Subtle messages in clinical supervision.

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Abstract:

The supervision literature is replete with cautions that supervision practice often must be subtle and nuanced to meet the individualized needs of supervisees. It offers little direction, however, for how and why a supervisor might choose a more subtle, indirect approach over a more direct approach. Some guidelines for making this decision and some examples of more subtle, indirect approaches are described and illustrated.

Keywords: clinical supervision | supervisee anxiety | supervision | clinical supervising guidelines

Article:

SUBTLE MESSAGES

Effective clinical supervision consistently is described (directly and indirectly) as complex and nuanced by authors of supervision texts (e.g., Bernard & Goodyear, 2004; Borders & Brown, 2005) and journal articles (e.g., Borders, Eubanks, & Callanan, 2006; Masters, 1992; Protinsky & Preli, 1987). Similarly, authors of supervision models (e.g., Bernard, 1997; Blocher, 1983; Loganbill, Hardy, & Delworth, 1982; Stoltenberg, 1981) indicate that application of these models necessarily will be idiosyncratic, requiring individualized approaches based on the unique dynamics of each supervisee. The supervision enterprise is further complicated by contradictory (if not paradoxical) demands on supervisees, who, for example, are asked to be open and vulnerable about their professional and personal challenges with their supervisor evaluators. Supervisors must attend simultaneously to both content (e.g., skills) and process (in both the counseling and supervision relationships), facilitating supervisee development while ensuring client well-being at the same time.

Such descriptions suggest that the effective supervisor will not be able to attend directly to all the dynamics, forces, and issues at play in a supervision session. Rather, a delicate balance of

directive and more subtle approaches is needed. Subtle messages, though understated, somewhat disguised, and covert, actually may be preferred in some instances. In particular, more subtle messages may be more effective when supervisees' learning challenges, such as supervisee anxiety or blocks in recognizing clients' emotions, are getting in the way.

Although the need for subtle approaches in supervision is clear, the supervision literature offers little guidance for supervisors seeking to understand and use them. The purpose of this article is to begin to address this gap in the literature. First, a brief introduction to use of subtle messages is provided, followed by a more detailed focus on use of subtle approaches to deal with supervisee anxiety. A range of preventive approaches to address supervisee anxiety are described and illustrated. Then a discussion and example of a "thinking aloud" approach is provided, with a focus on dealing with supervisee anxiety about clients' emotions.

It should be noted that the subtle approaches presented here are not ground-breaking, nor are they particularly new or novel. In fact, they mimic or draw from familiar clinical skills, approaches, and theories. Rather, the goal here is to begin to articulate some "why" and "how" guidelines for choosing, creating, and delivering subtle messages in supervision.

One accepted educational premise underlying a subtle approach in supervision is that supervisees learn best through the process of discovery. When they discover a connection, achieve their own insight, or reach their own conclusion, they own that learning and understand it much more clearly and deeply than they could if the supervisor simply pointed out these learnings for them. The supervisor's job is to set the stage, to ask the right questions, to lead supervisees subtly down the path to their discovery. Sometimes supervisors know the destination or the intended learning; sometimes they do not; often, they are surprised at least once along the way.

Such a belief is quite comparable to many of our counseling theories and approaches. Humanistic counselors believe clients know themselves best and need to make their own decisions regarding their lives. When psychoanalytic therapists maintain a neutral stance with patients, they are serving as a foil for the patients' gaining insights regarding their issues. Those trained in strategic family therapy and paradoxical interventions know how to create a situation that essentially requires movement by the client, without explanation of the how or why. Rather, they later marvel at the change with their clients and help clients determine how the client created the change.

Thus, in line with the discovery learning approach, and the call to craft intentional, individualized supervisory interventions, supervisors can focus on a key question: What is the message I want to send to my supervisee today? Actually, what are the messages, as any communication during clinical supervision is likely to carry multiple messages, on multiple levels.

First, all supervisors will want to convey some basic consistent, ongoing messages: that they respect the supervisee, that they want supervision to be collaborative, and that they want to be

supportive. Second are messages specific to a particular supervision session—messages about insights, observations, and counselor behaviors seemingly not yet within a supervisee's conscious awareness, such as the following:

Pay attention to your client's nonverbal behaviors!

Be aware of what you are feeling during the session!

Notice the contradictions in the client's report of family relationships.

Why not state these directly to a supervisee? Sometimes that's an appropriate approach, maybe even the best approach. Other times, a more subtle approach is needed, especially when a supervisee's anxiety is getting in the way.

Supervisee Anxiety and Resistance

Subtle approaches often are a supervisor's best option when trying to deal with supervisee anxiety and resistance. "Resistance" primarily has negative connotations, yet supervisee resistance is a normal, expected dynamic. Given the inevitable anxieties endemic to clinical supervision, supervisees will at times come to a place where they cannot manage the anxiety and so will "resist" in an attempt to reduce their anxiety to a manageable and productive level (Liddle, 1986). More direct supervision approaches, then, may require supervisees to defend themselves, and thus be more resistant. More subtle approaches are efforts to get under or behind the anxiety and deflate it so that it doesn't obstruct the supervisee's learning path. In the following sections, I present some preventive approaches to address common sources of supervisee anxiety, including examples from my own experience. Then, I describe and illustrate a more complex "thinking aloud" approach for addressing more challenging sources of anxiety (e.g., dealing with clients' emotions).

Preventive Approaches

A preventive, proactive approach is to acknowledge and normalize students' anxiety up front (Borders & Brown, 2005; Borders et al., 2006). When supervisors take the initiative to address these feelings, they let students know they don't need to try to hide these feelings. A good thing to say is, "I expect you'll be a little anxious about some of your new experiences here. That's perfectly normal, and I want to help." Supervisors might identify similar concerns of previous interns (e.g., tearful or angry clients) and/or disclose some of their own anxieties, and ask, "Which of these do you think may be challenges for you?" An important follow-up question is, "How can I be most helpful to you when these concerns come up?" The messages here are that "It's okay to be anxious" and "It's okay to let me see your anxieties because that's my job—to help you with those. I'm in your corner." In contrast to more general discussions about learning styles sometimes suggested for first sessions (e.g., Borders & Leddick, 1987; Campbell, 2000;

Stoltenberg, 1981), these supervisor statements give the supervisee some power and suggest an expectation that the supervisor and supervisee will work together.

Another anxiety-prevention message for supervisees is that they have permission to make mistakes and take risks. If they are overly concerned about evaluation of their performance, supervisees will not try new skills or stretch themselves. I have taught a counseling theories practicum in which beginning students apply several theoretical interventions with a volunteer client, their first experience with a "real" client. Although not in my syllabus, I tell students they are required to make three mistakes, and tell them they have to report these to me to determine whether they have met the requirement. The tongue-in-cheek humor is apparent but, as Viktor Frankl (1976) suggested in his writings about paradoxical interventions, being aware of the intent and humor do not interfere with the message delivery. When students report, "I think I've got my first mistake," my response typically is "Doesn't count. Not big enough." The ruse continues in good fun throughout the semester. I know I can trust that none of the students will hurt a client as part of this game, and they have ample supervisory support from the practicum supervisors who assist with the course. Rather, the messages are "It's okay not to be perfect" and "Push yourself!"

Having an undergraduate education background, I find great value in learning goals, and creating a list of learning goals is an initial assignment in any practicum or internship experience I supervise. Writing learning goals encourages supervisees to take some ownership for the learning process. This up-front investment gets the momentum of involvement going, as well as giving practice in self-evaluation. Supervisees often need help writing concrete and specific goals. Helpful tools include Bernard's (1997) discrimination model. Supervisees can be asked to write at least one goal for each of the three focus areas: counseling performance skills, cognitive counseling skills, and self-awareness. A tool such as this not only gives supervisees a framework for understanding what supervision entails; it also sends the message that all three are important areas for growth and all three will be addressed in supervision. An alternative is to have supervisees complete a self-rating using the evaluation form that will be used at the end of supervision. This is particularly helpful for beginning supervisees who are still learning exactly what the components of effective counseling are. Giving attention to supervisees' learning goals sends several messages: "What you want to learn is important to me. I respect your requests and priorities. This is a collaborative relationship, and you have some say in what we do here."

Supervisees really do want feedback, honest feedback, and they are fearful of it. Their learning goals provide one entrée to providing honest feedback as well as bringing up other issues, including challenging or sensitive topics. The subtle approach here is to frame the feedback in the language of the supervisees—to use their own words. Although this approach doesn't eliminate supervisee anxiety, it often does seem to make it easier for them to hear feedback, and it is more difficult for them to resist what they have asked for (Borders & Brown, 2005; Borders et al., 2006): "In listening to your counseling tape, I was hoping to find an opportunity to help you with your goal of using confrontation more effectively. I think I have a section here that is relevant to that goal. Want to give it a go?"

The use of a question at the end is deliberate. It is an invitation that implies the supervisee has some power and some decision in what happens in supervision although, somewhat paradoxically, the invitation makes it hard for them to say "no." Supervisors first need to observe the supervisee's response to the invitation. Is the supervisee's reaction an eager smile, a flicker of concern in the eyes, a lean forward or a lean back? Supervisors will not be very effective if the supervisee is trying to protect herself and isn't participating fully. So, the supervisor first may need to address the nonverbal response ("You're not quite sure about this") and process that with the supervisee. Borders and Brown (2005) reported they have never gotten a "no" in response to such an invitation. They have had to give some explanation about what supervision intervention or activity they had in mind, or acknowledge the anxiety and indicate they would monitor that throughout the session: "You let me know if we need to stop or take a break." Alternatively, the supervisor can ask periodically during the session, "Still okay with this?" If the supervisee seems to be approaching an uncomfortable level of anxiety, here-and-now immediacy statements that address the supervisor-supervisee interaction may help (Borders et al., 2006). "I know I'm pushing you right now. Can you hang in here with me just a little longer?" The supervisee could say "no," but hopefully instead takes a deep breath and thinks, "I'm okay. I can do this a little more. It will soon be over!"

Clearly, a message of respect for the supervisee exists in these types of statements. At a more subtle level are the messages suggested through the supervisor's modeling when making such statements. By example, the supervisor is reminding the supervisee to pay attention to client reactions, especially non-spoken ones, and periodically to look at or try to experience the session—even look at the counselor herself—from the client's point of view: "Does the client understand my intention? What does the client need from me right now?" Helping supervisees take the client's perspective has another goal, as the ability to take multiple perspectives is a central component of cognitive complexity. Encouraging greater counselor cognitive complexity is a major goal in developmental models of supervision (e.g., Blocher, 1983) and a major contributor to counseling effectiveness, according to several researchers (e.g., Holloway & Wampold, 1986; Welfare, 2007). Taking the client's perspective also is a key counseling principle, but hard to remember to do in the midst of a session. Ongoing modeling of behaviors that suggests the supervisor is trying to keep in touch with the supervisee's perspective during the supervision session helps reinforce the message to the counselor to remember to consider the client's perspective.

As these examples illustrate, even a simple, subtle feedback strategy can have multiple and complex goals. The point is not so much to be clever, but to work more efficiently, at multiple levels, to help the supervisee manage his anxiety so he can participate more openly in supervision.

Supervisors can be more direct about the issues supervisees are ready to address, such as the skills named in their learning goals. They can use more indirect—more subtle—approaches to introduce supervisees to more challenging issues, to plant seeds, to create a readiness (an

eagerness?) for change. Supervisees can "hear" the message, at least to some extent, even if it isn't heard at the conscious level. Our challenging task, as supervisors, is to craft interventions, when needed, that send messages at multiple levels that are optimum for the supervisee at a particular point in time.

Thinking Aloud Approach

The thinking aloud approach is one of a very few supervision interventions focused on developing counselors' cognitive skills presented in the literature. Here, "cognitive skills" refer not only to those related to case conceptualizations, but also the less commonly described in-session cognitions (see Borders & Brown, 2005), such as the almost instantaneous decisions counselors make during sessions: what response to make at that moment, whether to change the focus or pace of the session, or to what depth to pursue a client emotion. Such moment-to-moment decision making is at the heart of the subtle art of counseling, although not yet well-defined. Researchers have yet to determine how to get inside counselors' heads to identify these cognitive processing skills. Our supervisees can't wait for that to happen, however, before they need answers to their questions, such as, "How do you know when a client wants to explore an emotional issue more?" "How do you decide which of the client's issues to pursue today?" "How do you know whether to keep pushing?" Supervisees need much guidance concerning how to process the wealth of information available during a session, what factors influence their in-session decisions, what options to consider, and how to evaluate these options and choose one—all within a very short time during a session. Understandably, supervisees often experience much anxiety about their abilities to make such moment-to-moment decisions. At times, their processing is hampered by their own reactions to the client, the client's story, and the client's emotions.

In the thinking aloud approach, the supervisor essentially models his or her own internal processing and decision making during a session. Typically, the supervisor thinks aloud in response to a portion of a supervisee's counseling session tape. Here's where the complexity—and subtlety—comes to play as the supervisor must quickly determine what message or messages need to be sent to the supervisee, as well as which messages should be stated directly and which indirectly.

The following illustration is based on Borders and Brown (2005, pp. 53–54). A supervisee presents a tape of a session with a young woman, married, with two small children. The client recently revealed that she is having an affair with another man and is trying to decide whether to leave her husband. The supervisee has been very concerned about the client's decision, particularly the potential impact on the children. In today's session the supervisor notes that the supervisee has changed the focus several times back to an evaluation of the client's marriage. The supervisee has asked a number of leading questions that suggest the client should take a more positive view of her marriage. The supervisee does not address the client's tearfulness or her despair that, from the supervisor's perspective, seems to almost visibly leak through the client's

statements and from her body at times. The supervisor has seen the supervisee work more effectively with other clients. Clearly, there is a block here. The supervisor has asked several questions regarding the supervisee's observations of her behaviors and pointed out client nonverbals, none of which have helped unblock the supervisee. At one point the supervisor stops the tape and asks, "What do you remember noticing about your client's reaction here?" The supervisee reports that she was surprised by her client's remark that finances are the main problem in her marriage, and didn't know what to say. The supervisor then says:

As I'm watching your client here on the videotape, I'm confused, too. For several sessions she has been talking about how there is really nothing left in her marriage, and the positive qualities of the other man she is seeing. Yet, when you ask her what's missing in her marriage, she replies, "Hope; hope that it will get better." And I see her reach for a tissue and it looks like she tears up. So, at this moment in the session I'm wondering how to make sense of all this. It almost seems like she hasn't given up on her marriage. I get some sense that she's searching for something, something deep and really meaningful. I sense such grief in her body, the way she is slumped over, her tears, her reference to hope. And I'm wondering how I could check that out, how I could help her get to that level. (Borders & Brown, 2005, p. 53)

The supervisor has modeled a thinking process that sends multiple messages on multiple levels. The supervisor's thinking aloud statements include

observations of a client's words and nonverbal behavior;

comparisons of the client's behavior in today's session and previous sessions;

a perspective on contradictions in a client's behavior that views them as meaningful rather than wrong;

internal responses to the client and how these responses might be used in session; 5. One way to make sense of all this information; and

a statement of a hypothesis about the client's pain to check out versus "the answer" to share with the client.

Through this thinking aloud sequence, the supervisor has given the counselor some new perspectives on her client, modeled empathy for (versus judgment of) the client, and encouraged a deeper level of understanding of the client. Hopefully, in the discussion following the thinking aloud statement, the supervisee will begin to work from these new perspectives.

Two important aspects of a thinking aloud statement exist. First, the tone must be nonjudgmental, without an implied message that the supervisee should have seen or thought the same thing. In fact, the supervisor states up front that these are her observations and thoughts as she watches the client on the videotape. The thinking aloud statements simply provide another perspective for discussion. A second point is that the supervisor wants to "think aloud" at an

appropriate developmental level, often described as one-half step beyond the student's current functioning (e.g., Stoltenberg, 1981). This optimal mismatch stretches the supervisee's thinking but does not flood the supervisee's thinking with more information than she can handle. It illuminates the learning path with a soft glow rather than harsh sunlight.

Thus, the supervisor's own internal processing during a supervision session involves determining what messages are appropriate and how to phrase them. Guiding questions for supervisors in their decision making are "What do I want the supervisee to be thinking about during session?" and "What do I want the supervisee to become more conscious of during the next session with this client?"

CONCLUSION

Other subtle or indirect approaches for clinical supervision have been described, such as giving feedback from the perspective of the client (Borders, 1991; Borders et al., 2006); using metaphors for the client, counselor, or counseling relationship (Guiffrida, Jordan, Saiz, & Barnes, 2007; Young & Borders, 1998, 1999); positive reframing (Masters, 1992); Socratic questioning (Overholser, 1991); and paradoxical intervention (Storm & Heath, 1982). Rather than a more comprehensive description of the range of subtle approaches, the focus of this article has been on "why" and "how" guidelines to help a supervisor determine when a more subtle approach is needed. When supervisors are clear and intentional about the key, subtle messages to the supervisee, the approach likely will be more effective and successful. Supervisees may hear well-crafted, more indirect interventions more easily at the conscious level than they would hear a more direct intervention. At the same time, at deeper levels, more indirect interventions send messages in the more subtle language of supervisees' fears, motivations, and their desire to be open to the learning path.

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REFERENCES

Bernard , J. M. (1997). The discrimination model . In C. E. Watkins , Jr. (Ed.), Handbook of psychotherapy supervision (pp. 310 – 327). New York : Wiley .

Bernard , J. M. , & Goodyear , R. K. (2004). Fundamentals of clinical supervision () , 3rd ed. . Needham Heights , MA : Allyn & Bacon .

Blocher , D. H. (1983). Toward a cognitive developmental approach to counseling supervision . The Counseling Psychologist , 11 (1), 27 – 34 .

Borders , L. D. (1991). A systematic approach to peer group supervision . Journal of Counseling and Development , 69 , 248 – 252 .

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

Borders , L. D. , Eubanks , S. , & Callanan , N. (2006). Supervision of psychosocial skills in genetic counseling . Journal of Genetic Counseling , 15 , 211 – 223 .

Borders , L. D. , & Leddick , G. R. (1987). Handbook of counseling supervision . Alexandria , VA : Association for Counselor Education and Supervision .

Campbell , J. M. (2000). Becoming an effective supervisor: A workbook for counselors and psychotherapists . Philadelphia , PA : Accelerated Development .

Frankl , V. (1976). Man's search for meaning . New York : Pocket Books .

Guiffrida , D. A. , Jordan , R. , Saiz , S. , & Barnes , K. L. (2007). The use of metaphor in clinical supervision . Journal of Counseling and Development , 85 , 393 – 400 .

Holloway , E. L. , & Wampold , B. E. (1986). Relationship between conceptual level and counseling-related tasks: A meta-analysis . Journal of Counseling Psychology , 33 , 310 – 319 .

Liddle , B. J. (1986). Resistance in supervision: A response to perceived threat . Counselor Education and Supervision , 26 , 117 – 127 .

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

Masters , M. A. (1992). The use of positive reframing in the context of supervision . Journal of Counseling and Development , 70 , 387 – 390 .

Overholser , J. C. (1991). The Socratic method as a technique in psychotherapy supervision . Professional Psychology , 22 , 68 – 74 .

Protinsky , H. , & Preli , R. (1987). Interventions in strategic supervision . Journal of Strategic and Systemic Therapies , 6 (3), 18 – 23 .

Stoltenberg , C. (1981). Approaching supervision from a developmental perspective . Journal of Counseling Psychology , 28 , 59 – 65.

Storm , C. , & Heath , A. W. (1982). Strategic supervision: The danger lies in discovery. Journal of Strategic and Systemic Therapies , 1(1), 71–72.

Welfare , L. W. (2007). Counselor cognitive complexity: Instrument development and validation (Doctoral dissertation, The University of North Carolina at Greensboro, 2007) . Dissertation Abstracts International , 68 , 1342 .

Young , J. S. , & Borders , L. D. (1998). The impact of metaphor on clinical hypothesis formation and perceived supervisor characteristics . Counselor Education and Supervision , 37 , 238 – 256 .

Young , J. S. , & Borders , L. D. (1999). The intentional use of metaphor in counseling supervision . The Clinical Supervisor , 18 (1), 139 – 149 . [Taylor & Francis Online]