

### The Course of Supervision

Consistent with this notion that the needs and focus of supervision may shift across the course of clinical training, a great deal of literature has considered the question of whether or not there is a developmental sequence to supervision. Many authors have outlined a developmental model of supervision, in which the focus and activities of supervision shift as the clinical trainee gathers more expertise and moves through his or her clinical training. Gaoni and Neumann (1974), for example, describe a four stage supervisory program. In the first stage, the beginning of clinical training, they feel the trainee is confronted with a lack of skill and theoretical knowledge and feels overwhelmed with anxiety. Students at this stage, they indicate, want support, advice, help in making diagnoses, and lengthy theoretical explanations. Dependence on the supervisor should be tolerated, the focus should be strictly on the patient, and the goals for this first therapy experience should be merely that the trainee learn

to stay in the room with the patient and to establish a relationship with him.

In the second stage, the focus is on skills acquisition. The aim is to develop good listening skills and the capacity for patient- and self- observation. The supervisor should continue to provide the integration necessary for understanding the patient's needs, particularly within a theoretical framework. Learning is done by the apprenticeship model, with a reliance on modeling and direct rehearsal for skills transmission.

In the third stage, Gaoni and Neumann (1974) believe the trainee wants the emphasis to shift from the patient to himself and his relationship with the patient. The supervisor's function is to assist the trainee in cultivating self-awareness, independence, spontaneity and originality. The trainee learns to do his own theoretical integration, practicing this skill in the context of the safety of the supervision situation.

The trainee enters the fourth and final stage of supervision as he nears the end of his clinical training, and he continues to take advantage of this stage of supervision for the remainder of his professional career. In this stage, the model is one of peer review and colleague consultation. Gaoni and Neumann (1974) feel that the trainee first becomes exposed to this type of supervision in the context of group supervision situations, in which trainees consult with

each other about their patients under the tutelage of a supervisor. By this point, the trainee has assumed the majority of the responsibility for decision-making, integration, and treatment planning for his patients, looking to supervision as a means of gaining a professional "second opinion."

Similarly, Wagner (1957) argues that there are three methods of supervision which are possible for good training. The first method, termed "patient-centered," involves discussion of technical problems, advice about treatment interventions, and a discussion of patient dynamics. This is the approach which he feels is best suited to the needs of new trainees. The remaining two methods are better suited to the needs of more advanced students. The first of these he terms "therapist-centered." This approach is characterized by a discussion of transference/countertransference issues in therapy and is limited, he feels, by the danger of overlooking the patient altogether and coming too close to personal therapy for the trainee. The final and most desirable approach is termed "process-centered" supervision. The focus of this method is on the relationship between the therapist and the patient, the relationship between the trainee and the supervisor, and the process of the therapy hour. Although Wagner does not characterize these methods as three stages through which the trainee passes, his thinking is similar to that of Gaoni and Neumann (1974) in that he sees different methods as being more or less helpful to trainees depending on the level of their clinical experience.

Fleming and Benedek (1966) likewise differentiate the training needs of beginning therapy trainees from those of more advanced students. They indicate that beginners need to be supported and advised. They seek to identify with and imitate their supervisors, benefitting from reassurance and modeling. Unlike Gaoni and Neumann (1974), however, they dislike the use of a didactic approach as a bridge between this beginning period and the more advanced, introspective process of advanced trainees. Their dislike of the didactic method of teaching dynamics is based on their feeling that this approach hinders the development of independence on the part of the trainee. Quickly after the beginning stage of supervision, Fleming and Benedek (1966) advocate moving to a primarily therapist-centered approach, the goals of which are to help the trainee to develop the skills of self-observation and integration. The supervisor furthers this process based on his assessment of the trainee's "learning needs."

In discussing the notion of a developmental sequence to supervision, Marshall and Confer (1980) characterize supervision as progressing from "an opportunity to elicit answers from the master" (p. 93) to "open camaraderie between two professionals working to assist a patient to understand and alter . . . his/her life" (p. 93). Likewise, Langs (1980) delineates a "teaching sequence," such that the focus of supervision shifts from the listening process, to therapy "ground rules," to the therapeutic relationship, to therapeutic interventions.

Hogan (1964) similarly postulates a four level developmental sequence to clinical training. In level 1, the beginning therapist is seen as being heavily influenced by the "method of choice" promulgated by his supervisor. Seen as being uninsightful and insecure, the trainee naturally relies on simple imitation of his supervisor. The supervisor's tasks at this level are simple instruction of techniques and methods, modeling, support, and the evocation of self-awareness in the trainee. The supervisory relationship is seen as being characterized as one of simple dependence.

In level 2, the therapist-in-training begins to invest his therapeutic relationships with his own personality. The supervisory relationship is seen by Hogan as characterized by the trainee's on-going dependency-autonomy conflict. In this time of great flux, the student is seen as vacillating between being over-confident and overwhelmed, as struggling with insight into his own reactions, as unsure of his commitment to the field, and as experiencing marked ambivalence over the use of his newly gained insight. Supervisory methods suggested include clarification of this ambivalence, support through expressions of confidence in the trainee's ability to experiment, and continued modeling. At this stage, the use of basic instruction as a technique becomes somewhat curtailed.

In level 3, the student begins to use himself creatively with more assurance. The dependency/autonomy conflict yields to increased



self-confidence, greater insight, and the ability to differentiate between neurotic and healthy motivations. Here, the supervisor becomes increasingly self-revealing about his own therapeutic struggles with clients, combining these observations with personal and professional confrontation of the student.

In level 4, Hogan indicates that the trainee has achieved full creative use of himself and intuitive judgement. The supervisory relationship becomes one of peer consultation. Sharing, confrontation, and mutual consultation are seen as the techniques of choice.

In a study designed to assess directly the issue of developmental stages in supervision, Moskowitz (1981) distributed a questionnaire to 158 graduate students in clinical psychology. Moskowitz postulated three stages of supervision (seen as independent from theoretical orientation), which she termed "imitative," "didactic," and "therapist-centered." The imitative approach would involve direct modeling of therapy techniques specific to the client under discussion. Moskowitz felt that this approach would be seen as most desirable by beginning (first year) graduate students. The didactic, or patient-centered, stage would involve direct teaching of dynamics and general techniques suitable to a certain class of clients, but would not rely on direct modeling and role play in supervision. It was predicted that this approach would be seen as most desirable to intermediate level trainees. The final, therapist-centered stage involved

focusing on the personality of the trainee and how it affects what happens in the course of the therapy hour. This approach is most similar to the progression of psychoanalytic supervision delineated by Fleming and Benedek (1966). Much less direct in nature, it was hypothesized that this approach would be most appealing most to advanced students nearing the end of their graduate training.

Data obtained from the questionnaire were separated into responses coming from 39 beginning (first year), 76 intermediate (second and third years), and 43 advanced (internship level) psychotherapy trainees. All data were discarded for respondents having had previous schooling or previous work experience before coming to the graduate program. Data from 78 males and 81 females was retained. The age of respondents ranged from 21 to 46 years. Support was shown for the imitative and therapist-centered approaches being preferred by beginning and advanced students, respectively. Beginning trainees responded more positively to items loading on the imitative scale than did intermediate and advanced students, while advanced trainees responded more positively to items from the therapist-centered scale than did beginning and intermediate students. The results for the didactic approach were more tentative, and the preferences of intermediate level trainees were less clear and consistent. Moskowitz (1981) concluded that there was support for a developmental model of supervision which varied according to the level of training of the supervisee. She indicated that more research was needed to differentiate the intermediate level requirements of trainees.

While the details, pacing, and theoretical cast of each of these developmental models differ, there do seem to be some overall trends. Each of these models suggests that supervision begins in a more structured, skills-focused manner, with supervisors being fairly active, reassuring, and directive. Across training, these factors shift to increased reliance by the trainee on his own skills and intuition, as well as the use of himself in his work with the clients. Supervisors assume a less structured role, foster increased independence, and promote awareness on the part of the trainee of the impact of the trainee as a person on the client. Often the models end in a brief discussion of peer consultation and support as being the natural, unending outcome of the supervisory learning process.

### The Supervisory Relationship

Various theories and studies point to the relationship between the trainee and the supervisor as being an important element of the supervisory experience (Ekstein & Wallerstein, 1972; Fleming & Benedek, 1966; Hora, 1957; Muslin & Val, 1980; Pierce, Carkhuff & Berenson, 1967). Fleming and Benedek (1966) stress the need for trust, balance, and empathy in the supervisory relationship. They note that unless these conditions exist and unless the supervisor and supervisee share goals and expectations for the supervisory experience, growth cannot be optimized. Wagner (1957) notes that the therapist-supervisor relationship is a co-equal focus with the therapist-client rela-

tionship in the process-centered method of supervision, the method which he sees as the most desirable. Mueller and Kell (1972) agree, noting that the supervisory relationship is a factor which contributes to the complexity of the learning process.

Hora (1957) comments on the potential in the supervisory relationship for the intrusion of "parallel process" issues. In this situation, the trainee has introjected a portion of his client's dynamics and re-enacts these dynamics nonverbally in the supervisory relationship. As such, investigation of the supervisory relationship becomes a valuable source of information in trying to understand one's patients.

Ekstein and Wallerstein (1972), who write from the psychoanalytic tradition, go into greater detail on this issue of parallel process. They see clinical training as occurring within the "clinical rhombus." The rhombus consists of the therapist-in-training, the patient, the supervisor, and the clinical administrator, together with the dyadic relationships between each of these components. Each of these dyadic relationships is seen as being affected by all the others. Ekstein and Wallerstein (1972) discuss each of these relationships in context. They note that the students, in effecting their first therapeutic relationships with patients, experience "learning problems" which emerge as inappropriate stances taken to the patient in therapy. Similarly, they experiences "problems about learning" in

their supervisory relationships. These are seen as being caused by inappropriate needs for or expectations about the supervisor which disrupt the necessary learning process. The authors then go on to discuss the workings of parallel process in the learning experience, such that the student and the supervisor re-enact in their relationship the learning problems which are occurring in the student's therapy relationship. They note that in this process, the students may retain the same inappropriate stance, expectation, or fear that they maintain in therapy, or this role might flip, so that he assumes the role of the patient. In this stance, they expect that the supervisors will behave toward them as they have behaved toward their patients. Together, supervisors and students work to understand the supervisory relationship so that they can effect change in the therapeutic relationship.

Muslin and Val (1980) characterize the supervisory relationship as a learning alliance. They feel that in a good learning alliance, trust and confidence is increased and resistance to learning is decreased. They feel the supervisory relationship is crucial to the professional development of the trainee in two ways. In a good relationship, the student is able to merge with the supervisor through identification, thereby sharing the supervisor's strength and learning to be strong himself. Further, the student gains self-esteem through a process of mirroring with the supervisor, who assumes an idealized parent image. Therefore, through a good learning alliance, the stu-

dent is able to garner both strength and self-esteem. Muslin and Val (1980) note that in order to bring these processes to bear in the supervisory relationship, the supervisor must be an empathic listener.

In a study examining the importance of the supervisory relationship on training, Pierce, Carkhuff, and Berenson (1967) examined the effect of supervisors' interactions with their supervisees on the supervisees' interactions with their clients. Raters measured the level of the supervisors' functioning in the various "facilitative conditions" outlined by the client-centered school of therapy, namely empathy, respect, genuineness, concreteness, self-disclosure, and self-exploration. Seventeen paraprofessional volunteers were assigned randomly to either a supervisor high in the facilitative conditions or to one low in the facilitative conditions. The volunteers then underwent 20 hours of a training program, in conjunction with regular meetings with their assigned supervisor. At the end of the training program, raters measured the level of facilitative conditions evidenced by the trainees in their sessions with clients. Those trainees assigned to the high functioning supervisor were found to have improved significantly in the level of facilitative responses made, while those assigned to the low functioning supervisor evidenced no significant improvement. One may therefore conclude that the nature of the relationship between the supervisor and supervisee has an effect on the learning of the student and, therefore, on the quality of service the trainee comes to give to his clients.

### Disturbances in the Learning Alliance

In relationships as complex as the supervisory one, it is unrealistic to expect that problems will not arise. These problems, which serve to disturb the necessary learning alliance, have been called various things, including "conflicts" (Moskowitz, 1981), "problems in learning" (Fleming & Benedek, 1966), and "impasses" (Mueller & Kell, 1972).

Wolberg (1967) delineates five categories of potential difficulties. The first is termed "differences in theoretical orientation" and encompasses a variety of disagreements, all of which have to do with the nature of mental illness, the best form of treatment, and other related issues. Wolberg argues that differences such as these serve to prevent the supervisor and supervisee from working together for the good of the client, because their time in supervision is spent in arguing on a theoretical plane. The second category, "differences in communication," focuses primarily on differences in terminology, which lead to misunderstanding of what the other person is saying. The third category is "differences in method" and is similar to "differences in theoretical orientation," with the exception that here the abstract discussion is spent on issues such as the number of sessions considered to be optimal, the extent of diagnostic work-up necessary, and other related issues. The fourth category is "differences in goals," and arises when the supervisor and supervisee have a different

idea of what success in psychotherapy is, when it has been reached, and what reasonable expectations of treatment are. The fifth category is "problems in recording and reporting" and refers to technical faulting in the system of recording of the sessions--breakdown of audiotape machines, etc. For the most part, this category is different from the others, in that it really does not result in the disruption of the supervisory relationship.

Several authors note that a source of strain in the supervisory relationship is often the duality of roles which the supervisors play. Robiner (1982) observes that the supervisor in most situations is required to perform the functions of evaluation, support, teaching, helping, and administration simultaneously. Wolberg (1967) concurs, noting that the supervisors are torn between their role as teacher and their role as overseer, having responsibility both to the student and to the agency of which they are a part. The tension between these functions serves as an impediment to the relationship for the supervisor and the supervisee alike. Particular attention has been paid in the literature to the balance between the teaching and evaluating roles. Students are particularly attuned to this balance, simultaneously wishing to improve their skills while attempting to deny lack of competence (Weiner & Kaplan, 1980). Consequently, Greenberg (1980) notes, a conflict inherent in supervision for trainees is the choice between demonstrating what makes them look good to the supervisor and what they need the most help with to function effectively.



Relevant to this source of conflict, in an article written jointly by a supervisor and supervisee, Hassenfeld and Sarris (1978) discuss their own problematic supervisory relationship. They contend that a major contributor to supervisory tension is the dual loyalties of the supervisor--as "administrative supervisor" to the training program and as "therapy supervisor" to the growth and development of the student. They advocate adopting a non-paternalistic model of supervision in which the supervisor yields his power in the relationship by sacrificing the evaluation component of his position. Complete confidentiality would prevail, and supervision would seek to promote growth in a therapy-like manner. While the authors recognize that in this system the training program loses some of its ability to assess the trainees, they feel that performance in seminars and other "public" functions would be sufficient for the purposes of evaluation.

In other instances, the source of conflicts lie in the personal dynamics of the supervisor. Robiner (1982) notes that the supervisor can contaminate the supervisory situation through his need for dominance. He notes that supervisors differ in their use of power within the supervisory role. In cases where this is a problem, sexual harassment, diagnosis of the trainee, and the use of the evaluative function as a threat can result. He also notes that supervisors can err in the direction of deference, through their need to be liked and accepted by their supervisees. In these cases, avoidance of student confrontation and withdrawal from the supervisory relationship by the

supervisor can result. Here, too, the supervisory relationship serves to prevent optimal learning from occurring.

Barnat (1973) reports that in his training he discovered that some supervisors had "supervisory styles toward which psychotherapy trainees have shown a consistently negative reaction" (p. 17). He discusses particularly problems of affectation (the supervisor not being genuine and admitting to flaws or lack of knowledge), covert communication that the supervisor feels unable to help the student, thereby discouraging the student from being open with him, and problems of distancing (rejection of the student when the supervisory hour has become too tense).

Muslin and Val (1980) take the position that good professional development stems from the process of identification between the supervisor and the trainee. They indicate that if the supervisor sees the student as too dissimilar to himself, the alliance becomes strained and learning is hindered.

Styczynski (1980) discusses certain dynamics which are particularly common in beginning supervisors. He notes that over-identification with the student in the trainee role which the new supervisor has so recently left may lead to being overly supportive and non-confrontative. He further notes that the interpersonal needs of new supervisors are particularly compelling--the need to be perceived as likeable, difficult, or available and the need to be seen as competent by

the student. The establishment of power in the new supervisory role may also be difficult for new supervisors (Styczynski, 1980).

Just as the supervisor can contribute to strain in the supervisory relationship, the student, too, can have concerns or personal issues which contribute to the disturbance in the learning alliance. Fleming and Benedek (1966) refer to these interfering concerns as "problems in learning" and conceptualize them in a manner similar to the way in which client resistances are conceptualized in psychotherapy literature. Langs (1980) agrees, adding that problems in the supervisory relationship may stem from the trainee's envy of the supervisor, fear of the supervisor's knowledge, or fear of exposure, particularly of the trainee's own unresolved personality issues. Langs (1980) further indicates that the trainee's psychosis anxiety or sexual anxiety resulting from contact with his clients may be intruding into the supervisory experience.

Tischler (1968) states that the new student, in particular, enters the supervisory experience with pressing needs and expectations. New trainees feel particularly vulnerable and look to the supervisor for support and reassurance. In this search, they may screen the material they present, which, in turn, may prevent effective learning and service to the clients involved. Tischler (1980) further observes that in an effort to achieve a sense of professional adequacy and identity, new students may directly pattern themselves

after the supervisors, imitating them directly both in and out of therapy.

When the alliance has been disrupted, most theoreticians agree that restoration is necessary before learning can continue. There is less consensus on how this restoration is brought about and who is responsible for the process. Wolberg (1967), after noting the potential conflict areas previously discussed, has very little to say about how these issues are resolved. He merely comments that the good supervisor is able to address these problems and "fix" them, so that the learning process may continue. He indicates that this is accomplished through being open-minded and empathic, which then leads to the supervisor succeeding in winning the student over to his own viewpoint.

Unlike Wolberg (1967), who feels that these disturbances are temporary problems which must be resolved to continue the learning process, Mueller and Kell (1972) state that the essence of supervision is the exploring and understanding of conflicts. They take the position that the process of supervision involves the working through of conflicts on three levels: conflicts within the client, conflicts between the therapist and the client, and conflicts between the therapist and the supervisor. Like Hora (1957) and Ekstein and Wallerstein (1972), the authors attribute a proportion of the therapist/supervisor conflicts to the workings of parallel process--reenactment in supervi-

sion of the therapist/client dynamics. The remainder of the supervisor/therapist conflicts they attribute to the triggering of the therapist-in-training's own issues, which must be explored and resolved. Conflicts on two levels, therapist/client and therapist/supervisor, lead to "impasses" in therapeutic progress. It is their position that the good supervisor's function is to explore and work through these impasses in order to further growth, both on the part of the client and on the part of the trainee. In other words, they feel that there is no learning outside of conflicts and conflict resolution. Mueller and Kell (1972) strongly advocate full exploration of all areas of conflict within the context of supervision.

Fleming and Benedek (1966), on the other hand, are more cautious. Differentiating the supervision experience from personal psychotherapy, they suggest that the supervisor should bring up any problems he or she perceives, furnishing a partial interpretation of the purpose the difficulty may be serving. Extensive exploration of the antecedents of the problem is best left to the trainee's personal therapist, however. Ekstein and Wallerstein (1972) likewise note the difference between therapy and supervision, stipulating that relationship difficulties relevant to the student's professional growth should be fully explored, while those relevant to the student's personal growth should be left to the student's private therapy. Langs (1980) is even more conservative, urging supervisors to avoid all but the most general interpretations unless the situation is extremely press-

ing, at which time he advocates a straightforward critique and discussion of the problem. The supervisor should be careful to recognize his own contribution to the problem, and effort should be made to deal with it as directly and quickly as possible, so the more legitimate supervisory endeavor can begin again.

While theoreticians have widely divergent points of view about the type of relationship which is most productive and about how this relationship should be enacted, the consensus of the literature seems to be that it is a factor which cannot be overlooked in considering the training process. The authors agree that a good relationship is at least necessary for effective learning--some might argue that it is sufficient. Each of them agrees that problems which arise and which disrupt the trainee-supervisory alliance has a negative impact on the amount and quality of learning which can take place, and most say specifically that the rupture needs to be healed for optimal learning to resume.

### Survey Research

A limited amount of research has attempted to examine the supervisory experience, focusing on the impact of the relationship on learning and on the problems which arise. For the most part, this research has adopted a survey format. For example, Rosenblatt and Mayer (1975) collected 233 case accounts of problematic supervisory experiences from second year graduate students in Social Work pro-

grams. They used these accounts to delineate four types of supervisory behavior which students consistently found to be objectionable. The first was "constrictive supervision," in which students felt they were not given sufficient autonomy to decide how to handle their cases. However, the opposite style--"amorphous supervision," in which the supervisor affords the student insufficient direction--was also seen as problematic. A third type, "unsupportive supervision," caused students stress by providing only criticism in the absence of warmth, reassurance, and encouragement. However, the supervisory style seen as most objectionable was "therapeutic supervision," in which the students' difficulties with clients are ascribed to and explored as deficiencies in the students' character or personality style.

After noting that supervision and administration were becoming more and more central activities for social work professionals, Kadushin (1974) instituted a large scale survey research project designed to look at the impressions and opinions social work supervisors and supervisees held about the supervisory process. Kadushin (1974) distributed 1500 questionnaires on supervision to casework supervisors and casework supervisees. Names of 750 of each were selected at random from the 2600 supervisors and 5300 supervisees listed in the 1972 N.A.S.W. directory. Kadushin received back 469 usable questionnaires from supervisors and 384 from supervisees, an overall usable response rate of 61%. It should be noted that the supervisees in this study also held M.S.W. degrees and averaged nine

to 11 years paid experience (as compared with the 12 to 13 years experience for the supervisors). They therefore may not reflect the feelings/opinions of social work students being supervised for training purposes.

Kadushin's (1974) results indicated that supervision was being conducted in individual conference for an average of three to six hours per month. The bulk of supervisees (72%) indicated that this amount of time was "about right." Others, for the most part, would have preferred more time. Both supervisors and supervisees noted a trend toward the "colleague" consultation model as the supervisee gained experience. While both groups agreed this was desirable, the supervisees felt so more strongly than did the supervisors (26% of whom characterized themselves as "teacher").

In identifying the sources of power in the supervisory relationship, supervisees were much more likely to grant positional power (through title or office) to their supervisors than were the supervisors to accept it (21% of supervisees, as compared with 2.6% of supervisors). Rather, supervisors tended to attribute their power to expert knowledge (95.3% of supervisors, 65.5% of supervisees).

The three strongest sources of satisfaction for supervisors were being able to promote professional growth, ensuring better service to clients, and being able to share and transmit professional skills. For the supervisees, satisfaction came from shared responsibility and



support, problem-solving about difficult clients, and help in professional development. Sources of supervisor dissatisfaction were administrative "red tape," loss of direct client contact, and the need to have supervisors conform to policies with which they personally disagreed. Sources of supervisee dissatisfaction included the supervisor failing to bring supervisee needs to the agency, insufficient direction, and insufficient help with problem-solving.

Sixty percent of supervisees reported being "extremely" or "fairly" satisfied with their supervisor; 73% of supervisors were satisfied with their current supervisory assignment. Six percent of supervisors were dissatisfied, while 15.4% of supervisees were dissatisfied. Supervisees who were dissatisfied tended to cluster in public assistance and medical social work agencies, as opposed to those in private mental health agencies.

While supervisors tended to see the teaching of clinical skills as being by far the most important of their functions, the supervisees tended to stress the importance of the supervisor serving as an interface between them and the administration. Consistent with this difference, the greatest discrepancy between the "ideal" and "actual" ratings made by supervisees was on the item, "He goes to bat for his supervisees with the administration, even if this means trouble for him." In a final, open-ended section, respondents voiced concerns about the appropriateness of traditional supervision for functioning

professionals and also the need for coursework in supervision to be included in the curriculum of social work graduate programs.

Moskowitz (1981) pursued the issue of supervisory conflict in her doctoral dissertation. She distributed questionnaires to beginning, intermediate, and advanced clinical psychology trainees. In these questionnaires, she asked the students to indicate how they would prefer supervisors to handle various conflict situations she described.

She found that students differed in their preference for how conflict situations should be handled according to the level of their training. The overall trend was for beginning students to favor more extensive exploration of conflict areas than did advanced students, the percentage of students endorsing exploration decreasing with training. Advanced students were more likely to prefer partial interpretation without exploration to exploration.

More specifically, in response to an inquiry about problems related to trainee anxiety and lack of confidence, beginning students indicated that they would like their supervisors to help them explore and resolve these feelings. Advanced students preferred that the supervisors simply recognize these feelings and provide reassurance.

In reference to personality conflicts with the supervisor, 61% of the respondents endorsed exploration of the problem, while 16% pre-

ferred partial interpretation. No differences were noted across level of training. In the instance of personal life problems which are not affecting clinical work, the respondents strongly preferred that the problem not be identified at all by the supervisor.

In more serious problem areas, difficulty with patients due to countertransference, endorsement of exploration was higher. For example, for "characteristic countertransference blind spots," 63% of respondents endorsed the supervisor exploring the problem with the trainee in order to resolve the problem, 16% preferred partial interpretation with exploration, and 19% preferred referral for outside therapy. The implication, therefore, is that trainees feel that the way a problem area is addressed should vary according to the nature and seriousness of the difficulty involved.

Moskowitz (1981) also asked the students to describe conflicts which had actually arisen in the course of their supervisory experiences. Of the students polled, 38.8% reported having experienced a major conflict with their supervisor at some point in the course of their training. Of these students, 77% of them had discussed this problem with their supervisor at the time. Of these 77%, 84% had initiated the discussion themselves, while only 16% of the discussions had been initiated by the supervisor. This result would suggest that although the supervisory literature typically recommends that supervisors address problem areas directly as they arise, this recommendation

is not being implemented by supervisors in the field. What is unclear is whether this course is the result of an active choice on the part of the supervisors or whether it simply is the case that students are more likely to perceive differences as serious than are supervisors.

Of the students who discussed conflicts with their supervisors, 25% reported that the incident was followed by great improvement in the supervision experience, 33% by some improvement, 18% by no improvement, and 10% that the situation worsened. Ten percent of the students indicated that following the discussion a change of supervisors was effected. These results indicate that not all attempts to resolve supervisory conflict are followed by an improvement in the learning situation.

These survey studies tend to corroborate the position taken in the the theoretical literature that the supervisory relationship is an important element of the learning experience. It further suggests that a substantial portion of these relationships involve some dissatisfaction, particularly on the part of the trainee, and that trainees and supervisors may not be conceptualizing the supervisory relationship in the same way. These issues are addressed in the current study.

## Design and Hypotheses

The present study sought to explore further the supervisory relationship and the impact of problems in supervision, comparing these factors from the perspective of the supervisee and the supervisor. The study can be conceptualized as having three parts, each of which was explored using a survey format. The first part involved comparing the groups on their general philosophy of supervision, specifically around the ideal supervisory model and the importance of the supervisory relationship. The second part involved presenting a series of problems which typically arise in supervisory experiences, in order to examine whether or not the supervisors and supervisees differ in the way they believe such situations should be handled. Finally, the study sought to obtain examples of good and bad supervisory experiences which the participants had actually had, in order to compare what is actually occurring to the ideal situations espoused by supervisors and supervisees. Finally, given that the theoretical orientation of the authors who have discussed supervision hold seems to have helped to shape their thoughts about supervision, these same three issues will be explored to determine whether or not theoretical orientation affects the responses of participants, independent from professional status.

Philosophy of supervision. In this initial section, participants were asked to give some background information about themselves,

their professional training, and their theoretical orientation. They were then asked to endorse statements designed to reflect models of supervision and to assign percentages to "skills training" and "personal growth" according to how they conceptualized the function of supervision. They were asked to indicate how critical they felt a positive supervisory relationship is for a good learning experience, as well as how much should be spent in supervision focusing on this relationship.

No hypotheses were made about the impact of professional status on these general questions about the philosophy of supervision, the focus of the questions being exploratory in nature. In reference to theoretical orientation, however, it was hypothesized that psychodynamic participants would differ from non-psychodynamic participants in the following ways:

- 1) Psychodynamic participants will prefer a personal growth model of supervision over other supervisory models, while non-psychodynamic participants will prefer other more client-focused supervisory models.
- 2) Psychodynamic participants will assign a smaller percentage value to skills training as the function of supervision than non-psychodynamic participants.
- 3) Psychodynamic participants will state that a positive supervisory relationship is more crucial to learning than non-psychodynamic participants.

4) Psychodynamic participants will state that more time should be spent in supervision discussion the supervisory relationship than will non-psychodynamic participants.

Problem management in supervision. In this close-ended section of the questionnaire, a series of hypothetical problem situations were presented which are likely to cause a disruption in the learning alliance. The problems were modeled after those used in the survey research of Moskowitz (1981) and were ordered to range along the continuum of the extent to which they would affect the trainee's ability to function effectively in a psychotherapeutic manner with his clients. The six problem situations, referred to by number below, were stated as follows:

- 1) A trainee is experiencing a problem in his personal life which is currently not affecting his professional functioning.
- 2) While a trainee's psychotherapy skills are good, he is not adequately fulfilling his other professional responsibilities--paperwork, promptness, staff relationships, professional appearance, etc.
- 3) A trainee and his supervisor conflict as individuals (e.g., different personal values, different personality styles, different supervisory style preference).
- 4) A trainee and his supervisor differ in theoretical orientation to the extent that they are having difficulty agreeing on case conceptualizations and treatment plans.

5) A trainee's personality vulnerabilities are interfering with his ability to work effectively with one of his therapy clients.

6) A trainee's personality vulnerabilities are interfering with his ability to work effectively with more than one of his clients.

In this section of the questionnaire, participants were allowed to respond to these items in the ideal sense--how the situations are best understood and addressed. Since there is no current empirical literature which specifically addresses the differences in opinions between trainees and supervisors, much of this section was seen as exploratory in nature. However, based on the literature which reflects how students conceptualize supervisory difficulties (e.g., Kadushin, 1974; Moskowitz, 1981; Rosenblatt & Mayer, 1975), the following hypotheses were made:

5) Students will feel more strongly than supervisors that it is the responsibility of the supervisor to initiate discussion of problem situations, with the exception of problems in the student's personal life.

6) Supervisors will endorse a greater amount of discussion and exploration of problem areas than will students.

7) Trainees will be more positive about switching supervisors as a means of addressing problems than will supervisors.

The effect of espoused theoretical orientation on participants' responses to these questions was also, for the most part, exploratory



in nature. However, based on the theoretical literature, the following tentative hypotheses were made:

- 8) Psychodynamic participants will endorse more complete discussion and exploration of problem situations than will non-psychodynamic participants.
- 9) Psychodynamic participants will be less receptive to the option of switching supervisors than will non-psychodynamic participants.
- 10) Psychodynamic participants will endorse more strongly the need for referring the trainee for personal therapy than will non-psychodynamic participants.

Positive and negative case histories. In this final section, participants were asked to describe positive and negative supervisory relationships they had actually experienced. No hypotheses were made for this portion of the study.

## CHAPTER III

### METHODS

#### Subjects

The investigator distributed questionnaires to 112 psychology interns and 237 supervisors, each of whom were currently working at one of the 14 training sites contacted. Questionnaires were returned by 52 trainees and 54 supervisors, representing a 46.4% and 22.8% return rate respectively.

Of the 52 trainees, 25 were male and 27 were female. The mean age was 30.38 years ( $SD = 5.126$ ). Participants ranged from third to seventh year graduate students ( $M = 4.5$  years), with an average of more than 1500 hours supervised practicum experience previous to completing the questionnaire. Twenty characterized their theoretical orientation as psychodynamic, 11 as cognitive or cognitive-behavioral, three as behavior, none as person-centered, 12 as "eclectic," and three as something other than these categories, with three failing to respond to the question.

Of the 54 supervisors, 37 were male and 17 were female, with a mean age of 39.17 years ( $SD = 11.93$ ). They reported an average of

9.78 years experience as supervisors ( $\underline{SD}$  = 8.22), with an average of 4.17 supervisees per year. Fifty held Ph.D. degrees, one a Psy.D., one M.A., and one M.S.W., their advanced degrees having been awarded between 1949 and 1983 (median = 1974). Twenty-two specified their orientation as psychodynamic, three as cognitive or cognitive-behavioral, three as behavioral, one as person-centered, ten as eclectic, and two as something other than these categories, with thirteen supervisors not responding to the question.

To a question about formal training they had received in supervision, 35 indicated that they had had no training, eight indicated that they had taken one or more courses in graduate school, three that they had taken a course after graduation, four that they had received supervision on their supervision (or had purchased it), five that they had attended workshops on the subject, and two that they had taken business management courses for this purpose.

### Materials

Trainee questionnaire. Each trainee was asked to complete a three part questionnaire written by the primary investigator. The first section is composed of general demographic questions about the trainee, his training experiences, and his theoretical orientation. The trainees are also asked some questions about their general philosophy of supervision. The trainees are asked to select from four model statements those which they feel represent the way they conceptualize

the function of the supervisor. They are asked to assign percentages to "skills training" and "personal growth," according to how they conceptualize the function of supervision. Finally, they are asked to mark on two scales how critical they feel a positive supervisory relationship is to a good learning experience and the amount of time which they feel should be spent in supervision focusing on that relationship.

The second section consists of a series of hypothetical problems which might cause a disruption in the learning alliance. The problem descriptions are modeled after those used by Moskowitz (1981) and are ordered along the dimension of the extent to which the problem would affect the trainees' psychotherapeutic functioning with their clients. For each problem area, the trainees are asked to answer six close-ended questions relevant to the nature of the problem and how they think the problem should be addressed. In one question, the trainees are asked to project the likely effect of such a problem on the training experience. The six questions asked for each of the problem situations are presented in Table 1. Finally, the trainees are asked to indicate whether the problem was one they had ever experienced in their own supervisory relationships.

The third and final portion of the trainees' questionnaire is an open-ended investigation of their previous supervisory relationships. The trainees are asked to describe a poor supervisory relationship in

TABLE 1

## Section Two Questions

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |   |            |
|----------|---|---|---|---|------------|
| 1        | 2 | 3 | 4 | 5 | 6          |
| critical |   |   |   |   | not at all |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |   |                |
|------------|---|---|---|---|----------------|
| 1          | 2 | 3 | 4 | 5 | 6              |
| definitely |   |   |   |   | definitely not |

c) How should the supervisor address the situation?

|       |  |
|-------|--|
| _____ | Do nothing--do not identify the problem  |
| _____ | Simply identify the problem without discussion or reassurance                                |
| _____ | Identify the problem and provide reassurance only  |
| _____ | Identify the problem and possible factors responsible for it, without encouraging discussion |
| _____ | Work in supervision to explore and resolve the situation                                     |

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |   |   |         |
|------------|---|---|---|---|---------|
| 1          | 2 | 3 | 4 | 5 | 6       |
| not at all |   |   |   |   | crucial |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |   |   |            |
|---------|---|---|---|---|------------|
| 1       | 2 | 3 | 4 | 5 | 6          |
| crucial |   |   |   |   | not at all |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |   |   |             |
|-----------|---|---|---|---|-------------|
| 1         | 2 | 3 | 4 | 5 | 6           |
| no chance |   |   |   |   | very likely |

which they are or have been involved, and to detail the critical elements which made it problematic. The students are asked to also report how the problem situation was addressed, if at all, and what the impact was on their learning. The trainees are asked to describe how they would have preferred the situation to have been dealt with, if they are unhappy with what actually happened. They are then asked to describe a particularly good supervisory experience they are having or had experienced, reflecting on what the elements of the experience were which made it such a productive one. A copy of the trainees' questionnaire is included in Appendix A.

Supervisor questionnaire. The supervisors were asked to complete a parallel questionnaire, also composed by the primary investigator. The first section of the supervisors' questionnaire is similar to the first section of the trainees' questionnaire in that basic demographic information is obtained, including questions about the supervisor's degree, years of supervisory experience, and any training he or she may have had in psychotherapy supervision. The supervisors are then asked the same general philosophy of supervision questions as were used in the trainees' questionnaire. The second section to be completed by the supervisors is identical to the second section of the trainees' questionnaire, which is discussed above.

The third portion of the supervisors' questionnaire paralleled the trainees' measure, in that the supervisors are asked to detail the

important elements of a particularly poor relationship they had had with a supervisee, as well as providing information about how the problem was addressed in the supervisory experience. Like the students, the supervisors are asked to rate the impact the problem had on the quality of learning which occurred. Finally, the supervisors are asked to discuss changes they would make, in retrospect, if they are dissatisfied with the way the problem was handled in the context of the supervisory relationship. Additionally, the supervisors are asked to describe a particularly good supervisory experience they had had with a trainee, explaining the qualities of the trainee or the experience which they feel made it so positive. A copy of the supervisors' version of the questionnaire is included in Appendix B.

#### Procedure

Training Directors around the Chicago area were contacted by letter. In this letter, the investigator described the proposed study and asked that the Directors consider allowing distribution of questionnaires to the students and supervisors working in the facilities. Follow-up phone calls were made, in order to secure this permission and to make arrangements for questionnaire distribution. Of fourteen Directors contacted, only one indicated unwillingness to participate on any level. In most instances, questionnaires were sent in groups to the Directors of Training, who then distributed them to the students and supervisors at their training facility. Each questionnaire

contained a cover letter describing the study and indicating how the investigator could be contacted to answer questions. An addressed, stamped envelope was clipped to each questionnaire distributed. Participants willing to complete the questionnaires did so and then returned the completed surveys to the investigator by mail, sealed in individual envelopes. In this way, anonymity and confidentiality were able to be preserved.



## CHAPTER IV

### RESULTS

#### Philosophy of Supervision

As noted above, each participant was asked a few questions about his or her general philosophy of supervision. In order to explore the impact of professional status and theoretical orientation on this philosophy, separate analyses of variance were performed on the responses to each question.

Participants were presented with the following supervisory model statements:

I see the supervisor as someone who:

\_\_\_\_\_ Gives the trainee instructions about what to do in therapy

\_\_\_\_\_ Acts as a mentor, overseeing the student's professional development, while leaving the teaching to his graduate program

\_\_\_\_\_ Acts as a teacher, helping the trainee to learn about his clients and techniques he can use to work with them

\_\_\_\_\_ Has as his primary focus the development of the trainee into someone who has the personal awareness and adjustment to help clients effectively

Of the 52 trainees, seven endorsed statement 1 (13.4%), 13 statement 2 (25.0%), 35 statement 3 (67.3%), and 23 statement 4 (44.2%). Of the 54 supervisors, 19 endorsed statement 1 (35.2%), 15 statement 2 (27.7%), 45 statement 3 (83.3%), and 23 statement 4 (42.6%). Of the 33 trainees endorsing only one of the four models, six chose model 2 (18.4%), 16 model 3 (48.4%), and 11 model 4 (33.3%). Of the 27 supervisors endorsing only one model statement, one chose 1 (3.7%), two model 2 (7.4%), 20 model 3 (74.1%), and four model 4 (14.8%). No significant relationships were found between espoused model and theoretical orientation, a failure to support Hypothesis 1. Likewise, choice of model statements was not found to be significantly related to professional status. Accordingly, choice of model (using only those participants who selected a single model statement) was included as a third, exploratory independent variable in the further analyses of this section of the questionnaire.

All participants were asked to complete the sentence, "I see the function of supervision as being \_\_\_\_\_% skills training and \_\_\_\_\_% personal growth." Analyses of variance were then done of the responses, analyzing for professional status (trainee vs. supervisor), theoretical orientation (collapsing for psychodynamic vs. other), and espoused supervisory model. Four separate analyses were done, using professional status, theoretical orientation and one of the model statements (coded yes or no) as the independent variables and percent allotted to skills training as the dependent variable. No significant

interactions were observed between any of the independent variables. No significant main effects were noted for status or orientation, thereby failing to support Hypothesis 2. However, there were significant main effects noted for models 3 and 4, such that people choosing model 3 saw skills training as being more important ( $\underline{M} = 74.72\%$ ,  $\underline{SD} = 13.78$ ) than did those choosing other models ( $\underline{M} = 52.92\%$ ,  $\underline{SD} = 20.90$ ),  $\underline{F}(1,56) = 19.745$ ,  $p < .001$ . Those people endorsing model 4 saw skills training as being less important ( $\underline{M} = 44.00\%$ ,  $\underline{SD} = 18.73$ ) than did those choosing other models ( $\underline{M} = 73.33\%$ ,  $\underline{SD} = 14.26$ ),  $\underline{F}(1,56) = 35.79$ ,  $p < .001$ .

Participants were then asked to respond to the question, "How critical do you feel a positive supervisory relationship is for a good learning experience?," by circling a number on a scale from 1 (not at all) to 6 (critical). Again, analysis of variance were done for professional status, theoretical orientation, and espoused model. No main effect was noted for status, nor was one noted for theoretical orientation (a failure to support Hypothesis 3). However, there was a significant interaction between status and orientation, with psychodynamic trainees seeing the relationship as most important ( $\underline{M} = 5.50$ ,  $\underline{SD} = 0.54$ ), psychodynamic supervisors ( $\underline{M} = 5.00$ ,  $\underline{SD} = 0.67$ ) and non-psychodynamic trainees ( $\underline{M} = 5.00$ ,  $\underline{SD} = 1.06$ ) less important, and non-psychodynamic supervisors as being the least important ( $\underline{M} = 4.89$ ,  $\underline{SD} = 0.93$ ,  $\underline{F}(1,84) = 4.35$ ,  $p < .05$ ). The implication is that within status groups, psychodynamic participants do see the relationship as more

important than non-psychodynamic participants, but that this relationship is affected by the trend for trainees as a group to see it as more crucial than supervisors. Lastly, a main effect was noted for model statement 4, such that those endorsing model 4 saw the relationship as more important ( $\underline{M} = 5.53$ ,  $\underline{SD} = 0.64$ ) than did those choosing other models ( $\underline{M} = 4.89$ ,  $\underline{SD} = 0.88$ ),  $\underline{F}(1,56) = 5.937$ ,  $p < .05$ . It should be noted that all responses clustered in the upper half of the scale, a pattern which suggests that all participants see the relationship as important.

Finally, participants were asked to respond to the question, "How much time do you feel should be spent in supervision focusing on the supervisory relationship?," by circling a number on a scale from 1 (should be the main focus) to 6 (should not be brought up). Again, analyses of variance were performed on these responses across professional status, theoretical orientation, and supervisory model. As in the previous question, no main effects were found for status or for theoretical orientation (a failure to support Hypothesis 4). A significant main effect was noted for model 3, such that those choosing model 3 felt less time should be spent ( $\underline{M} = 3.99$ ,  $\underline{SD} = 0.92$ ) than did those choosing other models ( $\underline{M} = 3.46$ ,  $\underline{SD} = 1.06$ ),  $\underline{F}(1,56) = 4.902$ ,  $p < .05$ . A similar main effect was noted for model 4, such that those choosing 4 felt more time was desirable ( $\underline{M} = 3.33$ ,  $\underline{SD} = 1.05$ ) than did those choosing other models ( $\underline{M} = 3.92$ ,  $\underline{SD} = 0.95$ ),  $\underline{F}(1,56) = 4.409$ ,  $p < .05$ . A significant interaction ( $\underline{F}(1,56) = 4.66$ ,  $p < .05$ ) was noted

between status and model 3, with the amount of time considered appropriate by supervisors being approximately equal whether they selected model 3 ( $\underline{M} = 3.73$ ,  $\underline{SD} = 0.88$ ) or not ( $\underline{M} = 3.86$ ,  $\underline{SD} = 1.07$ ), whereas trainees selecting model 3 felt less time was appropriate ( $\underline{M} = 4.31$ ,  $\underline{SD} = 0.87$ ) than did trainees preferring other models ( $\underline{M} = 3.29$ ,  $\underline{SD} = 0.93$ ). Finally, a significant interaction ( $\underline{F}(1,43) = 5.664$ ,  $p < .05$ ) was noted between orientation and model 4, such that psychodynamic participants choosing model 4 felt less time was appropriate ( $\underline{M} = 4.67$ ,  $\underline{SD} = 0.58$ ) than did psychodynamic participants choosing other models ( $\underline{M} = 3.57$ ,  $\underline{SD} = .086$ ), while non-psychodynamic participants choosing model 4 felt more time was appropriate ( $\underline{M} = 3.20$ ,  $\underline{SD} = 0.79$ ) than did non-psychodynamic participants choosing other models ( $\underline{M} = 4.13$ ,  $\underline{SD} = 1.01$ ).

In summary, there was little support for the notion that philosophy of supervision is affected by theoretical orientation. None of the hypotheses made about orientation were supported. Likewise, there were no systematic differences noted between supervisors and trainees in the way they conceptualize the process of supervision. What differences occurred seemed to be related to choice of supervisory model statement, a variable which was expected to mirror theoretical orientation but instead seems to carry independent meaning.

## Problem Management in Supervision

Participants were presented with a series of hypothetical problem situations which arise in supervisory relationships. They were asked to consider each of the problems in turn and answer the questions presented in Table 1 in reference to each one of the situations. In order to analyze this close-ended section of the questionnaire, a repeated measures analysis of variance was performed for each question, with the six problem areas serving as the within subject variable and status as the between subjects variable. This analysis was then repeated, with theoretical orientation (psychodynamic vs. other) as the independent variable.

First, participants were asked to respond to the question, "How important is it that the situation be brought up in supervision?" by circling a number from 1 (critical) to 6 (not at all). Analyses yielded no significant main effects for status, nor for orientation. Likewise, neither of these variables interacted significantly with problem situation. Participants universally indicated that problems in the trainee's personal life should not be discussed ( $\bar{M} = 4.95$ ), while all other problem situations should be discussed ( $\bar{M}$ s = 1.49, 1.43, 1.19, 1.17, and 1.09 for problem situations two through six, respectively).

Next, participants were asked to respond to the question, "Should the supervisor be the one to initiate such a discussion?" by

circling a number between 1 (definitely) and 6 (definitely not). The analysis for professional status yielded a significant main effect for status,  $F(1,97) = 26.76$ ,  $p < .001$ . However, the direction of the significant difference was the opposite of the one predicted in Hypothesis 5, with supervisors feeling more strongly than students that the supervisor should be the one to initiate the discussion. Additionally, the interaction between status and problem situation was also significant,  $F(5,485) = 6.68$ ,  $p < .001$ . Here, trainees and supervisors agreed that the supervisors should not initiate discussion about the trainee's personal problem, but that the supervisor should initiate discussion about problems in meeting professional responsibilities. Supervisors then continued to claim responsibility for initiating discussion for all further problem areas, while students tended to see it as less strongly the responsibility of the supervisor, particularly for personality clash and theoretical orientation differences. The response curves for this question are depicted in Figure 1.

The repeated measures analysis for this question across theoretical orientation yielded a significant main effect,  $F(1,84) = 5.98$ ,  $p < .05$ . The interaction of orientation with problem situation was not statistically significant. Here, regardless of the problem area, psychodynamic participants tended to lay responsibility for initiating discussion more clearly on the supervisor than did non-psychodynamic participants. The divergence noted on problems 3 and 4 was not evident here.

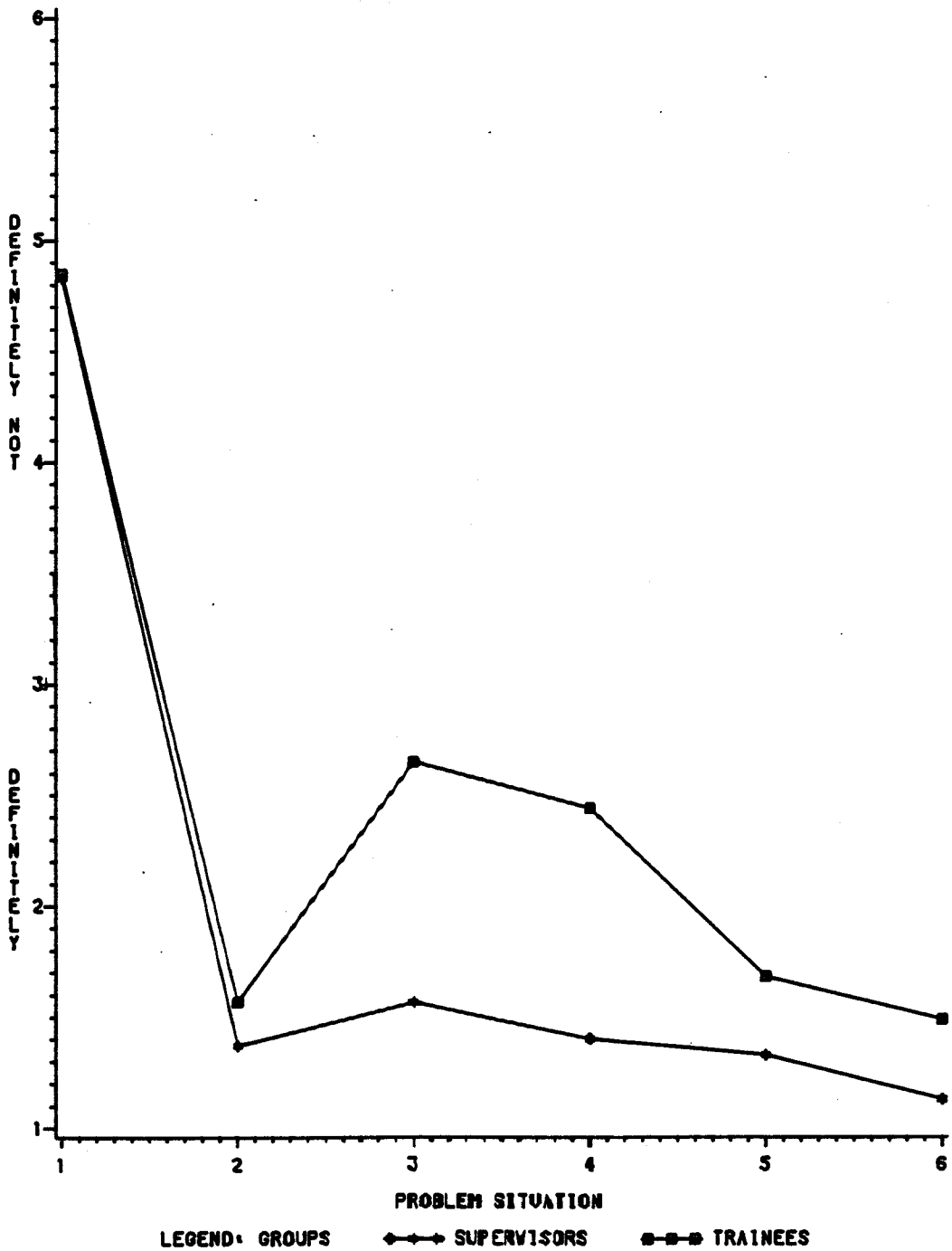


FIGURE 1: Responses to "Should the supervisor be the one to initiate such a discussion" Across Problem by Status



The participants were then asked to respond to the question, "How should the supervisors address the situation?" by checking one of five possibilities, ranging from 1 (Do nothing--do not identify the problem) to 5 (Work in supervision to explore and resolve the situation), with the amount of discussion and interpretation increasing at each level. Neither a main effect nor an interaction were noted for professional status, with all participants checking either 4 or 5 for all problem situations except a problem in the trainee's personal life, for which responses clustered between 2 and 3 universally. The same configuration appeared when the analysis was repeated for theoretical orientation, with neither a significant main effect nor a significant orientation by problem interaction being found. The failure of analysis to demonstrate main effects for either status or theoretical orientation shows a lack of support for Hypotheses 6 and 8.

Participants were next asked to respond to the question, "How important is it that the trainee be referred for personal therapy?," by circling a number from 1 (not at all) to 6 (crucial). A significant main effect was noted for professional status,  $F(1,95) = 5.10$ ,  $p < .05$ . Here supervisors felt personal therapy was more desirable than did trainees, regardless of the problem situation, with all responses falling in the bottom half of the scale for situations one through four and in the top half for situations five and six. The status by problem situation interaction was not significant. The mean

responses to this question, broken down by status, are depicted in Figure 2. The analysis of this question by theoretical orientation was not significant, although a trend was noted, such that psychodynamic participants saw therapy as more desirable, regardless of problem, than did non-psychodynamic participants,  $F(1,81) = 3.38$ ,  $p < .10$ . This result shows marginal support for Hypothesis 10, but fails to demonstrate it in a statistically significant manner.

Next, participants were asked to respond to the question, "How desirable is a change of supervisors," by circling a number from 1 (crucial) to 6 (not at all). In this analysis, the main effect for status was not significant (thereby failing to support Hypothesis 7), but the status by problem interaction was significant,  $F(5,445) = 2.53$ ,  $p < .05$ . Trainees saw supervisory switches as slightly more desirable than did supervisors for problem situations one through four, with this pattern reversing for problems five and six. All participants tended to be more open to switching in cases of personality clash and theoretical orientation differences than they were for other areas; however, responses as a whole tended to cluster in the top half of the scale, suggesting an overall reluctance to exercise this option as a means of problem resolution. Mean responses for this analysis, broken down by status, are shown in Figure 3. No differences at all were noted for theoretical orientation, with both the main effect and the interaction failing to achieve significance. This result fails to support the difference hypothesized in Hypothesis 9.

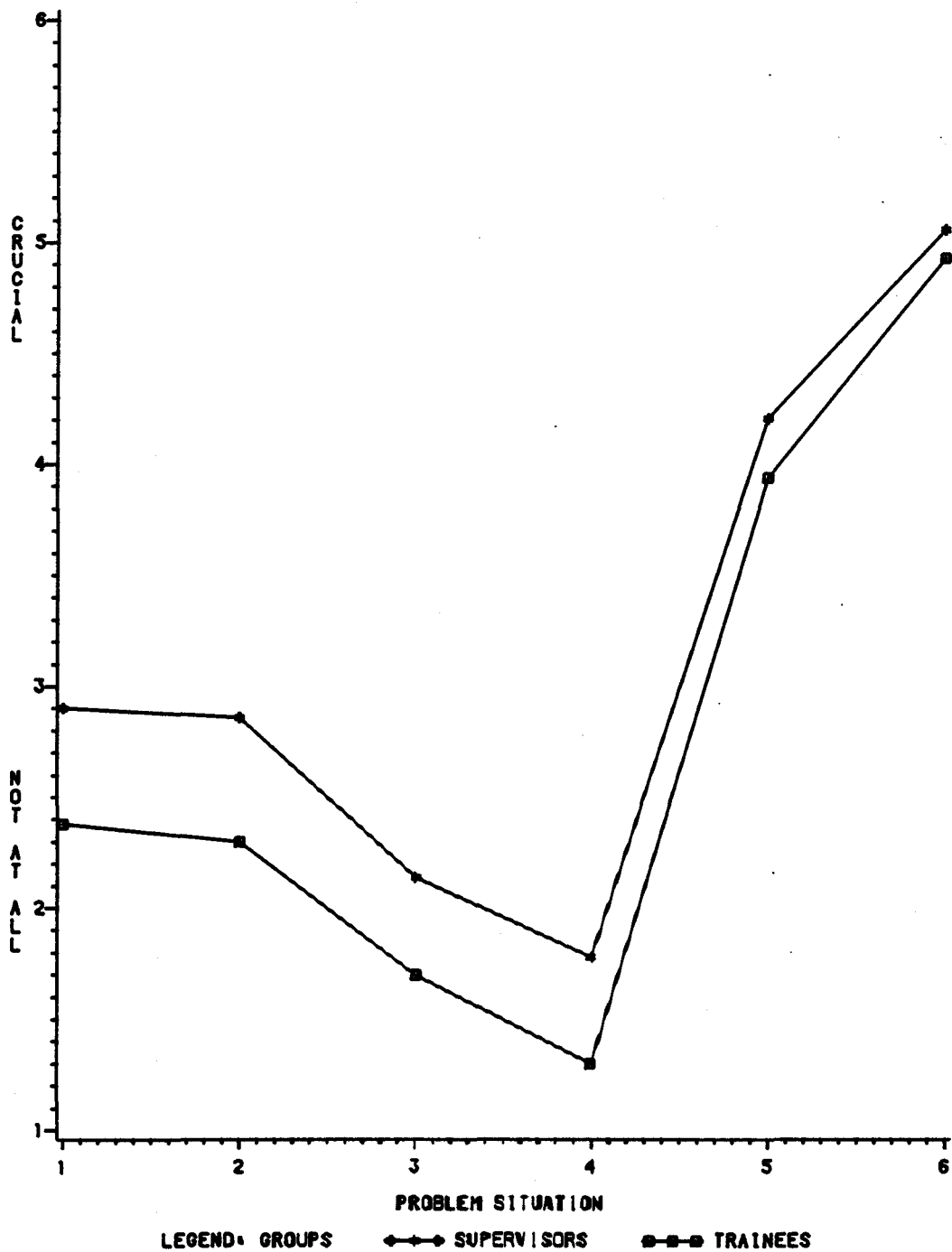


FIGURE 2: Responses to "How important is it that the trainee be referred for personal therapy" Across Problem by Status

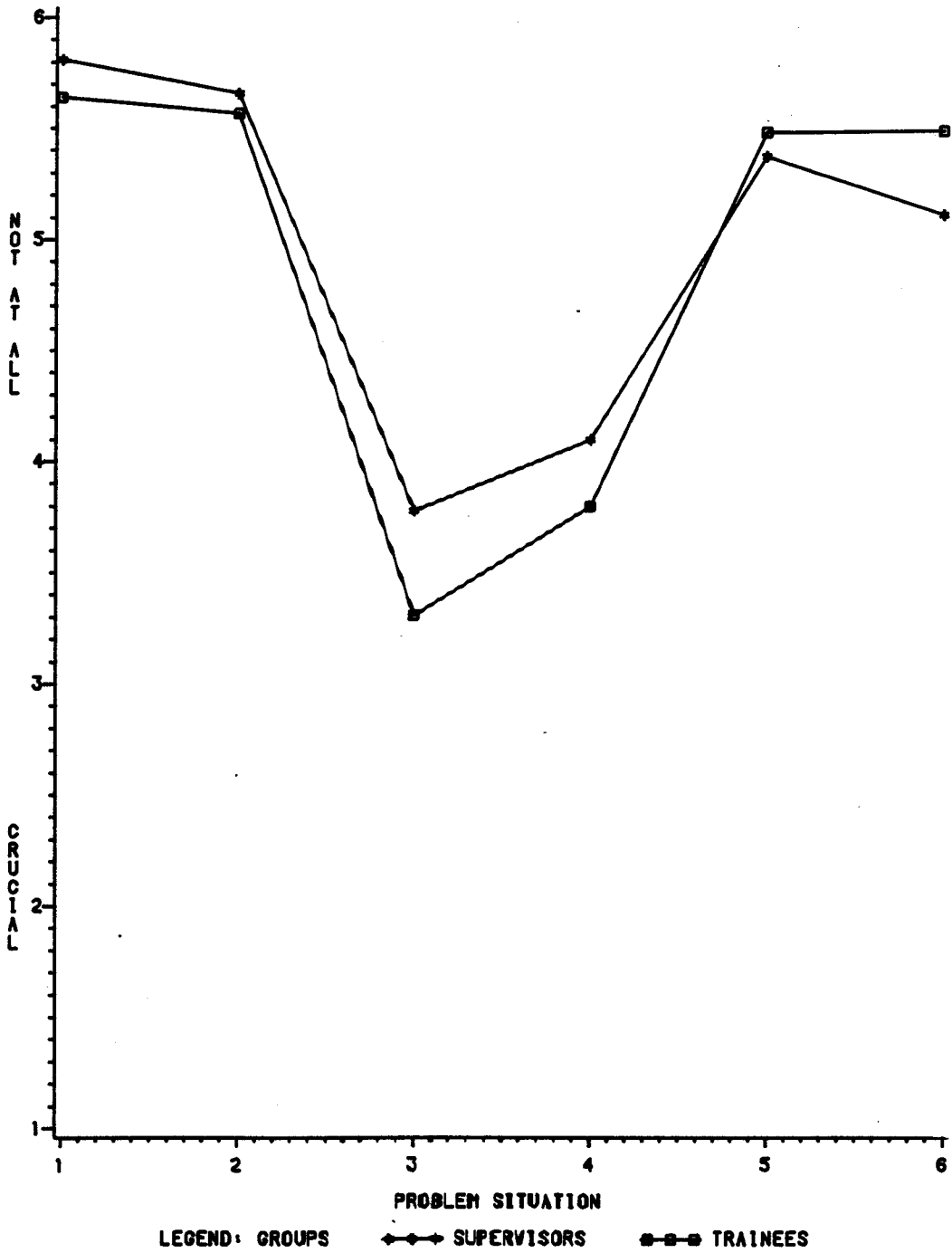


FIGURE 3: Responses to "How desirable is a change of supervisors"  
Across Problem by Status

Finally, participants were asked to respond to the question, "If this situation is handled as you have indicated, what are the chances the supervisory experience will be a positive one?," by circling a number from 1 (no chance) to 6 (very likely). The main effect for status was not significant, but a significant status by problem interaction was noted,  $F(5,465) = 2.27, p < .05$ . Participants in general were fairly optimistic, with all responses clustering between four and six, but supervisors were more optimistic than trainees for problem situations one (problems in the trainee's personal life), two (problems in meeting non-therapy professional responsibilities), and four (differences in theoretical orientation), and trainees were more optimistic than supervisors for problem situation six (personality problems affecting the trainee's work with more than one client). Mean responses for this question, broken down by status, are depicted in Figure 4. The analysis for orientation yielded no significant effects, although a trend was noted toward an orientation by problem interaction,  $F(5,400) = 2.03, p < .05$ , with psychodynamic participants being slightly more optimistic than non-psychodynamic participants in problem situations one (personal life problems for trainee) and three (personality clashes).

In summary, data analysis failed to support any of the Hypotheses made for either theoretical orientation or professional status. Marginal support in the form of a non-significant trend, was afforded for Hypothesis 10. Two main effects for professional status

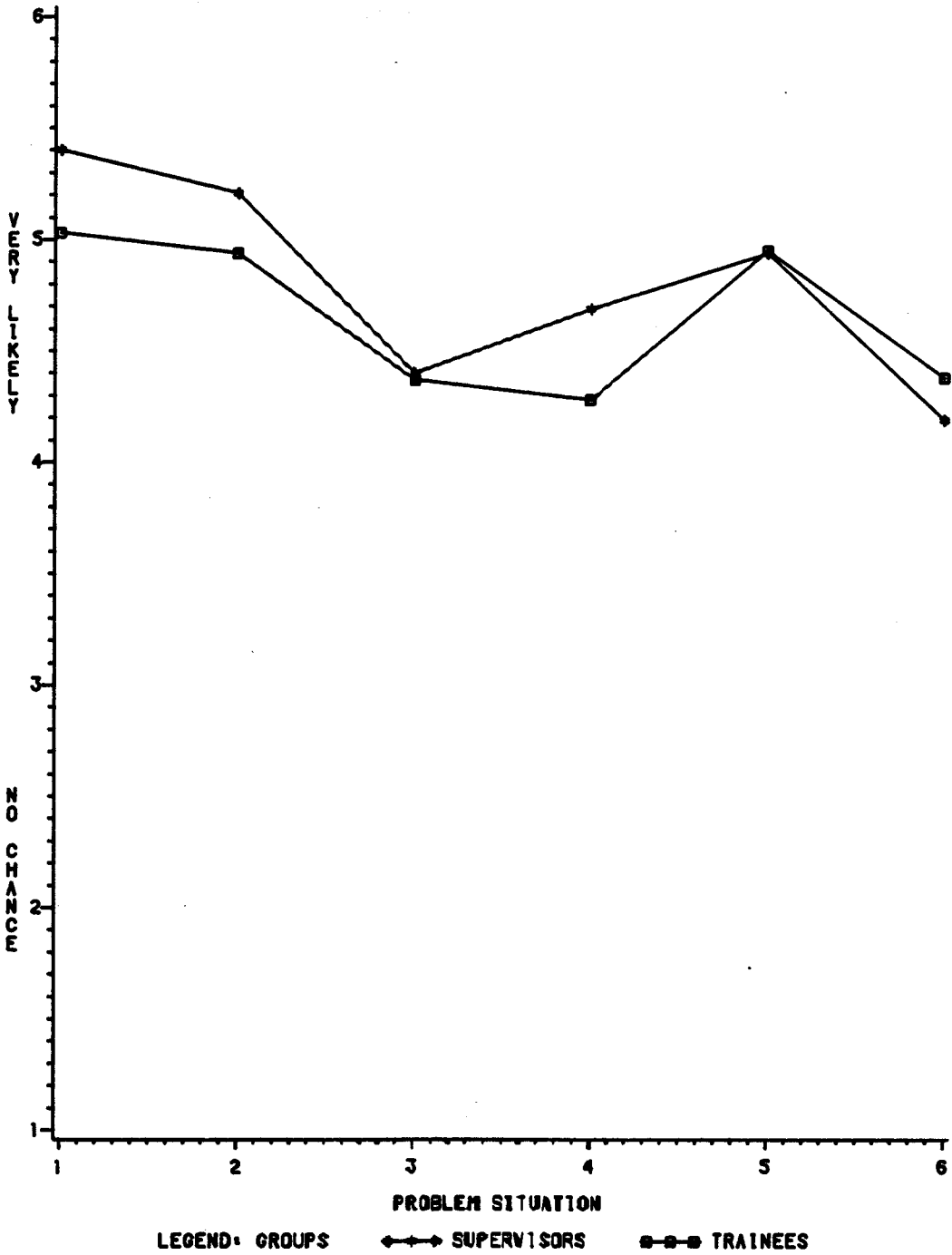


FIGURE 4: Responses to "If this problem is handled as you have indicated, what are the chances the supervisory experience will be a positive one" Across Problem by Status

were found, the first being that supervisors more strongly than students saw it as the supervisor's responsibility to initiate discussions about problems and the second being that supervisors consistently stated that a therapy referral was desirable more strongly than students. Three significant interactions between status and problem situation were noted, first for the responsibility of supervisors to initiate discussion of problem situations, second for the desirability of switching supervisors, and last for the likelihood of a positive outcome. The nature and direction of these interactions are presented in Figures 1, 3, and 4, respectively. One significant main effect was noted for theoretical orientation, indicating that psychodynamic participants consistently saw a referral for personal therapy as more desirable than did non-psychodynamic participants. No significant orientation by problem situation interactions were noted.

At the end of this portion of the questionnaire, participants were asked to indicate whether or not they had ever experienced each of the problem situations in supervisory relationships. For the first problem situation, a problem in the student's personal life which was not affecting his professional functioning, 47 out of 53 supervisors indicated that they had experienced this problem at some point, while 24 of 52 trainees said they had experienced it. For problem area 2, failure to fulfill professional responsibilities other than psychotherapy, 52 of 54 supervisors and 12 of 52 trainees indicated

that they had experienced this problem before. For problem 3, conflicting personalities, 39 of 54 supervisors and 35 of 52 trainees indicated that they had experienced this problem in their supervisory relationships. For problem area 4, differing theoretical orientations, 42 of 54 supervisors and 26 of 52 trainees indicated that this had been a problem for them at some point. For problem area 5, personality vulnerabilities in the trainee affecting work with one of his clients, 48 of 54 supervisors and 21 of 52 trainees indicated that they had experienced this problem at some point. For problem area 6, personality vulnerabilities affecting work with more than one client, 34 of 54 supervisors and 3 of 52 trainees indicated that they had experienced this problem at some point.

Each subject who had responded positively to having experienced a problem was then asked to indicate whether or not the problem had been resolved to his satisfaction. For problems in the trainee's personal life, 45 of 45 supervisors felt it had been satisfactorily resolved, and 23 of 26 trainees reported being satisfied. For professional functioning problems, 43 of 47 supervisors and eight of 12 trainees were satisfied with the outcome. For personality clashes, 28 of 35 supervisors and 15 of 36 trainees were satisfied. For theoretical orientation differences, 34 of 39 supervisors and 21 of 27 trainees were satisfied with the outcome. For problem 5, personality vulnerabilities affecting one client, 35 of 43 supervisors and 19 of 24 trainees were satisfied with the resolution of the



problem. Finally, for personality vulnerabilities affecting more than one client, 14 of 28 supervisors were satisfied, while all three trainees felt the problem had been satisfactorily resolved.

### Negative Case Studies

Problem descriptions. Following the consideration of these hypothetical supervisory problems, participants were all asked to reflect on their own real life supervisory relationships. They were first asked to think about a particularly poor supervisory experience they had actually experienced and to describe the major problems, as well as the characteristics of the other person or the situation which contributed to the difficulty. The written responses were then grouped into categories by two raters, working together. Up to three problem categories were coded for each subject. Of the trainees returning questionnaires, twenty listed only one problem as contributing to the difficulty and 22 listed two problems, with only six trainees listing three problems. Four trainees did not respond to this question. Of the supervisors responding to this question, twenty-six listed only one problem as contributing to the difficulty and 18 listed two problems, with only six listing three problems. Four supervisors did not respond to this question.

A tabulation of the trainees' responses to the nature of the problem experienced is presented in Table 2. As can be seen, of the problems noted, 21 had to do with basic differences between supervisor

and trainee, either in personality (nine participants) or in theoretical orientation (12). Three laid responsibility on the supervisor's individual pathology. The remainder of students noted problems which had to do with the supervisory style adopted (lack of availability, 13; not supportive, 6; lack of theoretical direction, 14; therapeutic supervision, 1; and sole use of critical feedback, 10). Of the problems mentioned first (or only) by trainees, the four complaints most frequently made were theoretical orientation differences (11 times), lack of theoretical direction (9 times), lack of availability (9 times), and use of critical feedback only (7 times).

In contrast, a tabulation of responses made by supervisors to this question are presented in Table 3. Of the 50 supervisors describing problematic relationships, 19 listed personality issues in the trainee impacting on his relationship with clients and with the supervisor as responsible, while 14 cited personality issues in the trainee affecting only the supervisory relationship and six that the trainee adopted a superior stance with the supervisor. Others indicated problems were related to other qualities of the trainee, (anxiety levels, 9; poor clinical skills, 6; failure to meet professional responsibilities, 6). Some commented on differences between themselves and the trainees (personality clash, 3; theoretical orientation differences, 7), and some to extra-relationship problems in the training site (4). Of the above mentioned problem areas, three most frequently listed first were trainee's anxiety, personality issues

TABLE 2

## Supervisory Problems Listed by Trainees

| <u>Problem Category</u>                           | <u>Number of Trainees</u> |
|---|---------------------------|
| Personality clash                                 | 9                         |
| Supervisor not available (late,<br>disinterested) | 13                        |
| Supervisor not supportive                         | 6                         |
| Lack of theory, direction provided                | 14                        |
| Differing theoretical orientations                | 12                        |
| Pathology of supervisor                           | 3                         |
| Therapy in supervision                            | 1                         |
| Only critical, unconstructive feedback            | 10                        |
| Supervisor too directive                          | 4                         |

affecting the supervisory relationships, and personality issues affecting the supervisory and client relationships.

Students were asked at what point in their training these problems occurred. Eighteen indicated that it had been during a beginning practicum experience, while 13 indicated that it had occurred during an advanced practicum experience. Finally, 16 indicated that it had occurred during their internship training. One of the students listing a problematic experience failed to respond to this question. Five supervisors reported problems had occurred while supervising a beginning practicum experience, while eight indicated that it had occurred during an advanced practicum experience. Finally, 38 indicated that it had occurred while supervising an internship experience. The supervisors reported an average of 7.68 years supervisory experience at the time of the difficulty ( $SD = 6.78$ ).

Nine students indicated that they had been working with inpatients at the time, while 31 were working with outpatients. Nine were working with children, nine with adolescents, and 20 with adults. Twenty-six were doing predominantly individual treatment, two were doing couples treatment, five family treatment, two group treatment, two psychological testing, and three several types of treatment. The supervisors reported that seventeen problems occurred while supervising work with inpatients at the time, while 24 were with outpatients. Ten were working with children, five with adolescents, and 25 with

TABLE 3

## Supervisory Problems Listed by Supervisors

| <u>Problem area</u>   | <u>Number of supervisors</u> |
|---|------------------------------|
| Trainee anxious   | 9                            |
| Personality issues affecting<br>relationship with supervisor                | 14                           |
| Personality issues affecting<br>relationship with supervisor<br>and clients | 19                           |
| Trainee adopts superior stance<br>vis a vis supervisor                      | 6                            |
| Differing theoretical orientations  | 7                            |
| Personality clash   | 3                            |
| Poor skills/insufficient training<br>in student                             | 6                            |
| Supervisory style problems  | 1                            |
| Internal politics at training site  | 4                            |
| Non-therapy responsibilities not met<br>by student                          | 6                            |
| Other   | 5                            |

adults. Twenty-seven were supervising mostly individual treatment, four mostly family treatment, three group treatment, one psychological testing, and six several different types of treatment.

Discussions of the problem. Of the 51 problematic experiences related by trainees, 27 were reportedly discussed within the context of supervision, 20 of these 27 discussions being trainee-initiated. In contrast, of the 51 problematic experiences reported by supervisors, 50 were reportedly discussed within the context of supervision, 47 of these 50 discussions being supervisor-initiated.

Those participants who indicated that some form of discussion of the problem had occurred were asked to briefly describe the nature of this conversation. Four of the 27 trainees reporting that discussion had occurred indicated that this discussion had taken place only indirectly, on a case by case basis. Seven reported that discussion had involved a problem identification only, while seven more reported that exploration of the problem occurred during the discussion. Six trainees reported that the discussion involved an identification of the problem, followed by a specific request for change. Finally, two trainees reported that identification of the problem had resulted in an argument between supervisor and trainee. Of the 27 discussions, only two resulted in a change of supervisors.

Three of the 50 supervisors having discussed the problem reported that this discussion had taken place only indirectly, on a

case by case basis. Eighteen reported that discussion had involved a problem identification only, while two more involved identification with reassurance of the trainee. Sixteen reportedly involved problem identification followed by exploration of the underlying factors involved, and nine involved problem identification followed by the adoption of a remedial plan. In two cases, ultimatums were given to the trainees. Of the 50 discussions, only two resulted in a change of supervisors, while two resulted in the student being terminated from the practicum.

Those participants who reported that discussion had taken place were then asked to indicate how the quality of learning had changed after the discussion by circling a number from 1 (much worse) to 4 (no change) to 7 (much better). The trainees as a group reported a very mildly positive change ( $\bar{M} = 4.33$ ,  $SD = 1.27$ ), with responses varying across the entire scale. To examine the possibility that the type of problem involved might affect outcome, the problems mentioned were grouped into three categories, problems involving personality differences (lack of perceived interest/availability being included in this category), orientation differences, and supervisory style issues. These categories were then used as an independent variable for an analysis of variance, using changes following discussion as the dependent variable. This analysis failed to approach significance,  $F(2,24) = 1.81$ , ns.

Supervisors who reported that discussion had taken place were also asked to indicate how the quality of learning had changed after the discussion by circling a number from 1 (much worse) to 4 (no change) to 7 (much better). The supervisors as a group also reported a mildly positive change ( $M = 4.57$ ,  $SD = 1.06$ ), with responses varying across the entire scale. Here, again, problem categories were collapsed to contrast those problems which reflected personality issues of either the trainee or between trainee and supervisor with other types of issues. These broader categories were then used as an independent variable for an analysis of variance, the dependent variable being changes occurring following discussion. This analysis also failed to achieve significance,  $F(1,47) = .11$ , ns.

Trainees who indicated that no discussion had occurred ( $N = 24$ ) were asked to indicate how they otherwise coped with the situation. Nine reported that they had sought out the advice of other supervisors, while eight relied on peer consultation. Four attempted to comply with their supervisor's wishes, with three trainees similarly indicating that they merely "waited out" the training experience. The rest (relatively fewer) relied on evasive strategies, with three censoring case materials, two avoiding supervision appointments, and one leaving the training experience altogether.

These trainees were further asked how much they had gained from supervision despite the problems by circling a number between 1 (noth-



ing) and 6 (a great deal). Here, trainees were much more negative ( $M = 2.57$ ,  $SD = 1.53$ ), although responses again varied across the entire scale. To explore the possibility that certain types of problems may impede supervisory gain less than others, an analysis of variance was performed on this scale across the three problem categories previously outlined. Again, the analysis failed to approach statistical significance,  $F(2,20) = .91$ , ns.

The one supervisor who reported that no discussion occurred was asked to indicate how he had otherwise coped with the situation. The subject reported that he had relied on consultation with other supervisors in the training site for support and advice. This supervisor further reported that the trainee had gained a great deal from supervision, despite the problem (six on a scale from one (nothing) to six (a great deal)).

When asked to say, in retrospect, what they would have done or have wanted the supervisor to do differently, seven trainees responded that they would change nothing. A second group would have had the supervisors be different in the way they responded to the problem (i.e., more responsive to the student's feedback (six students) or to have initiated the discussion themselves (one student)). A larger group would have wanted the supervisor to be different in the first place (i.e., supervisor gives positive feedback also (five students), supervisor gives feedback about therapist (one student), supervisor

not problematic at all (ten students)). The largest group would have preferred that they themselves had confronted the situation more aggressively, either by requesting a change of supervisors (seven students), by discussing the problem sooner (six students), or by discussing it more directly (eight students).

When asked to say, in retrospect, what they would have done or have wanted the trainee to do differently, 15 supervisors responded that they would change nothing. Ten indicated that they would have explored the problem more fully, one would have removed the intern from the training site, nine would have discussed the problem sooner, eight would have liked the trainee to have been more open to discussion, one would have been more reassuring to the trainee, five would have adopted a structured remedial plan, two would have directed the trainee to take his difficulties to personal therapy, one would have switched supervisors, and one would have limited the clients assigned to the trainee. Four would have not accepted the trainee in the first place. Five supervisors left this question blank.

Points which arise in examining these responses include the fact that students tended to conceptualize the problem in terms which involved the supervisor/supervisee match, while supervisors tended to prefer conceptualizations which attributed the problems to qualities of the trainee alone. Both supervisees and supervisors seemed to feel that improvement resulted from discussion of the problem, with no evi-

dence being found to suggest that any particular type of problem was more difficult to resolve than others. Finally, supervisees tended to feel more negatively about the what was gained from conflictual supervisory experiences than did supervisors.

### Positive Case Studies

Following these questions about problematic situations, trainees were asked to consider a particularly good supervisory experience and to describe the characteristics which made it so positive. Again, up to three attributes were recorded per narrative. The results of trainee responses to this request are tabulated in Table 4. The most frequently mentioned factor was that the supervisor helped the trainee to maintain self-esteem during the learning process. Next frequent was the notion that the supervisor was theoretically challenging to the student, followed by liking the supervisory style of the supervisor. Other qualities frequently mentioned were that the supervisor was committed to teaching, the supervisor was clinically skilled himself, the supervisor's orientation was the same as the trainee's, the supervisor was sensitive to the trainee's learning needs, the supervisor encouraged independence, a positive personal relationship outside of supervision, and use of supervision to discuss the trainee's professional development. Of these factors, the four most frequently mentioned first by students were maintenance of the trainee's self-esteem, commitment to teaching, clinical skill, and a positive personal relationship.

TABLE 4

## Positive Attributes Listed by Trainees

| <u>Attributes</u>   | <u>Number of trainees</u> |
|---|---------------------------|
| Supervisor committed to teaching                                  | 10                        |
| Helped trainee to maintain self-esteem<br>while learning          | 18                        |
| Supervisor clinically skilled                                     | 9                         |
| Similar theoretical orientations                                  | 5                         |
| Supervisor sensitive to trainee's<br>learning needs               | 5                         |
| Theoretically challenging   | 16                        |
| Encouragement of trainee's independence<br>without abandoning him | 9                         |
| Positive personal relationship                                    | 10                        |
| Discussion of trainee's professional<br>development               | 7                         |
| Supervisory format/style  | 15                        |

Supervisors were also asked to consider a particularly good supervisory experience and to describe the characteristics of it which made it so positive. Again, up to three attributes were recorded per narrative. These responses are tabulated and presented in Table 5. The most frequently mentioned factor was the notion that the trainee was open to learning. Similarly, many indicated that the trainee was open to self-examination within the context of supervision. Three described relationships in which there were problems which led to a positive resolution, others in which the trainee demonstrated innate skill, some in which the trainee was theoretically challenging to supervise, some in which the trainee structured his own supervision situations. Still others described situations where trainee and supervisor had similar conceptualizations of clients, where the trainee had been particularly conscientious, or where there was good personal rapport, some where the trainee was seen as growing across the supervisory experience, and others where the trainee saw supervision as a collaborative process. Of these factors, the two most frequently mentioned first by supervisors were the trainee's openness to learning and innate skill in the trainee.

Trainees reported that three of these positive experiences occurred in beginning practicum experiences, 27 in advanced practicum experiences, and 22 while on internship. Twelve were reportedly in an inpatient setting, 29 in an outpatient setting (11 failed to specify the setting). Five were while working with children, eight with ado-

TABLE 5  
Positive Attributes Listed by Supervisors

| <u>Attributes</u>                       | <u>Number of Supervisors</u> |
|---|------------------------------|
| Early problems with optimal outcome     | 3                            |
| Innate clinical skill in trainee        | 11                           |
| Openness to learning in trainee         | 13                           |
| Trainee challenging to supervisors      | 5                            |
| Trainee structures his own supervision  | 5                            |
| Similar theoretical conceptualizations  | 6                            |
| Trainee open to self-examination        | 11                           |
| Trainee is conscientious in his work    | 4                            |
| Good personal relationship              | 8                            |
| Trainee collaborates in his supervision | 3                            |
| Trainee grows across placement          | 7                            |

lescents, and 24 with adults (15 being left blank). Twenty-seven were predominantly focused on individual psychotherapy, six on family therapy, three in mixed modalities, and 16 unspecified.

Supervisors reported an average of 7.62 years supervisory experience at the time these positive relationships occurred ( $SD = 6.98$ ). Five of these experiences occurred while supervising beginning practicum experiences, seven in advanced practicum experiences, and 39 internship experiences. Nineteen were reportedly in an inpatient setting, 22 in an outpatient setting (13 failed to specify the setting). Twelve were while working with children, three with adolescents, and 27 with adults (12 being left blank). Twenty-five were predominantly focused on individual psychotherapy, five on family therapy, three on group therapy, one on psychological testing, and two on mixed modalities, 18 being unspecified.

## CHAPTER V

### DISCUSSION

#### Philosophy of Supervision

Supervisors tended to have a more broadly defined concept of the function of supervision, endorsing an average of 1.9 model statements, compared to trainees, who endorsed an average of 1.5 model statements. Further, students tended to prefer the more traditional models, three (teaching techniques) and four (furthering the personal development of the trainees), checking these items 58 of 78 times (78%). In contrast, supervisors endorsed these models only 68 of 102 times (67%), being more open than trainees to direct instruction and professional mentoring.

When one selects out only those participants who chose a single model statement (33 trainees, 27 supervisors), it becomes evident that supervisors tended to prefer in general a conservative, client-focused approach (20 of 27), veering away from focusing on trainee's personal growth (4 of 27). Trainees, on the other hand, were more likely to select this personal growth focus (11 of 33), although they also chose most often a client-focused, teaching model (20 of 33). The pattern



that is suggested is that while supervisors are more wide-ranging in their theoretical philosophy of supervision, they are less likely to adopt a therapist focus. Students, on the other hand, stick more closely to the two most common models, client-focused teaching and therapist-focused exploration, but within these two choices are more open to the second than are supervisors. This results seems to contradict the previously documented tendency for students to be unhappy with a therapeutic-like approach to supervision (Barnat, 1973; Rosenblatt & Mayer, 1975). It is not clear whether, in fact, this represents a true difference from previous responses or whether students here are endorsing an approach in theory which they might not feel comfortable with in practice. It is important to remember, in this regard, that "therapy in supervision" was not one of the complaints later made by the trainees in their case reports.

While the remaining general philosophy questions in this section about supervision and the importance of the supervisory relationship were expected to vary according to espoused theoretical orientation, these predicted relationships were not supported. Rather, it was the chosen model statement which yielded the bulk of the statistically significant variation. In particular, the choice between the client-focused teaching model and the therapist-focused personal growth model seemed to be the most powerful way to discriminate among subject groups. It should further be noted that there was no relationship noted between theoretical orientation (psychodynamic vs. others) and

espoused supervisory model. This finding contradicts the expectation that psychodynamic participants would more commonly select the personal growth model statements and non-psychodynamic participants the client-focused, teaching model.

Participants choosing the teaching model saw skills training as being a larger percentage of the function of supervision than did those choosing the personal growth model. They further saw a positive supervisory relationship as being less critical to a good learning experience and preferred that less time in supervision be devoted to examining this relationship. While theoretical orientation did figure into one significant interaction with status on the question about how critical the supervisory relationship is, it failed to yield any of the main effects hypothesized. Given that choice of model statements appears to be a more meaningful way of classifying participants in reference to their thoughts about supervision than theoretical orientation, further research exploring this variable seems indicated.

#### Problem Management and Professional Status

In this close-ended questionnaire, participants were presented with problems situations designed to range along the continuum of the extent to which they were likely to disrupt the therapist's psychotherapeutic functioning with his clients. The purpose of this part of the study was to determine whether or not supervisors and trainees agree on how the different situations should be handled. To the first

question, whether or not the problems should be discussed at all, little disagreement was noted. The consensus of supervisors and trainees seemed to be that all problems with the exception of problems in the trainee's personal life should be discussed within the supervisory context.

Students and supervisors did differ significantly on the issue of whether or not the supervisor should be the one to initiate this discussion. However, the direction of the noted difference was the opposite of the one predicted. It was hypothesized that trainees would be more likely than supervisors to prefer that the discussion be supervisor-initiated. To the contrary, trainees were less likely than supervisors to lay responsibility for initiating the discussion at the supervisor's door. Trainees were particularly likely to acknowledge their own responsibility for initiating discussions in the cases of theoretical orientation differences and personality clashes.

It was further expected that trainees would be more cautious in the amount of discussion/exploration they saw as optimal. This prediction was made based on the documented tendency of trainees to dislike aggressively exploratory supervision (Rosenblatt & Mayer, 1975). Moskowitz (1981) corroborated this finding, demonstrating that advanced students (students at the internship level or higher) were significantly more cautious than beginning students in the amount of exploration of underlying problems they saw as optimal. Given that

the trainees polled in this study were all advanced students, it was expected that they would endorse less exploration than the supervisors. This expected difference was not substantiated. Rather, supervisors and trainees responses clustered together, varying only by problem situation--4 or 5 on a 5 point scale for all problems except problems in the trainee's personal life, where responses for both groups tended to fall between 2 and 3.

The groups were found to differ in reference to the issue of whether or not a referral for personal therapy was indicated, with supervisors unilaterally seeing this as more desirable than trainees. This preference was evident regardless of the nature of the problem involved. One might speculate that this difference may be related to the difference in perspective between the person making the referral and the person receiving it. An alternative speculation is that, as a result of their years of experience, supervisors may be less optimistic about the ability of trainees to work through their concerns independent of professional help.

Around the issue of switching supervisors, there was no main effect difference noted between groups. However, trainees tended to be more open to this possibility than supervisors for the first four problem situations. Intriguingly, this pattern reverses for personality problems which disrupt therapeutic functioning. In these two instances, supervisors were more open than trainees to switching.

While the rationale for this reversal is again unclear, it is possible that this pattern is related in some way to the greater preference of students for a therapist-focused, personal growth model of supervision, which would indicate using the supervisory experience to explore these underlying personality issues. It was the case for all participants, however, that switching supervisors is seen as a more viable option for problems of theoretical orientation difference and of personality differences, perhaps because they are by definition problems in the supervisor-trainee pairing.

Finally, there was no main effect difference noted between the two groups for the likelihood of a positive resolution. Rather, students tended to be less optimistic about situations involving personal life problems, professional responsibility difficulties, and personality clashes, while they were more optimistic than supervisors about personality issues affecting therapy with more than one client. The surprising result for this question was the fact that for all problem situations participants tended to select outcomes ranging between four and six on a 6 point scale, with 6 reflecting a very high likelihood of the supervisory experience being a positive one in the end. This extreme optimism, regardless of situation, suggests that participants as a group tended to agree with the point of view in the literature that all problems in the supervisory experience can be rectified if handled appropriately.

Overall, students appeared to take a very idealistic stance in responding to these questions. The pattern of responses suggests that they subscribe to the notion that all issues should be handled directly, with student and supervisor taking an equal role in addressing the situations, that full exploration is indicated, and that, if handled in this way, positive outcome is extremely likely. This picture is congruent with the one presented, as a rule, in the theoretical literature (e.g., Ekstein & Wallerstein, 1972; Fleming & Benedek, 1966). While supervisors also responded to these questions in a manner consistent with the literature, they tended to be a little more cautious. This caution may be related to the increased experience they have had in actually trying to grapple with the situations described in the questionnaire. An alternative explanation might be the possibility that trainees were more reactive to the demand characteristics of the questionnaire, responding in a way that more closely matched the way the literature indicates one "should" conceptualize supervision--an extension of the need they may feel to be "good" supervisees.

#### Problem Management and Theoretical Orientation

No differences were noted across theoretical orientation on whether or not the problem should be discussed in supervision, with both psychodynamic and non-psychodynamic participants agreeing that all problems except for difficulties in the trainee's personal life

should be brought up. They did differ, however, in the extent to which they saw it as being the supervisor's responsibility to initiate this discussion. Psychodynamic participants indicated more strongly that this was the responsibility of the supervisor than did non-psychodynamic participants, regardless of the nature of the problem situation involved. One might speculate that the explanation for this finding is that it reflects the manner in which the supervisory relationship is conceptualized by psychodynamic theoreticians, such that the supervisor is seen as playing a role similar to that of a therapist in reference to the student. Following this line of reasoning, it would become the supervisor's responsibility to delineate the nature of problems which he perceives, as it is the therapist's responsibility to engender insight in clients. Non-psychodynamic participants, on the other hand, tended to place responsibility for initiating discussion more squarely in the middle of the scale, with supervisors and trainees sharing equal responsibility.

Surprisingly, psychodynamic and non-psychodynamic participants did not differ in the extent to which they felt full exploration and discussion of the underlying factors responsible for the problem was indicated. Although most psychodynamic theoreticians caution that supervision is not a personal therapy opportunity for the student (e.g., Fleming & Benedek, 1966), they do tend to advocate the use of discussion and exploration in supervision to delineate factors responsible for impasses in the trainee's work with clients. Given this

general position, it was expected that psychodynamic participants would advocate more extensive exploration than would non-psychodynamic participants. However, this pattern was not substantiated. Because of the commitment of psychodynamic theoreticians to exploring and working through" problems in the learning situation (Ekstein & Wallerstein, 1972; Fleming & Benedek, 1966), it was also expected that psychodynamic participants would be less open to switching supervisors as a means of resolving problems. However, here too the expected difference was not demonstrated. The only expected difference which was corroborated was the question about the importance of referring the trainee for personal therapy, with psychodynamic participants seeing this as being more important than non-psychodynamic participants.

In general, it can be said that theoretical orientation failed to be a powerful discriminator of participants' views about supervision. Just as was the case in the questions about general philosophy, the investigation of these problem situations failed to support the notion that psychodynamic participants and non-psychodynamic participants differ in the way they feel supervisory problems should best be addressed. In the general questions, what relationships were observed tended to involve supervisory model endorsed. At that time, it was suggested that perhaps this discrimination is the more powerful one. A fruitful source of future investigation would be exploring whether or not espoused supervisory model affects how participants feel problems such as these should be addressed.



## Case Experiences

The final major thrust of this study was to examine the question of what was actually happening in the supervisory experiences of these participants and to what extent these experiences were consonant with what they were saying about the ideal experiences they described in the second section. The first issue is to what extent these problems arise. When asked about each of the six problem situations described, supervisors reported having experienced the difficulty in numbers varying between 63 and 96%, depending on the problem. The problem most frequently experienced for supervisors was a trainee not meeting his non-therapeutic professional responsibilities, followed by a trainee experiencing personality difficulties which affect his work with one client. Trainees reported having experienced the situations in numbers ranging between 6 and 67%, depending on the problem. In their case, trainees most frequently agreed to having experienced a personality clash with a supervisor, followed by differing theoretical orientations.

There are two intriguing considerations about these results. The first is that while it is not surprising that supervisors are reporting having experienced these problems more frequently than trainees, having generally had more supervisory experiences than trainees, the number of trainees having experienced at least one of the problems is much higher than the 38.3% problem rate reported by

Moskowitz (1981). This higher rate may be attributable to the fact that the current study sampled only from advanced students, who have had a greater mean number of supervisory relationships than those sampled by Moskowitz, who questioned trainees of all levels of training. It is also the case that Moskowitz' questionnaire sampled a broad range of supervisory issues, whereas this one concentrated on the issue of difficulties in supervision, thereby increasing the likelihood that the questionnaires would be returned by people who had actually experienced such a difficulty. Nonetheless, the implication is that a substantial portion of all graduate students in clinical psychology experience some form of difficulty in their supervisory experiences at one point in their training. An even more suggestive inference from these statistics is that when thinking of problematic situations, supervisors tend to endorse most frequently problems which are centered in the student, while trainees most frequently place the responsibility on factors which are related to the trainee-supervisor match. This pattern is one which will be re-examined in greater detail below.

Those participants who indicated that they had experienced a particular problem were asked to indicate whether or not the difficulty had been resolved to their satisfaction. Responses to problem six, personality difficulties in the trainee affecting work with more than one client, diverged from those for the other problem situations, with 50% of supervisors feeling it had been satisfactorily resolved,

as contrasted to 100% satisfaction among the three trainees having experienced the problem. Excluding problem six, however, supervisors reported positive outcomes in numbers varying between 81 and 100%, depending on the problem. Trainees, on the other hand, reported positive outcomes in numbers ranging between 42 and 88%. The mean percentage of positive outcomes for supervisors was 88%, as compared with 58% for trainees. Further, the least number of positive outcomes for trainees occurred on the question about personality clashes, the problem situation most frequently experienced by trainees.

Again, two considerations are compelling. The first is that in all situations except for pervasive personality issues, trainees are markedly less pleased with outcomes than supervisors. The greatest differential is for personality clashes, with supervisors reporting positive outcomes 80% of the time and trainees reporting positive outcomes only 42% of the time. The second, and perhaps more important, consideration is that the incidence of trainee satisfaction in these actual experiences differs from the optimistic stance they took in the theoretical problem situations. In these questions, students took a very optimistic stance to the question, "If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one," regardless of the nature of the problem. The implication is that students are not as pleased as supervisors with the way problematic situations are being handled and, further, that they would prefer the problems be handled in a different way.

In order to investigate this possibility more completely, an examination of the individual problem situations was conducted. Toward this end, each subject was asked to describe a problematic supervisory relationship he had experienced, specifying the qualities about the relationship or the other person that contributed to the difficulties experienced. Responses made which reflect a problematic match between trainee and supervisor (either in personality or theoretical beliefs) comprised 12.5% of supervisors' comments (10 of 80), as contrasted with 29.1% (21 of 72) of trainees' comments. Responses which reflected some deficit or problem in the other individual comprised 75% (60 of 80) of supervisors' comments, as contrasted with 44.4% (32 of 72) of the trainees' comments. Responses which reflected some problem in the way the learning experience was approached (e.g., choice of supervisory style, amount of theoretical grounding, etc.) comprised 26.4% (19 of 72) of trainees' responses, as contrasted with 1.3% (1 of 80) of supervisors' responses.

Of course, it is difficult in some respects to differentiate between trainees objecting to choice of supervisory style in a supervisor and objecting to the supervisor. Nonetheless, these case experiences support the trend previously noted for trainees to conceptualize supervisory problems as being centered between the supervisor and trainee (a poor match), while supervisors tended to lay responsibility more frequently on some quality of or deficit in the trainee which was negatively impacting on the experience. While one might argue that

this pattern reflects the trainee's "one down" position in the supervisory relationship and that trainees were simply being more diplomatic than supervisors in responding to the questionnaires, it should be kept in mind that these questionnaires were returned individually and anonymously and could in no way be traced back to the respondents. As such, the differences noted may reflect a noteworthy discrepancy in the way supervisors and their students are conceptualizing the supervisory interchange. It is therefore possible that in attempting to discuss some current difficulty being experienced in a supervisory relationship, the two people involved in the discussion are conceptualizing the same problem situation in very different ways, a communication gap which may lead to some mutual frustration in attempting resolution.

If supervisors are conceptualizing most problems as being some difficulty in the student which needs to be addressed, they are less vulnerable than the student in raising the issue for discussion. Students, on the other hand, who are more likely to see the problem as a shared one, would feel much more vulnerable in such a discussion (both through accepting shared responsibility and through asking supervisors, who evaluate them, to consider accepting partial responsibility). It is therefore not surprising that supervisors reported discussion had occurred in 50 of 51 cases, while trainees reported discussion in only 27 of 51 instances. However, it also should be noted that this differential discussion rate may instead reflect dif-

ferences in the types of supervisors or supervisees who tended to complete and return the study questionnaire (e.g., particularly conscientious supervisors or particularly frustrated trainees).

The reported outcomes of these discussions are also intriguing. Despite the reported receptivity of both trainees and supervisors to the concept of switching supervisors as a possible solution to supervisory conflict, only four of 77 situations resulted in a change of supervisors (two by trainee report and two by supervisor report), suggesting that this option is more appealing on a theoretical level than it is on a practical level. Both trainees and supervisors reported outcomes which were only very mildly positive (4.33 and 4.57 on a seven point scale in which four was no change). This cautiously positive outcome stands out in contrast to the expressed optimism of both groups in the theoretical case examples previously discussed, in which participants were asked to predict outcome given that the situation were handled as they had specified. The inference is that the resolutions achieved in problem situations were somewhat disappointing for both groups when contrasted with what they feel might be possible in the best of all worlds. This frustration may be related to the variation in the way supervisors and trainees are conceptualizing the problem situations, a discrepancy which builds in some frustration for both groups in achieving satisfaction. It should be noted, however, that for both groups reported outcome did not differ significantly with the nature of the problem involved.

Despite these less than optimal outcomes, it is noteworthy that students who had experienced problems that were not discussed were markedly unhappy (2.57 on a six point scale) with their experiences and felt that they had gained very little. Instead, they relied on outside collaboration, either with peers or with other supervisors, or avoided supervision altogether. It can therefore be said that regardless of whatever frustrations may be present in discussing supervisory difficulties, this choice is preferable to not discussing the problem at all. In this respect, the data from real life situations corroborates the expressed preferences on the hypothetical problem situations. This preference is also evident in the comments of both trainees and supervisors that, given the chance to change something in retrospect, they would have addressed the problem more directly, more aggressively, sooner, and in greater detail. The evidence suggests that both theoretically and actually, discussion of problems as they arise is the more desirable and more effective approach to take than ignoring them or dealing with them indirectly, and also that in cases where discussion occurred students are more pleased with the outcome and feel as though more was gained from the experience, regardless of the nature of the problem involved.

An examination of the positive experiences of both groups yields a similar difference in conceptualization. Responses attributing the success to some quality in the other person comprised 23% of trainees' comments (24 of 104), as contrasted with 67% of supervisors' comments

(51 of 76). Responses reflecting something about the trainee-supervisor match, either interpersonally or theoretically, comprised 14.5% of trainees' comments (15 of 104) and 18.5% of supervisors' comments (14 of 76). Elements of the supervisory style adopted comprised 62.5% of trainees' responses (65 of 104), while supervisors mentioned something about the way in which trainees involved themselves in the supervisory process in 10.5% of their comments (8 of 76).

Here, again, one sees the tendency of supervisors to give the trainee the bulk of responsibility for the success or failure of the supervisory effort. What varies here, in the positive accounts, is that students were less likely to mention the trainee-student match than they were for negative experiences. Instead, they attributed the success of the supervisory experience to elements of the supervisory style, the manner in which the supervisors conducts himself vis a vis the student in the supervisory sessions. The implication is that supervisors are more consistent in granting the student's inherent qualities weight in the outcome of supervision, while students prefer joint responsibility for problems and credit to the supervisor's style for positive experiences. While further information was not gathered about these positive supervisory experience, a closer examination of this discrepancy and the manner in which it impacts on the supervisory process seems indicated.



In summary, several areas of interest have been delineated in reference to the process of psychotherapy supervision. The first is the notion that the theoretical orientation espoused by the members of the supervisory relationship does not seem to significantly impact on their general philosophy of supervision in the way one might intuitively expect. Rather, the suggestion is made that espoused supervisory model may be a fruitful area of further investigation. Examination of the responses of trainees and supervisors to presented hypothetical problem situations also failed to support the expected differences between participants, either across professional status or across theoretical orientation. Again, espoused supervisory model was a more meaningful way to differentiate participants than theoretical orientation. Students tended to take a more aggressive, idealistic stance than did supervisors, but all participants as a rule expressed support for direct confrontation of problems, support for exploration of factors responsible for the difficulties, and much optimism for the potential outcome of such discussions.

Finally, comparison of the reported actual experiences of these participants suggested that supervisors attribute a great deal of responsibility for the positive or negative nature of supervision to qualities inherent to the trainee. In contrast, students tended to lay joint responsibility for problems on the student and supervisor together, while they attributed positive experiences to the way in which the supervisor approaches supervision. The suggestion is that

this discrepancy in conceptualization may underly the discussions which occur about these problems, leading to less satisfaction being obtained in these discussions than both groups indicate is theoretically possible. However, there was marked difference in the experience of students in which no discussion of problems occurred, suggesting that regardless of the nature of the problem, some attempt at discussion and resolution is more productive than ignoring the problem or seeking other ways of coping with the situation.

Should these observations be valid, a number of fruitful areas of future investigation are delineated. It should be noted, however, that this study is vulnerable to all of the typical problems of survey research. An important consideration is the representativeness of the sample--do these respondents accurately reflect the feelings of psychology interns and supervisors in general? Were individuals who had experienced an unusual amount of difficulty in their relationships more likely to return the questionnaires than those who had not? Were supervisors who were particularly interested in the issue of the supervisory relationship more likely to take the time to complete the questionnaire? Do the differences in response rate between trainees and supervisors reflect systematic differences in the types of students vs. supervisors who returned their questionnaires? Although the issues raised here do include some found elsewhere in the literature, in general these are questions which can only be answered through replication.

Another source of concern is the possibility of demand characteristics inherent in responding to the questions. This is particularly true insofar as it is possible that these were more salient for the trainees responding than for the supervisors. While concerted effort was put into ensuring the confidentiality of participants, trainees were being asked to discuss an area in which they are already vulnerable, that of the supervision process, and beyond this, to think specifically about problems which arise within that context. It is possible that the more idealistic stance adopted by trainees is a more a reflection of this vulnerability and wish to respond "correctly" than of a true difference between the two populations. Again, replication under various circumstances is needed. Another possibility to address this concern is to ask recently graduated trainees to reflect back on their supervisory experience, as opposed to commenting on them while still being supervised, although such an approach would intensify the already present difficulties in discussing experiences retrospectively.

Finally, this information was used to make some suggestions about a difference in perspective on the same experience between trainee and supervisor. These conclusions reflect an inferential leap, in that the assumption is made that, in fact, the two groups are differentially interpreting the same situation, as opposed to a sampling error which has caused students and supervisors to choose different types of problem situations for discussion. The only way to

address this issue completely is to chart problematic experiences in an on-going way, while they are occurring, gathering information from student/supervisor dyads. The confidentiality and corresponding validity issues inherent in such an attempt are obvious. As in most areas of investigation, the solution again is replication under controlled and varied situations.

The present study sought to take a closer look at the nature of problem resolution in psychotherapy supervision, how it is affected by one's general philosophy of supervision and theoretical orientation, how it is conceptualized by students vs. supervisors, and how the reality compares with the perceived ideal of these participants. It was successful insofar as it raised some more specific questions, particularly about the role of endorsed supervisory model in determining one's opinions about other facets of supervision, including the supervisory relationship, and about the possible difference in conceptualization between students and supervisors participating in supervisory relationships.

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APPENDIX A



TRAINEE QUESTIONNAIRE

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

In what year of graduate school are you?

Is this your internship experience or a practicum?

# of pre-internship practicum hours to date:

At present, what would you say is your theoretical orientation preference?

I see the supervisor as someone who:

- \_\_\_\_\_ Gives the trainee instructions about what to do in therapy
- \_\_\_\_\_ Acts as a mentor, overseeing the student's professional development, while leaving the teaching to his graduate program
- \_\_\_\_\_ Acts as a teacher, helping the trainee to learn about his clients and techniques he can use to work with them
- \_\_\_\_\_ Has as his primary focus the development of the trainee into someone who has the personal awareness and adjustment to help clients effectively

I see the function of supervising as being \_\_\_\_\_% skills training and  
 \_\_\_\_\_% personal growth

How critical do you feel a positive supervisory relationship is for a  
 good learning experience?

|            |   |   |          |   |   |
|------------|---|---|----------|---|---|
| 1          | 2 | 3 | 4        | 5 | 6 |
| not at all |   |   | critical |   |   |

How much time do you feel should be spent in supervision focusing on  
 the supervisory relationship?

|                             |   |   |                             |   |   |
|-----------------------------|---|---|-----------------------------|---|---|
| 1                           | 2 | 3 | 4                           | 5 | 6 |
| should be the<br>main focus |   |   | should not be<br>brought up |   |   |

In the following questionnaire, hypothetical situations are presented which sometimes arise in supervisory relationships. Please answer the questions about each situation according to how you would like to see them handled ideally. Try to answer every question, circling your choice of responses.

1. A trainee is experiencing a problem in his personal life which is currently not affecting his professional functioning.

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |   |            |
|----------|---|---|---|---|------------|
| 1        | 2 | 3 | 4 | 5 | 6          |
| critical |   |   |   |   | not at all |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |   |                |
|------------|---|---|---|---|----------------|
| 1          | 2 | 3 | 4 | 5 | 6              |
| definitely |   |   |   |   | definitely not |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. While a trainee's psychotherapy skills are good, he is not adequately fulfilling his other professional responsibilities--paperwork, promptness, staff relationships, professional appearance, etc.

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |            |   |
|----------|---|---|---|------------|---|
| 1        | 2 | 3 | 4 | 5          | 6 |
| critical |   |   |   | not at all |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |                |   |
|------------|---|---|---|----------------|---|
| 1          | 2 | 3 | 4 | 5              | 6 |
| definitely |   |   |   | definitely not |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes\_\_\_\_\_ No\_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes\_\_\_\_\_ No\_\_\_\_\_

3. A trainee and his supervisor conflict as individuals (e.g., different personality styles, different values, different supervisory style preference).

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |            |   |
|----------|---|---|---|------------|---|
| 1        | 2 | 3 | 4 | 5          | 6 |
| critical |   |   |   | not at all |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |                |   |
|------------|---|---|---|----------------|---|
| 1          | 2 | 3 | 4 | 5              | 6 |
| definitely |   |   |   | definitely not |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |   |   |         |
|------------|---|---|---|---|---------|
| 1          | 2 | 3 | 4 | 5 | 6       |
| not at all |   |   |   |   | crucial |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |   |   |            |
|---------|---|---|---|---|------------|
| 1       | 2 | 3 | 4 | 5 | 6          |
| crucial |   |   |   |   | not at all |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |   |   |             |
|-----------|---|---|---|---|-------------|
| 1         | 2 | 3 | 4 | 5 | 6           |
| no chance |   |   |   |   | very likely |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_



4. A trainee and his supervisor differ in theoretical orientation to the extent that they are having difficulty agreeing on case conceptualizations and treatment plans.

a) How important is it that the situation be brought up in supervision?

|          |   |   |            |   |   |
|----------|---|---|------------|---|---|
| 1        | 2 | 3 | 4          | 5 | 6 |
| critical |   |   | not at all |   |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |                |   |   |
|------------|---|---|----------------|---|---|
| 1          | 2 | 3 | 4              | 5 | 6 |
| definitely |   |   | definitely not |   |   |

c) How should the supervisor address the situation?

- Do nothing--do not identify the problem
- Simply identify the problem without discussion or reassurance
- Identify the problem and provide reassurance only
- Identify the problem and possible factors responsible for it, without encouraging discussion
- Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |   |   |         |
|------------|---|---|---|---|---------|
| 1          | 2 | 3 | 4 | 5 | 6       |
| not at all |   |   |   |   | crucial |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |   |   |            |
|---------|---|---|---|---|------------|
| 1       | 2 | 3 | 4 | 5 | 6          |
| crucial |   |   |   |   | not at all |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |   |   |             |
|-----------|---|---|---|---|-------------|
| 1         | 2 | 3 | 4 | 5 | 6           |
| no chance |   |   |   |   | very likely |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. A trainee's personality vulnerabilities are interfering with his ability to work effectively with one of his therapy clients.

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |            |   |
|----------|---|---|---|------------|---|
| 1        | 2 | 3 | 4 | 5          | 6 |
| critical |   |   |   | not at all |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |                |   |
|------------|---|---|---|----------------|---|
| 1          | 2 | 3 | 4 | 5              | 6 |
| definitely |   |   |   | definitely not |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_

6. A trainee's personality vulnerabilities are interfering with his ability to work effectively with more than one of his clients.

a) How important is it that the situation be brought up in supervision?

|          |   |   |            |   |   |
|----------|---|---|------------|---|---|
| 1        | 2 | 3 | 4          | 5 | 6 |
| critical |   |   | not at all |   |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |                |   |   |
|------------|---|---|----------------|---|---|
| 1          | 2 | 3 | 4              | 5 | 6 |
| definitely |   |   | definitely not |   |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_

Finally, here are some questions which pertain to experiences you have actually had in your supervisory relationships. Again, please respond as honestly as you can.

1. Please think about a particularly poor supervisory experience you have had or one in which significant problems occurred.

a. Please describe the major problems and indicate the characteristics about the supervisor or the situation which you feel contributed to your difficulty.

b. At what level of training were you at the time?

\_\_\_\_\_ Beginning practicum student

\_\_\_\_\_ Advanced practicum student

\_\_\_\_\_ Internship level student

c. What type of clients/patients were involved?

d. Was the problem discussed in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

e. If so, who initiated this discussion?

You \_\_\_\_\_ Supervisor \_\_\_\_\_

f. What did this discussion involve?

g. Following this discussion, how did the quality of learning change?

|            |   |           |   |   |             |   |
|------------|---|-----------|---|---|-------------|---|
| 1          | 2 | 3         | 4 | 5 | 6           | 7 |
| much worse |   | no change |   |   | much better |   |

h. If it was not discussed in supervision, how did you cope with the situation?



i. If no discussion occurred, how much were you able to gain from supervision despite the problems?

|         |   |   |   |   |              |
|---------|---|---|---|---|--------------|
| 1       | 2 | 3 | 4 | 5 | 6            |
| nothing |   |   |   |   | a great deal |

j. In retrospect, what would you have done differently or have wanted the supervisor to do differently?

2. Now think about a particularly good supervisory experience you have had.

a. Please describe the experience and indicate the characteristics about the supervisor or the situation which made the experience so positive.

b. At what level of training were you at the time?

\_\_\_\_\_ Beginning practicum student

\_\_\_\_\_ Advanced practicum student

\_\_\_\_\_ Internship level student

c. What type of clients/patients were involved?

Thank you!

**APPENDIX B**

## SUPERVISOR QUESTIONNAIRE

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

How many years have you been supervising trainees?

Approximately how many supervisees do you have per year?

What degree do you have, and what year did you receive it?

Please describe any formal training you have had in supervision:

At present, what would you say is your theoretical orientation preference?

I see the supervisor as someone who:

\_\_\_\_\_ Gives the trainee instructions about what to do in therapy

\_\_\_\_\_ Acts as a mentor, overseeing the student's professional development, while leaving the teaching to his graduate program

\_\_\_\_\_ Acts as a teacher, helping the trainee to learn about his clients and techniques he can use to work with them

\_\_\_\_\_ Has as his primary focus the development of the trainee into someone who has the personal awareness and adjustment to help clients effectively

I see the function of supervision as being \_\_\_\_% skills training and  
 \_\_\_\_% personal growth

How critical do you feel a positive supervisory relationship is for a  
 good learning experience?

|            |   |   |   |   |          |
|------------|---|---|---|---|----------|
| 1          | 2 | 3 | 4 | 5 | 6        |
| not at all |   |   |   |   | critical |

How much time do you feel should be spent in supervision focusing on  
 the supervisory relationship?

|                             |   |   |   |                             |   |
|-----------------------------|---|---|---|-----------------------------|---|
| 1                           | 2 | 3 | 4 | 5                           | 6 |
| should be the<br>main focus |   |   |   | should not be<br>brought up |   |

In the following questionnaire, hypothetical situations are presented which sometimes arise in supervisory relationships. Please answer the questions about each situation according to how you would like to see them handled ideally. Try to answer every question, circling your choice of responses.

1. A trainee is experiencing a problem in his personal life which is currently not affecting his professional functioning.

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |   |            |
|----------|---|---|---|---|------------|
| 1        | 2 | 3 | 4 | 5 | 6          |
| critical |   |   |   |   | not at all |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |   |                |
|------------|---|---|---|---|----------------|
| 1          | 2 | 3 | 4 | 5 | 6              |
| definitely |   |   |   |   | definitely not |

c) How should the supervisor address the situation?

- Do nothing--do not identify the problem
- Simply identify the problem without discussion or reassurance
- Identify the problem and provide reassurance only
- Identify the problem and possible factors responsible for it, without encouraging discussion
- Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes\_\_\_\_\_ No\_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes\_\_\_\_\_ No\_\_\_\_\_



2. While a trainee's psychotherapy skills are good, he is not adequately fulfilling his other professional responsibilities--paperwork, promptness, staff relationships, professional appearance, etc.

a) How important is it that the situation be brought up in supervision?

|          |   |   |            |   |   |
|----------|---|---|------------|---|---|
| 1        | 2 | 3 | 4          | 5 | 6 |
| critical |   |   | not at all |   |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |                |   |   |
|------------|---|---|----------------|---|---|
| 1          | 2 | 3 | 4              | 5 | 6 |
| definitely |   |   | definitely not |   |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_

3. A trainee and his supervisor conflict as individuals (e.g., different personality styles, different values, different supervisory style preference).

a) How important is it that the situation be brought up in supervision?

|          |   |   |            |   |   |
|----------|---|---|------------|---|---|
| 1        | 2 | 3 | 4          | 5 | 6 |
| critical |   |   | not at all |   |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |                |   |   |
|------------|---|---|----------------|---|---|
| 1          | 2 | 3 | 4              | 5 | 6 |
| definitely |   |   | definitely not |   |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes\_\_\_\_\_ No\_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes\_\_\_\_\_ No\_\_\_\_\_

4. A trainee and his supervisor differ in theoretical orientation to the extent that they are having difficulty agreeing on case conceptualizations and treatment plans.

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |            |   |
|----------|---|---|---|------------|---|
| 1        | 2 | 3 | 4 | 5          | 6 |
| critical |   |   |   | not at all |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |                |   |
|------------|---|---|---|----------------|---|
| 1          | 2 | 3 | 4 | 5              | 6 |
| definitely |   |   |   | definitely not |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. A trainee's personality vulnerabilities are interfering with his ability to work effectively with one of his therapy clients.

a) How important is it that the situation be brought up in supervision?

|          |   |   |   |            |   |
|----------|---|---|---|------------|---|
| 1        | 2 | 3 | 4 | 5          | 6 |
| critical |   |   |   | not at all |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |   |                |   |
|------------|---|---|---|----------------|---|
| 1          | 2 | 3 | 4 | 5              | 6 |
| definitely |   |   |   | definitely not |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |   |   |         |
|------------|---|---|---|---|---------|
| 1          | 2 | 3 | 4 | 5 | 6       |
| not at all |   |   |   |   | crucial |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |   |   |            |
|---------|---|---|---|---|------------|
| 1       | 2 | 3 | 4 | 5 | 6          |
| crucial |   |   |   |   | not at all |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |   |   |             |
|-----------|---|---|---|---|-------------|
| 1         | 2 | 3 | 4 | 5 | 6           |
| no chance |   |   |   |   | very likely |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_



6. A trainee's personality vulnerabilities are interfering with his ability to work effectively with more than one of his clients.

a) How important is it that the situation be brought up in supervision?

|          |   |   |            |   |   |
|----------|---|---|------------|---|---|
| 1        | 2 | 3 | 4          | 5 | 6 |
| critical |   |   | not at all |   |   |

b) Should the supervisor be the one to initiate such a discussion?

|            |   |   |                |   |   |
|------------|---|---|----------------|---|---|
| 1          | 2 | 3 | 4              | 5 | 6 |
| definitely |   |   | definitely not |   |   |

c) How should the supervisor address the situation?

- \_\_\_\_\_ Do nothing--do not identify the problem
- \_\_\_\_\_ Simply identify the problem without discussion or reassurance
- \_\_\_\_\_ Identify the problem and provide reassurance only
- \_\_\_\_\_ Identify the problem and possible factors responsible for it, without encouraging discussion
- \_\_\_\_\_ Work in supervision to explore and resolve the situation

d) How important is it that the trainee be referred for personal therapy?

|            |   |   |         |   |   |
|------------|---|---|---------|---|---|
| 1          | 2 | 3 | 4       | 5 | 6 |
| not at all |   |   | crucial |   |   |

e) How desirable is it that a change of supervisors be effected?

|         |   |   |            |   |   |
|---------|---|---|------------|---|---|
| 1       | 2 | 3 | 4          | 5 | 6 |
| crucial |   |   | not at all |   |   |

f) If this situation is handled as you have suggested, what are the chances the supervisory experience will be a positive one?

|           |   |   |             |   |   |
|-----------|---|---|-------------|---|---|
| 1         | 2 | 3 | 4           | 5 | 6 |
| no chance |   |   | very likely |   |   |

g) Have you ever experienced this problem situation in supervision?

Yes \_\_\_\_\_ No \_\_\_\_\_

h) If so, was it resolved to your satisfaction?

Yes \_\_\_\_\_ No \_\_\_\_\_

Finally, here are some questions which pertain to experiences which you have actually had in supervisory relationships. Again, please answer as honestly as you can.

1. Think about a particularly poor supervisory experience you have had with a trainee, or one in which significant problems occurred.
  - a. Please describe the major problems and indicate the characteristics about the supervisee or the situation which you feel contributed to the difficulty.
  - b. How many years of experience had you had as a supervisor at that time?
  - c. At what level of training was the student?
  - d. What type of clients/patients were involved?
  - e. Was the problem discussed in supervision?  
Yes \_\_\_\_\_ No \_\_\_\_\_

f. If so, who initiated this discussion?

You \_\_\_\_\_ Trainee \_\_\_\_\_

g. What did this discussion involve?

h. Following this discussion, how did the quality of learning change?

|            |   |           |   |   |             |   |
|------------|---|-----------|---|---|-------------|---|
| 1          | 2 | 3         | 4 | 5 | 6           | 7 |
| much worse |   | no change |   |   | much better |   |

i. If it was not discussed in supervision, how did you cope with the situation?

j. If no discussion occurred, how much was the trainee able to gain from supervision despite the problems?

|         |   |   |              |   |   |
|---------|---|---|--------------|---|---|
| 1       | 2 | 3 | 4            | 5 | 6 |
| nothing |   |   | a great deal |   |   |

k. In retrospect, what would you have done differently or have wanted the trainee to do differently?

2. Now think about a particularly good supervisory experience you have had with a trainee.

a. Please describe the experience and indicate the characteristics about the supervisee or the situation which made the experience so positive.

b. How many years of experience had you had as a supervisor at that time?



APPROVAL SHEET

The dissertation submitted by Linda Brownell Bresolin has been read and approved by the following Committee:

Dr. Patricia Rupert, Director  
Associate Professor, Psychology, Loyola University

Dr. Roderick Pugh  
Professor, Psychology, Loyola University

Dr. John Shack  
Associate Professor, Psychology, Loyola University

The final copies have been examined by the Director of this dissertation and the signature which appears below verifies the fact that the dissertation is now given final approval by the Committee with reference to content and form.

The dissertation is therefore accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy.

Dec. 4, 1984

Date

Patricia Rupert

Director's Signature