

Counselling Supervision

by Willie Egan

Introduction

Thankfully much research literature is now available regarding Counselling Supervision from varying theoretical and philosophical perspectives; hence a simple a “cut and paste” approach from the many splendid books and papers on the subject would have in itself made this article a very interesting read.



But that would have been far too easy for my “experiential” brain and in my opinion of little use to the readers. Rather I feel it’s better if the readers research such books and articles themselves, should they find this article interesting. What this article hopes to focus on is an experiential “on-the-ground” introduction to the counselling supervision process from the

perspective of the writer who is an experienced supervisor and a lecturer on Counselling Supervision. Some of the practical issues explored here are: what is the purpose of supervision, what is the role of the supervisor... and what might a typical supervision session agenda look like? Other issues explored are: is supervision the same as training? Is it the same as counselling? What makes it different? These are just some of the questions with which I hope to engage the reader as I highlight the crucial role of counselling supervision and promote the wonderful comfort, enlightenment and security it can bring to supervisees.

Counselling Supervision in Practice

• Purpose

Supervision is quite a specific piece of work, with an equally specific purpose. There are many different theories (see Reference List below), models (Seven-Eyed Model, Cyclical Model, Tasks Model etc.), formats (“one-to-one” or “group”) and forums (Private Practice/ Organisation) of supervision. The purpose of supervision can vary therefore depending on which model, formation or clinical settings are being used. But my favourite generic understanding of the term Counselling Supervision is the one I have chosen as the foundation for this article: “Supervision is a working alliance between two professionals where supervisees offer an account

of their work, reflect on it and receive feedback... and guidance where appropriate” (Inskipp, F and Proctor, B, 1993).

The purpose of counselling supervision could be viewed therefore as a clinical practice whereby a supervisee(s) attends a supervisor on a regular basis as an “apprenticeship”, wherein the less-experienced therapist(s) attends a more experienced, qualified and accredited supervisor to gain fresh insights, to be guided, to be affirmed, supported and hopefully excited by this unique post-graduate continuous learning process.

Whereas in therapy the primary focus is on the relevant aspects of the client’s world as dictated by the therapist’s philosophy of counselling, the focus in supervision

is on therapeutic work itself, the feelings of the counsellor about the client(s), about him/herself and his/her sense of competency in the particular piece of work in focus, a review of the therapist’s strategic approach to the piece of work, what’s happening in the therapy sessions... and about the self-care attitude/ approaches of the therapist with particular emphasis on continuous professional development. This is achieved through the supervisor’s

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knowledge, experience and ability to skilfully and seamlessly blend theory and practice.

• **Role**

Counselling Supervision has many roles, which will to a large degree be determined by the format or forum within which the supervisor is practicing. But in general, the role can be collectively defined thus: to bring objectivity to what can be a very subjective experience for the supervisee, to bring structure to what at times seems like a pretty unstructured process that is therapy, to bring clarity to what may be unclear and to bring kindness, support, strategies and vision to the inevitable isolation and self-doubt suffered by most therapists at some stage of their careers.

If counselling supervision has a clear purpose and role, it equally promotes and encourages an equally clear vision of the role of the counsellor, whatever school of therapy is being practiced. As an experienced supervisor, I have found that whereas most counselling training colleges have an appropriate focus on relevant theories, skills and personal development, there still seems to be a deficit of focus on the precise nature of the role of the counsellor, often leading to counsellors taking on other roles ("consultant" being the most common) not conducive to good therapy. It is therefore one of the key supervisory roles to establish what the therapist's understanding is of their role in any given piece of client-work in which they are engaged.

Professional Supervision training is the key to empowering would-be supervisors to identify and modify such ambivalence and resultant confusion for supervisees and their clients. The Irish Association for Counsellors and Psychotherapists (IACP) in their wisdom mandated such training some years ago and this has resulted in many training

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colleges taking up this mandate and bringing a whole new level of consistency to counselling supervision.

• **The Supervision Contract**

The Supervisory Contract is one of the fundamental foundations of the practice. The contract will vary depending on which of the above formats of supervision is being contracted for.

However for ease of understanding, this section of the article will focus on a one-to-one format in private practice. I say this, as in an organisational setting, the contract for a one-to-one forum will probably vary considerably from a similar forum in private practice in terms of stakeholders and accountability.

In the hands of a suitably-trained and experienced professional supervisor, the Supervision Contract removes all potential ambivalence through initial dialogue and agreement (containing the key element of Informed Consent) wherein the supervisor very clearly sets out exactly what the dual responsibilities are in terms of professional expectations... note-taking consistency, accountability, support, feedback, challenge, ethical decision-making responsibility - sharing, self-care monitoring, CPD updating and monitoring, etc.

Equally the supervisee in that initial dialogue sets out his/her expectations, hopes, fears, potential transference issues re authority figures, etc. Such an initial meeting is seen as an essential ingredient

for a successful and long-lasting professional relationship.

The cornerstone of supervision lies in the forming of a warm but professional relationship between the supervisor and the supervisee. Trust is the key to this relationship. Anxiety caused by role ambivalence, referred to by Michael Carroll as a psychological contract (Carroll, 1996), can have no part to play in the supervision process. The contract will securely and effectively enshrine the relationship between you, leaving no room for supervisee disadvantage or dis-empowerment caused by confusion, authority or fear.

Neither is it helpful if the supervisor tries to direct the supervisee to be some form of "clone" of him/herself. If we simplistically view the counsellor as a product of Theoretical Training, Skills Training and Ethical Training, then in theory we should all be the same... but in doing that we omit the key ingredient of each counsellor, i.e. the "Self". It is this Self which ensures that, despite the consistency and monitoring/evaluations of all training institutes regarding theoretical understanding and skills, all therapists will be different in the therapy room. This Self component is potentially the best attribute of the counsellor but also potentially the worst if key personal development training has not brought unconscious issues to light such as transference, counter-transference, projection, mirroring and Blind Spots. Equally the supervisor must be aware of the Self in his/her own role, in terms

of the potential shadow side of the need to control, communication efficiency, feedback style and other potential blind spots which s/he may have.

So rather than wanting the supervisee to clone the supervisor, the supervisor's role is to monitor, evaluate and regulate all aspects of the supervisee's practice. In the writer's opinion, a good supervision macro-management model would be Hawkins & Shohet's 7-Eyed model (Hawkins and Shohet, 2000) while a suggested model of supervision micro-management would be a combination of Michael Carroll's Tasks of Supervision and his Model of Ethical Decision-making (Carroll, 1996)

• **In the Supervision Room**

So we are beginning to form a clearer picture of the supervision process. Whereas the supervisee brings themselves and their client-cases, the supervisor brings experience, insight, clarity, guidance, structure and support. But the supervisor also is entrusted with the key role of ethical "watchdog", representing the best interests of the many stakeholders involved, most notably the supervisee's clients, parents (where the client is a minor), legal guidelines (e.g. Children First), Agency Policy where relevant, the profession of counselling and Civil Law). In this potentially contentious role, conflict between supervisor and supervisee may occur and the relationship may be tested, but in this oft-difficult ethical decision-making arena, whereas agreement is the preferred supervisory position, in its absence the supervisor will be the final arbitrator.

But in principle, when we speak of the supervisory role, supervisee development and empowerment must be at the heart of this relationship. In matters ethical, the supervisor may ultimately hold sanction, but in all matters pertaining

to the ongoing development of the supervisee, perceived lack of hierarchy is the best way forward. And, again while there is anecdotal evidence of the shadow side of power in supervisors, this issue is not always of the supervisor's making; whereas power is sometimes "taken" by an unprofessional supervisor, it is equally often "bestowed" without question by the supervisee. This perhaps can be best explained by adapting a quotation by the New York psychotherapist and noted author, Sheldon B. Kopp, as he refers to such potentially-hierarchical relationships:

"The wish to satisfy someone greater than the Self, to be found acceptable, to belong at last, is a struggle familiar to many practitioners. In their therapy practice they waste themselves on wondering how they are doing, on trying to figure out the expectations of others so that they can become someone in the eyes of others. They try to be practical, to be reasonable, and to figure it all out in their heads. It is as though if only they could get the words straight in their heads, if only they could find the correct formula, then everything in their practice would be magically straightened out. They are sure there is a right way to do things, though they have not yet found it. Someone in authority must know...

Therefore s/he will not have it any other way but that I (as his supervisor) am bigger, stronger, and wiser than he is. I must rescue him, instruct him and teach him how to practice. But Lord help me if I try. He will show me that in the long term my efforts have not been sufficient, that he is not satisfied" (Kopp, 1972).

Hence one of the core principles of a good supervisor must be to encourage and support the development of the internal supervisor within the supervisee (Stoltenberg, McNeill, and Delworth,

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1998). Examples of this would be as follows: to facilitate the supervisee to write up their own session agenda, i.e. increase their own ethical awareness, identify their interpretation of what the supervision issues are in the cases they are bringing to each supervision session: to empower the supervisee to share their current understanding of the named issues, i.e. to encourage the supervisee to share their own vision of the ethical way forward with this issue rather than solely relying on the supervisor to do this. The supervisor may have a deeper, more experienced understanding of the issue but it's important that the supervisee is enabled to explore the potential solutions in the first instance, rather than supervision becoming merely a dis-empowering authoritative process wherein the supervisee brings problems and the supervisor gives direction. When the supervisee is encouraged to become an active part of the supervision process on a regular basis, their internal supervisor grows ever stronger and the supervisor's interventions in time become more supportive than prescriptive.

• **Typical Issues Raised in Supervision**

Let's take a brief look at the type of ongoing ethical issues which typically require supervision support and guidance:

- The supervisee's client of 10 sessions (private practice setting) wishes to bring her husband in for the next session.

- The supervisee's client (also private practice setting) has lost his job as a decorator/painter; he wishes to continue counselling but is offering to paint the counsellor's office in lieu of payment.
- A separated mother wishes her 15-yr-old son (who lives with her) to attend counselling with the supervisee (private practice); however the boy's father refuses to give consent and there is no formal legal custody arrangement in place.
- A 25-yr-old female client has revealed to the supervisee (private practice) that as a child she was abused by her uncle; though he is still alive with current access to other children, the client says she only wants therapy and has no interest in causing problems for the extended family. As such she absolutely refuses to even contemplate any reporting of these incidents to the proper authorities.
- A woman has approached the supervisee (private practice) requesting counselling for her aging and infirm mother in the mother's own home due to transport difficulties.
- The client, who works in an organisation, is being directed to carry out other duties within that agency which risk serious breach of boundaries and risk of dual relationship contamination for many of her clients within the organisation.
- In Session 8, it becomes alarmingly clear to the supervisee that he personally knows the married person with whom the client is having an affair.

This gives the reader a flavour of the type of situations wherein the

supervisor must have a clear model of ethical decision-making to be effectively able to support and guide the supervisee in any of the above situations.

Such examples immediately highlight the absolute need for trust in the supervisory relationship to facilitate the sharing of such ethical dilemmas. Such trust can only thrive in an atmosphere of safety and bring Adler's great quotation to mind: "A lie has no value where the truth holds no threat" (Adler, 1992).

It also highlights the skills required by the supervisor to manage this information in such a professional way that the supervisee will feel anchored and supported.

For all of these reasons the supervisor's role is responsible, caring and exciting all in equal measure... but it's also a beautiful role, wherein s/he can have an enormous influence on supervisees... with enormous job satisfaction.

Why don't you train as one? 

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