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Growing Through Supervision

The five steps in teaching an employee new skills are preparation, explanation, showing, observation and supervision.

Bruce Barton

B arton's quote certainly applies to the process of acquiring the knowledge and skills essential to being an effective professional counselor. Your course work has been an arena in which much information has been conveyed—via direct instruction, demonstration, and even illustration. But for your professional development to bloom, the knowledge that has been acquired needs to be applied and, with this application, the feedback you receive via supervision is refined.

Clinical supervision provides you with the supportive and educative activities that help you develop your abilities to apply counseling theory and techniques within a "real world" context. It is evident that supervision is one of the most important learning experiences that counseling trainees will experience in their formation. In counseling supervision, counseling trainees will be able to associate themselves with experienced supervisors both at their college or university and the practicum and internship site. Your experience in the field and the supervision you receive are invaluable in assisting your transition from classroom student to the role of professional.

As a counseling practicum student or intern, you want to fully involve yourself in this supervision process and gain experiences to increase your competence for becoming a professional counselor. When viewing yourself as part of the supervision, participating in the supervision, interacting with others in the supervision, and expressing your uniqueness in the supervision, you will grow and become mature professionally

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and personally. This participation includes activities such as exposing your vulnerability and sharing your strengths and weaknesses through video sessions, discussions, case conceptualization, and group activities in the process of the supervision. This participation will enrich your counseling knowledge and skills, and through this participation in supervision, you will become aware of the gap between your ideal and the real. Meanwhile, it is during this supervision that you will narrow this gap of yours as well. As a counseling supervisee, you will receive and give feedback and evaluation from and to your supervisors and others who are involved in this supervision process. It is in this counseling supervision that your belief and passion to become a professional counselor will also be attested. Further, your practicum or internship supervision will be another vehicle that carries you into the field of counseling.

This chapter will guide readers in exploring the importance of counseling supervision and its nuts and bolts in the training process. Therefore, after reading this chapter, readers will be able to

- know what is counseling practicum/internship supervision and its importance;
- understand the reasons of having practicum and internship supervision;
- prepare themselves for issues they will encounter in the supervision;
- become familiar with various supervision models and theoretical orientations;
- identify expectations and issues before, during, and after the supervision;
- distinguish the difference between supervision and therapy;
- know supervision evaluation, peer feedback, and self-evaluation; and
- become aware of how to transition from student to professional.

Counseling Supervision

What Is Counseling Supervision?

Perhaps you have heard the adage "do as I say, not as I do"? When applied to developing as a counselor, the guiding principle for supervisors and the experience they provide is "do as I say *and* as I do." Your supervisor and the supervision provided will serve not only as the model, or template, but as the experience that forges your knowledge, skill, and professional identity as counselor.

Counseling supervision is a means of transmitting counseling knowledge, skills, and attitudes of the counseling profession to the next counseling generation (Bernard & Goodyear, 2014). It is also a means of passing on the values and the professional identity of the counseling profession to the new generation in the profession. Stoltenberg and Delworth (1987) conceptualize counseling supervision as a process in which various developmental stages progress for counseling supervisees. In this process, there is also a working alliance between the supervisor and the supervisee in which the supervisee provides an account of his or her work, reflecting on it and receiving feedback and guidance, while the supervisor facilitates the development of therapeutic competence in the supervisee and helps the supervisee acquire appropriate professional behaviors through an examination of the work the supervisee has offered (Hart, 1982; Loganbill, Hardy, & Delworth, 1982).

We believe that supervision is a professional relationship that empowers counseling trainees and counselors to accomplish development and growth professionally and personally. As a result, the counselors become capable of not only providing the best service to their clients but also transmitting the essence of counseling principles, knowledge, and skills to the new generation.

Why Is Counseling Supervision Necessary and Required?

When asked why they take the practicum or internship class, students oftentimes say, "because of the program requirement." The answer is certainly correct at least at the level of course requirements, but the real question is then—why is it required?

As counselor educators whose responsibility is to develop counselors who are fully prepared to function ethically and efficiently with real-world clients, we recognize that clinical supervision is crucial for preparing counselors to function in complex work environments and handle complicated situations (Bernard & Goodyear, 2014). The benefits of counseling supervision include (a) developing greater effectiveness and accountability; (b) enhancing skill development and competencies; (c) increasing feelings of support, confidence, job satisfaction, professional identity development, and self-efficacy; and (d) decreasing feelings of isolation, role ambiguity, and burnout (Herlihy, Gray, & McCollum, 2002; Lambie, 2007; Lambie & Sias, 2009). Supervision has been reported to build supervisees' strengths; ameliorate supervisees' weaknesses; create an environment that fosters supervisees' clinical skill development, self-efficacy, and ethical decision-making; maintain clients' welfare (Falender & Shafranske, 2004); facilitate supervisees' personal growth; and assist supervisees in transitioning from students to professionals. Furthermore, the benefits of clinical supervision extend even beyond the formative values encountered by those in training. Studies have shown that clinical supervision has produced greater staff retention, less burnout, significant reduction in turnover, and improvements of treatment outcomes (Garner, Hunter, Modisette, Ihnes, & Godley, 2012; Knudsen, Ducharme, & Roman, 2008).

On the other hand, those trainees who lack clinical supervision are often troublesome and have low confidence in what they are doing clinically (Bernard & Goodyear, 2014). Studies have demonstrated that the number of hours of formal supervision and the number of supervisors that trainees have had are significantly related to trainees' felt competence (Bradley & Olson, 1980). Consider the reflection shared by a student following a particularly difficult session (see Case Illustration 6.1).

CASE ILLUSTRATION 6.1

Thank God for Dr. L.

I came close to calling it quits. I know this is not a new feeling. I can remember my first taping with a simulated intake during which I felt lost, and did everything wrong, and just felt like, crap, I'll never be a counselor. But today was different. This was a real

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human being—not a simulation. This is not a lab setting but a walk-in clinic. I'm not talking about grades—I'm talking about someone's life and I am not sure I can handle it. I am not sure I am qualified.

Clearly, Dr. L. could tell I was not doing well, postsession—perhaps the fact that I was crying and about to throw up may have given her the first indication? Anyway, thank God she is here!

Yes, she was warm and supportive, but I expected that. But once I was able to focus, she was really able to help me stop generalizing and catastrophizing. We were able to review my goals for the session and the approach I took, or tried to take. We looked at the client's comments (thank God for video), and we objectively assessed the progress—and yes, there was progress made.

I know I have a lot to learn, I have skills I need to hone. But I also now know I need to stop trying to be a perfect student to be more of a trained, caring professional. It wasn't so much what she said but how she approached it. I need to view myself and my performance with the same critical, problem-solving, yet caring and supportive eye, as she gave me and as I give my clients.

Rough day . . . yep . . . but more for me than my client. Thank God for Dr. L.

Evidently, counseling supervision is both an ethical imperative and evidence based. For this reason, almost all counseling and mental health professional organizations, national and international, mandate supervision for both trainees and professionals because clinical supervision has become the cornerstone of quality improvement and assurance. The value of supervision suggests that any client who encounters an intern counselor who is without supervision should perhaps reconsider if he or she is willing to seek help from a student counselor (Bernard & Goodyear, 2014).

When and How Often Is Counseling Supervision Conducted?

Given the benefits of supervision previously described, the simple answer to when and how often supervision is desirable could be "very often and throughout one's professional career." But, more specifically, counseling supervision is needed under four major circumstances: (a) when a person is a counseling graduate student to fulfill necessary requirements for a master degree, (b) when a person with a master's degree in counseling pursues a professional licensure, (c) when a licensed professional counselor needs improvement and education in certain specialty areas, and (d) any time a professional counselor is feeling "stuck" in his or her work with a client.

Because counseling is an applied science, all counseling programs, either master's or doctoral, require all students to be supervised while they see clients. Especially when students take practicum or internship class, they must be supervised by at least one on-site professional who is a qualified counseling supervisor. Here the word *qualified* means the following two aspects: education (e.g., master's or doctoral degree in counseling or related fields, supervision courses, or responsibility exams) and counseling

experience (e.g., at least a certain number of years' experience, various from state to state and institutions to institutions). For example, a licensed counseling professional has practiced for at least 2 or 3 years beyond the issue date of the license, completing a graduate course in counseling supervision and successfully passing a required exam. However, to be qualified for supervising a master's student in training, a counseling professional may only need to meet the requirements of holding a master's degree in counseling or related field plus 2 years counseling experience. Exercise 6.1 will invite you to explore counseling supervision with your supervisor and your peer supervisees.

EXERCISE 6.1

Clarifying Expectations

Directions: To master the essence of supervision, you are asked to bring the questions "*What is your counseling supervision? Why is it necessary? What can each of you in supervision contribute and gain?*" to your individual supervision or group supervision and explore these questions with your supervisor or peer supervisees. As a result of the discussion, each party will thoroughly understand the core of counseling supervision and clarify the expectations for each other.

Expectations of Counseling Supervision

Clarifying counseling expectations from both counseling trainees and supervisors is crucial. As a counseling practicum student or supervisee, you want to be clear about your rights (see Table 6.1, Supervisee Bill of Rights) and know what you want out of the counseling supervision or, in other words, what learning experience you expect to have at the time you finish your supervision at the end of the semester or academic year. Specifically, both the supervisor and the supervisee must clarify their expectations from the following aspects of the supervision and specific expectations in the Supervision Agreement (see Table 6.2).

The first expectation is regarding the frequency and attendance of supervision meetings. As a practicum student and an intern, the first thing you want to do is sit down with your supervisors to set up the expectation of how often the supervision meeting will occur and what the attendance policy is. The most commonly used time frequency is weekly, and the length of the supervision session can be one hour or more than one hour depending on individual or group supervision. CACREP 2009 standards require counseling practicum students to receive a minimum of one hour of individual supervision weekly and an average of one and a half hour of group supervision per week (CACREP, 2009). The attendance is imperative because any absence may affect the dynamics of the group or triadic supervision meetings and the quality feedback (Bernard & Goodyear, 2014).

Table 6.1	Supervisee Bill of Rights

Introduction

The purpose of the Bill of Rights is to inform supervisees of their rights and responsibilities in the supervisory process.

Nature of the Supervisory Relationship

The supervisory relationship is an experiential learning process that assists the supervisee in developing therapeutic and professional competence. A professional counselor supervisor who has received specific training in supervision facilitates professional growth of the supervisee through: monitoring client welfare; encouraging compliance with legal, ethical, and professional standards; teaching therapeutic skills; providing regular feedback and evaluation; providing professional experiences and opportunities.

Expectations of the Initial Supervisory Session

The supervisee has the right to be informed of the supervisor's expectations of the supervisory relationship.

The supervisor shall clearly state expectations of the supervisory relationship that may include: supervisee identification of supervision goals for oneself; supervisee preparedness for supervisory meetings; supervisee determination of areas of nonprofessional growth and development; supervisor's expectations regarding formal and informal evaluations; supervisor's expectations of the supervisee's need to provide formal and informal self-evaluations; supervisor's expectations regarding the structure and/or the nature of the supervisory sessions; weekly review of case notes until supervisee demonstrates competency in case conceptualization. The supervisee shall provide input to the supervisor regarding the supervisee's expectations of the relationship.

Expectations of the Supervisory Relationship

A supervisor is a professional counselor with appropriate credentials. The supervisee can expect the supervisor to serve as a mentor and a positive role model who assists the supervisee in developing a professional identity.

The supervisee has the right to work with a supervisor who is culturally sensitive and is able to openly discuss the influence of race, ethnicity, gender, sexual orientation, religion, and class on the counseling and the supervision process. The supervisor is aware of personal cultural assumptions and constructs and is able to assist the supervisee in developing additional knowledge and skills in working with clients from diverse cultures.

Since a positive rapport between the supervisor and supervisee is critical for successful supervision to occur, the relationship is a priority for both the supervisor and supervisee. In the event that relationship concerns exist, the supervisor or supervisee will discuss concerns with one another and work towards resolving differences.

Therapeutic interventions initiated by the supervisor or solicited by the supervisee shall be implemented only in the service of helping the supervisee increase effectiveness with clients. A proper referral for counseling shall be made if appropriate.

The supervisor shall inform the supervisee of an alternative supervisor who will be available in case of crisis situations or known absences.

Source: Reprinted from "Supervisee's Bill of Rights" by M. Giordano, M. Altekruse, and C. Kern, 2000, in *Clinical Supervision in the Helping Professions,* by R. Haynes, G. Corey, & P. Moulton (Eds.), Belmont, CA: Thompson/Brooks Cole.

Table 6.2 Supervision Agreement

Based on the Supervisee Bill of Rights

The supervisory relationship is an experiential learning process that assists the supervisee in developing therapeutic and professional competence. This contract is designed to assist the supervisor and supervisee in establishing clear expectations about the supervisory process.

Supervisee

1. Read the Supervisee Bill of Rights and this agreement. Complete the sections on skills, goals, and professional opportunities and bring this agreement to the initial supervisory session.

2. Prior to the first supervisory session, read the Introduction and Expectations of the Supervisory Experience sections of the American Counseling Association's *Code of Ethics* and Standards of Practice.

Supervisor

1. Introduce yourself and discuss your credentials, licenses, academic background, counseling experience, and supervisory style.

2. Describe your role as a supervisor: teacher, consultant, counselor, and evaluator.

3. Discuss your responsibilities: monitoring client welfare; teaching therapeutic skills; providing regular verbal and written feedback and evaluation; and ensuring compliance with legal, ethical, and professional standards.

4. Ask the supervisee about his or her learning style and developmental needs.

5. Help supervisee develop goals and counseling skills.

6. Review supervisee's progress regarding Professional Practice Portfolio.

Supervisee

1. Introduce yourself and describe your academic background, clinical experience, and training.

2. Briefly discuss information you want to address during the supervisory meetings.

3. Describe the therapeutic skills you want to enhance and professional development opportunities you want to experience during the next three months.

These goals/skills must be formed (written) within the first month of the internship experience at both levels.

List three therapeutic skills you would like to further develop.

1.

2.

3.

List three general goals you would like to attain during the supervisory process.

1.

2.

3.

List three specific counseling or professional development experiences you would like to have during the next three months (e.g., attending a conference, facilitating a group, presentation)

1.

2.

3.

Expectations of the Supervisory Relationship

Supervisor & Supervisee

1. Discuss your expectations of the supervisory relationship.

2. Discuss how you will work toward establishing a positive and productive supervisory relationship. Also, discuss how you will address and resolve conflicts.

3. The supervisory experience will increase the supervisee's awareness of feelings, thoughts, behavior, and aspects of self, that are stimulated by the client.

4. Discuss the role of the supervisor in assisting with this process.

5. Share your thoughts with one another about the influence of race, ethnicity, gender, sexual orientation, religion, and class on the counseling and the supervision process.

Supervisee

Describe how you would like to increase your awareness of personal cultural assumptions, constructs, and ability to work with clients from diverse cultures.

Supervisor

If the supervisee needs to consult with you prior to the next supervision session, discuss how you would like to be contacted. Also, if you are unavailable during a period of time, inform the supervisee of an alternate supervisor who will be available in your absence.

Ethics and Issues in the Supervisory Relationship

1. Discuss the *Code of Ethics* and Standards of Practice. Review key issues not listed in this section.

2. A professional relationship is maintained between the supervisor and supervisee. The supervisor and supervisee do not engage in social interaction that interferes with objectivity and professional judgment of the supervisor.

3. After the initial supervisory meeting, the supervisee and supervisor can reestablish goals and expectations and discuss roles of the supervisory process. The supervisor and supervisee provide one another with regular feedback.

4. During the initial counseling session, the supervisee will inform the client that she or he is in training and is being supervised. If the supervisee wishes to audiotape or videotape, the client needs to give written consent.

5. Discuss confidentiality and the importance of obtaining a written release from the client prior to consultation with other professionals who are serving the client.

6. The supervisor is ultimately responsible for the welfare of the supervisee's clients. During each supervisory session, the supervisee will review each client's progress and relate specific concerns to the supervisor in a timely manner.

(Continued)

Table 6.2 (Continued)

Expectations of the Supervisory Process

Supervisor

1. Describe your theory of counseling and how it influences your counseling and supervision style.
2. Discuss your theory or model of supervision.

Supervisee

1. Discuss your learning style and your developmental needs.
2. Discuss your current ideas about your theoretical orientation.

Expectations of Supervisory Sessions

Supervisee

Discuss your expectations about the learning process and interest in reviewing audiotapes, videotapes, and case notes.

Supervisor

1. Describe the structure and content of the weekly supervisory sessions.
2. Discuss your expectations regarding supervisee preparedness for supervisory sessions (e.g., audiotapes, videotapes, case notes).
3. CACREP (2009) standards require students in their internship experience to receive a minimum of one hour of individual supervision per week and 90 minutes of group supervision each week.
4. The weekly supervisory session will take place face-to-face in a professional environment that ensures confidentiality. Decide the location, day, and time.

Expectations Regarding Evaluation

Supervisee

Discuss your interest in receiving weekly feedback in areas such as relationship building, counseling techniques, client conceptualization, and assessment.

Supervisor

1. Discuss your style of providing verbal feedback and evaluation.
2. Provide the supervisee with a copy of the formal evaluation you will use; discuss the evaluation tools and clarify specific items that need additional explanation.
3. Discuss the benefit of self-evaluation, provide a copy of self-evaluation forms, and clarify specific items that need additional explanation.

_____

Supervisor's Signature Date

_____

Supervisee's Signature Date

Source: Adapted from M. Giordano, M. Altekruse, and C. Kern (2000). Unpublished manuscript. Adapted by Yolanda Hawkins-Rodgers and Anthony Tasso for the Farleigh Dickinson University's Practicum and Internship Program Handbook.

The second expectation is regarding the supervisory relationship. What are your expectations of a supervisory relationship? Areas to think about may include skills of building an effective and productive supervisory relationship; strategies of addressing and resolving conflicts in supervision; roles that both supervisors and supervisees will take; and multicultural factors such as race, ethnicity, gender, religion, and sexual orientation that may affect the supervisory relationship.

The third expectation is about the process and content of supervision. It is important that both the counseling trainee and his or her supervisor have a clear understanding about the way each supervision session will be conducted as well as the nature of the topics or content that will be reviewed. This also includes clarification about what it is that you want to gain during the supervision sessions. The process and content of supervision meetings may involve discussing the structure and styles of teaching and learning and supervision models and reviewing audiotapes, videotapes, SD cards, case notes, treatment plans, or the case study. The process and content may further consist of case presentation, giving feedback, and case conceptualization. In addition, you may have interest in learning things that you do not typically have opportunities to learn during your tenure of practicum/internship (e.g., mediation, consultation, or alternative medicine). One last task that both supervisees and supervisors expect to see is the evaluation. All these operations will be discussed in detail later in the chapter.

Because the content of supervision is to facilitate the development of the supervisee's therapeutic competence, the specifics concerning the content of supervision may also include using a variety of operations to learn therapeutic skills and techniques based on theories and research outcomes, exploring supervisee's personal issues that may affect the counseling process and the relationship between the supervisee and his or her clients, and addressing issues related to the supervisee's personal and professional growth. Now you're invited to complete Exercise 6.2 to compare the expectations in the Supervision Agreement by Maria A. Giordano, Michael K. Altekruse, and Carolyn W. Kern (2000) to the expectations between you and your supervisors.

EXERCISE 6.2

What Are Our Expectations?

Directions: To make counseling supervision effective, both you as supervisee and your supervisor must have clear expectations from each other. To achieve your goal, you are invited to compare the expectations that you have set up with your supervisor and the expectations that are described in the Supervision Agreement. Identify the similarities and differences and discuss these similarities and differences in your supervision. The questions you will want to ask may include the following: *Why are your expectations similar or different from the ones described in the Supervision Agreement? What have been missing? What have been added? Why?*

Forms of Counseling Supervision

Classroom Versus On-Site Supervision

A parallel process of practicum supervision has been adopted by almost all counseling training programs—classroom supervision and on-site supervision. This parallel form functions as the two legs that help the practicum student walk into the field of counseling profession.

Counseling training programs usually require you, the practicum student, to attend a group supervision provided by a college or university faculty member. This type of supervision is conducted in a classroom with a number of practicum students and serves as a support system processing the practicum students' firsthand experiences and facilitating their professional development. The faculty supervisor plays the role of instructor, consultant, counselor, and monitor, while student peers doing their internships at the same or different sites support each other by sharing their experiences; providing each other with their perspectives on those experiences; coming up with ideas on dealing with conflicts and solving problems; and addressing operational concerns such as site carrying out treatment, staff theoretical orientations, site rules, or ethical practice (Hodges, 2011).

Within such a supportive atmosphere, you as an intern student will feel safe to express your concerns about the site agency or relationship development with the site supervisor and others, address your issues on counseling and personal development, and process your experience gained on site. Your faculty supervisor and peer students will be able to help you achieve your professional development of therapeutic competence.

Parallel to your classroom supervision, you are required to have supervision with your on-site supervisor. The on-site supervision can be either individual or in groups, which will be discussed in the following section. No matter what format is used, the purpose of the on-site supervision is similar to your classroom supervision—to facilitate your development and growth professionally and personally. As has been discussed in the previous section, counseling supervision is designed to create an environment that fosters your clinical skill development, maintain your clients' welfare, facilitate your personal growth, and assist you in the transition from student to professional.

Individual Versus Group Supervision

Supervision has three major forms: individual, triadic, and group supervision. The individual supervision consists of two people, a supervisor and a supervisee; the triadic supervision includes one supervisor and two supervisees; and the group supervision can have one supervisor and more than two supervisees. The most common group supervision has one supervisor and 3 to 12 supervisees. There are no advantages or disadvantages among these forms of supervision; in other words, individual supervision, triadic supervision, and group supervision have no significant difference in terms of their effectiveness (Lawson, Hein, & Stuart, 2009; Newgent, Davis, & Farley, 2005).

Which form is used largely depends on the supervisor's preference, time, and number of trainees. When there is only one trainee, the supervisor would have no

choice but to conduct individual supervision. If there are more than three trainees, the supervisor can choose to have individual, triadic, or group supervision. Under such circumstances, the supervisor is most likely to use group supervision unless he or she has enough time for each trainee individually. However, even with multiple counseling trainees, the supervisor may conduct individual supervision due to special situations such as one trainee has a particularly difficult case or situation. If this is the case, the supervisor may provide this trainee individual supervision and have group or triadic supervision with the rest of the trainees.

Process and Content of Supervision

Carroll (1997) outlined seven generic tasks of counseling supervision: teach, evaluate, monitor professional practice (ethical standards), counsel, consult, monitor administrative tasks, and set up a learning relationship. Through the accomplishment of these tasks, the goal of developing the supervisee's initial professional competencies will be achieved. These competencies contain the supervisee's process skills (what you are doing in session), conceptualization skills (how you understand what is occurring in the session), personalization skills (how you interface a personal style with the role of the counselor at the same time that you attempt to keep therapy uncontaminated by personal issues; Bernard, 1979), professional behavior (ethics; Lanning, 1986), and administrative skills (Bernard & Goodyear, 2014). Other practical skills learned in supervision may include diversity, application research, interpersonal relationships, clinical assessment, and interprofessional collaboration (Hatcher & Lassiter, 2007).

To help supervisees develop these major professional skills, the supervisor may use a variety of processing methods. Some popular methods include but are not limited to audio, DVD, SD card, case conceptualization, role-plays, activities and exercises, live observation, joint therapy, discussions and didactic teaching, and feedback.

Audio- and Videotape and Case Presentation

Audio- and videotape of counseling sessions are the most commonly used means in counseling supervision, particularly when they are used for case presentation (Prieto, 1998). These means may be more often used in your classroom supervision than in your on-site supervision because your faculty supervisor does not have access to your on-site facilities. Many on-site supervisors also prefer videotapes because they can have more flexibility during watching the tapes with you; for example, it can be stopped anywhere the supervisor thinks necessary or he or she may want the tape to be played without sound to teach nonverbal skills. On the contrary, live observation does not have such advantages.

As supervisees, there are a number of very practical tasks that you need to attend to in preparing for the audio- or videotaping and the presentation. However, before addressing these, it is important that we—actually *you*—confront any anxiety you may feel about presenting yourself in video.

It is natural to be somewhat self-evaluative when viewing yourself on tape and even to be apprehensive, if not defensive, about the evaluation of your supervisor, but performance on tape needs to be secondary to service to client. Perhaps an illustration outside of the realm of counseling would help.

Imagine if you were interested in learning a sport such as tennis or golf. You can read about the right way to swing a racket or club, but at some point you need to do it. Further, while an observing eye of a trained professional may result in suggestions for adjusting your swing, actually viewing your swing and having a professional point out specifics at any one moment would prove invaluable at improving your game. We imagine that if you hired a professional to help with your game, you would be less concerned about how you dressed or how your hair was or even what mistakes you made. Rather, you would focus on your shortcomings and seek corrective feedback. After all, that is why you are paying your trainer! The same is true as you develop your counseling skills. You have the opportunity to work with a professional—who, with the aid of your videotape, can point out specifics or make on-the-mark recommendations, all for your professional growth. So, before we worry about how to tape, let's embrace the value of taping and put aside your ego in service of your professional development.

Now that this has been addressed, you will want to do well on the following tasks. First, make sure you have a recorder, camera, audio- and videotapes, and DVD or SD card. Some schools and internship sites provide cameras and tapes or SD cards for students to borrow and others may not. If not, you need to get your equipment ready before starting your internship. Second, follow the site's procedures on how to obtain clients' consent and/or guardians' permission for minor clients before you tape any session, and make sure your clients understand all the legal ramifications of taping and that the session on the tape/SD card will be viewed by your classmates and supervisors and *destroyed for clients' privacy after your task is complete*. Third, before you record a session, test the camera and the tape or SD card to make sure of their functionality and the quality of recording. Oftentimes a student will record a session and then bring the tape/SD card to supervision only to find there is nothing on the tape/SD card or the quality is not good. Such a situation can be frustrating and waste your supervisor's and other supervisees' time. As a result, the feedback and evaluation of your presentation or supervision can deviate from what you expected. Fourth, before you show your tape/SD card session in supervision, make sure that your tape/SD card is cued before-hand at the segment(s) you plan to show. Searching for what you want to show during your presentation in supervision can be nerve-racking for you as well as others. Finally, most supervisors often let their supervisees decide what they want to show for supervision. If this is the case, you may want to balance between your strengths and areas in which you need improvement of your clinical skills. In this way, you will be able to get constructive feedback. Alternatively, you might show only the areas where you need improvement. However, in that case, you need to prepare for the feedback. If all feedback is negative, you may feel discouraged. Particularly for those who have just begun their internship, negative feedback may make them doubt their ability to succeed in the field. On the other hand, if you present only what you do well, you may not get what you really need to improve your skills. Showing successful sessions in supervision can

help you master what you have done effectively and build your confidence, whereas reviewing the sessions that you don't think are ideal will help you expand your counseling skills (Baird, 2002). That is why we suggest a balanced presentation of counseling sessions in supervision.

Case Conceptualization

Case conceptualization refers to the process in which the counselor understands his or her client's presenting concerns or explains the client's symptoms, emotions, cognitions, behaviors, personality, and interpersonal aspects in the context of a particular theory or integration of theories (Loganbill & Stoltenberg, 1983). Such understanding and explanation of presenting concerns will lead to the formulation of therapy goals and objectives, treatment plans, and intervention strategies.

You may have learned case conceptualization skills in your theory and basic counseling skill classes. Further implementation of this skill is a major emphasis in your internship and internship supervision. As you know, the same case can be conceptualized differently by different counseling theorists due to the aspect of client experience they emphasize. The same thing is true when different counselors, coming from different theories and experiences, view the case materials. As such, discussing your case conceptualization in supervision invites another perspective on the what and why of the client's unfolding story and, with those varied perspectives, the identification of a variety of paths and strategies to pursue. The following exercise (6.3) helps illustrate how case conceptualization is actualized by way of supervision.

EXERCISE 6.3

How Is Case Conceptualization Actualized in My Supervision?

Directions: Your task is to observe how your supervisor helps you with the case conceptualization. How does your supervisor handle the following questions? *What does your client say about what his or her problems are? Where are his or her problems coming from (e.g., learned problematic behaviors, irrational thinking, unhealthy relationships, etc.)? How did he or she come to have these problems? What are the goals for counseling that are identified? What specific interventions are used to address these problems? How are your client's strengths used in the process of the interventions?* Then compare the similarities and differences between your and your supervisor's case conceptualization approach.

Role-Play

The concept of role-play is not foreign to you at this point as it may have been used in the counseling classes you took earlier. Role-play is a very common method and a fundamental component of counselor education (Ivey & Ivey, 2007; Smith, 2009).

Although specific instructions for using role-play in group or individual supervision are still sparse (Smith, 2009), role-play has become one of the important tools frequently used by counseling supervisors (Borders & Brown, 2005).

Role-play is used in counseling supervision (e.g., individual, triadic, or group) for counseling interns to learn or refine a counseling skill (Borders & Brown, 2005). Borders and Brown listed the following ways that role play is used in counseling supervision: (a) the intern plays the role of the counselor and the supervisor plays the role of the client to learn a new skill or improve a learned skill; (b) the supervisor plays the role of counselor to model a specific skill; (c) an intern assumes the role of the client while the supervisor plays the role of the counselor to help the intern work on his or her skill of empathy; (d) the intern plays the role of the counselor and another intern in the same group supervision assumes the role of the client to practice a new skill or theoretical perspective; and (e) after watching a tape segment, the intern plays the role of the counselor while other interns in the supervision group take the roles of the client and a family member. After each role-play, the supervisor will process what has happened with you, the intern. Particularly after the role-play in the group supervision, each person will talk about his or her experience and the intern is helped by hearing the many possible perspectives. The two case illustrations (see Case Illustrations 6.2 and 6.3) created by Allison L. Smith (2009) below show you how role-play is used in both individual and group supervision.

CASE ILLUSTRATION 6.2

The Use of Role-Play in Supervision: Mary

During the check-in at the start of group supervision, supervisee Mary explained she was struggling with a client. The supervisor suggested that the group do a creative supervision activity to explore the struggle, along with any other struggles that members might have. The supervisor asked the group to split into dyads and for each to draw an image that depicted a challenge he or she was facing at the internship site. Supervisees Mary and Joshua paired up and began drawing. After the dyads completed the drawing activity, the supervisor asked Mary about her drawing. Mary reported that she had struggled with a new client, Robert, during a recent intake session at her internship site. She had depicted this in her drawing and explained what each part of the drawing represented. The supervisor then asked Mary to assume the role of her client, Robert, while her partner Joshua took on the role of counselor. The supervisor asked Mary to arrange the chairs in the supervision room according to how they were arranged at her internship site. The supervisor also instructed Mary to assume the gestures, mannerisms, posture, and tone of voice that her client, Robert, assumed. Next, the supervisees started the role-play. As the session began, Joshua assumed the counselor role. Mary shifted from her talkative and bright demeanor to a more withdrawn and awkward role as Robert. Joshua and "Robert" discussed Robert's hobbies and his struggles with meeting women. Robert answered the questions but appeared uncomfortable.

After the role-play, the supervisor encouraged group members to share their observations. Group members pointed out that Robert seemed uncomfortable talking to Joshua about his struggle with meeting women and that talking about his hobbies was much easier. Members also noted that Robert avoided eye contact when Joshua asked him questions. The supervisor then asked Joshua about how it felt in the counselor seat. Joshua remarked, "The more he resisted answering questions, the more uncomfortable I felt as the counselor. When I felt this discomfort, I got nervous and started asking more and more questions!"

When the supervisor asked Mary about her experience as she role-played her client, Robert, Mary explained that she felt uncomfortable answering questions, especially about meeting women. She reported the more questions that Joshua asked, the more her discomfort grew. She also said she wanted Joshua to tell her more about him in order to build a strong relationship. "I felt as though my counselor wanted to know so much about me, and I didn't know anything about him!" The supervisor then asked Mary if she had any new insight into her struggle after engaging in the role-play. Mary stated, "I didn't realize that Robert might be feeling this way. I think I might have overlooked the need for relationship building. Maybe I need to back up and take more time developing our relationship." The supervisor processed this in more depth with Mary, and then proceeded with other group members who wished to explore a struggle. (Smith, 2009)

Source: Adapted from Smith, A. L. (2009). Role play in counselor education and supervision: Innovative ideas, gaps, and future directions. *Journal of Creativity on Mental Health, 4,* 124-138.

CASE ILLUSTRATION 6.3

Sarah

Supervisee Sarah explained a case to her peers during group supervision. The videotaped session that Sarah wished to present was a recent meeting she had with Anna (client) and Patrice (client's mother). Before showing the tape, Sarah described the client. Anna, age 13, had been acting out in school and at home, prompting her mother, Patrice, to seek family counseling. Sarah shared that she had an ongoing struggle with keeping Patrice from dominating the conversations in session and getting Anna to speak at all. Sarah asked group members to assume the roles of mother, client, and counselor.

The group watched the tape and, afterward, group members offered feedback to Sarah in first person and present tense (see Borders, 1991). The group member who assumed the role of Anna exclaimed, "Why won't anyone treat me like an adult? Everyone talks *about* me and not *to* me and I can't stand it anymore! Doesn't anyone care what I think?" The group member who assumed the role of Patrice stated, "I just don't understand what's going on with Anna. She's always been so well-behaved. Now, all of a sudden, she turns 13 and everything changes—problems in school, fighting at

(Continued)

(Continued)

home. I'm not prepared for this. Plus, I have no one to talk to except you since all my friends have *good* kids." The group member who watched the session in the role of counselor noticed Sarah's struggle to keep Patrice on track. Speaking from Sarah's point of view, this group member stated, "I just can't seem to get Patrice to refrain from telling stories related to Anna's problems at school. Whenever I try to redirect, she finds a way to get off-topic. I don't know how we can make progress if all she wants to do is tell me about behavior problems. I may as well give up and just let her talk."

From the feedback, Sarah was able to understand more clearly the dynamics of the session: Anna wanted to be heard, but Patrice needed to vent about behavior problems. This, along with Sarah's struggle to redirect, interfered with the productiveness of the session. In Sarah's next session with the family, she established a few simple ground rules about taking turns so that everyone could speak. These rules assisted with Anna's need to feel heard and Sarah's need to direct the session so that Patrice did not dominate. (Smith, 2009)

Source: Adapted from Smith, A. L. (2009). Role play in counselor education and supervision: Innovative ideas, gaps, and future directions. *Journal of Creativity on Mental Health, 4,* 124-138.

Feedback and Evaluation

Feedback and evaluation are two major elements of supervision, and feedback can be either oral or written, but evaluation is most often given to supervisees in writing. As a practicum student or intern, you will frequently get feedback at different occasions during your supervision. In your university supervision, both group and individual, you may receive feedback from both your peers and supervisor during or after you present a case, show a counseling session on video-/audiotape, or conduct a role-play. During your on-site supervision, you may be given feedback by your supervisor and peers on various occasions of your performance. Your performance may include but not be limited to case presentation; observation of your counseling sessions using either video-/audiotapes or live observation; management of administrative matters; and dealing with personnel issues, workshops, outreach programs, or your paperwork. The feedback on all these matters is often provided orally and in a constructive manner.

We have noticed that in the feedback-giving process, it is beneficial for students to be in control. As a reflection of the students' increased responsibility for directing their own professional development, they should enter supervision with a clear understanding of those areas of professional practice for which they desire supervisory feedback. Most supervisors may ask the practicum student what kind of feedback he or she wants, and this type of question puts the practicum student in the driver's seat. As the practicum student, you want to get feedback on both what you do well and areas in which you want to see improvement. Again, if we return to our simple illustration of developing skills in tennis or golf, it is clear that the "student" has some insight into

what is not exactly right or the way he or she wants to perform and thus will request specific feedback from the trainer. The same is true in developing our counseling. As a student, you will know areas where you feel stuck, or lost—or simply feel that it didn't go as well as you desired. Bring these specific concerns to your supervisor and ask for his or her concrete feedback and suggestions.

Evaluation is pretty much about the formal feedback, which is often in writing and which the practicum student receives in the middle or at the end of a semester. There are two kinds of evaluation here, the site supervisor's evaluation and the grade given by the faculty supervisor. In almost all circumstances, the site supervisor will provide some written evaluation about the practicum student's overall performance, which includes strengths and areas that need improvement. The site supervisor's evaluation may be factored into the faculty supervisor's final grade for the student.

The supervisor's evaluation should not be a surprise. Prior to starting your field work, it is important that you discuss with the supervisor both the areas of expected functioning and the methods by which your functioning will be assessed. If there is a particular scale or form, ask to see it. Be sure to understand the components that go into your evaluation and, as you progress through your experience, seek feedback as to your performance on those evaluative measures.

There are a few important things that are necessary for the intern to know about the evaluation. These things include that evaluation is a tool used to help the intern to grow, to reflect the unknown aspects of self, and to become more open-minded or less defensive. In addition, the intern should know that he or she can direct communication about unfairness of evaluation to the supervisor.

The faculty supervisor also gives the intern a final evaluation, which can be an academic grade plus a formal written evaluation that reflects all the tasks the intern performed in the on-campus supervision. The faculty supervisor's grade often includes both the work done by the intern in the on-campus supervision and the on-site supervisor's evaluation. As intern, you want to understand the relationship between the two evaluations.

Counseling Supervision Models

In an almost parallel way, just as theories of counseling provide an orientation or template within which to view client issues and engage in a helping process, so does a supervisor's model of supervision provide a conceptual framework for the supervisor to address the supervisees' needs (Bernard & Goodyear, 2014). Through using supervision models, counseling supervisors build a supervisory alliance with their supervisees, in which the supervisees gain competence and obtain confidence and the ability to be creative in order to offer the best service to their clients.

There are many instructional supervision models for classroom supervision. Your faculty supervisor may choose an instructional supervision model or format that he or she sees fits a certain group of counseling trainees for their development of counselor skills and personal growth. For example, your faculty supervisor may adopt an empirically supported model such as structured group supervision (SGS) by Wilbur, Roberts-Wilbur,

Morris, Betz, and Hart (1991; 1994) for your practicum class. This is a commonly used model by college/university faculty supervisors. The SGS includes five phases: case presentation, readings, goal setting, discussion of articles, and review and critique of counseling sessions by peer practicum students and faculty supervisor. In addition, a recent study of CACREP-accredited programs by Prieto (1998) showed that faculty supervisors tend to use a collegial and relationship-oriented approach in practicum classes regardless of the level of practicum class being taught.

Numerous models have been created for clinical supervision. Supervision models are generally conceptualized from three major perspectives: psychotherapy theories–based, developmental, and integrative. The psychotherapy-based supervision models are a natural extension of counseling theories used by counselors (e.g., psychodynamic, humanistic-relationship, cognitive-behavioral, systemic, constructivist, narrative, and solution-focused theories; Bernard & Goodyear, 2014). The developmental supervision models focus on progressive stages of supervisee development from novice to expert with discrete characteristics and skills (Haynes et al., 2003). The processing models of supervision "emerged from an interest in supervision as an educational and relationship process" (Bernard & Goodyear, 2014, p. 51).

Because each model or approach has a special focus and will influence the nature and direction of the clinical supervision received, it is important to discuss the model or models employed by your site supervisor and how these address your unique needs as a supervisee.

Issues and Dilemmas in Supervision

As with counseling, the relationship and the dynamic that occur in supervision are not without challenge. The very personal, as well as professional, nature of supervision requires supervisees to take close look at themselves, as people and as counselors, and to challenge themselves in ways that are sometimes difficult. This all happens within the boundaries of supervision—boundaries that at times are difficult to maintain.

Conflicts in Supervisory Relationships

Conflicts are not uncommon in all human relationships. Supervisory relationships cannot be an exception. Supervision occurs in a supervisory relationship, so conflicts are inevitable. As a counseling trainee, you will encounter a process of building multiple relationships in your field practice: the relationship between you and other counseling professionals (your supervisor's colleagues), between you and your peer practicum students, and particularly between you and your supervisors. The dynamics that these relationships create will facilitate your growth and development as a counseling professional and protect the welfare of your clients. As we discussed in the previous chapters (e.g., Chapter 1), field experience is an opportunity for you to construct and strengthen your relationships with yourself and with the external world and to gain confidence in your belief of becoming a counseling professional.

The relationships in your supervision area are a small portion of the relationship between you and the external world. However, they can affect your other relationships, either positively or negatively. If this relationship is managed well, it will compensate your other areas of relationship (e.g., your relationship with self, clients, peers, and even friends and family). If not managed well, it can cost the gain in your other areas of relationship. For example, negative supervision experience affected supervisees' clinical skills (e.g., less strong relationships with clients), training satisfaction, career aspirations, and overall supervisory relationship (Ramos-Sanchez et al., 2002). Further, Burkard and his colleagues (2006) have found that such negative supervision experiences have an impact on future supervision experiences. Therefore, building a strong supervisory relationship is crucial. This requires devotion, trust, and confidence. It also calls for, on your part, a strong professional ethic, open and honest communication, reliability, and behavioral predictability/consistency.

Conflicts in supervision can directly rise in the supervision process or be brought into the supervision process from other aspects of practicum and internship. Some examples of direct conflicts are when supervisees arrive late, leave early, do not come prepared for supervision, are reluctant to record or show tapes, or do not accept feedback. Other conflicts might be supervisors throwing students into counseling situations that are too serious and involve more skills and experience than their current level of experience (e.g., assigning supervisees' clients who are in crisis or at risk for lawsuit). Some supervisors might treat practicum students more as office assistants than counselors-in-training, which means they do not always supervise or let trainees do the activities that faculty supervisors give as assignments, or they fail to include supervisees in important activities and meetings. Some supervisors do not let supervisees count hours if they are not present on the site. All these can result in the trainees' not getting enough hours to meet the requirements of the graduate program. Some supervisors do not spend enough time with practicum students and fail to provide proper delegation of duties and adequate supervision (e.g., they are busy with many other administrative tasks or meetings, come late, leave early, or take prolonged vacation or personal leave without designating a substitute supervisor for trainees). In addition, research has identified examples of conflicts caused by supervisors such as some supervisors dismissed supervisees' ideas and emotions (Gray, Ladany, Walker, & Ancis, 2001), did not invest themselves in the supervisory alliance, avoided responsibility for conflictual actions (Nelson & Friedlander, 2001), and displayed racial microaggressions (Constantine & Sue, 2007).

There are also supervisors who role-model inappropriate professional behaviors. These behaviors include but are not limited to talking about clients with others who are not involved in the case in front of trainees, frequently taking phone calls during meetings, discussing personal matters during supervision, using trainees as confidants by talking about other colleagues' shortcomings, or taking advantage of trainees by asking trainees to do things that have nothing to do with work or training. Consider the situation experienced by one intern, as illustrated in the case of "needing a sitter" (Case Illustration 6.4).

CASE ILLUSTRATION 6.4

Needing a Sitter

Emma just finished her practicum of 100 hours in the counseling center at one of the Big Ten universities in the past semester. She felt the experience she gained at her practicum was beneficial and interesting and something she wanted to continue with her internship. Unfortunately, the counseling center where she did her practicum was not able to take her as an intern due to its commitment for more predoctoral interns, so she found her internship site in a counseling center at a community college nearby. Emma was excited about this opportunity and began her internship as it was scheduled. At the beginning of the semester, Emma gave her supervisor, Elizabeth, the internship requirements from her university faculty supervisor. Her supervisor was very responsive and promised Emma that there would be no problem for her to complete all her 300 hours and other requirements. However, after 2 weeks, Emma had not done much more than become very familiar with her supervisor's 5-year-old daughter, Ava. Elizabeth divorced before her daughter was born and she had remained single since. For some reason, her daughter could not go to the kindergarten for longer hours and Elizabeth had to bring Ava to work and watch her when she did not see clients in the afternoon. After Emma began her internship at the counseling center as her supervisee, Elizabeth often asked Emma, "Can you watch Ava for a minute and I'll be back soon?" She left no matter whether Emma agreed or not, leaving Emma no choice but to watch Ava. In addition, Elizabeth often told Emma about some of the issues she had in her previous relationship with her ex-husband. Emma felt frustrated and did not know what to do.

Moreover, there are situations in which supervisors do not always give credit to the students for the work they do or do not spend enough time with practicum students to provide proper delegation of duties and supervision needed for feedback. In addition, many site supervisors have never taken any supervision courses or trained to be supervisors. They do not understand what practicum students should be doing and what they as supervisors should be doing. For example, some school counselors do not know or use American School Counselor Association (ASCA) model.

Conflicts can occur due to miscommunication or mismatched expectations and normative processes (Bernard & Goodyear, 2014). Evaluative feedback is one of the major tasks of supervision, which can cause tension, even obstruction, to the supervisory relationship between the supervisee and the supervisor. The normative processes occur in response to the supervisee's developmental level. Although counseling trainees are soon becoming professionals, many still have feelings of insecurity and lack the confidence to behave as professionals. These feelings of insecurity and lack of confidence can also cause obstruction in the supervisory relationship. Some other specific conflicts may arise in areas such as different

theoretical orientations, supervision style (structure vs. no structure), values clash, ethical violations, and personality conflicts.

Resolving Conflicts in Supervisory Relationships

Moskowitz and Rupert (1983) have found that all trainees in their study expected their supervisors to address the conflict openly when a conflict was present. However, these researchers also discovered that more than 80% of trainees who experienced conflicts reported their own initiation of discussion about the conflict. Therefore, this study tells us that as counseling trainees, you want proactively to address a conflict when it is present. Direct intervention is the better option to address either misunderstandings or incongruent expectations in the supervision process (Bernard & Goodyear, 2014).

Besides bringing the conflict to your supervisor and making your supervisor become aware of it, you may want to consult your peers or other counseling professionals to make sure about your approach. If the conflict arises in your supervision on site, you may seek a different perspective by taking the issue to your supervision class or faculty supervisor at the university. Finally, the Internet is also a wonderful resource to discover how other people deal with similar situations.

Brian Baird (2002), a long-time experienced internship supervisor, has identified six principles for interns to use to deal with conflicts effectively in supervision. The first principle is to have a positive attitude toward conflicts. The author believes that if you, as the intern, have an attitude of learning from a conflict rather than an attitude of anger, fear, or avoidance, the resolution of the conflict and the way you deal with the situation will be more positive and effective. The second principle is to define the nature of the conflict, which means that you need to identify what a conflict is really about before raising it with your supervisor. Third, you honestly and thoroughly explore what your actions and reactions are to better understand your role in the conflict. If you find it difficult to identify your part, you may want to get a third party's objective perspective. Baird suggests that the purpose of seeking an outsider's perspective is to understand what has happened instead of to assure others of your supervisor's fault or to prove you're right. The fourth principle is to see the situation from your supervisor's perspective. In other words, stepping into your supervisor's shoes is another critical step to resolve the conflict. The fifth principle is to clarify what you really want to be different and what change would make you satisfied. The final principle is when the mutual satisfaction of resolving the conflict cannot be reached, a switch of supervisor or placement might be considered. This change can be mediated by a neutral third party, for example, another supervisor or instructor who can help you and your supervisor find the satisfactory alternatives. In Exercise 6.4 we would like to challenge you to identify a conflict or issue and the resolutions or strategies you have used to resolve this in your supervision.

EXERCISE 6.4

My Style of Resolving Conflicts

Directions: Now you have an opportunity to use some of Baird's principles to identify a major conflict you had and how you resolved it.

Step 1: What was the conflict (issue or situation)?

Step 2: Who were involved?

Step 3: What was your attitude toward the conflict?

Step 4: What was the nature of the conflict?

Step 5: What was your role in the conflict (action or reaction)?

Step 6: What was the other party's position?

Step 7: What conflict resolution strategy did you use to resolve the conflict?

Step 8: What was the "ideal situation"?

Boundaries: Supervision Versus Therapy

Counseling supervision is not personal therapy. The focus of the counseling supervision is mainly on the counseling trainee's professional development and personal growth. This professional development and personal growth may include but not be limited to the trainee's counseling skills, knowledge and implementation of ethical and legal standards, and delivery of minimum quality of care to clients. It is a unique intervention that occurs at a different level than therapy (Bernard & Goodyear, 2014). To some extent, a counseling supervisor may do therapy with his or her trainees in order to help the supervisee "examine aspects of his or her behavior, thoughts, or feelings that are stimulated by a client, particularly when these may act as barriers to the work with the client" (Bernard & Goodyear, 1992, p. 5). However, the purpose of this type of therapy with a supervisee is to help the supervisee become more effective with his or her clients. Along this line, the supervisor may also help the supervisee become aware of his or her personal issues that may interfere with his or her efficacy in the counseling process.

Your own issues. It is expected that supervisees reflect on the impact of their own history and issues on the work with clients. To bring this into discussion as appropriate, you and your supervisor need to distinguish the difference between supervision and therapy. If your own issues began to be the main focus or to interfere with your work with clients, you would want to seek therapy for yourself. Consider the following case illustration (Case Illustration 6.5).

Transference and Countertransference

Transference and countertransference are two concepts gleaned from psychoanalysis to describe the projection of intense feelings that may occur in the process of

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CASE ILLUSTRATION 6.5

Losing Perspective

Jennie is a second-year graduate student in a counseling program at a large state university in the Midwest of the United States. Currently, she is doing her internship in the practicum clinic of the university. As a graduate intern and supervisee, Jennie is observed during each counseling session that she conducts with an actual client from the local communities. One of Jennie's clients has issues of PTSD and severe depression. Each session after the intake, the client began crying when the topic touched her relationship with her stepfather. However, Jennie quickly shifted the topic to other issues every time the client brought up her relationship with her stepfather. The supervisor noticed what was happening while he was observing the sessions on the other side of the mirror and pointed out what was going on during the supervision with Jennie. Jennie then admitted that she was sexually abused by her father when she was little, and she was scared to go in that direction with the client. As a result of this supervision meeting, Jennie was counseled to seek therapy for herself because her issue had become an interference to her work with her client.

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counseling or therapy. Freud (1933) noted that clients would transfer personal thoughts or feelings that perhaps they held for other significant individuals in their life or their past onto a therapist. Whereas the analysis of such transference was viewed as therapeutic, the occurrence of countertransference, that is, the process by which the therapist transfers his or her own personal feelings, desires, wishes, and fantasies onto the client, was not. Clearly, any personal feelings or fantasies experienced by a counselor in session cannot be acted on and need to be resolved in the counselor's own supervision so they do not influence or leak into the treatment relationship. Therefore, addressing the importance of countertransference feelings is considered a professional and ethical responsibility of the counselor.

But beyond the experience of both transference and countertransference in a counseling session, it is also possible to experience these within the dynamic of supervision. Perhaps, for example, one is resisting supervision feedback because the feedback threatens the strong countertransference you feel for a client (Epstein, 2001), or your supervisor mirrors your client's attitude and behavior—transference may occur within the supervision process in what has been called a parallel process (Bernard & Goodyear, 2014).

Baird (2002) suggests that understanding transference and countertransference in supervision can be helpful for you as a counseling supervisee to make the most out of supervision and gain greater awareness of processes you are likely to observe and experience in therapy. Transference reactions within supervision may present as a form of resistance to supervisory feedback, or your expectations and reactions to supervisory feedback may be distorted given the nature of that feedback. Baird (2002) suggests that a supervisee consider the following question as a way of making possible points of transference conscious: "If you were to anticipate a transference

reaction toward a supervisor based on someone from your own past, who most likely would the person be? Why?"

Supervision and Multiculturalism

In most counseling programs, interns and practicum students are required to take at least one class on multicultural issues in counseling. The exposure to multicultural issues in counseling in one class is far from enough. As we will discuss in the next chapter on practice in multicultural settings, increasing multicultural awareness, knowledge, and skills is a lifetime task for all counselors. Multiculturally sensitive clinical supervision can be a cornerstone toward enhancing competence in practice for counseling interns. It is the responsibility of the supervisor to assure that multicultural issues receive attention in supervision (Bernard & Goodyear, 2014). This does not mean that you as the intern have no obligation. You want to make sure multicultural issues and issues related to multicultural supervisory relationships are addressed during your supervision; this is vital to interns' professional and personal growth and development (Brown & Landrum-Brown, 1995; Constantine, 1997), especially racial/ethnic minority supervisees, who also need to integrate their ethnic and professional identity (Vasquez & McKinley, 1982).

Issues that you and your supervisor want to address are on four dimensions: the intrapersonal dimension of identity; the interpersonal dimension of expectations, bias, and prejudice; the interpersonal dimension of cultural identity and behavior; and the sociopolitical dimension of privilege and oppression (Bernard & Goodyear, 2014). To fully understand these four dimensions, we ask you to complete Exercise 6.5.

EXERCISE 6.5

Multicultural Dimensions in Supervision

Directions: Complete the following questions under each dimension and then take the questions and your answers to your supervision meetings for discussion with your supervisor and peer supervisees.

Intrapersonal Dimension of Identity

1. How do you identify yourself in terms of race, gender, sexual orientation, national, cultural, etc.?

2. How does the way you identify yourself affect your sense of self in relationship to others?

Interpersonal Dimension of Expectations, Bias, and Prejudice

1. What are your expectations, bias, and prejudice toward others based on their membership in a particular group (e.g., racism, sexism, classism, heterosexism, ageism, ableism, etc.)?

2. How do you categorize the world and the peoples populating in the world?

Interpersonal Dimension of Cultural Identity and Behavior

1. How do you view people from different cultures? Do you view them as essentially the same or different?

2. Do you believe that culture can produce effects on interactions between you and your clients and your supervisor? If so, in what ways? If not, why not?

Social Political Dimension of Privilege and Oppression

1. In what ways and in what situations have you been either privileged or oppressed due to your race/ethnicity, gender, sexual orientation, age, social economic class, religious belief, nationality, or other characteristics?

2. How did the experience that you had in Question 1 affect your identities and behavior?

Through addressing multicultural issues in supervision, interns will increase their abilities in overall case conceptualization (Gainor & Constantine, 2002), abilities to include multicultural issues in client treatment conceptualization (Ladany, Inman, Constantine, & Hofheinz, 1997), personal awareness of cultural issues (Toporek, Ortega-Villalobos, & Pope-Davis, 2004), satisfaction in supervision (Gatmon et al., 2001), and multicultural competence (Constantine, 2001). Therefore, as interns, it is best to be proactive in the aspect of addressing multicultural issues in supervision.

Transitioning From Student to Professional Counselor in Supervision

A final value of field experience is that it is a valuable opportunity for students to more fully transition to the role and identify as professional counselors. The supervision one experiences throughout his or her field work serves as one of the most important vehicles that will guarantee the counselor trainee a quality transition from student to professional. The practicum supervisors, both on site and on campus, are the gatekeepers of the counseling profession. They are obligated to facilitate the occurrence of a high-quality transition that takes place at two major levels—interpersonal functioning and intrapersonal functioning.

In conclusion, the purpose of supervision is to facilitate the development, growth, and maturity of counseling interns in the areas of counseling skills, theories, techniques, research, multicultural competence, and capability of professional practice. The purpose of supervision further includes helping counseling interns fully understand their professional roles, set clear boundaries of professional behavior, abide by professional ethics rules, and improve service quality. Finally, counseling supervision assists in improving counseling interns' mental health and personality and helps them become role models.

KEYSTONES

- Counseling supervision is a professional relationship that empowers counseling trainees and counselors to accomplish their development and growth professionally and personally; as a result, counselors become capable of not only providing the best service to their clients but also transmitting the essence of counseling principles, knowledge, and skills to the new generation.
- Counseling supervision is both an ethical imperative and evidence based, and it has become the cornerstone of quality improvement and assurance.
- Clarification of counseling expectations from both counseling trainees and supervisors is essential; it benefits all parties and facilitates supervisory outcome.
- The focus of the process and content of counseling supervision is to achieve the goal of developing the supervisee's initial professional competencies, which include the supervisee's process skills, conceptualization skills, personalization skills, professional behavior and administrative skills, and other practical skills.
- Counseling supervision model is a framework with which the counseling supervisor helps the supervisee gain competence to offer the best service to his or her clients.
- Issues and dilemmas in counseling supervision are necessary challenges that can be opportunities for the supervisee to grow.
- Counseling supervision is an important vehicle that, with many others, will guarantee the counselor trainee a quality transition from student to professional.

ADDITIONAL RESOURCES

Web Based

American Counseling Association (ACA). (2014). *2014 ACA code of ethics.* Retrieved from http://www .counseling.org/docs/ethics/2014-aca-code-of-ethics.pdf?sfvrsn=4

Association for Counselor Education and Supervision: http://www.acesonline.net/resources/

Heimsch, K. A. (2013). *A development theory for the clinical supervision of counselors encountering suicidal clients* [video]. Retrieved from http://www.youtube.com/watch?v=23AfQXWxXWw

Heimsch, K. A. (2013). *The benefits of supervision for counselor development part 1* [video]. Retrieved from http://www.youtube.com/watch?v=rj0D4Jkr74E

Heimsch, K. A. (2013). *Therapist countertransference and supervision* [video]. Retrieved from http://www .youtube.com/watch?v=hUQiq1mou78

Print Based

Borders, L. D., & Brown, L. L. (2008). *The new handbook of counseling supervision.* Mahwah, NJ: Lawrence Erlbaum.

Fukuyama, M. A. (1994). Critical incidents in multicultural counseling supervision: A phenomenological approach to supervision research. *Counselor Education and Supervision, 34*(2), 142–151.

REFERENCES

Baird, B. N. (2002). *The internship, practicum, and field placement handbook: A guide for the helping professions* (3rd ed.). Upper Saddle River, NJ: Prentice Hall.

Bernard, J. M. (1979). Supervisor training: A discrimination model. *Counselor Education and Supervision, 19,* 740–748.

Bernard, J. M., & Goodyear, R. K. (1992). *Fundamentals of clinical supervision.* Needham Heights, MA: Allyn & Bacon.

Bernard, J. M., & Goodyear, R. K. (2014). *Fundamentals of clinical supervision.* Upper Saddle River: Pearson.

Borders, L. D., & Brown, L. L. (2005). *The new handbook of counseling supervision.* Mahwah, NJ: Lawrence Erlbaum.

Bradley, J. R., & Olson, J. K. (1980). Training factors influencing felt psychotherapeutic competence of psychology trainees. *Professional Psychology, 11,* 930–934.

Brown, M. T., & Landrum-Brown, J. (1995). Counselor supervision: Cross-cultural perspectives. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (pp. 263–286). Thousand Oaks, CA: Sage.

Burkard, A. W., Johnson, A. J., Madson, M. B., Pruitt, N., Tadych-Contreas, D., Kozlowski, J. M., . . . Knox, S. (2006). Supervisor cultural responsiveness and unresponsiveness in cross-cultural supervision. *Journal of Counseling Psychology, 53,* 288–301.

Carroll, M. (1997). Clinical supervision: Luxury or necessity? In I. Horton & V. Varma (Eds.), *The needs of counselors and psychotherapists* (pp. 135–151). Thousand Oaks, CA: Sage.

Constantine, M. G. (1997). Facilitating multicultural competency in counseling supervision: Operationalizing a practical framework. In D. B. Pope-Davis & H. L. K. Coleman (Eds.), *Multicultural counseling competencies: Assessment, education and training, and supervision* (pp. 310–324). Thousand Oaks, CA: Sage.

Constantine, M. G. (2001). Multiculturally-focused counseling supervision: Its relationship to trainees' multicultural counseling self-efficacy. *The Clinical Supervisor, 20,* 87–98.

Constantine, M. G., & Sue, D. W. (2007). Perceptions of racial microaggressions among black supervisees in cross-racial dyads. *Journal of Counseling Psychology, 54,* 142–153.

Council for Accreditation of Counseling & Related Educational Programs. (2009). *CACREP 2009 standards.* Retrieved from http://www.cacrep.org/wp-content/uploads/2013/12/2009-Standards.pdf

Epstein, L. (2001). Collusive selection inattention to the negative impact of the supervisory interaction. In S. Gill (Ed.), *The supervisory alliance: Facilitating the psychotherapist's learning experience* (pp. 13–163). Northvale, NJ: Jason Aronson.

Falender, C. A., & Shafranske, E. P. (2004). *Clinical supervision: A competency-based approach.* Washington, DC: American Psychological Association.

Freud, S. (1933). *New introductory lectures on psychoanalysis.* New York, NY: W. W. Norton.

Gainor, K. A., & Constantine, M. G. (2002). Multicultural group supervision: A comparison of in person versus web-based formats. *Professional School Counseling, 6,* 104–111.

Garner, B, R., Hunter, B. D., Modisette, K. C., Ihnes, P. C., & Godley, S. H. (2012). Treatment staff turnover in organizations implementing evidence-based practices: Turnover rates and their association with client outcomes. *Journal of Substance Abuse Treatment, 42*(2), 134–142.

Gatmon, D., Jackson, D., Koshkarian, L., Martos-Perry, N., Molina, A., Patel, N., & Rodolfa, E. (2001). Exploring ethnic, gender, and sexual orientation variables in supervision: Do they really matter? *Journal of Multicultural Counseling and Development, 29,* 102–113.

Giordano, M. A., Altekruse, M. K., & Kern, C. W. (2000). *Supervisee bill of rights.* Unpublished manuscript. Retrieved from http://www.grace.edu/files/uploads/webfm/pdfs/Supervision%20Training%20Manual%20081009.pdf

Gray, L. A., Ladany, N., Walker, J. A., & Ancis, J. R. (2001). Psychotherapy trainees' experience of counterproductive events in supervision. *Journal of Counseling Psychology, 48,* 371–383.

Hart, G. M. (1982). *The process of clinical supervision.* Baltimore, MD: University Park Press.

Hatcher, R. L., & Lassiter, K. D. (2007). Initial training in professional psychology: The practicum competencies outline. *Training and Education in Professional Psychology, 1,* 49–63.

Haynes, R., Corey, G., & Moulton, P. (2003). *Clinical supervision in the helping professions: A practical guide.* Pacific Grove, CA: Brooks/Cole.

Herlihy, B., Gray, N., & McCollum, V. (2002). Legal and ethical issues in school counselor supervision. *Professional School Counseling, 6,* 55–60.

Hodges, S. (2011). *The counseling practicum and internship manual: A resource for graduate counseling students.* New York, NY: Springer.

Ivey, A. E., & Ivey, M. B. (2007). *Intentional interviewing and counseling: Facilitating client development in a multicultural society* (6th ed.). Belmont, CA: Brooks/Cole.

Knudsen, H. K., Ducharme, L. J., & Roman, P. M. (2008). Clinical supervision, emotional exhaustion, and turnover intention: A study of substance abuse treatment counselors in the Clinical Trials Network of the National Institute on Drug Abuse. *Journal of Substance Abuse Treatment, 35,* 387–395.

Koltz, R., & Champe, J. (2010). *A phenomenological case study: The transition of mental health counseling interns from students to professionals.* Retrieved from http://counselingoutfitters.com/vistas/vistas10/Article_31.pdf

Ladany, N., Inman, A. G., Constantine, M. G., & Hofheinz, E. W. (1997). Supervisee multicultural case conceptualization ability and self-reported multicultural competence as functions of supervisee racial identity and supervisor focus. *Journal of Counseling Psychology, 44,* 284–293.

Lambie, G. W. (2007). The contribution of ego development level to burnout in school counselors: Implications for professional school counseling. *Journal of Counseling & Development, 85,* 82–88.

Lambie, G. W., & Sias, S. M. (2009). An integrative psychological developmental model of supervision for professional school counselors-in-training. *Journal of Counseling and Development, 87*(3), 349–356.

Lanning, W. (1986). Development of the supervisor emphasis rating form. *Counselor Education and Supervision, 25,* 191–196.

Lawson, G., Hein, S. F., & Stuart, C. L. (2009). A qualitative investigation of supervisees' experiences of triadic supervision. *Journal of Counseling and Development, 87,* 449–457.

Longanbill, C., Hardy, E., & Delworth, U. (1982). Supervision: A conceptual model. *The Counseling Psychologist, 10*(1), 3–42.

Loganbill, C., & Stoltenberg, C. (1983). The case conceptualization format: A training device for practicum. *Counselor Education and Supervision, 22,* 235–241.

Moskowitz, S. A., & Rupert, P. A. (1983). Conflict resolution within a supervisory relationship. *Professional Psychology: Research and Practice, 14*(5), 632–664.

Nelson, M. L., & Friedlander, M. L. (2001). A close look at conflictual supervisory relationships: The trainee's perspective. *Journal of Counseling Psychology, 48,* 384–395.

Newgent, R. A., Davis, H., Jr., & Farley, R. C. (2005). Perceptions of individual, triadic, and group models of supervision: A pilot study. *Clinical Supervisor, 23,* 65–79.

Prieto, L. R. (1998). Practicum class supervision in CACREP-accredited counselor training programs: A national survey. *Counselor Education and Supervision, 38*(2), 113–223.

Ramos-Sanchez, L., Esnil, E., Goodwin, A., Riggs, S., Touster, L. O., Wright, L. K., . . . Rodolfa, E. (2002). Negative supervisory events: Effects on supervision and supervisory alliance. *Professional Psychology: Research & Practice, 33,* 197–202.

Smith, A. L. (2009). Role play in counselor education and supervision: Innovative ideas, gaps, and future directions. *Journal of Creativity in Mental Health, 4,* 124–138.

Stoltenberg, C., & Delworth, U. (1987). *Supervising counselors and therapists.* San Francisco, CA: Jossey-Bass.

Toporek, R. L., Ortega-Villalobos, L., & Pope-Davis, D. B. (2004). Critical incidents in multicultural supervision: Exploring supervisees' and supervisors' experiences. *Journal of Multicultural Counseling and Development, 32,* 66–83.

Vasquez, M. J. & McKinley, D. L. (1982). Supervision: A conceptual model. Reactions and an extension. *The Counseling Psychologist, 10*(1), 59–63

Wilbur, M. P., Roberts-Wilbur, J., Morris, J. R., Betz, R. L., & Hart, G. M. (1991). Structured group supervision: Theory into practice. *Journal for Specialists in Group Work, 16,* 91–100.

Wilbur, M. P., Roberts-Wilbur, J., Morris, J. R., Betz, R. L., & Hart, G. M. (1994). Structured group supervision: A pilot study. *Counselor Education and Supervision, 33,* 262–279.

7

Multicultural Counseling in Practice

Multiculturalism without strong research risks becoming an empty political value, and evidence based treatment (EBT) without cultural sensitivity risks irrelevancy.

Eduardo Morales and John C. Norcross

The above statement by Morales and Norcross reflects the true nature of multiculturalism in counseling practice, and it further alerts us counselors of the necessity and urgency of becoming multiculturally competent while we serve our clients with cultural backgrounds that are different from our own. Therefore, training multiculturally competent counselors has become an imperative obligation for counselor educators, and this call comes from the awareness of counseling professionals, the requirement of the counseling profession (e.g., ACA, APA, and CACREP), the society, and ultimately the need of our clients.

Up to this point as interns, you most likely have taken courses with some components of multiculturalism, and some of you may have taken a required course on multicultural counseling. In this chapter, we will emphasize the value of approaching each of your clients through a multicultural perspective. After completing this chapter, readers will be able to

- understand the necessity of becoming multiculturally competent;
- become more sensitive while they serve clients with multicultural backgrounds;
- become more aware of their function and impact as counselors in the process of multicultural counseling;
- understand the necessity to adapt traditional counseling interventions for meeting the needs of multicultural clients;

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