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Online Supervision Case Analysis: The Case of Kelly

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Abstract

Providing supervision to graduate counseling students using secured online technology is becoming a trend given the advancements in technology, students’ attending extended campuses rather than traditional universities, and convenience. Building a strong working alliance between the supervisee and supervisor is critical, particularly when the parties involved are establishing the relationship remotely. This article analyzes a case involving online supervision through the application of the Supervisory Working Alliance Model and the Individual Psychology Supervision Model. The supervisory relationship is discussed, and issues such as developing a working alliance virtually, the supervisory relationship, multicultural competency, and supervisor/supervisee evaluation are addressed.

*Keywords:* supervision, supervision models, online supervision, counseling theory, working alliance
Online Supervision Case Analysis

Supervision is the primary method used to maximize counselor development and competence (Bernard & Goodyear, 2009), and it is essential to the integrity of the counseling profession. Though there are some parallels between the client and therapist relationship and the supervisor and supervisee relationship, there are also some significant differences that have legal and ethical consequences. Standard F.4 of the 2015 American Counseling Association (ACA) Code of Ethics defines the counselor supervisor as “a professional counselor who engages in a formal relationship with a practicing counselor or counselor-in-training for the purpose of overseeing that individual’s counseling work or clinical development” (p. 20).

Counselor Supervision

Bernard and Goodyear (2009) define supervision as “an intervention provided by a more senior member of a profession to a more junior member or members of that same profession” (p. 7). The authors posit that the supervisory relationship is “evaluative and hierarchical, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s); monitoring the quality of professional services offered to the clients that she, he, or they see; and serving as a gatekeeper for those who are to enter the particular profession” (p. 7). As such, Bernard and Goodyear (2009) suggest that one of the central purposes of supervision is to “foster the supervisee’s professional development and to ensure client welfare” (p. 14).

It is important to note that supervision is considered an intervention distinct from teaching, counseling, and consultation, though they overlap. Supervision is similar to teaching in that both approaches attempt to impart knowledge. However, counselor supervision is “driven by the needs of the particular supervisor and his/her clients” instead of a set curriculum (Bernard
Supervision is similar to counseling in that “both can address recipients’ problematic behaviors, thoughts, or feelings” (Bernard & Goodyear, 2009, p. 9), but they differ in several ways. According to the authors, any therapeutic work conducted with the supervisee should only be done to increase the supervisee’s self-efficacy (Bernard & Goodyear, 2009). Second, the authors posit that “supervision is evaluative and is an integral component of supervision” (Bernard & Goodyear, 2009, p. 11). The authors define evaluative as it relates to the hierarchical relationship that gives the supervisor interpersonal influence. Last, supervision differs from counseling in that with the exception of court-order clients, clients can engage in therapeutic relationships of their own free wills. In contrast, supervision is not a voluntary decision in the United States but a requirement for the licensure process. Bernard and Goodyear (2009) found that supervision is similar to consultation in that both are dedicated to enhancing the professional development of the supervisee and/or the profession. In consultation, both parties are considered equals, whereas in counselor supervision, there is an evaluative and hierarchical relationship, as noted earlier. Additionally, a consultation could potentially occur one time versus over a period of time like supervision.

**Online Supervision**

The American Distance Counseling Association (ADCA) defines distance counseling as the “practice of seeking and receiving help through the internet” (www.adca-online.org). It is also referred to as tele-health, online counseling, online therapy, and eTherapy. Online counseling can occur via asynchronous email, synchronous chat, and video conferencing. Limited research exists regarding conducting supervision online. To bridge the gap in the literature and for the purpose of this article, the researcher postulates that the relationship
between the client and therapist parallels the relationship of the supervisor and supervisee with some limited differences, such as legal and ethical consequences.

**Case Study**

Kelly is working on her master’s degree in professional counseling at a university in Atlanta. She is a 31-year-old Caucasian who is in her first semester of internship at the university counseling center. Her first client is Amalia, a Puerto Rican second-semester freshman from New York City who is considering declaring a college major in chemical engineering or pre-dentistry. Amalia presents with feelings of homesickness. She misses her family greatly and is considering a transfer to a university in New York where she would be closer to home. Kelly is surprised to learn that Amalia is a third-generation college student and that her parents are both professionals: her father is a bank president, and her mother is a pediatrician. Kelly comments to Amalia that her English is “very good” and that she is surprised that Amalia is studying engineering and on the dean’s list. Given these facts, the Supervisory Working Alliance (SWA) model or the Individual Psychology Supervision (IPS) model might be most beneficial when conducting supervision with Kelly via video conferencing.

**Supervision Model Option 1: Supervisory Working Alliance Model**

E. S. Bordin developed the SWA model in 1983, and it applies the working alliance theory. Working alliance explores the nature of the therapeutic alliance and is comprised of goals, tasks, and bond. The goals are the change outcomes that the supervisor and supervisee have mutually agreed upon. Bordin (1983) posits that the formulation of goals is a collaborative process between the supervisor and supervisee in which they negotiate the goals until they reach a mutual agreement. Additionally, according to Bordin (1983), determining which goals take
precedence requires collaboration and consideration of the supervisee’s individual needs, interests, and development level.

Like goals, both parties mutually agree upon the tasks, which are the activities that the supervisee will complete to reach the established goals. The supervisor and supervisee also mutually agree upon the method by which the supervisor will give feedback based on the completion of the task. The supervisor and supervisee can share responsibility for the completion of certain tasks. Wood (2005) warns of the importance of being cognizant of the emotional bond between the supervisor and supervisee because “this influences the mutual establishment of goals and subsequent tasks” (p. 130).

Within the context of the SWA model, the developer, Bordin, defines bond as “the extent to which the supervisor and supervisee trust each other, respect one another, and care for each other” (Wood, 2005, p. 130). Bordin (1983) believed that sharing the experience of supervision and mutually agreeing upon the goals and tasks strengthens the bond. Bordin (1983) states that “the amount of change is based on the building and repair of strong alliances” (p. 36).

The SWA model has four major strengths. The model is considered transtheoretical because it can be used with different theoretical approaches, such as psychotherapy-based models or psychodynamic models of supervision (Wood, 2005). Wood (2005) posits that both goals and tasks can be adjusted to incorporate different theoretical approaches. Similarly, the use of models in conjunction with the SWA can help guide a supervisor in selecting appropriate supervisor roles (Wood, 2005). Wood (2005) argues that the discrimination model is useful in helping the supervisor and supervisee identify the focus of supervision. Though the model can be adapted or used in conjunction with other models, one limitation is the amount of time that
may be needed to negotiate the goals and tasks. Supervision, though required, is an investment of both time and money for the supervisee.

Next, the SWA model is conducive to incorporating multicultural counseling competencies due to its collaborative nature. Wood (2005) argues that because the process of establishing goals and tasks “necessitates the consideration of the respective cultural backgrounds of counselor and supervisor, the Supervisory Working Alliance Model, in essence, models multicultural counseling competencies” (p. 131). Last, both the supervisor and supervisee can easily evaluate the effectiveness due to the explicitness of the goals. The SWA can be measured using the Supervisory Working Alliance Inventory (SWAI), which is composed of a 23-item supervisor scale and a 19-item supervisee scale that Patton, Brossart, Gehlert, Gold, and Jackson note have “demonstrated good validity across the working alliance constructs” (as cited in Wood, 2005, p. 128).

**Application to the Case of Kelly**

The SWA model could prove beneficial to Kelly for several reasons. Because Kelly is beginning her internship, it is imperative that she feels confident in her role as a therapist-in-training and feels supported by her supervisor throughout the process. Larson and Daniels (1988) define counseling self-efficacy as “one’s belief’s or judgments about his or her capabilities to effectively counsel a client in the near future” (p. 180). The authors found that counselors with high counseling self-efficacy report less anxiety and “have an increased ability to receive and incorporate evaluative feedback” (p. 180). Gnilka, Chang, and Dew (2012) concluded in their research that “supervisee stress had a significant negative relationship with the working alliance” (p. 67). The authors suggest that if the supervisee perceives his or her life to be stressful, it may be difficult for the supervisee to form and/or maintain a therapeutic bond.
with his or her clients. Given that this model cultivates a strong working alliance between both parties through empathy, warmth, and encouragement, it is possible that Kelly’s level of perceived stress will be low, thus increasing her self-efficacy even when she faces working through her personal and professional obstacles.

Second, this supervision model is appropriate for Kelly because she lacks self-awareness of some of her biases. In the facts presented, Kelly acknowledged her shock about her client’s educational success given the client’s ethnicity. The SWA model can be used with different theoretical approaches, allowing the supervisor and supervisee the flexibility to adjust goals as opportunities for growth, such as this, present themselves. Additionally, one of the recognized strengths of the model is its conduciveness to incorporating multicultural counseling competencies due to its synergistic nature. The collaboration that is fostered through the use of the model develops a positive relationship in which the supervisor can offer constructive and useful feedback that will alert the supervisee of his or her blind spots in a non-threatening and non-condescending way.

Finally, the SWA model incorporates the use of the Working Alliance Inventory (WAI), which provides both parties with immediate quantitative feedback on the supervisory relationship. Horvath and Greenberg (1989) developed the WAI to be “an efficacious early predictor of successful counseling outcome” (p. 231). Hanson, Curry, and Bandolos (2002) report the inventory to be the most popular measure of working alliance available. The working alliance has been shown to be an important and robust predictor of positive outcomes in psychotherapy (Gaston, 1991). The results of the inventory provide feedback that the supervisor and supervisee can evaluate and use to determine where necessary adjustments are needed. If Kelly is defensive regarding the feedback on her lack of self-awareness that the supervisor
provides, having quantitative results that the supervisor can reference could help maintain and/or restore the positive working relationship necessary for effective supervision.

**Supervision Model Option 2: Individual Psychology Supervision Model**

Based on Adlerian theory, the IPS model “is the exploration of the supervisee’s counseling style of life” (Lemberger & Dollarhide, 2006, p. 106). The “counseling style of life” refers to the professional patterns that the supervisee conceptualizes and operationalizes in a counseling relationship (Lemberger & Dollarhide, 2006). The model is process-based but not sequential or mutually exclusive. Components of the model include goal-focused supervision, social interest, style of counseling, style and goal reformation, and encouragement (Lemberger & Dollarhide, 2006).

Several strengths have been cited for the IPS model. The model can be applied to supervision in a variety of contexts and populations. Additionally, the IPS model “encourages the supervisee to configure his or her clinical efforts in such a way that they are congruent, personally significant and comfortable, and beneficial to the client” (Lemberger & Dollarhide, 2006, p. 118). However, the model lacks qualitative and quantitative research examining its efficacy.

**Application to the Case of Kelly**

The IPS model could prove beneficial in Kelly’s case because it forces the supervisee to be self-reflective. The process-based model allows Kelly to create a unique counseling style that is beneficial to the client and personally congruent. The supervisor can serve as a mirror to reflect back the supervisee’s blind spots in a way that fosters encouragement and professional and personal growth. This supervisory model could ensure a positive ongoing supervisory
relationship and heightened self-efficacy on Kelly’s part, as the feedback is self-reflective versus received directly from the supervisor.

**Developing a Working Alliance: Online versus Face-to-Face**

Gnilka et al. (2012) note that over 1,000 empirical research studies have been conducted purporting that “a strong working alliance is one of the best predictors of a successful counseling outcome for clients” (p. 63). No universally accepted single definition of working alliance exists as of today. Greenson (1965), “who saw the positive collaboration between client and therapist as one of the essential components for success in therapy,” was the first to use the term (Horvath & Symonds, 1991, p. 139). Hanson et al. (2002) defined working alliance as “the extent to which a client and therapist work collaboratively and purposefully and connect emotionally” (p. 661). There is broad agreement that the collaborative engagement “involves, but is not necessarily limited to, consensus over the goals of treatment, a sense of confidence and commitment to the kinds of activities that the helper and helpee engage in as part of the helping journey, and the relationship or engagement is in a context of mutual trust, confidence and liking of one another” (http://wai.profhorvath.com). The working alliance has three characteristics: (a) the alliance is beneficial in itself, (b) the alliance is necessary for successful interventions, and (c) the alliance is not bound by specific interventions (Gaston, 1991). This author assumes that these same characteristics are appropriate for and applicable to counselor supervision.

Cook and Doyle (2002) found no significant differences in the level of working alliance when counseling is conducted online versus in person. In their results, all of the WAI subscales and composite scores were higher in the online sample (Cook & Doyle, 2002). The authors state, “Despite limitations, however, working alliance levels demonstrate that participants felt a collaborative, bonding relationship with therapists, and comments overwhelmingly indicated
participants’ belief that online therapy was a positive experience with unique advantages over face-to-face counseling” (p. 102). The same results would likely hold true for online supervision. Given this finding, the development of the working alliance for online supervision would follow the same protocol as if it were being conducted in person.

In Kelly’s case, the establishment of a working alliance with her should begin prior to the counselor supervisor’s accepting her as a supervisee. The pairing of the supervisee and supervisor is the most important consideration for a successful engagement. Though theoretical approaches may differ, there must be an alignment between the supervisor’s and the supervisee’s views and beliefs. Bordin (1983) found that the “strength of the working alliance was a function of the closeness of fit between the demands of a particular kind of working alliance and the personal characteristics of patient and therapist” (p. 253). Using a screening process that includes a personality assessment like the Myers-Briggs Type Indicator and a learning styles inventory like the Herrmann Brain Dominance Instrument, the supervisor might find it helpful to understand not only the personality of the supervisee but also how the supervisee best learns and processes information. This reduces frustration for both parties and makes the supervision sessions more effective.

If the pre-selection assessments demonstrate that there is a good fit between Kelly and the supervisor, the supervisor should provide her with a professional disclosure statement. Corbia and Boes (2000, p. 296) suggest using a disclosure statement “that fully disclose[s] to supervisees the potential risks, benefits, and expectations of entering into the supervisory relationship” to minimize potential risk and exposure. The statement allows the potential supervisee to evaluate the competency and compatibility of the supervisor prior to engaging in supervision. Cobia and Boes (2000) state that the purpose of the disclosure statement is to “fully
inform the prospective supervisee of the mutual rights and responsibilities of all parties, the parameters of supervision, and methods of evaluation, desired outcomes, and potential risks and benefits of participation in supervision” (p. 294). If the statement is well-written and comprehensive, Cobia and Boes (2000) argue that it can serve as a starting point for establishing a professional relationship and building rapport. It is important to note that a professional disclosure statement is not the same as informed consent. Cobia and Boes (2000) consider informed consent to be “the client’s right to agree to participate in professional service after such services are fully described to him or her” (p. 294).

Agreement on the professional disclosure statement, informed consent, and supervision contract formally establishes the supervisory relationship. Roper (2002) provides a method for developing relationships. He posits, “in order to construct a positive relationship it is imperative that we create a history of successful conversations” (p. 13). Roper believed this could be achieved by the supervisor’s allowing time at the beginning of each session for informal exchanges and interpersonal discussions. Following Roper’s recommendation, the counseling supervisor might start each session with a conversation that is not related to supervision. Topics such as Kelly’s self-care and challenges in classes could be discussed prior to engaging in dialogue regarding clients and supervision

**Dyadic Supervisory Relationship Components**

Based on the facts presented in the case, Kelly will most likely present some resistance to the supervisor when confronted about her initial reactions to her client. Liddle (1986) defines resistance as “overt verbal and non-verbal defensive responses, on the part of the supervisee, which arise from an effort to protect themselves against some perceived threat” (p. 120). He cautions supervisors to view resistance as self-protective behavior that supervisees utilize when
they feel threatened. Given that Kelly is not culturally self-aware, she may be shocked and ashamed when she becomes aware of how she presented to the client. Liddle (1986) identifies performance anxiety, fear of inadequacy, immaturity, poor interpersonal skills, and deficiencies in multicultural competencies as a few of the factors that influence resistance. Kelly is at high risk of these factors because of her level of experience and matriculation into her master’s program. She may demonstrate her resistance through the use of self-deprecating statements in an attempt to attack herself. Bernard and Goodyear (2009) found that the primary motivation for this type of resistance is to “maintain an emotional connection with the supervisor” (p. 177) by not allowing the supervisor to provide constructive feedback. To address the possibility of resistance, the supervisor could model vulnerability by self-disclosing if he or she thinks it may be helpful and/or role-playing the upcoming client session so that Kelly can practice vulnerability and self-awareness.

Parallel Processes

Parallel processes occur when the supervisees present themselves to their supervisors in the same way in which their clients present themselves to them (Bernard & Goodyear, 2009). Given Kelly’s lack of cultural awareness and her level of experience, it is plausible that Kelly may present herself as helpless to her supervisor, just as her client, Amalia, presented herself to Kelly. If this occurs, the supervisor could demonstrate to Kelly how much Kelly and Amalia are alike in this stage of their education versus emphasizing how much they are different because of ethnicity, race, and age. This will provide Kelly with an opportunity to empathize more with her client and will cultivate a therapeutic bond between her and Amalia.
Supervisory Experience

Given the sensitivity of the multi-cultural issue that this case presents, one can assume that regardless of the ethnic and racial background of the supervisor, there is a high probability that supervisor countertransference may occur. In this context, countertransference is a reaction by the supervisor in response to a maladaptive behavior, affect, or perception demonstrated by the supervisee. Research has shown that the interpersonal style of the supervisee can trigger such a countertransference, or it can occur as a result of some aspect of the supervisor’s own unresolved personal issues (Bernard & Goodyear, 2009). One solution is for the supervisor to record the supervision sessions and review his or her work independently, with a peer, or with his or her mentor for reflection and feedback.

Supervisor and Supervisee Evaluation

The WAI can be used to measure the working alliance between the supervisor and supervisee as well as the working alliance between the supervisee and his or her client(s). Three versions of the WAI are available: a client version, a therapist version, and an observer version. The long version of the WAI is composed of 36 items, and the short form is composed of 12 items. Both are scored using a seven-point Likert-type scale. Gnilka et al. (2012) recommend that supervisors measure the working alliances of the supervisee’s clients. The authors believe that this data will provide the supervisors with insight into the quality of care that the clients are receiving and the extent of the therapeutic bonds. The data could be used as discussion points to help the supervisee identify any personal biases that may be impacting the therapeutic relationship. The WAI could be utilized not only in the supervisory relationship but also with Kelly and Amalia, as Kelly will receive immediate feedback from her client on their progress and be able to chart her scores to demonstrate her growth personally and professionally.
In addition to using the WAI for the supervisory relationship, the supervisor can review the goals that the supervisee and supervisor established at the beginning of the relationship to ensure that they are meeting the goals. The models of supervision that were recommended in the case study for Kelly are both goal-focused and collaborative. These attributes allow for adjustments to the goals as learning opportunities arise.

**Multicultural Competency**

In the case presented, Kelly is not perceived to be multiculturally competent. Baruth and Manning (2007) list the following characteristics of culturally effective counselors: awareness of self, recognizing and addressing their values and biases, and an understanding of clients’ worldviews. While this list does not exhaustively describe all the characteristics of a multiculturally competent therapist, it does highlight the areas in which Kelly is incompetent. Kelly stereotyped Amalia based on her ethnicity. Baruth and Manning (2007) state that “stereotyping can result both from a counselor’s personal prejudices and biases as well as from a lack of factual information about cultures and individuals” (p. 59). Second, Kelly lacked self-awareness. Baruth and Manning (2007) define self-awareness as “a person’s consciousness of specific events that influence his or her psychological, social, emotional, and cultural attributes” (p. 38). Self-awareness is based on identity, which is how one thinks of oneself and how one thinks of oneself based on how one believes one is perceived by others. Identity includes factors such as race, ethnicity, and gender (Baruth & Manning, 2007). Once Kelly address her lack of self-awareness by examining her personal attitudes and beliefs regarding individuals of other races and ethnicities, the supervisor will become more aware of any potential interpersonal impairments that need to be addressed. Currently, the case does not provide enough detail to accurately assess any interpersonal impairment.
Section F.2.b. of the 2014 ACA Code of Ethics mandates that “counseling supervisors are aware of and address the role of multiculturalism/diversity in the supervisory relationship.” One recommendation is that the supervisor utilize mindfulness as a technique to develop the multicultural competency that Kelly needs. Mindfulness allows practitioners to enhance respect for others and diminish the influence of conflicting or bias-based emotions (Khong, 2011). A clearer awareness of negative tendencies may be facilitated through mindfulness practices by allowing the therapist to be fully present and cognizant of his or her interpersonal skills during a therapy session. Interpersonal skills are easier to teach and shape due to their behavioral nature than an individual’s attitude, which personality traits largely dictate (Lambert & Ogles, 1997). Therefore, mindfulness techniques offer promise for enhancing a counselor’s relational abilities.

**Recommendation of Counseling Theories**

The supervisor should not advise the supervisee on a particular counseling theory to utilize with the supervisee’s client. This could potentially place the client at risk of harm if the supervisee does not have formal training on the theory and techniques. The supervisor’s role is to encourage the supervisee to practice theories that he or she is knowledgeable about and that are congruent with his or her personality and work style. While the supervisor may have to step into the role of a teacher at times, the role is not to teach the supervisee a theory per se but to provide clarity about a theory or technique that the supervisee is using. In the supervisor’s role as a consultant, the supervisor may encourage the supervisee to explore other counseling theories and techniques; however, formal training in the approach should not occur during the supervisory session. The supervisor should consider encouraging Kelly to explore her toolbox and discuss some counseling theories that she believes may be useful in her sessions with Amalia.
and/or role-play their application. This approach would empower Kelly and increase her self-efficacy when working with Amalia and with future clients.

**Conclusion**

Ethical principles as defined by the ACA guide the supervisory relationship. Multicultural competency is woven throughout the code. Supervisor responsibilities are defined to provide parameters for the supervisory relationship as well as protection of the client being reviewed. The counselor supervisor has an ethical responsibility to provide constructive feedback to the supervisee as mandated by section F.6 of the 2014 ACA ethical code. In the case of Kelly, it is the supervisor’s ethical responsibility to address the lack of cultural awareness that Kelly presents. Using a model that raises self-awareness and that is self-reflective is helpful in preparing counselors-in-training, particularly when performing supervision virtually as it helps to build a positive working alliance.
References


