

Supervision – the grown-up relationship?

By Duncan E. Stafford

Troubled by the power imbalance in the one-to-one supervisory relationship, a recently qualified supervisor believes peer support in supervision could provide a more reflective space for autonomous decision-making

I've just become a supervisor. It has been a long process and I'm not quite sure when it began. While there are now very particular routes in place that allow 'suitably qualified people' to train to access the counselling and psychotherapy profession, supervision does not have such a clear route. With regulation looming large, recent years have seen a homogenisation of the paths to becoming a counsellor/ psychotherapist, yet the paths to becoming a supervisor are far less defined.

As an experienced therapist, I find it inspiring to work with counselling trainees. Deep in the process of their own personal development and challenge, juggling perhaps work and family with course commitments and demands these are well-motivated people who spend considerable sums of (their own) money on a professional

training with a great deal of uncertainty about whether they will ever get paid work in the profession. And yet they still keep coming, working and studying. But becoming a supervisor is very different.

The 'grown-up relationship'?

I remember being told when I was a counselling trainee that, in the therapeutic world, supervision was the 'grown-up relationship'. I took this to mean that supervision was a space in which power dynamics were understood; a facilitative space that was not only reflective but also allowed for autonomous decision-making. Yet during my training, this was not my experience of a significant proportion of my supervision.

Some of this may have been explained by what Page and Wosket¹ claim to be the difference between working with experienced therapists, where the focus is on teasing out relationship dynamics, choosing intervention options and perhaps dealing with feelings of frustration and boredom towards clients, as opposed to working with trainees, where the issues of technique, boundary, understanding the material and dealing with the personal affect of anxiety are more the order of the day. However, working with seven different

supervisors across the six years of my training, I encountered negative power imbalances, untold difficulties with family transferences, plus corollary gender issues about working with men in the supervisory space.

Gender difference

These early issues in training about gender have left me fascinated by 'stereotypes' in the psychotherapeutic realm, and, as a result, led me to write about men and eating disorders². My own experience of supervision as a trainee was that I encountered rather directive styles from the female supervisors I had. There certainly do appear to be differences in the way in which male and female supervisors think about supervision and the way across-gender relationships influence the process. In fact, McHale and Carr report that 'female supervisors used a directive style more commonly than did male supervisors. They tended to interrupt trainees more and made more declarations of opinions as facts³.'

There is research evidence by Granello et al⁴ that suggests 'male and female supervisees may not be given the same opportunities to develop into independent practitioners'. The Granello study reports that both male and female supervisors 'did not enhance the developmental potential of female supervisees at the same level they did for male supervisees'.

Having already been involved as a supervisor of small groups and individuals within my mentoring and facilitation work prior to entering counselling training, the gender-style 'difficulties' in using supervision in counselling training rather perplexed me. This was somewhat resolved post-qualification through developing different supervision contracts – a small equally gender-split supervision group, plus extending my supervisory experiences within co-peer supervision with a female psychotherapist. But one-to-one supervision never seemed clearly defined enough in the style and relationship it offered, even when I found a deeply trusted and mutually respectful supervisory relationship with a male supervisor: Supervision was certainly safe in terms of the way it examined my practice, but did one-to-one supervision address my needs as a therapist?

Having established a thriving private practice, my peers began to ask me when I might consider taking on some one-to-one supervision within my portfolio of work. Initially, I was rather hesitant. Mulling over the idea for more than 12 months it dawned on me more deeply that in order to become a supervisor there needed to be more to that process than simply having the 'honour' bestowed on you by your peers. Carroll states that 'training for supervisors is now an imperative, rather than an option, and as such constitutes "an ethical requirement for the job"⁵.' I felt in sympathy with Carroll's statement but

was left with the question: do I know what supervision really is?

Co-peer and group supervision

In trying to answer this, I was drawn to the distinct difference I was finding between one-to-one supervision and co-peer and group supervision. Intense personal examination and discussions during peer networking highlighted significant differences in the functioning of supervision support in co-peer and group supervision, with the consequence that levels of support and trust were extremely high, which enabled a totally 'editing free' dialogue about my professional practice. Since, in these settings, there were no 'reminders' of my trainee days in terms of the power differential, the collegial model allowed the facilitation of a new kind of supervision for me. It dawned on me that my internalised model from my counselling training was of the one-to-one supervision setting being a 'one focus' consultation with a superior about the quality of my work, and this was not the 'grown-up relationship' I had sought since my training.

The seven-eyed model of supervision

Research allowed me to find a training within my region which I felt would help me address my ideas about one-to-one supervision – one that could provide the peer support experience and help me to understand what it could be like to be a 'consultant' who stood alongside rather than 'above' supervisees. The integratively frameworked course offered a

mature, encouraging and deeply reflective view of supervision and, among other models and ideas used, Hawkins and Shohet's⁶ seven-eyed model of supervision was a central component.

The seven-eyed model allows a supervisor constantly to monitor and move between a focus on the client, supervisee and supervisor, as well as the different relationships each one of these has with each other, and the strategies used within the process and the context. I feel that this ability to shift focus helps to support the therapist deeply as an individual. Certainly in my training cohort this was important to me, since I found myself as the only male in the group and yet through the facilitation offered by the shifting focus I did not feel I had an additional burden of being the 'token male' supervisor.

A new skills set

During the training I developed from a therapist with some idea of how I might 'do some supervision' into a professional supervisor – a therapist with the possibility of a new key skills set. After the model of Hawkins and Shohet, I think of supervision as a regular space for the reflection on the content and process of casework. Supervision offers another perspective concerning your work and adds feedback about content and process. There is also validation and support for you both as a person and as a professional. It becomes a place to rest the necessary and unnecessary difficulties of your

caseload. The problems and projections don't have to be held alone. Through supervision there can be help with effective planning and utilising your personal and professional resources. And, finally, there is a way to monitor the quality of your own work.

The above is just a fragment of the knowledge learned during supervision training, although as a practitioner I feel it provides the essential elements I was looking for and seek now to 'pay forward' to my own supervisees. Having been through my particular training, I feel open-minded rather than 'certificated' or 'regulated', blending my 'training knowledge' with the ever-deepening knowledge of practice. I find myself opened up to the process of supervision in both chairs: supervisor's and supervisee's. I also find myself pondering the idea that, perhaps for our own profession's good (supervision and therapy), we need some standards in place for those who call themselves supervisors. I don't feel that we all need to start 'collecting hours' for BACP accreditation as a supervisor. It is more that I'd like to think that, instead of being told we must train to become supervisors or sold a commercial concept within the therapy world that we must take a course for every role we undertake, we might want to train of our own accord because of what it offers to our self and the profession at large.

And alongside this new 'career' widening in front of me, I find myself wanting to know more about others and their supervision paths, to develop my small supervision group ideas and examine whether new technologies like videoconferencing might impact on the way group supervision can exist. I can feel more research coming on...

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