

MODULE 2: A Personal Model of Supervision

INSTRUCTOR'S OUTLINE

NOTES

INSTRUCTIONAL METHODS

- Small group exercise
- Large group discussion
- Individual exercise

PARTICIPANT MATERIALS

- Participant Workbooks

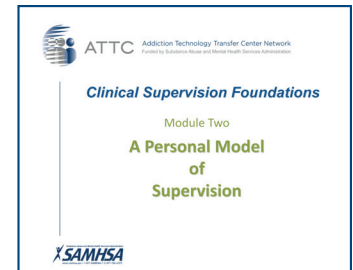
TRAINING AIDS

- PowerPoint slides 2-1 through 2-15 on computer disk
- LCD projector or overhead projector and screen
- Easel pad or white board, markers, and masking tape

ROOM SET-UP

- Round or rectangle tables for about six participants each to allow for discussion and ample space for use of participant materials and exercises

60 minutes



2-1 Module Title

MODULE 2: A Personal Model of Supervision

INSTRUCTOR'S OUTLINE

NOTES

RECAP & INTRODUCTION

> (3 minutes)

Set the context for this module by reviewing the topics covered thus far:

- Module 1: Roles and Definitions

Then introduce the module by sharing the purpose and learning objectives.

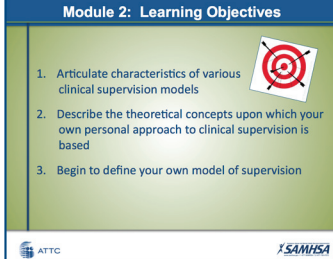
PURPOSE

In this module participants will review a number of models for clinical supervision and begin to articulate their own model.

LEARNING OBJECTIVES

Participants will be able to:

1. Articulate characteristics of various models that can be applied to clinical supervision.
2. Describe the theoretical concepts upon which their own personal approach to clinical supervision is based.
3. Begin to define their own model of supervision.



The slide titled "Module 2: Learning Objectives" features a green background and a target icon. It lists three learning objectives: 1. Articulate characteristics of various clinical supervision models; 2. Describe the theoretical concepts upon which your own personal approach to clinical supervision is based; 3. Begin to define your own model of supervision. Logos for ATTC and SAMHSA are visible at the bottom.

2-2 Learning Objectives

MODULE 2: A Personal Model of Supervision

INSTRUCTOR'S OUTLINE

NOTES

DISCUSSION IN DYADS AND LARGE GROUP

> (10 minutes)

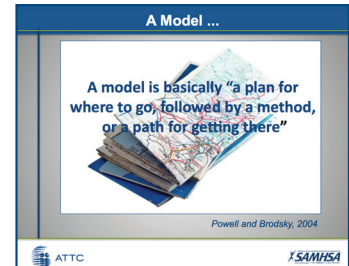
Following an introduction to the objectives for this section of the workshop present Powell and Brodsky's definition (2004) of a model and a related quote (anonymous) for the group's consideration. After a moment, ask participants pair off and discuss these questions:

1. What are the advantages of being able to explain or defend what you do as a clinical supervisor?
2. What is the value of having a theoretical base that supports what you do?
3. Who is accountable for clinical services?
4. How does having a supervisory model or standard protect the supervisor and the agency?(P.S. The text in any of these notes does not need to be in red. I just don't know how to change to color when I'm copying it from one thing to another!)

After about 3 minutes, facilitate a large group discussion. During the discussion make sure the following are mentioned:

- Advantages: makes supervision understandable and predictable for supervisees; clarifies supervisors role; assures agency management that adequate supervision is being provided
- Value: provides credibility for the supervision program; adds clarity to the program for supervisees; helps build consistency and accurate expectations for how supervision will be delivered
- Accountability: agency, supervisor and direct service staff are all accountable for the services delivered; supervisor is responsible for assuring quality care
- Protection: assures supervision consistent with agency policy and procedures is being provided; assures that supervisors have knowledge of how services are being delivered; establishes workforce development plans for direct service workers.

NOTE: All these issues will be addressed in this module and throughout the remainder of the workshop.



2-3 through 2-5
Importance of a Model

MODULE 2: A Personal Model of Supervision

INSTRUCTOR'S OUTLINE

NOTES

SMALL GROUPS: THEORETICAL FOUNDATIONS

> (10 minutes)

ASK

Ask participants to individually write their answers to the Theoretical Foundations questions in the Participant Workbook on page 16. When finished, ask them to compare and contrast their answers with others at their table.

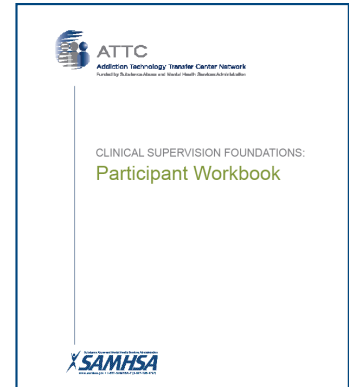
1. How does counseling help people change?
2. What are the necessary ingredients for change?
3. What model of change are you most attracted to? (Participant Workbook pg 16)

After about 5 minutes, conduct a large group discussion about the similarities and differences they have discovered. Point out it is not uncommon for participants in this training to think about their theoretical model of counseling for the first time (or in a long time).

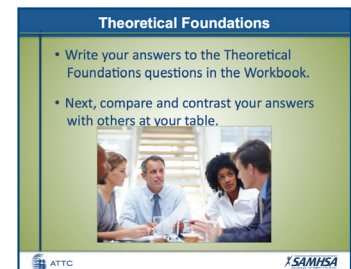
1. What did you discover as you answered the questions and then discussed them?
2. What are the necessary ingredients for change?
3. How do your ideas about change influence how you do clinical supervision?

During the discussion point out that there is a great variety of models for both counseling and how people change. Our ideas about how people change are very likely to influence how we practice clinical supervision. The treatment model utilized within the agency will also influence the supervision model embraced by the agency.

The online course reviewed a variety of supervision models. We will next refresh our memories of those models



Participant Workbook
pg 16



2-6 and 2-7 Theoretical Foundations and Discussion

MODULE 2: A Personal Model of Supervision

INSTRUCTOR'S OUTLINE

REVIEW TYPES OF SUPERVISION MODELS

> (10 minutes)

TRAINER NOTE:

Models tend to be based on a specific theoretical framework. One of the many parallels between counseling and supervision follows the concept that what is useful in promoting change with clients will likely foster change with supervisees. In the online course, participants reviewed several types of models. Within each type the workbook describes multiple models which can be used to guide the practice of clinical supervision. Among them participants are likely to find one or more fitting their individual style of supervision.

In preparing to lead this course the trainer should review the model types and the examples described in the workbook. While there is not time to present more than a one sentence description of the specific examples described in the workbook, the trainer should read through those descriptions in preparation to answer questions that might be raised by participants.

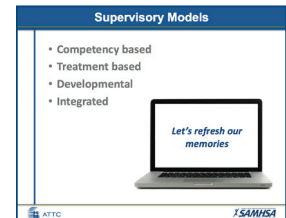
Start this section of the course by briefly reviewing the model types presented in the online course. Refrain from providing more than a single sentence describing the example models described in the workbook. The slides provide only the titles of example models. Encourage participants to review them on their own when time permits.

Here are the basic types of supervisory models:

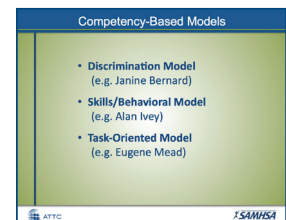
1. **COMPETENCY-BASED MODELS** - Focus on skills, learning needs and current knowledge of the supervisee.
2. **TREATMENT-BASED MODELS** - Focus on the application of counseling models to the practice of supervision.
3. **DEVELOPMENTAL MODEL** - Focuses on applying a growth stages concept of counselor development to the development of clinical supervision skills. Note that the Stoltenberg model was presented in the online course.
4. **INTEGRATED MODELS** - Focus on integrating two or more models into a single coherent framework for supervision. The Powell and Brodsky model was reviewed in the online course.

The titles of the specific models described in the workbook are listed on each slide. While time will not permit the presentation of those models, brief descriptions and references for further reading are included in the workbook.

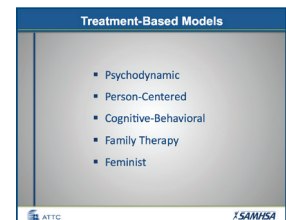
NOTES



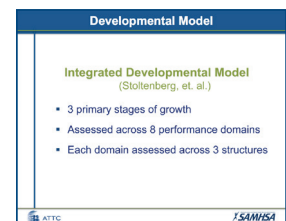
2-8 Supervisory



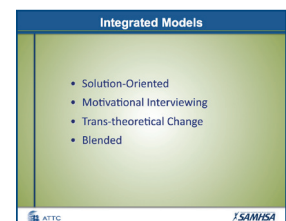
2-9 Competency-Based



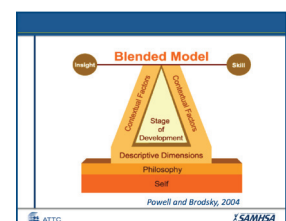
2-10 Treatment-Based



2-11 Developmental



2-12 Integrated



2-13 Blended Models

MODULE 2: A Personal Model of Supervision

INSTRUCTOR'S OUTLINE

DISCUSSION IN DYADS

> (20 minutes)

ASK

Ask participants to answer the questions in the “Building My Model of Clinical Supervision” page 24 of the workbook.

The questions include:

1. What model type am I most attracted to?
2. What about the model is attractive?
3. What are my foundation beliefs about:
 - a. The purpose of supervision
 - b. Key role of the supervisor
 - c. Primary tasks of the supervisee
 - d. Methods I prefer to use in supervision

When the questions have been answered, ask participants to pair off and share what they have written with their partner. Ask each other questions, and compare and contrast their answers.

LARGE GROUP DISCUSSION

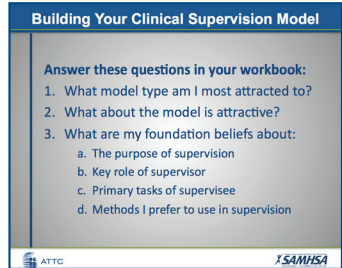
> (10 minutes)

Encourage several participants to share their foundation beliefs and encourage a discussion of the individual differences that exist among group members. Note that we will be adding elements to these beginning foundations as we move through the workshop.

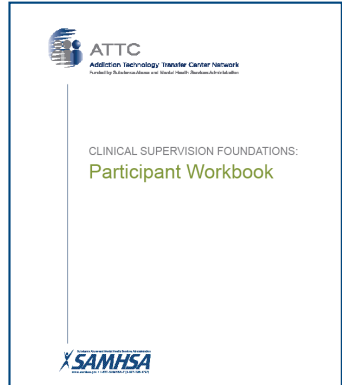
MODULE CLOSURE

Close the module by taking final questions and informing participants that the next module will cover the importance of developing a strong supervisory alliance.

NOTES



2-14 Building Your Clinical Supervision Model



Participant Workbook
pg 24



2-15 Closure -
Integrated Models

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

INSTRUCTIONAL METHODS

- Lecture
- Inventory
- Small group exercise
- Large group discussion

PARTICIPANT MATERIALS

- Participant Workbooks

TRAINING AIDS

- PowerPoint slides 3-1 through 3-20 on computer disk
- LCD projector or overhead projector and screen
- Easel pad or white board, markers, and masking tape

ROOM SET-UP

- Round or rectangle tables for about six participants each to allow for discussion and ample space for use of participant materials and exercises

NOTES

90 minutes



3-1 Model Title

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

RECAP & INTRODUCTION

> (2 minutes)

Set the context for the current module by reviewing the topics covered to date:

- Module 1: Roles and Definitions
- Module 2: Theories and Models

Then introduce the module by reviewing the purpose and learning objectives on the slides.

PURPOSE

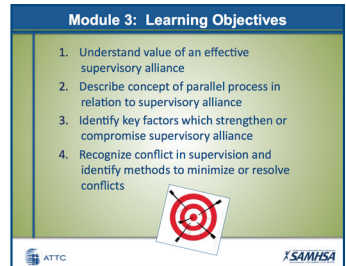
This module introduces participants to the importance of an effective supervisory alliance, factors influencing the alliance, and methods to address weaknesses and failures in the supervisory relationship.

LEARNING OBJECTIVES

Participants will be able to:

1. Understand the value of a positive supervisory alliance.
2. Describe the concept of parallel process in relation to the supervisory alliance.
3. Identify key factors which strengthen or compromise the supervisory alliance.
4. Recognize conflict in supervision, and identify methods to minimize or resolve conflict.

NOTES



The slide titled "Module 3: Learning Objectives" features a green background with a white target icon in the bottom right corner. It lists four learning objectives:

1. Understand value of an effective supervisory alliance
2. Describe concept of parallel process in relation to supervisory alliance
3. Identify key factors which strengthen or compromise supervisory alliance
4. Recognize conflict in supervision and identify methods to minimize or resolve conflicts

Logos for ATTC and SAMHSA are visible at the bottom of the slide.

3-2 Learning Objectives

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

SELF-ASSESSMENT INVENTORY

> (15 minutes)

Refer participants to the inventory in their workbook and ask them to choose the response best describing their current thoughts regarding each statement using the five-point scale (3 minutes):

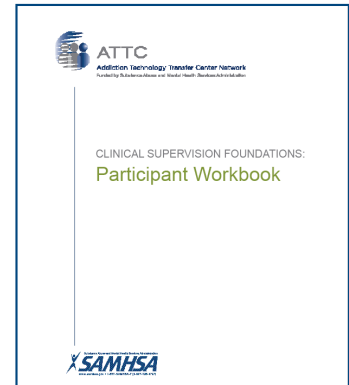
- 1 = Strongly agree
- 2 = Agree
- 3 = Undecided
- 4 = Disagree
- 5 = Strongly disagree

After participants complete the inventory, ask them to discuss their response to the survey in their small groups. After about 5 minutes, pull the class back together and elicit responses to the inventory. (5 minutes).

Brainstorm with the group by asking the following questions (7 minutes):

ASK

1. *Which items did you talk about?*
2. *Which of these items have you not thought about before?*
3. *Which items surprised you on this list?*
4. *Which made you feel uncomfortable?*
5. *How do your responses fit with your description of your model in MOD 2?*



Participant Workbook
pg 26

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

CHARACTERISTICS OF AN EFFECTIVE SUPERVISORY ALLIANCE LECTURETTE

> (3 minutes)

ASK

How do you know you have a positive supervisory alliance?

Hallmarks of a Positive Supervisory Alliance:

- *A high level of trust:*
Trust plays a role in maintaining a positive supervisory alliance:
 - Trust leads to increased self-confidence
 - Trust leads to respect
 - Trust leads to a tacit approval for the supervisee to take risks without fear of judgment
- *Increased self-efficacy:*
Point out: Several research studies have shown the strength of the supervisory alliance is a source of increased self-efficacy by the supervisee (Ladany, Lehrman-Waterman, Molinaro, & Wolgast, 1999; Chen & Bernstein, 2000; and Cashwell & Dooley, 2001). These studies have all also concluded that a strong working alliance in supervision leads to:
 - Increased comfort by the supervisee,
 - Self-motivation for continued growth,
 - Greater satisfaction with role as a counselor, and
 - Positive impact on counseling performance.

ASK

So now we have looked at the value of a positive supervisory alliance. How do you develop and build a positive alliance?

An Effective Supervisory Alliance

Characterized by:

- High level of trust
- Increased self-efficacy
- Increased comfort
- Higher level of motivation for growth
- Greater satisfaction with counselor role
- Improved counseling performance



ATTC SAMHSA

3-3 Effective Supervisory Alliance

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

BUILDING AN EFFECTIVE WORKING ALLIANCE EXERCISE AND DISCUSSION

> (5 minutes)

Brainstorm important steps when building a positive supervisory alliance. Put responses on the flip chart. If not mentioned, include the following Jane Campbell's tips for building a working alliance:

- Establish mutuality and collaboration to accomplish tasks
- Use self-disclosure to foster openness, honesty, and willingness to admit mistakes
- Talk openly about the hierarchy of power and the means available to resolve problems
- Include supervisee in setting goals, planning and the evaluation process (Campbell, 2006, p. 164).

CHALLENGES TO THE SUPERVISORY ALLIANCE LECTURETTE

> (10 minutes)

TRAINER NOTE:

Let the attendees know the rest of this module will address challenges to the supervisory relationship, which was also covered in the online course. Inform them that you will be providing a quick review of the topics and then they will explore them in more depth in the exercise and subsequent class discussion. Material for this section is on pages 27-29 in the Participant Workbook. The trainer lectures notes follow on pages 32-33 here.

NOTES



3-4 Tips for Building a Working Alliance

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

CHALLENGES TO THE SUPERVISORY ALLIANCE

Boundary Issues / Dual Relationships

- Dual relationships extend the boundary beyond supervision and potentially complicates the relationship.

All of you are familiar with examples of dual relationship between a counselor and a client, or between a family member and doing business with a client.

Boundaries regarding dual relationships in supervision can be less clear. An example is allowing supervision to slip into psychotherapy. A good clinical supervisor is a therapist doing supervision not a supervisor doing therapy.

ASK

Is it possible to avoid all boundary issues?

Power And Authority

ASK

What is the difference between power and authority?

ANSWER

Power is the ability to influence or control others, while authority is the right to do so (Kadushin, 1992). As a supervisor, you will have both power and authority in your relationship.

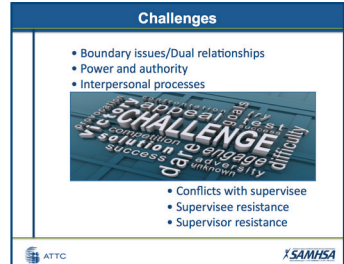
- A built-in power differential exists in the supervisory relationship.

ASK

What is it?

ANSWER

Supervisors continually evaluate the work of their counselors.



3-5 Challenges for Supervisors

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

The Supervisory Relationship as an Interpersonal Processes

- Transference can occur in the supervisory relationship when a counselor unconsciously shifts feelings to the supervisor which are displacements from reactions to others.
- Counter-transference can occur when a counselor loses objectivity with a client due to unresolved personal issues triggered by clients.
- Parallel Process is a common phenomenon where the dynamics in supervision replicate those occurred or are occurring in the supervisee' relationship with a client.

Conflicts Between Supervisor & Supervisee

Conflict is a natural part of all relationships. Since the supervisor has more power, conflicts can easily occur in supervision. Some differences that can lead to conflict:

- Cultural conflict
- Political
- Religious
- Treatment model/orientation/school
- Difference in intellectual orientation

ASK

What's more important - Avoiding or Resolving Conflict?

Supervising the "Resistant" Counselor

There are many contributing factors to counselor resistance. The following factors might precipitate counselor hesitancy to participate in supervision:

- Uncertainty about the purpose of supervision
- Lack of trust in the supervisor
- Absence of structure in supervisory meetings
- Fear of criticism
- Hesitancy to take risks

ASK

What are some of the factors which create resistance?

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

CHALLENGES TO THE SUPERVISORY ALLIANCE EXERCISE AND DISCUSSION

> (50 minutes)

TRAINER NOTE:

This next section will explore each of these topics by having the attendees work through scenarios. Encourage participants to refer to their workbook, which provides additional information, and details to help them hone in on the issue in their scenario. Let them know this is an opportunity for them to address and develop strategies to address these issues.

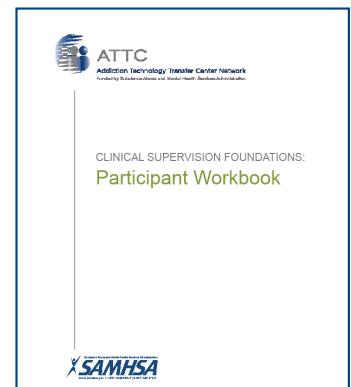
Exercise Instructions:

- Break the class into five groups.
- Assign each table one of the potential challenging scenarios below (provided in their workbook on pages 30-32).
- Give the groups 10 minutes to discuss and answer the questions provided with each scenario. Let them know they will be presenting their answers to the large group.
- Reconvene the large group and have each group present the main points of their answers (3 minutes each group). You can use the slides to present the scenarios and questions to the large group.
- As they are presenting, you may want to guide them to include the discussion point provided in your manual. Validate and encourage their response.
- After they have finished their presentation to the large group, present the slide with the discussion points as a supplement to their answers vs. here are the "right answers." (3 minutes each topic)

NOTES



3-6 Scenarios



Participant Workbook
pg 30

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

SCENARIO 1 - BOUNDARY ISSUES

As we mentioned earlier dual relationship in supervision may be less clear and unavoidable.

Scenario:

How many of you will be supervising a former peer? How many of you will be supervising someone you consider a friend? Let's talk about that. You are now supervising someone you were close to as a peer.

Questions:

1. What are the advantages and disadvantages?
2. What are potential problems?
3. How would you manage it?

Discussion Points:

- There are some situations in agencies where dual relationships cannot be avoided.
- The supervisor needs to raise the issue that the dual relationship exists and may impact our ability to work as supervisor and supervisee.
- Both the supervisor and supervisee need to discuss the potential impacts (i.e. may be less willing to expose their areas of weakness to someone holding them in high regard, may not respond appropriately).
- The supervisor needs to establish agreements about how to proceed, the importance of talking about sensitive issues, and how things may change in the relationship (i.e. immediacy of access, not discussing personal issues).
- The supervisor needs to identify a mentor to discuss issues and help navigate the relationship.

Scenario 1: Boundary Issues

You are now supervising someone you were close to as a peer.

1. What are the advantages and disadvantages?
2. What are potential problems?
3. How would you manage it?

ATTC

SAMHSA

3-7 Boundary Issue Scenario

Tips for Managing Boundary Issues

- Dual relationships cannot always be avoided
- Raise the issue that the dual relationship exists
- Discuss potential impacts
- Establish agreements about how to proceed
- Identify mentor to discuss issues

ATTC

SAMHSA

3-8 Boundary Issue Tips

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

SCENARIO 2 - POWER AND AUTHORITY

Scenario:

During the past year, because of staff turnover, the capacity to do periodic reviews has been mitigated. You are going to be doing an annual review with a supervisee who is:

- Consistently late from hour lunch break
- Late in their charting
- 60% of their clients have dropped out in first 30 days of care

Questions:

1. What would be some examples of a supervisor overusing/abusing their power and authority?
2. What might cause the supervisor to underutilize their power and authority?
3. How will the fact that the persons' compensation package for the year will be influenced?
4. What are healthy guidelines for managing power and authority?

Discussion Points:

Power and authority must be addressed by both supervisor and supervisee:

- Supervisor must clearly inform supervisee of the evaluative structure of the relationship
- Criteria for evaluation must be defined
- Goals for supervision must be clearly discussed
- Assist supervisee to develop more power to increase their decision-making abilities – thus becoming empowered. In other words, leadership is the ability to use authority to make others powerful (Zander, R.S. & Zander, B., 2000).

Scenario 2: Power and Authority

During the past year, because of staff turnover, the capacity to do periodic reviews has been mitigated. You are preparing to conduct an annual review with a supervisee who is:

- Consistently late from hour lunch break
- Late in his/her charting
- 60% of his/her clients have dropped out in first 30 days of care

ATTC SAMHSA

3-9 Power and Authority

Power and Authority Questions

1. What would be some examples of supervisors overusing/abusing their power and authority?
2. What might cause supervisors to underutilize their power and authority?
3. How will the fact that the supervisee's compensation package will be influenced impact the relationship?
4. What are healthy guidelines for managing power and authority?

ATTC SAMHSA

3-10 Power and Authority Discussion

Tips for Managing Power and Authority

- Inform supervisee of the evaluative structure of the relationship
- Define criteria for evaluation
- Discuss goals for supervision
- Empower supervisee to increase their decision-making abilities
- Use authority to give power to those being led

ATTC SAMHSA

3-10 Power and Authority Tips

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

SCENARIO 3 - INTERPERSONAL RELATIONSHIP

Scenario:

Imagine yourself as a 45-50 year old supervisor with a 28-30 year old supervisee of the opposite sex.

Questions:

1. What potentially impacts the supervisory alliance?
2. How might a supervisor abuse his/her power and authority because of emotional reaction to supervisee?
3. What would your responses be if supervisor and supervisee were:
 - a. Same age and same gender
 - b. Same age and different gender
 - c. Same age, same gender, different sexual orientation

Discussion Points:

- Supervisors must be aware of when their feelings may compromise the supervisory relationship.
- To understand these reactions means recognizing clues (such as dislike of a supervisee or romantic attraction), doing careful self-examination, personal counseling, and receiving supervision of your supervision.
- In some cases, it may be necessary for you to request a transfer of supervisees, if this counter transference hinders the counselor's professional development.
- Counselors will be more open to addressing difficulties with counter-transference if you communicate understanding and awareness that these experiences are a normal part of being a counselor.
- Counselors should be rewarded in performance evaluations for raising these issues in supervision and demonstrating a willingness to work on them as part of their professional development.

NOTES

Scenario 3 – Interpersonal Relationships

Imagine yourself as a 45-50 year old supervisor with a 28-30 year old supervisee of the opposite sex.



ATTC

SAMHSA

3-12 Interpersonal Relationship Scenario and Questions

Interpersonal Relationship Questions

1. What potentially impacts the supervisory alliance?
2. How might a supervisor abuse his/her power and authority because of emotional reaction to supervisee?
3. What would your responses be if supervisor and supervisee were:
 - Same age and same gender
 - Same age and different gender
 - Same age, same gender, different sexual orientation

ATTC

SAMHSA

3-13 Interpersonal Relationship Scenario and Questions

Tips Regarding the Relationship

- Supervisors need to be aware of feelings which may impact supervision
- Supervisors need to recognize clues, do careful self-examination, and have own supervision
- When relationship issues are more transparent counselors may be more open to addressing difficulties
- Counselors should be rewarded for raising relationship issues in supervision
- May be necessary to transfer supervisees

ATTC

SAMHSA

3-14 Interpersonal Relationship Tips

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

SCENARIO 4 - CONFLICT

Scenario:

Imagine yourself in supervisory relationship where:

- Supervisor believes in empowering clients to take responsibility for their own recovery
- Supervisee believes in providing guidance to help the client avoid making mistakes which will interfere with his/her recovery

Questions:

1. How might these differences impact the supervisory relationship?
2. What are special considerations supervisor will have to give to establish a successful supervisory alliance?
3. What guidelines would you suggest for managing these ideological differences?

Discussion Points:

- Resolution is reached with listening, understanding and working to clarify the ground rules of the relationship.
- Conflicts are resolved when:
 - There is a willingness by the supervisor to engage in open and frank discussions about concerns of the supervisee
 - The supervisor asks what the relationship would “look like” if it were working satisfactorily (and both answer)
 - Steps are identified that would lead the relationship to the point envisioned
 - An open discussion occurs involving the sharing of goals for supervision to gauge similarities or differences
 - The supervisor acknowledges the many challenges faced by the supervisee
 - The supervisor recognizes, appreciates, and understands the phenomenological world of the supervisee

NOTES

Scenario 4: Conflict

Imagine yourself in supervisory relationship where:


- Supervisor believes in empowering clients to take responsibility for their own recovery
- Supervisee believes in providing guidance to help the client avoid making mistakes which will interfere with their recovery

ATTC SAMHSA

3-15 Conflict Scenario

Conflict Questions

1. How might these differences impact the supervisory relationship?
2. What are special considerations supervisor will have to give to establish a successful supervisory alliance?
3. What guidelines would you suggest for managing these ideological differences?



ATTC SAMHSA

3-16 Questions

Tips for Managing Conflict

- Open and frank discussions
- Describe a satisfactory relationship
- Identify steps to reach a satisfactory relationship
- Share goals to gauge similarities and differences
- Acknowledge counselor's challenges
- Recognize, appreciate, and understand counselor



ATTC SAMHSA

3-17 Conflict Management Tips

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

SCENARIO 5 - RESISTANCE

Scenario:

A supervisee's former supervisor was highly critical, directive, and constantly disappointed in the supervisee's performance. Now in a new supervisory relationship, the supervisee is hesitant, afraid of criticism, taking risks, and being observed. Even though the supervisee is achievement oriented, there seems to be a strong fear of failure. The supervisor notices the resistance to supervision and is trying to communicate that making mistakes and taking risks are a natural part of the learning process (refer to Tip 52).

Questions:

1. What does the supervisor have to attend to in this situation to enhance the alliance?
2. How can the supervisor reassure the supervisee?
3. How would the needs of this type of supervisee impact the supervisor's expectations and how the relationship will develop?
4. What are some guidelines for managing resistant counselors?

ASK

Have you ever had a supervisor who argued with you over something in supervision? If so, how did you feel and what was your reaction?

Discussion Points:

- **Avoid labeling:** As in the client/counselor relationship, labeling evokes resistance and hinders progress; Think of the "resistant" counselor as being ambivalent.
- **Avoid power struggles and arguments** – they are counterproductive.
- **Reframe information:** A technique that offers validity to the counselor's observations while offering a new meaning or interpretation to him/her.
- **Emphasize personal choice:** Put the responsibility for goal setting squarely on the shoulders of the counselor; When individuals think their freedom of choice is being threatened, they tend to assert their liberty: "I'll show you - nobody tells me what to do!" This only feeds resistance.

Scenario 5: Resistance

A supervisee's former supervisor was highly critical, directive, and constantly disappointed in the supervisee's performance. Now in a new supervisory relationship, the supervisee is hesitant, afraid of criticism, of taking risks, and of being observed.

Even though the supervisee is achievement oriented, there seems to be a strong fear of failure. The supervisor notices the resistance to supervision and is trying to communicate that making mistakes and taking risks are a natural part of the learning process.

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3-18 Resistance Scenario

Resistance Questions

1. What does the supervisor have to attend to in this situation to enhance the alliance?
2. How can supervisor reassure supervisee?
3. What would be impact of having such a supervisee on supervisor's expectations and how relationship will develop?
4. What are some guidelines for managing resistant counselors?



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3-19 Questions

Supervising the "Resistant" Counselor

- Avoid labeling
- Avoid "power struggles"
- Reframe information
- Emphasize personal choice
- Recognize level of self-confidence
- Elicit self-motivating statements



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3-20 Tips on Resistance

MODULE 3: Supervisory Alliance

INSTRUCTOR'S OUTLINE

NOTES

- Recognize level of self-confidence: Support, validate, and encourage progress and professional growth.
- Elicit self-motivating statements: This becomes a guiding strategy to help resolve ambivalence; Examples:
 - Problem recognition: "In what ways has this been a problem for you?"
 - Concern: "In what ways does this concern you?"
 - Intention to change: "What would be the advantages of (making a change)?"
 - Optimism: "What makes you think that if you decide to (make the change) you could do it?"

MODULE CLOSURE

ASK

What are walkaways you are taking away from this section on building the alliance?

TRAINER TIP:

Summarize the points as they are mentioned.

Bridge to the next module by pointing out to the participants that the next module will cover the Techniques and Modalities of supervision.