Academic Article

Existential – Humanistic Supervision: Paying Attention to Lived Experiences

By Fiona Smith and Dr Rita Glover



In this article the authors advocate that supervisor and supervisee take sufficient time and space to engage in deep exploration of lived experience to make more intelligible what is actually happening in counselling and psychotherapy practice.

Introduction

The practice of supervision is influenced by both theory bound approaches and conceptual models that enable supervisors to become proficient in the 'how' of supervision. In this article we offer the view that it is also necessary to pay close attention to the 'what' of supervision, that is to say, what is actually happening in therapeutic and supervisory encounters in order to uncover and consider the impact of clients', therapists' and supervisors' lived experiences on therapeutic processes and therapeutic change. As a therapist, the first author's professional training and development focussed on attending to hereand-now human experiencing. Existential-humanistic [EH] therapy facilitates attention to focussing on 'lived experience' and it has greatly enhanced her clinical practice and client outcomes. Furthermore, recent training in clinical supervision has offered the potential to apply the EH approach in her supervisory practice. The second author utilises an existential-humanistic approach to supervision to assist supervisees to raise awareness of what is really happening in their interactions with clients and in supervisory encounters. EH therapy and supervision provides a real, in the moment, opportunity to understand and get a sense of how clients and therapists experience their world and their social interactions (Van Deurzen & Arnold-Baker, 2005; Van Deurzen & Young, 2009c; Van Deurzen, 2012). Therefore, EH supervision is an integrative approach to supervision that focusses primarily on uncovering and making meaning of the lived experience of clients, therapists and supervisors.

This article sets out the proposition that EH supervision is an effective approach in its own right, depending on the client's presenting issues, and the therapeutic and supervisory contexts. However, the authors consider that there is also untapped potential to integrate aspects of EH supervision into theory bound and conceptual models of supervision, due to the therapeutic benefits of privileging the lived experiences of clients, therapists and supervisors as they are uncovered and reflected upon within therapeutic and supervisory relationships (Glover, 2017).

The concepts of EH psychotherapy

Existential therapy emerged from philosophy and concerns itself with the phenomenological level of human existence (Van Deurzen, 2005). Its foundation lies in understanding subjective lived experience whilst recognising the continuing psychical conflict between freedom, responsibility and the limits of humanity (Farber, 2010; Farber, 2012). The focus is on the client's worldview and four dimensions contained therein, including the world in which they physically exist, or embodiment; the social or relational world and how they experience their interconnectedness to others: the personal world that contains their sense of self and the spiritual world and how they put meaning to transcendental existence (Van Deurzen & Arnold-Baker, 2005; Van Deurzen, 2012). Existential therapy seeks to understand the client's struggles to cope within these dimensions of experience, their search for a sense of well-being, and in doing so to develop the ability to tolerate the challenges and tensions of human existence (Van Deurzen, 2005; Van Deurzen, 2012). It recognises the subjectivity of 'being-in-the-world' (Heidegger, 1927/1962) and that 'one truth does not fit all'. Van Deurzen (2012) describes it as understanding the client's lived experience so they can reflect more deeply on how they live.

Humanistic therapy also has philosophical roots (Passer et al, 2009). Carl Rogers (Cain, 2007) was concerned with exploring and understanding clients' lived experience. Rogers proposed that the pathway to understanding lived experience is through the therapeutic relationship (Rogers, 1957/2007). This process requires the need to 'bracket' our biases, hypotheses and potential **P**resence can be defined as the ability to focus concurrently on the client's process, as well as the therapist's own process, whilst actively listening for verbal and non-verbal emotional cues

(Malan, 1995)

diagnoses of clients and rather just 'be' in the therapeutic space and let human experiencing unfold, in and of itself (Farber, 2010). Humanistic therapy recognises that human beings possess an innate drive for self-actualisation, to strive for continuing personal development despite their circumstances (Mearns & Thorne, 2007). According to Cooper (2007) people react and respond in the best way they can to their lived experience and strive to find meaning and purpose in their lives whilst simultaneously accepting the limitations of human existence (Silva & Sousa, 2018). EH adheres to the position that clients have a conscious capacity for change and growth within a supportive therapeutic environment wherein the therapist pays close attention to their lived experience (Cain, 2007; Cooper, 2007; Farber, 2010; Glover, 2017).

Roger's core conditions and therapeutic presence are central to working relationally (Cain, 2007; Cooper, 2007; Rogers, 1957/2007). Presence is a way of being that the EH approach views as definitive to the work (Suri, 2010). Presence can be defined as the ability to focus concurrently on the client's process, as well as the therapist's own process, whilst actively listening for verbal and non-verbal emotional cues

(Malan, 1995). It necessitates the capacity for deep empathy and remaining present during times of highly intense emotional expression (Farber, 2010). This reflexively enhances relational depth and the client's capacity to be more self-aware and selfpresent. Immersing presently in this 'live' way uncovers lived experience (Clarkson, 2004). EH comprises the therapist's ability to be authentic and accepting, in order to promote dialogical openness not only about the psychotherapeutic process but also with regard to the therapeutic relationship itself and human experiencing (Farber, 2010).

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EH informed supervision

EH supervision closely mirrors EH and applies the same principles (Du Plock, 2009a; Farber, 2012). It takes a broad view of how clients and supervisees are 'present' in the world and how they present in the world (Van Deurzen & Young, 2009c). The underlying principles of existential supervision are the enquiry into the "widening circles of life" (Van Deurzen & Young, 2009c, p. 3) as it relates to the client. These circles include the client, the therapist, the interaction between client and therapist, the supervisor, the client's life, the therapist's life and life itself (Van Deurzen & Young, 2009c). Du Plock (2007) describes EH supervision as real enquiry into 'relationship'; an investigation into how the client, the supervisee and the supervisor meet each other within the therapeutic and supervisory space, and then make sense of the encounter(s). The supervisor's attentiveness to their own 'being-in-the-world' (Heidegger, 1927/1962) provides a model of learning for the supervisee which can then permeate into the therapeutic relationship (Du Plock, 2009a). Furthermore utilising the supervisory relationship in this way



allows space for reflection on the therapist's "availability to encounter the lived-world of the client" (p. 303).

EH supervision: a phenomenological enquiry

Glover (2017) advocates 'privileging' lived experience within the supervisory space (p. 31). This allows for refection-in-action (Calvert et. al., 2016) and momentto-moment engagement in order to uncover the hidden nuances of how supervisees and their clients experience each other (Glover, 2017). This supports the supervisee to develop their awareness of and focus on 'being' within the therapeutic relationship rather than seeking answers from knowledge based structures, enabling the development of presence to and tolerance of ambiguity and uncertainty in human experiencing (Van Deurzen, 2009; Glover 2017).

An important aspect of supervision is that "the-therapistwho-meets-the-client is in the room" (Du Plock, 2009a, p. 302). Supervisory phenomenological enquiry concerns itself with the intersubjective triadic lived experience of client-therapistsupervisor. This incorporates the supervisee's perspective of the client's lived experience; the supervisee's perspective of the therapeutic relationship and both the supervisor's and the supervisee's interrelatedness within the supervisory space (Du Plock, 2009a; Spinelli, 2015). The supervisor will never directly encounter the client or their lived experience and is therefore reliant on the supervisee to bring the client's lived experience into the supervisory space (Pagdin, 2013).

EH supervision has the capacity to uncover the worldview of both supervisee and client and in doing Working solely in private practice often affords a certain amount of freedom to integrate various theoretical modalities whether working with clients or supervisees

so illuminates the potential for resonance or dissonance (Van Deurzen, 2009). This requires both supervisor and supervisee to set aside their assumptions, biases, beliefs and values (Längle & Klaassen, 2019; Pagdin, 2013). This includes client and supervisee narratives, diagnoses, theory bound approaches, as well as the supervisee's and supervisor's clinical experience (Carpendale, 2002; Pagdin, 2013; Van Deurzen, 2009). Instead the focus is on what is actually being experienced within the supervisory space and to consider and give meaning to this material. Phenomenological enquiry encourages both supervisor and supervisee to assume nothing and be open to new experience. Bringing each such worldviews to the fore provides rich insight into the client's world (Glover, 2017). Authenticity, congruence and open discussion of supervisor and supervisee processes in real time highlights "how this might influence supervisory and therapeutic practices" (Glover, 2017, p.36).

Contexts for EH supervision

The supervisor's role is multiplex with a number of responsibilities to be attended to such as developing understanding of theoretical notions, application of appropriate theoretical models to client work and gatekeeping (Spinelli, 2015; Van Deurzen & Young, 2009b). Supervisory models such as the Cyclical Model (Page & Wosket, 2015), the Seven-Eyed Model (Hawkins & McMahon, 2020) and Integrative Developmental Model (Stolenberg & McNeill, 2010) oversee much of this formative, normative and restorative function whereas EH supervision privileges and pays close attention to human experiencing. The approach is mainly experiential and explores interconnectedness and relatedness to enhance self-awareness, insight and professional development. Current thinking advocates working relationally with clients and supervisees (Angus & Kagan, 2007; Calvert et al., 2016; McMahon, 2014). The EH approach to supervision specifically enhances the potential for relational learning and deeper engagement with human experiencing.

Working solely in private practice often affords a certain amount of freedom to integrate various theoretical modalities whether working with clients or supervisees. We suggest that EH supervision is especially suited to working within a private practice setting. Supervision of private practice within a private practice setting is not subject to the potential constraints present in organisational settings where other factors can take precedence. for instance restrictions on time allocated for supervision (Tantam & Kumar, 2009). Similarly private practice is not limited to crisis intervention work (Lybbert et al., 2019) or evidence based practice (Hunot et al., 2013; Thomason, 2010). Consequently there is time and space for engaging in more long-term work as an effective means of change (Huber & Klug,



2017). A study conducted by Vaštakė and Kočiūnas (2017) found that supervisees valued how EH supervision facilitated an open, measured and deliberate enquiry within the supervisory process. Participants described the supervisor's slowing and calming of the exploratory space as permitting more in-depth reflexivity.

Supervision: a 'seeing-over' process

Spinelli (2015) splits the word supervision into super-vision. He describes other theoretical approaches and conceptual models as 'over-seeing' the supervisee's practice. This concept implies that the supervisor is 'more-knowing' with the focus on the formative, normative and restorative functions. However, Spinelli views EH supervision as a 'seeing-over' process; observing the supervisee's engagement with the client's lived experience. Spinelli (2008) refers to this as 'the I-focused realm of encounter' (p. 61). From a seeing-over standpoint it requires posing the question to the supervisee: how did I experience myself in my interaction with the client? (Spinelli, 2008). This 're-viewing' offers an opportunity to reflect on the actual interaction between the supervisee and the client in order to look at what really happened; what may have been overlooked and to explore the reasons the interaction unfolded as it did (Spinelli, 2015).

The focus is mainly on the supervisee's lived experience of the encounter in order to evaluate their real experience against their idealised version of being a therapist (Spinelli, 2015). This exploratory process considers the 'worldview' of the supervisee with regard to what it means to be a therapist; the The focus is mainly on the supervisee's lived experience of the encounter in order to evaluate their real experience against their idealised version of being a therapist

(Spinelli, 2015)

ideal circumstances to practice therapy; and how engagement with clients enriches or inhibits their professional practice (Spinelli, 2015). This also provides an opportunity to explore any potential 'blind spots' that may be impeding work with a particular client or the supervisee's clinical practice in general (Du Plock, 2009a). Spinelli (2015) stresses that this aspect of phenomenological enquiry may elicit a sense of personal therapy so the supervisor must be aware and ensure the phenomenon being explored is centred within the therapeutic relationship. This requires holding a boundary between personal and professional development in supervision and personal therapy. Spinelli describes this seeingover approach as "embodying an existential phenomenological way of being" (p. 174).

EH supervision in practice: a vignette

The following vignette typifies the process of EH supervision with regard to the interaction between supervisor and supervisee. It demonstrates how attention to human experiencing provides rich insight to client-superviseesupervisor worldviews.

An EH supervisor and supervisee, Alison, were discussing recent sessions about a male client during which Alison had been trying to address the client's anger. However, the client was strongly resistant to exploring this. In the course of the previous two sessions Alison had experienced herself stuttering and stumbling over her words leaving her anxious and confused. She indicated that she had experienced significant frustration and irritation after the sessions. The supervisor was curious about how she experienced the client's way of being during the session. Alison considered this momentarily and pointed out that whenever she tried to explore his anger he looked at her in a way that she could only describe as distain and then he remained silent. The supervisor then tried to uncover what she noticed physically about him in that moment. Alison realised that when he stared intently at her she experienced great difficulty in maintaining eye contact with him.

The supervisor wondered if Alison's own biases might have been influencing the therapeutic relationship so she invited her to reflect on any personal resonance about this encounter. Alison immediately recognised that she had experienced this many times during her childhood and she felt shamed by it, and later angry. The supervisor encouraged Alison to reflect on those childhood moments and to consider what emotion she was experiencing with respect to the other person. Alison connected with what it was like to experience her father's anger and disapproval. The supervisor checked if her father's anger was verbalised. Alison realised that it had not been verbalised and she remembered that it was the memory of the look on her father's face that had resulted in her experience of struggling to speak when faced with an angry male client.



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The supervisor wondered about how this new insight might help Alison to approach her next session with this male client. Alison paused to ponder this and indicated that having identified her own process; she believed she could now be aware of and strive to set aside her own lived experience in order to be more present to the client. She added that she was now wondering if the client's look of distain was how he experienced and expressed his anger.

At that point the supervisor volunteered how she experienced Alison earlier in their session. The supervisor told Alison that she had noticed her becoming angry during her account of the therapeutic encounter with her client. The supervisor offered that she had experienced increasing anxiety resulting in her being unsure what to say. The supervisor went on to express her curiosity about how the client actually experienced other people's anger. Alison indicated that she had never really explored this with him but she recognised the benefit of doing so in future sessions.

In their next supervision session Alison provided an update that the client experienced fear and shame as a child when his father was angry or disapproving and he was aware of how 'bad' it felt for him. The idea of him expressing anger was terrifying because he would never want to make others feel that way. In the momentto-moment encounter Alison supportively encouraged her client to express what he experienced when asked about his own anger. He revealed that he became very anxious and unsure about what to say or how to behave when he felt angry. On reflection Alison realised that the 'intense stare and silence' she had experienced was actually

Advocates of theory bound approaches and conceptual models contend that existentialhumanistic therapy and supervision is not suited to certain presenting issues such as suicidality, substance abuse or complex trauma

(Aherne et al., 2018; Du Plock, 2009b; Du Plock & Fisher, 2005; Du Toit, 2017; Lybbert et al., 2019)

a vacant and frozen expression of his anxiety, an enduring lived experience for this client.

Clinical implications and integrative supervisory practice

Advocates of theory bound approaches and conceptual models contend that EH and supervision is not suited to certain presenting issues such as suicidality, substance abuse or complex trauma (Aherne et al., 2018; Du Plock, 2009b; Du Plock & Fisher, 2005; Du Toit, 2017; Lybbert et al., 2019). However, exponents of EH supervision argue that the model can be utilised when working with such complex presenting issues (Aherne et al., 2018; Du Plock, 2009b; Du Plock & Fisher, 2005; Du Toit, 2017; Lybbert et al., 2019). We also believe that there is the potential to integrate central principles and practice of the EH approach into therapeutic and supervisory responses to complex case presentations. Working in an integrative way means we consider what interventions are appropriate for supervisees and clients' presenting issues (Zarbo et al., 2015). In order to stabilise clients, crisis intervention

strategies should take precedence (Aherne et al., 2018; Lybbert et al., 2019). However, once stabilised, space can be created to attend to clients' enduring negative lived experiences (Du Toit, 2017; Glover 2017). People can consider suicide or engage in substance abuse because they are trying to abate emotional suffering (Fisher, 2017). Early attachment disruption (Wallin, 2007) can lead to a lack of connection and emotional holding as well as difficulty with emotional regulation. EH supervision offers a means to make significant human connection (Aherne et al., 2018; Du Toit, 2017) through its relational context (Du Plock, 2009b; Lybbert et al., 2019). It offers the client an opportunity for a corrective emotional experience through the supervisee learning to be in a relationship which pays close attention to the client's enduring lived experience (Du Plock, 2009a; Glover, 2017).

Cognitive and behavioural therapies (Beck, 2011; Hunot et al., 2013; Vivian & Salwen, 2013) sit in stark contrast to EH supervision (Farber, 2012). However proponents of EH supervision suggest it can be used cross-theoretically and inclusively (Spinelli, 2015; Van Deurzen & Young, 2009a). Spinelli states that his experience, after many years as a trainer in the field of EH, is that it has proved "challenging, appealing and liberating" (p. 176) for all modalities regardless. According to Pagdin (2013) many supervisees have training in person-centred therapy which is rooted in the humanistic approach (Barnett, 2009; Mearns & Thorne, 2007). This commonality allows for integration with an EH approach to supervision (Barnett, 2009) and attending to supervisees' and clients' actual lived experiences (Glover 2017).

Conclusion

There is growing belief in the importance of relatedness within both the supervisory and therapeutic relationships (Angus & Kagan, 2007; Calvert et. al., 2016; McMahon, 2014). Relationality facilitates privileging lived experience and is the gateway to understanding what is really happening in the clienttherapist-supervisor triad as these unfold within the therapeutic and supervisory relationships (Glover 2017). Phenomenological enquiry through the use of EH supervision necessitates setting aside our assumptions, biases and beliefs (Längle & Klaassen, 2019; Pagdin, 2013). Instead it requires the capacity for presence within the supervisory space in order to uncover human experience (Clarkson, 2004; Malan, 1995). This developmentally enhances the ability to tolerate ambiguity and uncertainty in human experiencing, a fundamental condition of human existence (Van Deurzen, 2009; Glover 2017). By being open to this 'unknowing' and privileging human experiencing, we give meaning to clients-therapistssupervisors worldviews. The supervisor's willingness to work relationally provides experiential learning for the supervisee in order to enhance engagement and relational depth in clinical practice (Du Plock, 2007, Du Plock, 2009a). Spinelli (2015) applies the term 'over-seeing' to theoretical and knowledge based structures where the focus is on theoretical. knowledge based, ethical practice. 'Seeing-over' in supervision is a relational concept; the central purpose of EH supervision (Farber, 2010). Focussing on how client, supervisee and supervisor encounter each other in relationship is about more fully understanding actual lived

Our concern is that if we rely solely on theoretical and knowledge based frameworks our attention becomes narrowed and future focussed and we potentially miss what is really happening in the moment to moment therapeutic encounter

experience so that supervisees can reflect, in a more informed manner, on how they practice (Glover, 2017).

In this article we advocate that an EH approach to supervision is beneficial when the supervisor and supervisee have sufficient time and space to engage in-depth exploration of lived experience and make more intelligible what is actually happening in counselling and psychotherapy practice. Furthermore, we agree with Cooper (2007) and Du Plock (2009) that an EH approach to supervision can be effectively integrated into dominant theoretical approaches and conceptual models of supervision. Our concern is that if we rely solely on theoretical and knowledge based frameworks our attention becomes narrowed and future focussed and we potentially miss what is really happening in the moment to moment therapeutic encounter. Therefore, we consider that EH supervision is an essential part of the supervisory process as a means to uncovering lived experience and developing relational learning. No matter how complex the presenting issues are or the nature of supervisees' theoretical orientation, we suggest that there is a space to

attend to lived experience within the therapeutic and supervisory relationships. If we create space for an EH approach in supervisory practice, we are providing an added opportunity for personal and professional growth, informed insight and self-actualisation for supervisees and their clients.)

Fiona Smith

Fiona Smith is an accredited humanistic and integrative therapist working solely in private practice in Dun Laoghaire and Naas. She has recently qualified as a supervisor having successfully completed the Professional Diploma in Clinical Supervision in Dublin City University. She has a keen interest in exploring and understanding human experiencing. Fiona can be contacted at fionacasmith@hotmail.com and her website address is

www.supportcounsellingservices.ie

Dr Rita Glover

Dr Rita Glover is an Assistant Professor of Psychotherapy in Dublin City University, Ireland and lectures on the Doctorate in Psychotherapy, M.Sc. in Psychotherapy and is the Chair of Professional Diploma in Clinical Supervision programmes. She is an accredited supervisor and psychotherapist who works with clients presenting with intrapersonal, relationship and psychosexual issues. Dr Glover has a breadth of experience in supervising hermeneutic (interpretive) and descriptive phenomenological research studies focussed on developing understanding the lived experiences of clients, therapists and supervisors.



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