Factors influencing supervisee perceptions of critical feedback validity

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Abstract:

The authors investigated supervisees' (*N* = 93) memories of critical feedback and validity ratings of that feedback. Supervisees most often recalled critical feedback about their counseling performance skills. Attachment avoidance, the supervisory relationship, and critical feedback of counseling skills and professional behaviors were significantly related to perceived feedback validity.

Article:

Supervisors and supervisees agree that feedback is essential to supervision effectiveness, in terms of both counselor growth and client welfare (Borders et al., 2014). In fact, supervisees highly value their supervisor's feedback (Chur-Hansen & McLean, 2006; Heckman-Stone, 2003; Ladany, Hill, Corbett, & Nutt, 1996), including constructive feedback (e.g., feedback about skills, behaviors, or attitudes that need change or improvement; Fickling, Borders, Mobley, & Wester, 2017), and are disappointed when they do not receive it (Borders et al., 2012). A main advantage of individual supervision (over triadic and group) identified by practicum supervisees in Borders et al. (2012) was the opportunity to receive deeper, more challenging, and individualized feedback from their supervisors. Similarly, practicum supervisees in Fickling et al. (2017) frequently reported that supervisory feedback was the most helpful event during their supervision sessions; in contrast, "not having any negative feedback about the session so that I could improve" (p. 297) was named a least helpful event.

If feedback is to be effective, supervisees must be open and responsive to it (Alexander & Hulse-Killacky, 2005; Hoffman, Hill, Holmes, & Freitas, 2005); however, constructive feedback can increase supervisees' anxiety (Daniels & Larson, 2001; McKibben & Webber, 2017). Developmental models of supervision (e.g., McNeill & Stoltenberg, 2016) suggest it is normal

for beginning supervisees to feel anxious, yet their dependence on their supervisor for direction supports their desire for and openness to feedback. Some supervisees seem particularly sensitive, hesitant, and even defensive around constructive feedback, suggesting that supervisees may have some predispositions around their responses to supervisory feedback (Fickling et al., 2017).

Alexander and Hulse-Killacky (2005) investigated whether supervisees' past experiences receiving constructive feedback influenced their response to constructive feedback in group supervision. Most of the seven participants in their study focused on feedback from the group supervisor rather than from peers; perhaps importantly, participants received the feedback in front of their peers, which may have heightened their reaction. Participants with negative or abusive childhood memories of feedback were fearful and anxious about receiving feedback even before group began. They reported taking their supervisor's feedback personally and felt disrespected and angry. Participants with more positive childhood memories asked clarifying questions and tended not to hear feedback in terms of their self-worth. More important, and consistent with a large body of literature (e.g., Heckman-Stone, 2003; Hoffman et al., 2005; Veilleux, Sandeen, & Levensky, 2014), supervisees were more receptive to the feedback when the supervisory relationship was supportive and trusting. The similarities among supervisees' childhood memories and their responses to supervisory feedback suggested that previous experiences with authority figures were still very much at play in supervisees' interactions with their supervisor. It seems some of the supervisees' attachment systems, developed in childhood, may have been activated in supervision.

Attachment refers to a person's relational orientation to others, views of self, and the role of both processes in exploration and learning (Bowlby, 1969, 1988). Individuals with secure attachments tend to develop healthy relationships and to view themselves as competent, worthy, and trustworthy (Bartholomew, 1990; Hazan & Shaver, 1990; Mikulincer & Shaver, 2007). Conversely, an anxious attachment is characterized by heightened rejection sensitivity and anxiety about being alone during times of stress (Mikulincer & Shaver, 2007). Avoidant attachment is characterized by distancing or withdrawal from others, which is related to a view of self as unworthy or incapable of closeness (Bartholomew, 1990; Mikulincer & Shaver, 2007).

Individual differences in attachment strategies are relevant to clinical supervision because the supervisor may serve as an attachment figure for supervisees (Fitch, Pistole, & Gunn, 2010; Gunn & Pistole, 2012; Watkins & Riggs, 2012), suggesting that constructive feedback from a supervisor (i.e., a "close other") could be perceived through a supervisee's internal working model of attachment. Specifically, a supervisee with a secure attachment may be more likely to hear constructive feedback more objectively for what it is and as intended by the supervisor. Operating from a healthy self- and other-view prompts securely attached supervisees to view constructive feedback as valid and to rely appropriately on the supervisor to improve their counseling skills in line with feedback. Supervisees with anxious and avoidant attachment may react differently to constructive feedback, perceiving it as criticizing their personhood. In response, anxious attached supervisees may be concerned about supervisor disapproval, may rely too much on the supervisor's direction, or may be overwhelmed by the feedback, regardless of perceived validity. Avoidant attached supervisees may dismiss the feedback as invalid or shut down/withdraw from the supervisor in session. They may provide excuses that minimize constructive feedback or challenge the supervisor or the feedback. Thus, anxious and avoidant

attached supervisees may misconstrue constructive feedback from their supervisors as personally critical.

In line with these notions about feedback and attachment strategies, Fitch et al. (2010) hypothesized a conceptual model in which a supervisee's attachment system becomes activated in response to a threat or anxiety before or during supervision (e.g., feeling inadequate, feeling threatened by having work evaluated, having intense reactions to supervisory feedback). Once the attachment system is activated, the supervisee's learning is inhibited until the attachment system is successfully deactivated by the supervisor serving as a secure base to contain the supervisee's attachment-based reactions (Fitch et al., 2010). In line with this model, McKibben and Webber (2017) conducted a quasi-experimental study to investigate whether recalling perceived critical feedback from a supervisor might activate a supervisee's attachment system and negatively affect the supervisory relationship. The researchers randomly assigned counseling student supervisees ($N = 179$) either to recall perceived critical feedback from a supervisor (experimental group) or to list objects in a room (control group) and then rate the quality of the supervisory relationship with the supervisor who gave the feedback. McKibben and Webber found that higher attachment anxiety and avoidance scores each related to lower supervisory relationship scores in general, a finding that aligned with previous research (Bennett, BrintzenhofeSzoc, Mohr, & Saks, 2008; Gunn & Pistole, 2012; Marmarosh et al., 2013; Renfro-Michel & Sheperis, 2009). However, McKibben and Webber did not find evidence that recalling perceived critical feedback from a supervisor yielded significantly different ratings of the supervisory relationship than did listing objects in the room.

McKibben and Webber's (2017) study raised important questions about supervisee openness and responsiveness to constructive feedback, particularly from an attachment perspective. McKibben and Webber commented on the possibility that receiving feedback deemed critical may elicit a variety of reactions from supervisees, even if such reactions do not elicit an attachment response. They also noted that supervisees in their study may not have recalled particularly critical feedback or may/may not have perceived the feedback as valid. Relatedly, although McKibben and Webber asked supervisees in the experimental group to recall critical feedback from a supervisor, they did not report what participants wrote down as part of the study. Closer analysis of what supervisees actually recall as critical feedback is needed to better understand how supervisees' attachment systems are related to what they perceive as critical feedback and if they consider that feedback valid. As a first step toward this goal, in the present study, we analyzed the content of supervisees' critical feedback recollections from McKibben and Webber. Our study was guided by the following research questions:

Research Question 1: What types of supervisory feedback do supervisees list as critical?

Research Question 2: How do the types of feedback given and supervisees' attachment to supervisor variables explain variance in perceptions of feedback validity?

Method

Participants and Procedure

We used the deidentified data from the McKibben and Webber (2017) study described earlier. Notably, McKibben and Webber collected data via an online survey in Qualtrics and contacted all counselor education programs accredited by the Council for Accreditation of Counseling and Related Educational Programs that had publicly listed faculty email addresses. We specifically used data provided by participants in McKibben and Webber's experimental group because these participants listed critical feedback they received from their current supervisors.

McKibben and Webber (2017) reported 93 participants in their experimental group. The participants' ages ranged from 22 to 60 years ($M = 28.69$, $Mdn = 26.00$, $SD = 6.85$). Seventy-six (81.72%) participants identified as female, nine (9.68%) as male, three (3.23%) as gender nonbinary/nonconforming, and one as other (1.08%). Two female participants also identified as cisgender (2.15%), and four (4.30%) participants did not indicate their biological sex or gender. (Percentages may not total 100 because of rounding.) Participants reported their race/ethnicity as follows: White or Caucasian ($n = 62$, 66.67%), Black or African American ($n = 12$, 12.90%), Hispanic ($n = 5$, 5.38%), multiracial ($n = 4$, 4.30%), Asian ($n = 2$, 2.15%), Latina ($n = 1$, 1.08%), Pacific Islander ($n = 1$, 1.08%), Jewish ($n = 1$, 1.08%), and other ($n = 1$, 1.08%); four (4.30%) participants did not report a race/ethnicity. Geographically, participants were located in the following Association for Counselor Education and Supervision (ACES) regions: Southern ($n = 44$, 47.31%), North Atlantic ($n = 17$, 18.28%), North Central ($n = 12$, 12.90%), Western ($n = 12$, 12.90%), and Rocky Mountain ($n = 2$, 2.15%); six (6.45%) participants did not indicate their ACES region.

Seventy-nine (84.95%) participants were master's-level students, six (6.45%) were doctoral students, and one (1.08%) was an educational specialist student; seven (7.52%) students did not indicate the type of degree they were pursuing. Counseling specialty concentrations were as follows: clinical mental health ($n = 48$, 51.61%); school ($n = 15$, 16.13%); marriage, couple, and family ($n = 10$, 10.75%); counselor education ($n = 5$, 5.38%); career ($n = 4$, 4.30%); rehabilitation ($n = 3$, 3.23%); student affairs and college ($n = 2$, 2.15%); and other (i.e., dual-track clinical and school counseling; $n = 1$, 1.08%); five participants (5.38%) did not indicate their specialty concentration. Participants had earned between zero and 75 credit hours toward their degree ($M = 47.06$, $Mdn = 48.00$, $SD = 14.08$) and had completed between zero and 35 meetings with their current supervisor ($M = 12.28$, $Mdn = 11.00$, $SD = 7.46$; note: a boxplot flagged six responses to this item as outliers [>36 sessions], which were not included in this calculation). Forty-nine (52.69%) participants were enrolled in a counseling internship, 29 (31.18%) were enrolled in a counseling practicum, seven (7.53%) provided other descriptions of their clinical experiences (e.g., "practicum as part of helping skills," "general/ongoing internship for doc program," "doctoral practicum"), and eight (8.60%) did not respond to the question.

Instrumentation

Critical feedback. Participants in McKibben and Webber's (2017) experimental group responded to the following prompt:

Take a moment to think about feedback you have received this semester from your current supervisor. In the space below, list 1–2 times that your supervisor criticized your

work or gave you feedback about your counseling performance that needed to change. (p. 329)

In response to this prompt, participants typed the feedback into a text box in a Qualtrics survey.

Feedback validity. In addition to listing critical feedback, participants in the experimental group were asked to use an ascending 7-point rating scale to evaluate their recalled feedback in terms of perceived validity. This yielded a single-item score for perceived feedback validity, with higher scores reflecting higher perceived validity of the feedback. McKibben and Webber (2017) originally used this item as a manipulation check to assess whether supervisees may have reacted against recalled feedback. In this study, we used these data to explore whether various types of feedback given and supervisee attachment variables helped to explain how valid the feedback was perceived to be.

Experiences in Supervision Scale (ESS). The 36-item ESS (Gunn & Pistole, 2012) measures attachment to supervisors along two scales: the 18-item Anxiety scale (e.g., "I worry that supervisors won't care about me as much as I care about them") and the 18-item Avoidance scale (e.g., "I prefer not to show my supervisors how I feel deep down"). Items are scored on a Likert scale from 1 (*strongly disagree*) to 7 (*strongly agree*), with higher scores reflecting higher attachment anxiety and avoidance. McKibben and Webber (2017) reported good internal consistency for the Anxiety scale (Cronbach's α = .86) but found a low alpha for the Avoidance scale (Cronbach's α = .35). They dropped nine items from the Avoidance scale based on low item-total correlations, which improved the scale's alpha to .89. In this study, we used the nine-item Avoidance scale data along with the full 18-item Anxiety scale.

Short Supervisory Relationship Questionnaire (S-SRQ). The S-SRQ (Cliffe, Beinart, & Cooper, 2016) measures supervisees' perceptions of the supervisory relationship across three subscales: Safe Base, Reflective Education, and Structure. Previous researchers have also used a total scale score as a global measure of the supervisory relationship (McKibben & Webber, 2017 [α = .93]; McKibben, Cook, & Fickling, 2019 [α = .91]), finding good internal consistency reliability. Items are scored on a Likert scale from 1 (*strongly disagree*) to 7 (*strongly agree*), with higher scores reflecting a more positive perception of the supervisory relationship. We used McKibben and Webber's (2017) total scale data in this study to examine the overall supervisory relationship.

Data Analysis

To analyze recalled critical feedback (Research Question 1), we used content analysis, which allows for systematic, contextualized analysis of communication (Krippendorff, 2013; Neuendorf, 2016). We followed Krippendorff's (2013) steps for conducting the analysis: unitizing, sampling, recording, and reducing. To accurately code each piece of feedback recalled, we separated recalled feedback into discrete units based on a complete thought about a specific piece of feedback from a supervisor. The sample of feedback units was drawn from the 93 participants described earlier. Some participants listed more than one piece of critical feedback from a supervisor, whereas others did not list any feedback. This process yielded a total of 156

discrete feedback units. Because participants typed feedback into an online textbox, the data were recorded as written text.

To reduce the data into interpretable categories, we used a combined deductive and inductive coding procedure. A deductive approach involves defining categories a priori (e.g., from a conceptual framework) and coding categories numerically, and an inductive approach allows new categories to emerge from data without a priori definitions (Krippendorff, 2013). For our deductive approach, we operationalized codes for the type of supervisory feedback according to Bernard's discrimination model (expanded by Lanning, 1986, based on Bernard & Goodyear, 2014; Borders & Brown, 2005). Bernard's model was chosen because it includes four foci that supervisors attend to in their feedback and discussions with supervisees. Accordingly, we coded four feedback content categories: (a) counseling performance skills, (b) cognitive counseling skills, (c) self-awareness, and (d) professional behaviors. A category of "no feedback listed" was used to capture statements that did not include supervisory feedback. These a priori categories allowed us to organize recalled critical feedback based on its content. We coded an additional category for "personal reaction" when a supervisee provided commentary on a feedback category (e.g., noted in their narrative that the feedback was helpful or hurtful), on the supervisor (e.g., "My supervisor was a jerk"), or on the supervision experience in general (e.g., "I enjoyed supervision"). For our inductive coding, we included an "other" category that was assigned when a unit of feedback did not fit clearly into one of the above categories.

Next, we organized the category definitions and coding procedures into a codebook and coding sheet (Neuendorf, 2011). The coding team (see Trustworthiness section) then conducted a pretest by randomly selecting 10% of the units ($n = 15$) and coding them as a team. Although overall interrater reliability (IRR) was high (Krippendorff's $\alpha = .92$, 95.60% observed agreement), the coders identified two vague/confusing feedback statements that complicated the coding process. The coders then rescanned the entire data set and identified 18 additional vague statements, which were organized into a second pretest to further clarify the coding scheme (Krippendorff's $\alpha = .70$, 83.30% observed agreement). Among the two pretest phases, the coders' overall IRR was above .80 (Krippendorff's $\alpha = .83$, 90.80% observed agreement), and the coders reached consensus on all coding discrepancies, indicating that the coders were sufficiently consistent to code the remainder of the data. The coding team coded the remainder of the feedback statements ($n = 123$) individually in two rounds of coding, meeting after each round to discuss and resolve any discrepancies (Krippendorff's $\alpha = .94$, 96.72% observed agreement). An external auditor (see Trustworthiness section) reviewed all codes, discrepancies, and coders' notes after each round and provided feedback. We used ReCal2 (Freelon, 2013) to calculate all IRRs.

We used descriptive statistics (i.e., frequency counts, percentages), along with participant quotes, to describe the data for Research Question 1. For Research Question 2, we used multiple linear regression analysis to fashion a model for explaining supervisee feedback validity ratings from the four feedback categories (counseling performance skills, cognitive counseling skills, self-awareness, and professional behaviors) and supervisee attachment variables (S-SRQ, attachment avoidance, and attachment anxiety).

In the model, the four feedback categories were treated as separate dichotomous variables (1 = present, 0 = not present) indicating the presence of each feedback category in the participants'

written response to the prompt. These variables were entered into the model with S-SRQ, attachment avoidance, and attachment anxiety scores. Participants' feedback validity rating was the outcome variable in the model. Although item-level data are typically not appropriate in parametric analyses, Harpe (2015) argued that individual rating items that use a numerical scale (i.e., anchors are only provided at the extremes of a number line) and offer more than five options in a response format can be treated as continuous data. Furthermore, these data should approximate a normal distribution and conform to other assumptions of parametric analyses, including equality of variance (Harpe, 2015).

Before performing the analysis, we checked for missingness as well as the assumptions of multiple regression. Twelve participants did not write a response to the feedback prompt and were therefore removed from the analysis. There were no missing data among the remaining participants ($N = 81$). The size of the final sample exceeded the recommended minimum of 10 participants per parameter (Wilson VanVoorhis & Morgan, 2007). The Durbin-Watson statistic ($d = 2.02$) was between 1.5 and 2.5, indicating that the data were not autocorrelated. Variance inflation factor values ranged from 1.12 to 1.96; this range does not indicate problematic multicollinearity. The magnitude of correlations (see Table 1) among the variables also did not suggest the presence of multicollinearity. Cook's distance was examined, and no values were greater than 1, suggesting individual cases were not influencing the model. P-P plots were inspected to assess homoscedasticity; no pattern was detected in the distribution. Skewness and kurtosis values were within acceptable ranges, and inspection of Q-Q plots and histograms suggested that feedback validity ratings, attachment avoidance, attachment anxiety, and S-SRQ scores approximated a normal distribution.

Table 1. Summary of Correlations With Descriptive Statistics for Feedback Validity Ratings, Attachment Avoidance and Anxiety, and Supervisee Perceptions of the Supervisory Relationship

Measure	1	2	3	4	5	6	7	8	*M*	*SD*	*n*	*%*
1. FV	—								5.74	1.62		
2. S-SRQ	.60**	—							5.56	1.03		
3. Att Av	.16	.61**	—						5.32	1.16		
4. Att Anx	.15	.37**	.46**	—					5.15	0.85		
5. CPS	.28*	.26*	.07	.06	—						43	53
6. CCS	.07	−.02	.01	−.04	−.09	—					14	17
7. SA	.14	.14	−.01	−.04	−.23*	−.21	—				29	36
8. PB	.04	−.05	−.01	−.07	−.34**	−.06	−.18	—			16	20

Note. FV = feedback validity rating; S-SRQ = Short Supervisory Relationship Questionnaire; Att Av = attachment avoidance; Att Anx = attachment anxiety; CPS = counseling performance skills; CCS = cognitive counseling skills; SA = self-awareness; PB = professional behaviors.
* $p < .05$. ** $p < .01$.

Trustworthiness

The coding team consisted of the first two authors, and the third author served as an auditor during the coding process. All three authors have experience providing individual, group, and triadic supervision to counselors across counseling specialties; all are active researchers in clinical supervision; and all had previous experience with content analysis. The first author is a cisgender White male counselor educator with 3 years of faculty experience at the time of this

study. The second author is a White female counselor educator with 30 years of faculty experience at the time of this study. The third author is a White male counselor educator with 5 years of faculty experience at the time of this study. The coders attempted to bracket assumptions (e.g., that reported feedback would fit within the discrimination model categories) and biases (e.g., whether our experiences as supervisors influenced how we read participants' feedback) through ongoing discussions with one another throughout the coding process. To increase IRR and trustworthiness of the coded data, the auditor reviewed codes, coding discrepancies, and coding process notes after the pretest and main data coding. The auditor helped the coders clarify definitions, coding procedures, and coding decisions during the content analysis. The coders and auditor also reviewed the inductive "other" data at the end of the coding process to determine if additional emergent codes were needed to describe the data.

Results

Research Question 1

Across the 156 coded units of feedback, 73 (46.79%) feedback units were focused on counseling performance skills. This type of feedback focused on what a supervisee did during a counseling session that was observable by a supervisor. This feedback included helping skills, theory-based techniques, procedural skills, and issue-specific skills (Borders & Brown, 2005). For example, one supervisee recalled, "During a mid-semester evaluation, my supervisor encouraged me to use more silence."

Thirty-nine (25%) units of recalled feedback focused on the counselor's self-awareness. Self-awareness included a supervisee's personal counseling style and personal background or experiences that might affect work with a client. This feedback included issues related to transference/countertransference, counselor presence in session, and distance from/identification with a client. For example, a supervisee noted, "My site supervisor pointed out that my desire to be a good counselor was making the session about my needs rather than focusing on my client's needs."

Twenty (12.82%) units of recalled feedback focused on the counselor's professional behaviors, which included ethical, legal, or professional issues within and beyond the counseling session (e.g., "A supervisor critiqued my note writing style and informed me that I was not being clinical enough."). Seventeen (10.89%) units of feedback focused on the counselor's cognitive counseling skills, including case conceptualization skills, explanation of client issues, identification of patterns and themes in client concerns, and integration of counseling theory (e.g., "My supervisor challenged me to consider a conceptualization different from my own, and I turned out to be wrong after reconsidering it.").

In addition to the discrimination model feedback categories, 17 units were coded as containing personal reactions to feedback or to the supervisor. Supervisee reactions to feedback included that the feedback either was helpful (e.g., "Today my supervisor provided feedback … to slow down the session and sit more with the silence. I found this to be very useful and an accurate assessment of what needed to happen.") or not helpful (e.g., "I can talk to another situation where trainers gave me the following [incorrect] interpretations of my behaviors: 'You are not

aware of the impact of your behavior on other people.'"). Other supervisees noted that their initial reaction changed over time after receiving the feedback (e.g., "[My supervisor] said excessive naiveté could limit my ability to confront clients when needed. At first I was very confused and upset, but as time passed I was able to process the feedback and realize my supervisor was correct.") or that they did not receive any critical feedback (e.g., "I've never received such feedback.").

Supervisees' reactions to their supervisor included that the supervisor was inappropriate (e.g., "I am leaving my internship because I can't stand my supervisor…. He's a jerk and has made comments to me about my appearance. Goodbye to him!") or was not critical enough (e.g., "My thing is, I feel my supervisors are not critical enough at times."). Other supervisees noted that their supervisor either was available (e.g., "In my internship, I feel that my supervisor is great and I can talk to her about anything.") or unavailable (e.g., "I felt like my supervisor in practicum wasn't very personal and didn't take the time needed to accurately assess me and my skills. I never felt a connection with my supervisor.").

Research Question 2

We conducted a multiple regression to examine how types of feedback and attachment variables explained feedback validity ratings. Results indicated that the model explained 44% (adjusted $R^2 = .44$) of the variance and that it significantly accounted for variance in validity ratings, $F(7, 73) = 9.94$, $p < .001$. S-SRQ ($\beta = .71$, $p < .01$) and attachment avoidance scores ($\beta = -.31$, $p < .01$) and feedback categories counseling performance skills ($\beta = .23$, $p < .05$) and professional behaviors ($\beta = .19$, $p < .05$) each made a significant contribution to the model (see Table 2).

Table 2. Regression Analysis of Attachment and Feedback Variables Explaining Validity of Feedback Rating

Variable	*B*	*SE B*	β	*t*	95% CI
Constant	0.58	0.98		0.59	[−1.38, 2.53]
S-SRQ	1.11	0.18	.71	6.00**	[0.75, 1.48]
Attachment avoidance	−0.44	0.16	−.31	−2.80**	[−0.75, −0.12]
Attachment anxiety	0.08	0.18	.04	0.46	[−0.28, 0.45]
Counseling performance skills	0.73	0.33	.23	2.20*	[0.07, 1.40]
Cognitive counseling skills	0.68	0.38	.16	1 .81	[−0.07, 1.43]
Self-awareness	0.52	0.33	.15	1.60	[−0.14, 1.17]
Professional behaviors	0.77	0.39	.19	1.99*	[0.01, 1.55]

Note. CI = confidence interval; S-SRQ = Short Supervisory Relationship Questionnaire.
* $p < .05$. ** $p < .01$.

Discussion

Supervisees value feedback from supervisors (Chur-Hansen & McLean, 2006; Heckman-Stone, 2003; Ladany et al., 1996), including constructive or critical feedback (Borders et al., 2012; Fickling et al., 2017). In this study, we investigated what supervisees actually recalled in terms of perceived critical feedback they received from a supervisor, the extent to which supervisees perceived the critical feedback as valid, and the role of attachment and the

supervisory relationship in supervisees perceiving critical feedback as valid. We found that supervisees most frequently recalled feedback critical of their counseling performance skills, followed by feedback on supervisee self-awareness, professional behaviors, and cognitive counseling skills. Supervisees were significantly more likely to rate feedback on counseling performance skills and professional behaviors as valid, whereas feedback on self-awareness and cognitive counseling skills did not make a significant contribution to the model. One possible reason for this finding is that feedback about counseling performance skills and professional behaviors are discrete behavioral observations, which may be perceived by a supervisee as more objective and less personal.

Supervisory relationship scores were associated with significantly higher ratings of feedback validity. In other words, the stronger a supervisee perceived the relationship with the supervisor, the more likely the supervisee was to rate critical feedback as valid. This finding reinforces an expanding body of literature arguing that supervisees may be more receptive to feedback, in this case critical feedback, when the supervisor and supervisee have a supportive and trusting relationship (Alexander & Hulse-Killacky, 2005; Heckman-Stone, 2003; Hoffman et al., 2005; Veilleux et al., 2014). Ladany, Ellis, and Friedlander (1999) referred to the supervisory relationship as a foundational common factor in supervisee growth and development, and our findings further implicate the supervisor-supervisee relationship as an important element specifically in the feedback process.

Higher scores for supervisee attachment avoidance were associated significantly with lower validity ratings of critical feedback, whereas attachment anxiety scores did not help explain validity ratings. Collectively, these findings may speak to nuanced processes of attachment systems in the supervisory relationship. When a supervisee's attachment system becomes activated in response to a threat or anxiety, an individual with an avoidant attachment is likely to use distancing or withdrawal strategies (Bartholomew, 1990; Mikulincer & Shaver, 2007). If a supervisor indeed serves as an attachment figure for a supervisee, as posited in the literature (Fitch et al., 2010; Gunn & Pistole, 2012; Watkins & Riggs, 2012), then a supervisee with an avoidant attachment strategy may dismiss, excuse, or explain away feedback perceived as critical, or he or she may shut down or withdraw from the supervisor in session if critical feedback signals a threat or anxiety. Our finding that avoidant attachment significantly explained lower validity ratings of critical feedback may lend support to the notion of dismissing, excusing, or explaining away an attachment threat. Conversely, when supervisees with an anxious attachment perceive feedback as critical, they may experience heightened rejection sensitivity (e.g., worrying about supervisor disapproval, seeking supervisor direction, feeling overwhelmed). Regardless of how valid the supervisee perceives critical feedback to be, the tendency to internalize the feedback may prompt the supervisee to mitigate anxiety through reliance on the supervisor.

Limitations

The current findings should be considered in light of the study's limitations. We relied on participants' self-report and did not have nonverbal (e.g., body language, facial expressions) or paraverbal (e.g., tone of voice) data to contextualize their reactions to receiving critical feedback. Thus, when coding participants' statements about feedback, the coders may not have captured

the full essence of participants' narratives about critical feedback. Additionally, we did not have the full context of participants' experiences receiving feedback, which may have limited our ability to accurately code and represent the data.

Because our data were drawn from McKibben and Webber (2017), the present study inherits some of their study's limitations as well, including inability to calculate a response rate, participants having a motivated interest to participate in the study, and a predominantly White female participant sample that limits generalizability to diverse populations. Additionally, we used the shortened nine-item ESS Avoidance scale provided by McKibben and Webber, which had greater internal consistency than the 18-item scale. However, as McKibben and Webber noted, removing nine items from this scale may also have affected how comprehensively the attachment avoidance construct was measured by the scale. Finally, the regression analysis was performed on a single-item numerical rating scale. Although scores were normally distributed, these findings should be interpreted with caution.

Implications and Future Directions

In this study, we identified several important components that factor into supervisees' evaluations of how valid they perceive critical feedback to be. Collectively, the content of the supervisor's feedback, the supervisory relationship, and attachment avoidance and anxiety explained about 44% of the variance in validity ratings. Additional factors most certainly play a role in this process, and future researchers are offered a variety of avenues to explore how supervisees perceive, evaluate, understand, and integrate feedback from supervisors. Notably, because there is not much literature on how supervisees respond to critical feedback, qualitative inquiries into supervisees' understanding of and responses to critical feedback from supervisors may offer a foundation for additional research in this area.

Researchers might also reexamine the role of the supervisory relationship in attachment dynamics. Previous researchers have mostly viewed the supervisory relationship or working alliance as an outcome variable that is influenced by attachment dynamics in supervision (e.g., Bennett et al., 2008; Gunn & Pistole, 2012; Marmarosh et al., 2013; Renfro-Michel & Sheperis, 2009). In the present study, however, we reconceptualized the supervisory relationship as an explanatory variable and found support that it significantly accounted for variance in perceived validity of critical feedback. Future researchers might extend this work by examining the roles of attachment and the supervisory relationship in explaining other supervisory events and dynamics.

It may be helpful for supervisors to broach the topic of feedback in the first session, including how a supervisor typically offers feedback and the important role of feedback for growth and development. Supervisors might explain to supervisees that not all feedback is positive, and constructive feedback is not meant as personal criticism but intended for growth and client welfare. It could be useful for a supervisor to explore a supervisee's previous experiences with receiving feedback from supervisors (if applicable) and what the supervisee is looking for in terms of feedback. It is also important for the supervisor to have a conversation at the outset of supervision about the supervisee's learning goals so that feedback can be tied to those learning goals (Borders & Brown, 2005). Collectively, a clear understanding of what feedback the

supervisee has found helpful in the past, what feedback the supervisee is looking for, and what the supervisee's learning goals are can guide the supervisor in offering feedback the supervisee may perceive as more valid and useful.

When supervisors offer feedback about something they want supervisees to change or do differently, supervisors may find it helpful to offer simple, straightforward, behaviorally focused feedback (Borders & Brown, 2005), especially for relatively new supervisees such as those in this study. Spending more time talking about alternatives or possibilities may go over better with a supervisee than talking about what he or she did wrong or not well enough. Similarly, focusing on concrete, observable behaviors may be easier for a supervisee to understand and correct, although sometimes this is not always feasible for a supervisor to do.

Finally, Fitch et al.'s (2010) attachment caregiving model offers supervisors a guide for attending to supervisee attachment reactions when delivering constructive feedback that could be deemed critical. Fitch et al.'s model emphasizes that supervisors rely on sensitivity, responsiveness, and flexibility toward attachment-driven reactions. Supervisors must first be attuned to attachment cues by tracking and responding to verbal, paraverbal, and nonverbal responses from supervisees. If a supervisee has a negative reaction or shuts down, then the supervisor might use additional counseling skills (i.e., reflective listening) to process the interaction to prevent or repair ruptures in the working alliance (Friedlander, 2015). In this way, the supervisor creates a secure base for the supervisee by maintaining appropriate proximity that can alleviate the attachment threat and deactivate an attachment response (Fitch et al., 2010). Deactivating the attachment system through intentional processing and communication of care to the supervisee promotes safety and a willingness to return to learning from the supervisor through the supervisory process.

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