Psychotherapy Trainees’ Experience of Counterproductive Events in Supervision

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The authors conducted interviews with 13 psychotherapy trainees about a counterproductive event that occurred in individual supervision, which was defined as any experience that was hindering, unhelpful, or harmful in relation to the trainee's growth as a therapist. A qualitative analysis revealed that trainees typically attributed their experiences of counterproductive events to their supervisors dismissing their thoughts and feelings. All trainees experienced a negative interaction with their supervisors following the counteractive event, yet most did not believe their supervisors were aware of the event's counterproductive nature. All trainees believed the counterproductive event weakened the supervisory relationship and led to a change in the way they approached their supervisors. Although trainees typically thought the counterproductive events negatively affected their work with clients, most did not disclose their counterproductive experience with their supervisors.

Although much of the existing supervision research identifies supervisor behaviors and supervision components that contribute to trainees' reports of satisfaction and dissatisfaction (Allen, Szollos, & Williams, 1986; Friedlander & Ward, 1984; Heppner & Handley, 1982; Heppner & Roelke, 1984; Kennard, Stewart, & Gluck, 1987; Krause & Allen, 1988; Lochner & Melchert, 1997; Olk & Friedlander, 1992; Schacht, Howe, & Berman, 1989; Tracey, Ellickson, & Sherry, 1989), only a few researchers have explored trainees' perceptions of how negative supervision experiences influence the supervisory relationship, process, and outcomes (Hutt, Scott, & King, 1983; Moskowitz & Rupert, 1983). Such information has implications for trainees' ability to work in supervision and raises questions as to how supervisory experiences influence trainee development, the supervision process, and trainees' work with clients (Bernard & Goodyear, 1998; Bordin, 1983; Friedlander, Siegel, & Brenock, 1989; Heppner & Roelke, 1984; Schacht et al., 1989). One way of identifying negative supervision experiences is by their counterproductive nature. We defined counterproductive supervision events as any experience that trainees identified as hindering, unhelpful, or harmful in relation to their growth as therapists. The overarching purpose of our study was to examine the nature and extent of trainees' experience of counterproductive events in supervision. Also, we were interested in how such events influenced the supervisory alliance and outcome as well as how they may influence the therapeutic process and client outcomes.

The existing literature on positive and negative supervision experiences indicates that trainees report positive supervision experiences when they perceive their supervisors as being supportive, instructional, interpretive (Kennard et al., 1987), collegial, and respectful (Gandolfo & Brown, 1987). Conversely, trainees report negative supervision experiences when they perceive their supervisors as being rigid (Allen et al., 1986; Hutt et al., 1983; Kennard et al., 1987; Nelson, 1978), critical (Allen et al., 1986; Hutt et al., 1983; Nelson, 1978), and inattentive (Chung, Baskin, & Case, 1998; Shanfield, Matthews, & Heatherly, 1993). Hutt et al. (1983) found that trainees reported good supervision events as those that incorporated a facilitative, nonjudgmental relationship with task-oriented behavior that reduced their anxiety and allowed them to explore client interactions. Likewise, Worthen and McNeill (1996) found that trainees typically reported good supervision events when they shared feelings of inadequacy in supervision and then received acceptance and support from their supervisors, which bolstered their confidence. Conversely, Allen et al. (1986) found that trainees' worst experiences in supervision were likely to include authoritative or demeaning supervision. Trainees may have experienced such supervision as disempowering, which likely hindered their self-efficacy and their disclosure of mistakes. These results identified supervisor behaviors and supervision components that contribute to trainees’ experience of positive and negative supervision but did not provide an in-depth explanation of what happens in supervision between trainees and supervisors when trainees experience counterproductive events—the first and major purpose of our study. Understanding such processes may aid supervisors and trainees in diminishing or even preventing the counterproductive nature of some supervision events.
The existing empirical literature details aspects of supervision components that influence the supervisory alliance and trainee disclosure primarily by using survey format. However, an in-depth perspective of how trainees experience and perceive the influence of counterproductive events on the supervisory relationship, process, and outcome, as well as the therapeutic process and outcome, is missing. Researchers have examined the frequency, type, and outcome of trainees’ experience of conflict in supervision. Moskowitz and Rupert (1983) found that nearly 40% of the trainees they surveyed had experienced a major conflict with a supervisor related to personality issues, supervision style, or therapeutic techniques and approach. Their findings identified common types of conflicts that occur in supervision, the outcome of trainees’ disclosure of supervision conflicts, and trainees’ reasons for nondisclosure. However, the existing research has not identified the specific nature of supervision conflicts or how the conflicts influenced both the supervisory and therapeutic relationships, processes, and outcomes. Thus, an in-depth qualitative analysis of the nature, resolution, and outcomes of counterproductive events appears warranted.

Qualitative methodology (Hill, Thompson, & Williams, 1997) allowed us to examine (a) trainees’ definition and inner experience of counterproductive events, (b) the sequence of events and interactions that contribute to and perpetuate counterproductive experiences, and (c) supervision and therapeutic dynamics about which current information is limited. Hence, qualitative methodology seemed to serve our exploration of trainees’ experience of counterproductive events in supervision ideally, by allowing us to examine trainees’ perceptions of how the events influenced the supervisory and therapeutic relationships, processes, and outcomes in depth.

The second purpose of our study was to examine the influence of counterproductive supervision events on the supervisory relationship, process, and outcome. The supervisory relationship appears to be a salient component of trainees’ experience of good or positive supervision (Allen et al., 1986; Ellis, 1991; Heppner & Roehlke, 1984; Hutt et al., 1983; Kennard et al., 1987; Worthen & McNeill, 1996). For example, in one study of negative supervision events (Hutt et al., 1983), trainees attributed their intensely negative emotional focus on the supervisory relationship to their supervisors’ inflexibility in meeting their needs. In another study (Worthen & McNeill, 1996), trainees identified the quality of the supervisory relationship as essential to their experience of good supervision events. Much like the importance of the therapeutic alliance in client outcomes, the supervisory working alliance plays an integral role in trainee satisfaction and learning in supervision (Bordin, 1983; Eifstaton, Patton, & Kardash, 1990). Bordin (1983) identified a strong supervisory alliance as a positive relationship in which the supervisor and trainee reciprocate trust, liking, and caring, and in which they discuss mutual expectations and goals and agree on supervision tasks. Researchers have found that positive supervisory relationships facilitate trainee disclosure and growth when warm, acceptance, understanding, respect, autonomy, and trust exist in supervision (Hutt et al., 1983). In contrast, trainees identified negative supervisory relationships as those that lacked trust, respect, openness (Allen et al., 1986; Hutt et al., 1983; Kennard et al., 1987; Nelson, 1978), support, and instruction (Allen et al., 1986; Hutt et al., 1983; Nelson, 1978), which suggest a poor supervisory alliance and a relationship that is hindering, unhelpful, and harmful in relation to trainees’ growth as therapists.

Positive and negative supervision events also appear to influence the supervisory process and outcome. Trainees reported gaining increased awareness, knowledge (Hutt et al., 1983), skills, and confidence (Hutt et al., 1983; Worthen & McNeill, 1996) from positive supervision events, whereas negative supervision experiences taught trainees self-preservation through avoidance and censoring disclosures, rather than through vulnerable exploration (Hutt et al., 1983). What remains unclear in the existing literature is the relationship between counterproductive events and the supervisory alliance, process, and outcome. Specifically, what is the nature of supervisory alliances in which counterproductive events occur and how do counterproductive events affect supervisory dynamics and trainee growth? Such information may facilitate the resolution of counterproductive events within the context of the supervisory relationship, potentially leading to a deeper and stronger relationship (Bordin, 1983).

The third purpose of our study was to examine further trainee disclosure of counterproductive supervision events. Research indicates that trainees consciously distort, conceal (Yourman & Farber, 1996), or withhold (Ladany, Hill, Corbett, & Nutt, 1996; Yourman & Farber, 1996) clinical material from their supervisors. While examining the nature and extent of what trainees do not disclose in supervision, Ladany et al. (1996) found that 90% of the trainees they surveyed experienced a negative reaction to a supervisor, which they did not disclose in supervision. The most typical reasons for these nondisclosures were deference to the supervisor’s power or authority, strategic self-presentation, and fear of political suicide. In addition, trainees reported greater dissatisfaction with supervision when not disclosing because of a poor supervisory alliance, fear of professional harm, and perceived supervisor incompetence. Correspondingly, when trainees chose to disclose negative reactions toward their supervisors, they reported greater dissatisfaction with supervision (Ladany et al., 1996; Moskowitz & Rupert, 1983). Thus, trainees seemed likely not to disclose counterproductive events in supervision and, if they did disclose, resolution of the counterproductive event seemed unlikely and could have possibly hindered trainee growth. Therefore, further research in this area seemed warranted.

The fourth purpose of our study was to examine the effect of counterproductive events on the therapeutic process and outcome. Supervision plays a primary role in psychotherapy trainees’ acquisition of skills and professional development (Binder, 1993), which implies that supervision ultimately influences trainees’ work with clients both during and beyond training. However, researchers know little about the counterproductive effect of negative supervision experiences on trainee development and work with clients. Research results on parallel processes in psychotherapy and supervision indicate that the two share a reciprocal relationship (Friedlander et al., 1989), which suggests that both positive and counterproductive supervisory experiences may influence the therapeutic process and client outcome. Supervision provides a forum for supervisors to model therapeutic skills for trainees to generalize to their work with clients. Perhaps trainees also learn counterproductive skills in supervision. Knowledge of these processes could be a useful resource for supervisors and training programs. For example, such awareness may facilitate the resolu-
tion of counterproductive supervision events and provide trainees a model for resolving therapeutic conflicts successfully.

In sum, the purpose of our study was to extend our understanding of trainees’ experience of counterproductive events in supervision through an in-depth qualitative examination. Particularly, we were interested in the nature and extent of counterproductive events and how they hindered trainee growth. Additionally, we wished to examine the influence of counterproductive events on the supervisory relationship and to examine how trainees and supervisors addressed and resolved counterproductive events in supervision. Furthermore, we wished to investigate the influence of counterproductive events on the therapeutic relationship and outcome.

Method

Participants

Thirteen trainees (12 White and 1 person of color; 10 women and 3 men), who ranged in age from 23 to 29 (M = 25.92, SD = 2.10) years, participated in this study. The participants were students in counseling psychology graduate programs. The trainees had received an average of 19.92 (SD = 17.04, range = 3–55) months of supervised counseling experience and had seen an average of 65.85 (SD = 81.81, range = 8–300) clients. Four of the trainees were master’s students and had experienced the counterproductive event during their first practicum. The rest of the trainees were at various stages of their doctoral career when the event occurred. Four were at their first doctoral practicum, three were at advanced doctoral placements, and two were at their predoctoral internship. Although not assessed in the demographic questionnaire, during the interviews, trainees revealed that eight of the counterproductive events occurred with program supervisors (three with advanced doctoral supervisors and five with faculty supervisors), and five occurred with training site supervisors. Nine trainees revealed during the interviews that their training placement was at a college counseling center, two disclosed that their placement was at an outpatient facility, one was at a site providing milieu treatment, and one did not disclose the training placement. At the time of the counterproductive event, the participants had been in individual supervision with their supervisors for an average of 14.38 (SD = 8.54) weeks and had received approximately 1.17 (SD = 0.69) hours of supervision weekly. We asked participants to rate their belief about the importance of counterproductive events in supervision as a construct to study as important (n = 4), or extremely important (n = 8). To assess their overall satisfaction with the supervision they had received, at the end of the interview we asked participants to rate their satisfaction with eight aspects of supervision with their supervisors as assessed by the Supervisory Satisfaction Questionnaire (SSQ; Ladany et al., 1996; Larsen, Atkinson, Hargreaves, & Nguyen, 1979). The participants’ total average SSQ score was moderate (M = 2.53, SD = 0.86), an indication that although they had experienced a counterproductive event in their supervisory relationship, on average, they were moderately satisfied with the type and quality of their supervision experience.

The 13 supervisors (8 persons of color and 5 White; 8 women and 5 men) identified by the participants in this study ranged in age from 28 to 65 (M = 38.69, SD = 9.10) years. Ten of the supervisors were counseling psychologists and three were clinical psychologists; nine had PhDs, one had a PsyD, and three were advanced doctoral students.

Researchers

The researchers for this study were two White counseling psychology faculty members and two White graduate students enrolled in a counseling psychology doctoral program (3 women and 1 man; age range = 24–35 years; counseling experience range = 2 months–13 years; supervisor experience range = 0–10 years). The two graduate students served as the interviewers, and all four researchers served as judges for the coding tasks.

To increase their awareness of any biases that may have influenced the data collection and analyses, the primary researchers documented and discussed their biases and expectations regarding the study’s potential findings prior to data collection. An additional researcher joined the research team after data collection and served as the auditor of the primary researchers’ coding tasks. All four team members’ biases and expectations were combined in the following summary. Three team members had experienced counterproductive supervision that ranged from benign to harmful. Two team members had experienced counterproductive supervision involving a power differential with a supervisor that did not meet their needs. Three team members expected that counterproductive supervision would occur in relationships that were noncollaborative and in relationships in which the supervisor was an authoritarian who emphasized power differentials. One team member believed that all of the trainees would feel harmed in some way by the counterproductive event and that they would disclose less in supervision as a result. Two team members expected that counterproductive events would involve countertransference. Three team members expected that a major factor of the counterproductive events would be a negative supervisory relationship. In sum, all team members had some experience with counterproductive supervision with a range of effects. They had varying expectations for the findings, and all expressed curiosity toward the topic of study.

Measures

Interview. After a literature review of critical incidents, positive and negative experiences, and good events in supervision (e.g., Ellis, 1991; Hutt, Scott, & King, 1983; Worthen & McNeill, 1996), we designed a semistructured interview on the basis of McCracken’s (1988) open-ended long interview format. We modified the interview questions after conducting two pilot interviews with counseling psychology trainees and divided them into the following categories: (a) the counterproductive event (description of the counterproductive event; thoughts, feelings, and behaviors in reaction to the event) and supervision content and behavior immediately before and after the event; (b) perception of supervisor experience before, during, and after the event; (c) desired supervisor response; (d) desired trainee response; (e) influence of event on supervisory relationship (did it recover and how?); (f) influence of event on trainee work in supervision (feelings, behavior, and approach); (g) event typical or atypical of supervisor; (h) when in relationship event occurred; (i) length of event; (j) influence on trainee thoughts and feelings as a counselor; (k) influence on clients; (l) parallel process; (m) cues of supervisor awareness of event; (n) affect on supervisor evaluation; (o) dreams related to event; (p) disclosure of event; (q) supervisor approach to supervision; (r) satisfaction questionnaire; (s) biographical information about participant trainees and supervisors; and (t) reactions to the research. The interviewers also used extensive and predetermined probes to clarify and elaborate on participants’ responses to the questions.

SSQ. The SSQ (Ladany et al., 1996; Larsen et al., 1979) is an eight-item self-report inventory in which supervisees rate their satisfaction with various aspects of supervision on a 4-point scale ranging from a low of 1 (quite dissatisfied) to a high of 4 (very satisfied). Scores range from 8 to 32, with higher scores indicating greater satisfaction. Example items include "To what extent has this supervision fit your needs?" and "How would you rate the quality of supervision you have received?" Originally derived from the Client Satisfaction Questionnaire (Larsen et al., 1979), researchers have related the SSQ to supervisee nondisclosure (Ladany et al., 1996). Previous researchers have found the internal consistency (alpha) of the SSQ to be .96 (Ladany et al., 1996) and .97 (Ladany, Lehrman-Waterman, Molinaro, & Wolgast, 1999).
Procedure

To answer the research questions under investigation, we used the consensual qualitative research methodology defined by Hill et al. (1997). Detailed below, consensual qualitative research entails conducting and transcribing qualitative interviews, coding the interview data into domains or themes, abstracting the core ideas within the domains, and conducting a cross analysis of the abstracted domains across participants. Research team members arrive at all coding decisions by consensus and audit the data throughout the data analysis.

Recruiting. We distributed 41 packets nationally to personal contacts, training directors, and counseling trainees at counseling psychology training programs and college counseling centers, who agreed to distribute the packets to predocotoral interns. A cover letter detailed the purpose of the study and asked participants to reflect on the previous year of supervisory experiences and recall the most significant counterproductive event they experienced in individual supervision. The letter informed the participants that their participation would entail an anonymous 30- to 45-min telephone interview during which an interviewer would ask them to describe this experience. We then asked the participants to complete a brief demographic questionnaire and, if they were willing to participate, to provide a first name or pseudonym, telephone number, and times when we could reach them for further contact. The participation packets contained a definition of a counterproductive supervision event and a list of all interview and SSQ questions that we would ask them during the interview so that they could review and consider their responses in advance. Potential participants returned the questionnaires to a student member of the research team in preaddressed, postage-paid envelopes.

Of the 41 packets distributed to potential participants, 16 counselor trainees responded, 15 trainees participated in the study, and we included 13 cases in the data analysis, resulting in a final retention rate of 32%. Of the 16 respondents, one participant was unreachable through the contact information provided, and we excluded two participants’ data from the analysis. We excluded one participant’s data because she reported her counterproductive event in group supervision rather than in individual supervision. We excluded the other participant’s data because she could not isolate a single counterproductive event; instead she reported that the content of supervision was counterproductive throughout the supervisory relationship.

Interviews. We assigned the participants to one of two interviewers, who were also two of the coauthors. For 2 weeks prior to data collection, a person experienced in qualitative interviewing trained the interviewers to reduce differences between them in their approach to the questions, participant responses, and probing participant responses to the questions. To ensure the consistency of data collection, the interviewers adhered to the semistructured interview format and used predetermined probes to clarify and elaborate on participants’ responses to the questions. Additionally, the interviewers regularly debriefed their interview experiences with each other.

Data analysis. Research assistants and the two interviewers transcribed the audiotapes verbatim, omitting any identifying information about the participants. The interviewers then checked the transcripts against the audiotapes of their respective interviews to verify the authenticity of the transcription.

Coding into domains. On the basis of the content of the interview questions, we developed an initial list of domains (i.e., topic areas). Next, we reviewed two transcripts independently and divided the contents that related to the same topic area into corresponding domains. Then, we came together again to compare our independent domain assignments and to come to a consensus on domain allocations. For example, we coded any information indicating whether the counterproductive event was typical or atypical of the supervisor’s approach to supervision in the domain typical or atypical of supervisor. During this process, we modified the domains to fit the data more accurately and divided the data into the following final domain categories: (a) the counterproductive event, (b) typical or atypical of supervisor, (c) supervisor indications of trainee awareness of event, (d) preferred supervisor response during event, (e) preferred trainee response during event, (f) emergence and length of event, (g) influence of event on the supervisory relationship, process, and outcome, (h) supervisory relationship in general and supervisor approach, (i) parallel process, (j) influence of event on client outcome, (k) disclosure of reaction to event to supervisor, (l) disclosure of event to another, (m) reactions to research, and (n) other thoughts and reactions. Rotating teams of two researchers coded the remaining transcripts by independently assigning each transcript into domains, then by coming together to discuss the domain assignment and achieve consensus on the final decisions.

Abstracting domains within core ideas. After dividing all transcripts into domains, we summarized the contents of each transcript’s domains into core ideas (i.e., summary statements) by rotating teams of two researchers. The purpose of the core ideas was to summarize the interview content concisely. For example, when asked how the counterproductive event influenced a participant’s work in supervision, a participant responded “Well, the supervision sessions after the event, during those 3 weeks, were very, they weren’t as in depth and they weren’t as relaxed as they were [before].” The corresponding abstracted core idea was “for 3 weeks after the counterproductive event, supervision wasn’t as in depth or relaxed as before.” We independently read and abstracted the core ideas from the transcribed and domainated data and then discussed the abstracted core ideas until reaching a consensus on the wording of each core idea. We developed a final consensus version containing the transcribed interview data and corresponding core ideas for each domain.

Auditing of domains and core ideas. Once the primary team had reached a consensus on dividing each transcript into domains and abstracting the core ideas, a team member audited the abstracted core ideas and corresponding interview data. The auditor’s job encompassed checking the raw data for correct assignment to domains and checking it for complete and accurate core idea summaries. Once finished, the auditor provided written feedback to the primary team, who then discussed the feedback and came to a consensus regarding changes to the domain and abstracted data.

Cross-analysis. The three primary researchers examined the domains of data across participants for the purpose of identifying patterns of responses within each domain. On the basis of the observed similarities in patterns, we created categories across all participants for each domain. For example, in the typical or atypical of supervisor domain, we divided the data into two categories: typical of supervisor’s poor approach to supervision and atypical of supervisor’s productive approach to supervision.

After assigning each domain’s core ideas to the appropriate category, the team checked the domainated transcripts and core ideas to determine whether they had accurately assigned all relevant data to categories. When we found additional information, we decided by a consensus whether to include the information into the abstracted core ideas and into the suitable cross-analysis category.

Results

Table 1 shows the frequency of cases for the categories and subcategories within domains. Using criteria developed by Hill et al. (1997), we described a category as general if applied to all 13 cases, typical if it applied to 7–12 cases, and variant if it applied to 3–6 cases. We did not include categories that applied to only 1–2 cases, except for the actual counterproductive event.
Table 1  
Summary of Categories From the Cross-Analysis of the 13 Cases of Counterproductive Events  

<table>
<thead>
<tr>
<th>Domain and category</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Linking event prior to the CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Negative experience prior to the CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Awareness of supervisory relationship problems</td>
<td>Variant</td>
</tr>
<tr>
<td>Immediate context of the CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Trainee looking for support/feedback/processing</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervision focused on client</td>
<td>Variant</td>
</tr>
<tr>
<td>Initial CPE</td>
<td>Typical</td>
</tr>
<tr>
<td>Supervisor dismissed trainee’s thoughts and feelings/ was unempathic</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor denied trainee request</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor misunderstood trainee</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor directed trainee to be different with clients</td>
<td>Variant</td>
</tr>
<tr>
<td>Ensuing counterproductive interaction</td>
<td>Variant</td>
</tr>
<tr>
<td>Trainee trying to be agreeable/trying not to be defensive</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor not listening/not responding to trainee</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor disputed/challenged trainee</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor pushed own agenda</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervision work stilted</td>
<td>Variant</td>
</tr>
<tr>
<td>End of counterproductive interaction</td>
<td>Variant</td>
</tr>
<tr>
<td>Eventually dissipated/smoothed out</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor and trainee picked up where they left off before CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Abruptly ended</td>
<td>Variant</td>
</tr>
<tr>
<td>CPE took up rest of session</td>
<td>Variant</td>
</tr>
<tr>
<td>Experience of trainee during CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Trainee negative thoughts during CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Negative thoughts about self</td>
<td>Variant</td>
</tr>
<tr>
<td>Negative thoughts about supervisor/relationship</td>
<td>Variant</td>
</tr>
<tr>
<td>General confusion</td>
<td>Variant</td>
</tr>
<tr>
<td>Trainee negative feelings during CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Frustrated/irritated/annoyed</td>
<td>Variant</td>
</tr>
<tr>
<td>Angry</td>
<td>Variant</td>
</tr>
<tr>
<td>Uncomfortable/unsafe/upset</td>
<td>Variant</td>
</tr>
<tr>
<td>Shocked/disbelief/confused</td>
<td>Variant</td>
</tr>
<tr>
<td>Undermined/invalidated/upset</td>
<td>Variant</td>
</tr>
<tr>
<td>Trainee behaviors during CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Quietly upset</td>
<td>Variant</td>
</tr>
<tr>
<td>Visibly upset</td>
<td>Variant</td>
</tr>
<tr>
<td>Defensive</td>
<td>Variant</td>
</tr>
<tr>
<td>Trainee perceptions of supervisor’s thoughts &amp; behaviors</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor preoccupied</td>
<td>Variant</td>
</tr>
<tr>
<td>Perceptions of trainee/trainee’s abilities</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor’s negative experience</td>
<td>Variant</td>
</tr>
<tr>
<td>Typical/atypical of supervisor</td>
<td>Variant</td>
</tr>
<tr>
<td>Typical of supervisor’s poor approach to supervision</td>
<td>Variant</td>
</tr>
<tr>
<td>Atypical of supervisor’s productive approach to supervision</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor indications of trainee awareness of CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor unaware during CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Supervisor aware after CPE</td>
<td>Variant</td>
</tr>
<tr>
<td>Preferred supervisor response</td>
<td>Variant</td>
</tr>
<tr>
<td>Acknowledge/recognize (empathize/validate/support)</td>
<td>Variant</td>
</tr>
<tr>
<td>Process/talk about (discuss/offer rationale/explain/ ask opinion)</td>
<td>Variant</td>
</tr>
<tr>
<td>Different supervisory intervention</td>
<td>Variant</td>
</tr>
<tr>
<td>Preferred trainee response</td>
<td>Variant</td>
</tr>
<tr>
<td>Addressed CPE in the moment (asserted/confronted)</td>
<td>Variant</td>
</tr>
<tr>
<td>Why trainee did not address CPE in the moment</td>
<td>Variant</td>
</tr>
<tr>
<td>Not something trainee felt she/he could do</td>
<td>Variant</td>
</tr>
</tbody>
</table>

Note. General categories applied to all 13 cases, typical categories applied to 7–12 cases, and variant categories applied to 3–6 cases. Categories that included fewer than 3 cases are not shown in this table, except for the initial counterproductive event, which includes all categories. CPE = counterproductive event.
tionally, because of the vast amount of data we collected, we describe only those categories and subcategories with richly descriptive data not captured in Table 1.

Initial Counterproductive Event

All 13 trainees identified initial counterproductive events, which were separated into four categories; one category was typical (eight cases) and the rest were variant (one to two cases). The category of supervisor dismissed trainee’s thoughts and feelings or was unempathic was typical. For example, one trainee experienced a counterproductive event when her supervisor began conceptualizing the client in a way in which the trainee did not agree, without having listened to what the trainee considered to be an adequate length of a therapy session. When the trainee tried to share her conceptualization of the client, her supervisor dismissed her perceptions in favor of the supervisor’s. A second counterproductive event involved a supervisor’s inappropriate self-disclosure. A trainee came to supervision prepared to discuss cases and review tapes, but the supervisor used the entire session to self-disclose and process a recent event that the supervisor had experienced. A third trainee thought her supervisor asked her a question suspiciously, suggesting to the beginning trainee that she should not have felt anxious but confident instead. Another trainee experienced a counterproductive event when the supervisor was unprepared for supervision and spent 10–15 min of the session searching for needed materials. A fifth trainee played a therapy tape for her supervisor and expressed feeling very positively about having increased her skills in a desired area, after which the supervisor told the trainee several places where she could have improved. Another counterproductive event occurred when a supervisor intervened with a difficult client and took over the case from the trainee without providing an explanation or follow-up information. A seventh counterproductive event occurred when a supervisor shut off a trainee’s therapy session tape and bluntly asked “Why are you showing this to me?” Finally, a trainee asked to discuss a client’s concerns about a dual therapeutic relationship, and the supervisor said that it was not a big deal and dismissed both the trainee’s and the client’s concerns.

The first variant category was supervisor denied a trainee request. For example, concerned about discussing confidential information with the office door open, one trainee asked that the door be shut, and the supervisor declined. Another trainee asked for more supportive feedback rather than just feedback about mistakes, and the supervisor declined to provide that kind of supervision. The second variant category was supervisor misunderstood trainee. One trainee experienced a counterproductive event when the supervisor misinterpreted the trainee’s nervousness and began to assess the trainee for psychiatric symptoms, “blowing off” the trainee’s attempt to confront the supervisor’s behavior. Another trainee experienced a counterproductive event when the supervisor misunderstood the trainee’s desire to discuss negative countertransference toward clients and suggested that the trainee may need to change fields. The last variant category was supervisor directed trainee to be different with client. For example, a supervisor directed a trainee to switch his theoretical approach to working with a client after a few months of treatment without an explanation.

Ensuing Counterproductive Interaction

Trainees generally identified an ensuing counterproductive interaction that followed the initial counterproductive event. We divided the counterproductive interactions into five variant categories. The first category was trainee trying to be agreeable or trying not to be defensive (e.g., a trainee accepted what the supervisor said and told the supervisor he would do what she said; a trainee affirmed what the supervisor had to say rather than “sticking up for myself,” which perpetuated the trainee’s problem of not being direct). The second category was supervisor not listening or not responding to trainee (e.g., a trainee tried to tell the supervisor that she did not believe the supervisor’s suggestions fit the client’s issues, to which the supervisor replied that she had been wrong in the past, but not too often, and that this was not one of those cases; when another trainee asked the supervisor why she should change the theoretical approach he had taken with her client, the supervisor seemed very rushed and stressed and wanted the trainee to leave; when one supervisor took over with the trainee’s client, he did not inform her of what was going on or invite her back into the sessions to understand how to intervene with the client, and he did not give her supervision about the client). The third category was supervisor disputed trainee or challenged trainee (e.g., a trainee tried to process her feelings about how she experienced a client, and her supervisor challenged her about whether she was conceptualizing the client correctly). The fourth category was supervisor pushed own agenda (e.g., a supervisor spent the entire supervision session processing the supervisor’s experience of an outreach intervention and asking the trainee’s advice). The final category was supervision work stilted (e.g., with the door open, a trainee did not talk about anything personal, and the session was very stilted).

Experience of Trainees During the Counterproductive Event

Trainees’ negative thoughts during the counterproductive event. Generally, trainees experienced negative thoughts during the counterproductive event. Trainees variably had negative thoughts about themselves (e.g., a trainee felt incompetent; another trainee thought that her work was “not valuable” and that she would “never measure up” to her supervisor’s expectations). In all cases, trainees had negative thoughts about their supervisor or the supervisory relationship (e.g., one trainee thought that the supervisor was dictating what the trainee needed to do and was pressuring the trainee into something she was not comfortable doing; a second trainee thought that she did not want to have her supervisor for the rest of the year; another trainee thought the supervisor was “threatening” her; a fourth trainee thought his supervisor was “a jerk”). A variant number of trainees experienced general confusion (e.g., a trainee felt like he was “in a bind,” and he had no idea what to do).

Trainees’ negative feelings during the counterproductive event. Trainees experienced multiple negative feelings during the counterproductive event, which were separated into six subcategories. All subcategories were variant, except the fourth, which was typical: (a) frustrated or annoyed (e.g., 1 year later a trainee still felt frustrated and was annoyed), (b) anger (e.g., the trainees reported feeling “very angry,” “pissed,” and “mad at him” [the supervisor] for not recognizing the supervisory power differen-
tial”), (c) anxious or nervous (e.g., the trainees felt “stressed,” “nervous,” “very flustered,” and “really anxious”), (d) uncomfortable, unsafe, or upset (e.g., the trainees felt “very unhappy,” “very uncomfortable,” “threatened,” “very unsafe,” and “very upset”), (e) shocked, disbelief, or confused (e.g., the trainees felt “shocked,” “confused,” and “a very sharp jolt”), (f) undermined, invalidated, or unsupported (e.g., the trainees felt “undermined” “invalidated,” “insulted,” “invalidated,” and “insignificant”).

Trainee behaviors during the counterproductive event. Behaviorally, trainees had three types of variant responses during the counterproductive event. Of those who were quietly upset, one just tried to calm down, listen to the supervisor, and breathe deeply. Others were visibly upset. Two trainees cried during the counterproductive event. Several trainees became defensive. One noted that she became more defensive and nervous throughout the event, which “made everything worse.”

Typical or Atypical of Supervisor

Trainees typically reported the counterproductive event as typical of their supervisors’ poor approach to supervision (e.g., one trainee noted the power differential was there before, which seemed to be an underlying theme of their relationship; another trainee noted that the supervisor was constantly disappointing her and that she had only one good memory of supervision). Variantly, trainees reported the counterproductive event as atypical of their supervisors’ productive approach to supervision (e.g., one trainee reported that it was the only time he “threw me for a loop”).

Preferred Supervisor Response

Typically, trainees wished their supervisors had acknowledged or recognized the counterproductive event (e.g., a trainee wished the supervisor had recognized that receiving positive feedback was important for the trainee). Trainees also typically wished their supervisors had processed or talked about the counterproductive event (e.g., one trainee felt her supervisor “had an agenda” and that if the supervisor had been more up-front and had given the trainee a reason for what was happening, the event would not have been so counterproductive). In addition, trainees typically wished their supervisors had used a different supervisory intervention (e.g., one trainee wished his supervisor would not have spent the entire session focusing on the supervisor’s issues but had focused on the trainee’s work instead; another trainee wished her supervisor had coached her message in words that did not make the trainee feel defensive).

Preferred Trainee Response

Trainees typically wished they had addressed the counterproductive event in the moment. For example, one trainee wished she “had more guts” to tell her supervisor that the goal the trainee was working on in supervision was something very difficult for her and that she needed more time to grow. The typical reason why trainees did not address the counterproductive event in the moment was they felt that it was not something they could do. For example, one trainee did not feel “safe enough” with her supervisor to make herself vulnerable by sharing her feelings, whereas another felt uncomfortable asserting herself. A few trainees would not have done anything differently. For example, one trainee thought that he had “done the right thing” by discussing an ethical issue with his supervisor.

Influence of Counterproductive Event on the Supervisory Relationship and Supervision Process and Outcome

Influence on relationship. Generally, the counterproductive events weakened the supervisory relationship. In a variant number of cases, the relationship weakened permanently. For example, one trainee felt like she had to be “more subservient,” which made her feel like she was not being “genuine or honest,” and she did not look forward to supervision. Another trainee said that no matter what she did it would not be “good enough” for her supervisor, leaving her feeling “very negatively” about supervision. A third trainee said that the event “destroyed the relationship” because she “didn’t feel safe,” and there was too little time for the relationship to recover. Two additional trainees reported that the relationship did not recover. One noted that she and her supervisor “just did not connect on any level” and that the counterproductive event was “really ignorant” and “was so disrespectful” that she “couldn’t let go of that.”

Although some supervisory relationships did not recover, after an initial weakening, the relationships typically began to recover. Several trainees noted that the recovery was gradual (e.g., one trainee noted that the alliance was “trucking down hill” but the supervisor’s acknowledgment that supervision probably was not going the way that the trainee wanted helped somewhat; another trainee reported that she collaborated more rather than “taking directives,” and so the relationship felt more equal; a third trainee developed “thicker skin”). A few trainees found that discussing the counterproductive event helped the alliance recover. For example, one trainee noted that the counterproductive event had a delayed positive effect on the relationship because when a similar event happened again 2 weeks later, she was so upset that she addressed both events with her supervisor and received the support and feedback that she needed.

Trainee changed approach to supervisor. Trainees generally changed their approach to their supervisors after the counterproductive event, which we divided into five subcategories. The first subcategory of deferred to supervisor, was appeased or agreeable was variant (e.g., a trainee began thinking about how he could facilitate the supervisor what the supervisor wanted to hear in the language the supervisor wanted to hear). The second subcategory of more on guard or hypervigilant was typical (e.g., a trainee was much more lightly in supervision). The third subcategory of nondisclosed feelings and thoughts, limited self-expression was typical (e.g., a trainee recalled censoring herself and giving her supervisor “watered down stuff”). The fourth subcategory of withdrawn was variant (e.g., a trainee became uninvested in supervision and became disengaged). The fifth subcategory of proactive was variant (e.g., a trainee began thinking how he could facilitate the process of getting better supervision).

Influence on trainee–counselor self-efficacy. The counterproductive events typically affected the trainees’ self-efficacy. Variantly, the effect was positive. For example, one trainee noted that she felt better about herself as a counselor because her supervisor lost much credit in her mind, making her feedback “meaningless” to her. Typically, the effect was negative. For example, one trainee
thought “I could not counsel anyone to save my own life.” Another trainee said that the counterproductive event “destroyed” many of her thoughts and feelings about herself as a counselor. A third trainee noted that the counterproductive event left her feeling like a “peon” who was not mature enough to make her own decisions.

Disclosure of reaction to counterproductive event to supervisor. Typically, trainees did not disclose their experience of the counterproductive event to their supervisors. In a variant number of cases, their reasons for nondisclosure were due to a poor supervisory relationship (e.g., a trainee was uncomfortable; a trainee was frustrated and annoyed; a trainee was afraid that the supervisor would misconceive the reason for the trainee’s disagreement; a trainee thought her supervisor would not accept what she had to say). A variant number of trainees addressed aspects of the counterproductive event with their supervisors indirectly. For example, one trainee, who experienced a counterproductive event when her supervisor invalidated her feelings of anxiety, later told her supervisor that she wanted to discuss her feelings more.

Variantly, trainees disclosed the counterproductive event to their supervisors and found aspects of their supervisors’ responses helpful. For example, one trainee found disclosing helpful because “nothing bad happened.” Another trainee found it helpful that her supervisor apologized and tried to clear up the misunderstanding. A few trainees also found aspects of their supervisors’ responses unhelpful. One trainee noted that when discussing the counterproductive event, he thought his supervisor treated him like “one more thing” that the supervisor had to do. Another trainee found it unhelpful that her supervisor did not apologize or validate her disappointment.

Resolution of counterproductive event. Typically, trainees did not address the counterproductive event in supervision, and the event remained unresolved. For example, one trainee reported that because she and her supervisor had to work together for the rest of the semester and because her supervisor was also a professor in her training program, she did not make a big issue of or address the counterproductive event.

In a variant number of cases, trainees and supervisors addressed and resolved the counterproductive event in supervision. For example, after speaking about the counterproductive event with her supervisor, one trainee got the support she needed and the relationship recovered. Half the trainees who addressed the counterproductive event with their supervisors reported positive resolutions, and the rest reported either mixed or negative resolutions. The one case in which the trainee addressed the counterproductive event in supervision, but the event remained unresolved, ended with the trainee changing supervisors.

Fostered professional development. Typically, trainees reported that the counterproductive event fostered their professional development. For example, two trainees noted that the counterproductive event helped them to recognize that there are multiple ways of approaching clients and that they can choose the approach that fits for them. Two trainees noted that they became more assertive in getting their needs met. The counterproductive event reinforced the importance of seeking supervision and making the supervisory relationship a priority for one trainee because the relationship recovered in a positive way. Another trainee began to trust his own instincts more than he trusted his supervisor, saying that the counterproductive event affected him by “pulling the net out from underneath me.” A final trainee reported that the counterproductive event made him think, “God, I have had so, so much supervision like this . . . supervision that doesn’t meet up to what I know supervision can be.”

Supervisory Relationship in General

Generally, trainees experienced elements of their supervisory relationship as negative (e.g., the supervisor was impatient, not empathic, and regularly late; the relationship felt uncomfortable, unbalanced, and lacked connection). However, trainees also typically experienced aspects of the supervisory relationship as positive (e.g., the supervisor was helpful, supportive, challenging, and assisted the trainee in developing skills).

Parallel Process

Trainees typically identified parallel processes, or similarities, between their interactions with clients and their interactions with supervisors. One trainee noted that she was “very leading” in counseling sessions with her client, just as her supervisor had led her. Another trainee noted that she focused more on content and less on affect in sessions with clients, and she was not validating her clients’ experiences and feelings, which was how the trainee experienced supervision. Another trainee noted that he was not learning and growing in supervision, which led to his client not experiencing growth in therapy.

Influence on Client Outcome

Variantly, trainees believed the counterproductive event had a positive affect on their clients by increasing the trainees’ awareness of therapy dynamics (e.g., the counterproductive event increased the trainees’ awareness of the potential harm of power differentials). However, trainees typically believed that the counterproductive event affected their clients negatively. The negative subcategory of changed style or approach was variant (e.g., the trainee noted that her supervisor was so direct, even abrasive, that it turned the trainee off from being direct with clients). The negative subcategory of limited ability to work with clients was variant (e.g., one trainee felt that her resentment and emotional reaction to the counterproductive event interfered with her ability to attend to her clients’ emotional needs).

Discussion

The results of this study indicate that trainees’ experiences of counterproductive events in supervision appear to share common themes and similar patterns of interaction. To provide a conceptual understanding of our results, we discuss and explain the findings within the context of a descriptive case example. The case that we discuss provides the most typical picture of the aftermath of the counterproductive events that we examined. In reviewing the case, we focus our discussion of salient aspects of the primary domains and categories and include illustrative examples from other cases as needed. In addition, we discuss theory, research, and practice related to supervision.

We highlight the case of “Mark,” a White man in his mid 20s, who received supervision from his on-site practicum supervisor, a White man in his mid 40s. The counterproductive event occurred midway through Mark’s year at his first practicum placement.
Unlike the typical case scenario in which the counterproductive events occurred during usual supervision activities and involved the supervisor being unempathic or dismissive of the trainee’s thoughts or feelings, Mark’s counterproductive event occurred at the beginning of the session and involved the supervisor directing him to take a different approach with a client. Mark had been working with a client for a few months using the theoretical orientation (i.e., experiential) emphasized by his training program—an orientation that he felt comfortable using and that he felt suited his client’s presenting problem. His on-site practicum supervisor told Mark that the approach he had taken with his client was wrong and directed Mark to change his treatment approach to the supervisor’s theoretical orientation (i.e., cognitive–behavioral).

As in all cases, a counterproductive interaction ensued. In Mark’s case, he did not feel that his supervisor listened to or responded to his concerns. When Mark asked why he should change what he thought to be an effective treatment approach, his supervisor said that he wanted Mark to “do something different.” Mark experienced his supervisor as rushed, and the session ended early. In general, there seemed to be no pattern to how the counterproductive events ended; some ended abruptly such as Mark’s experience, some eventually dissipated, and some lasted the entire session.

Mark identified an array of cognitive, affective, and behavioral reactions to the counterproductive event, most of them negative. Like all of the trainees, Mark had negative thoughts about his supervisor. He thought that his supervisor “was a jerk” and that he “did not like him” at that moment. Mark’s feelings of discomfort were typical of other trainees. Not knowing what to do, he became quiet and said little during the counterproductive event. Across all cases, trainees identified a range of responses from mild reactions, such as Mark’s, to feeling intense anger, feeling unsafe, and crying visibly.

The counterproductive event shocked Mark, and he thought that his supervisor’s behavior was atypical of the supervisor’s productive approach to supervision. However, trainees typically described the counterproductive event as typical of their supervisor’s poor approach to supervision. Similar to previous research findings (Moskowitz & Rupert, 1983), trainees typically wished their supervisors had used a different supervisory intervention and had talked about the counterproductive event with them. In Mark’s case, he wished his supervisor had offered a rationale for the change in orientation. Correspondingly, Mark wished that he had addressed the counterproductive event with his supervisor in the moment that it occurred, a typical wish of other trainees. However, Mark believed that even if he had addressed the counterproductive event in the moment that it occurred, the outcome probably would have been the same. This belief appears to be validated by previous research. Moskowitz and Rupert (1983) found that only 11% of trainees who addressed theoretical conflicts with their supervisors reported a positive outcome.

Across all cases, the trainees initially believed that their experience of the counterproductive event weakened the supervisory relationship. Although in just more than half the cases, the relationship eventually recovered. Mark’s relationship with his supervisor gradually recovered after he addressed the counterproductive event in supervision 3 weeks later. The weakened and then recovered supervisory relationships appear consistent with other supervision research. Supervisors reporting an initial weakening of the supervisory relationship due to supervisor countertransference typically experienced a strengthening of the alliance later, especially when discussing the countertransference with the trainee (Ladany, Constantine, Miller, Erickson, & Muse-Burke, 2000). These results, as well as the present findings, appear to fit a common supervisory process that Bordin (1983) described as the building and repair of the working alliance. Bordin (1983) asserted that ruptures in the supervisory alliance are a common occurrence and that the building and repairing of these ruptures lead to a strengthened supervisory working alliance. An interesting note is that of the trainees who discussed the counterproductive event in supervision, only those who processed with their supervisors how the counterproductive event affected the trainee and the supervisory relationship reported a positive resolution of the counterproductive event. Perhaps processing the counterproductive event aided the building and repair of these ruptured alliances. Although most trainees identified positive aspects of the supervisory relationship, in all cases trainees reported negative relationship characteristics. A possible explanation for this is that an inadequately repaired relationship rupture caused by the counterproductive event clouded the trainees’ perceptions of the supervisory relationship. An alternative explanation could be that counterproductive events occurred more frequently in negative supervisory relationships. Future research that examines how characteristics of negative supervisory relationships relate to trainees’ counterproductive experiences seems warranted. Additionally, a deeper understanding of the nature, resolution, and repair of ruptured supervisory alliances may clarify how trainees and supervisors contribute to such events.

The counterproductive events generally resulted in trainees changing their approach to their supervisors. Because of feeling forced to use a model of therapy that he did not like and did not feel skilled in applying, Mark became less relaxed in supervision. His decreased confidence in his ability as a therapist resulted in the supervisory relationship becoming more distant; Mark asked many questions and his supervisor responded by becoming more didactic. This distance seemed to influence the supervisory working alliance negatively and likely affected Mark in ways beyond his awareness. Earlier research findings indicate that trainees are less likely to be vulnerable (Hutt et al., 1983) and are less likely to disclose (Ladany et al., 1996) in supervision when the supervisory alliance is poor; however, a trainee’s lack of vulnerability and disclosure in supervision likely limits her or his ability to learn and grow from supervision. In their examination of good supervision events, Worthen and McNeill (1996) observed that if trainees did not experience a positive supervisory relationship, their anxiety likely remained elevated after a disturbing event, and they were not likely to be receptive to supervision and self-analysis. In Mark’s case, after the counterproductive event, he became less emotionally invested in supervision and found himself preparing topics for discussion in case his supervisor asked him questions. This distance and decreased investment likely contributed to Mark’s belief that he was not learning or growing in supervision.

The counterproductive events also appeared to have influenced the supervisory process. In Mark’s case, he deferred to his supervisor by conducting therapy from his supervisor’s theoretical perspective. He also found himself withdrawing from supervision and noted that supervision became “just a block of time I had [to] just
go to every week." Across all cases, trainees reported changing their approach to their supervisors after the counterproductive event, most commonly by disclosing less. Consistent with previous research findings (Hutt et al., 1983; Ladany et al., 1996; Yourman & Farber, 1996), trainees appeared to practice self-protection by censoring their disclosures, which led to avoidance rather than self-exploration (e.g., one trainee did not discuss her countertransference toward a client because she would be too exposed," and another trainee "glossed over" her cases protectively and withheld suspected clinical errors). Trainees’ reasons for censuring disclosures parallel findings by Ladany et al. (1996) who reported that 50% of the trainees they surveyed nondisclosed because of a poor supervisory alliance and 46% nondisclosed because of impression management. Trainees who do not process countertransference issues in supervision may unintentionally limit the quality of client care. For example, if a client resembles an irritating family member of the trainee, the trainee could be impatient or punishing with interventions. Additionally, nondisclosures of clinical errors may directly influence client care in that trainees may not learn from their mistakes and, thus, may continue to make clinical errors.

The second most common way trainees altered their approach to their supervisors was by becoming more on guard or hypervigilant. Mark became less relaxed in supervision after the counterproductive event, whereas other trainees trod much more lightly or became more attentive to nonverbal cues of the types of behaviors their supervisors wanted. The ways in which trainees altered their approach to supervision appeared to fit a theme of decreased openness and vulnerability. One assumes that trainees need to be open to self-examination and critique to learn and to grow in supervision; however, the findings reported here suggest that the counterproductive events diminished some trainees’ growth processes in supervision.

The counterproductive events seemed to have a mixed influence on supervisory outcomes. Typically, they negatively influenced trainees’ self-efficacy, at least initially. Mark lost confidence in his ability as a counselor, whereas other trainees doubted their judgement. However, in a few cases, trainees experienced an increase in self-efficacy, by becoming more proactive in supervision, by discounting their supervisor’s input, or by weighing their supervisor’s suggestions against their own perceptions. Although trainees typically feared a negative evaluation from their supervisors resulting from the counterproductive event, most believed the counterproductive event did not result in a negative supervisory evaluation. These findings raise questions as to what influences supervisors’ evaluations of trainees. Given that many supervisors in this study were unaware of the trainees’ counterproductive experience, perhaps they would have evaluated the trainees differently if they were aware. Correspondingly, because the counterproductive events described in this study were from the trainees’ perspective, perhaps the supervisors perceived other events negatively and evaluated the trainees on the basis of those experiences. Future research could address these questions by examining counterproductive events from the perspectives of both members of the supervisory dyad.

Consistent with previous research findings (Hutt et al., 1983; Ladany et al., 1996; Moskowitz & Rupert, 1983), the present results indicate that trainees typically did not disclose their experience of a counterproductive event to their supervisors. Most attributed their nondisclosure to a poor supervisory relationship. In just fewer than half of the cases, trainees and supervisors discussed the counterproductive event. Of these disclosures, only one supervisor initiated the discussion. Most trainees who disclosed the counterproductive event to their supervisors identified their supervisors’ willingness to discuss the event as helpful. However, several trainees found aspects of their disclosure unhelpful. This was the case for Mark, who initiated a discussion with his supervisor of how the change of therapeutic approach was not comfortable for him and was not working for his client, but they did not process how the event was counterproductive for Mark and the supervisory relationship. When Mark suggested a more productive way for him to gain experience with different therapeutic approaches, he said his supervisor “blew me off” by saying the suggestion was fine and abruptly ending the discussion soon after. Mark expressed irritation that his supervisor did not acknowledge the effect the counterproductive event had on him. As with Mark’s case, half of the trainees (n = 3) who discussed the counterproductive event with their supervisors did not process how the event influenced the trainee or the supervisory relationship. A possible explanation for this finding could be that the trainees were hesitant to give their supervisors negative feedback. Another explanation could be that the supervisors may not have been receptive to processing the trainees’ experience or the supervisory relationship. Similar to Mark’s experience, one trainee noted that when discussing the counterproductive event, his supervisor responded to the topic but not to him as a person. Perhaps supervisors are afraid of violating supervisory ethical guidelines by turning supervision into therapy. Ladany et al. (1999) examined supervisors’ adherence to supervisory ethical guidelines and found that supervisors violated the guideline of keeping supervision from becoming psychotherapy in only 5% of the cases. Although processing of the client-therapist relationship may be a useful therapeutic tool in counseling, processing of the supervisory relationship does not necessarily result in crossing the supervisory boundary into psychotherapy. Instead, processing of the supervisory relationship may serve many useful purposes. For example, relationship processing may facilitate an evaluation of the trainee’s goals or training needs, or may provide an opportunity for the supervisor to model a useful clinical skill for the trainee to adopt with clients. Given the present findings, a plausible explanation for nondisclosure is that the trainees did not perceive their supervisors to be receptive to hearing their disclosures of counterproductive supervision experiences.

An interesting finding that emerged from the data is that trainees found ways to justify the counterproductive event. Many trainees attributed partial blame for the counterproductive event to themselves, and several defended their supervisors. According to cognitive dissonance theory, perhaps the presence of trainee self-blame relates to the severity of counterproductive events. For example, the more damaging the counterproductive event, the more trainees may seek to justify the event’s occurrence to ease the cognitive dissonance caused by a respected authority behaving in a harmful way. Another explanation for trainee self-blame is that perhaps some trainees internalize blame more than some others do when negative events occur. Moreover, perhaps the trainees perceived the counterproductive events as inevitable occurrences in the context of an evaluative training relationship. Furthermore, perhaps the trainees who blamed themselves accurately assessed...
their contribution to the event’s occurrence and outcome. Future research examining trainee attributes may clarify these questions. As with most of the trainees we interviewed, Mark developed professionally from his counterproductive experience. The counterproductive event left him with a definite picture of the kind of professionally from his counterproductive experience. The coun-

terproductive event influenced the therapeutic process and outcome. Mark noted that his client did not experience any growth or movement in therapy during the 3 weeks after the counterproductive event, just as Mark did not experience any growth or movement in supervision during that time. Just more than half the trainees reported parallels between their experience of the counterproductive event in supervision and their work with clients. Some trainees described parallel processes from therapy to supervision. However, most trainees reported parallels in the reverse direction, in that they behaved toward their clients similarly to how their supervisors had behaved toward them. Correspondingly, trainees typically believed the counterproductive event negatively influenced their clients, either because of a change in their approach to treatment, as in Mark’s case, or because of their limited ability to work with clients. An important note is that trainees not only perceived themselves as paralleling their supervisors’ counterproductive behavior, but they also perceived the counterproductive events as negatively influencing their work with clients.

The overarching purpose of this study was to examine the nature and extent of trainees’ perceptions and experience of counterproductive events in supervision. Specifically, our first purpose was to examine what happens in supervision between trainees and supervisors when trainees’ experience counterproductive events. Consistent with previous research examining negative supervisory experiences (Hutt et al., 1983), the present findings suggest that the initial counterproductive events and the ensuing counterproductive interactions contributed to most of the trainees’ perceptions that their supervision needs were unmet. Similar to Rosenblatt and Mayer’s (1975) identification of an objectionable supervisory style that is unsupportive, the majority of counterproductive events described here involved a supervisor being dismissive or unempathic toward a trainee, behaviors that are typically considered countertherapeutic with clients. Liddle, Breunlin, Schwartz, and Constantine (1984) identified supervision as closely resembling therapy in goals, processes, and desired outcomes and, as such, suggested that supervisors intentionally use their therapy skills in supervision. Although counterproductive events may be inevitable in supervision and working through them may be a necessary component to the building of a strong working alliance, perhaps the unresolved events observed here were because of a lack of therapeutic skill. A plausible explanation may also include the trainees’ comfort level with receiving feedback and with self-disclosing. Finally, the timing of the counterproductive events may have contributed to their negative quality. For example, events that occurred before the development of a strong supervisory alliance may have hindered the relationship’s growth. Conversely, events that occurred at the end of the relationship may not have allowed the trainees and supervisors enough time to repair their alliance rupture.

The second purpose of this study was to examine the influence of counterproductive events on the supervisory relationship, process, and outcome. Typically, the counterproductive events influenced the supervisory process and outcome negatively. Not only did most of the trainees feel uncomfortable, unsafe, or upset in response to the counterproductive events, but they also deferred to the supervisors’ authority, became hypervigilant, nondisclosed, and withdrawn in supervision. To diminish the hindering influence of power differentials on the supervisory process, Robiner (1982) recommended that supervisors model mutual respect. To prevent potential harm to trainees resulting from inappropriate levels of trust, Bernard and Goodyear (1998) recommended that supervisors facilitate an atmosphere of mutual trust that allows trainees to feel safe. The trainees’ responses to the counterproductive events suggest a breakdown of these important supervisory components, although the cause for the breakdown is unclear. Not only is more information needed on how supervisor characteristics contribute to counterproductive events, but more information is also needed about trainee characteristics. Perhaps some trainees’ behaviors or personality styles contribute to the occurrence of their experience of counterproductive events.

The third purpose of this study was to examine trainee disclosure of counterproductive events further. Consistent with existing literature (LaDany et al., 1996; Moskowitz & Rupert, 1983), trainees typically did not disclose their experience to their supervisors, mostly because of a poor relationship. When they did disclose the event, trainees found their supervisors’ willingness to discuss the event as helpful. Additionally, the three trainees who reported a highly positive resolution of the event discussed not only how the event affected them but also how the event affected the supervisory relationship. Such findings suggest that a more interpersonally sensitive supervisory approach may facilitate the repair of ruptured alliances.

The fourth purpose of this study was to examine the influence of counterproductive events on the therapeutic process and outcome. Similarly to the supervisory process, trainees believed that the counterproductive events also influenced the therapeutic process negatively. Not only did trainees identify parallels between their counterproductive experience and their work with clients, but they also perceived the events as affecting their therapeutic approach and ability to work with clients. Such findings provide further support for investigations of how supervision affects the therapeutic process. What remains unknown from the present investigation is the actual effect of counterproductive supervision on clients’ treatment outcomes. Future research simultaneously examining supervisory and therapeutic interactions may begin to answer this question.

Limitations and Implications

Although the sample size of this study was consistent with recommended qualitative methodology (Hill et al., 1997; Lincoln & Guba, 1985), the small number of participants and the nature of qualitative research prevent generalization of the results to the general population of psychotherapy trainees. However, we welcome readers to identify within the descriptive nature of the data that which holds meaning for them and to transfer that meaning to
their past, present, and future experiences and practices (Lincoln & Guba, 1985). A second limitation is participant self-selection. Those who responded may have had a greater-than-average interest in or sensitivity to counterproductive supervision events than the general population. For example, the participants may have had a strong interest in the supervisory process and, as such, attended to and perceived their experiences differently than the typical trainee. Correspondingly, some participants may have chosen to participate as a forum for expressing grievances toward their supervisors, programs, or training sites. Third, the results need to be considered within the parameters set by the guiding research question. Specifically, we asked participants to identify their most significant counterproductive event in supervision over the past year. As such, a range of counterproductive events untouched by the present investigation is worthy of future examination. Fourth, although we attempted to address the influence of researcher bias on the data analysis, it is possible that our perceptions uniquely influenced aspects of the investigation, such as the formulation of the research questions, which may have subsequently influenced the type of data we collected.

The findings hold several implications for future examinations. First, in this investigation, we considered counterproductive events only from the perspective of trainees. Supervisors and clients may perceive the influence of counterproductive supervision events on the supervisory and therapeutic alliances differently than do trainees. Thus, future examinations of counterproductive events in supervision may uncover more descriptive data by examining the perspectives of supervisors, trainees, and clients simultaneously. Second, simultaneous examination of supervision and therapy processes could lead to a fuller understanding of parallel processes related to counterproductive events. Given the extent to which trainees perceived counterproductive events to influence clients negatively, future research examining parallel processes and client outcomes in counseling and supervision using independent observations would provide collaborative data that could aid assessment of the actual effect of counterproductive events on clients. Perhaps counterproductive supervision events influence the therapeutic process and outcome beyond trainees’ awareness. Third, a further area of study is the extent to which the supervisory relationship contributes to the frequency and resolution of counterproductive events. Perhaps trainees are more likely to experience events as counterproductive when the supervisory alliance is poor. Correspondingly, perhaps trainees no longer perceive positively resolved supervision events as counterproductive. Fourth, future research could examine the relationship between supervisor style and approach, trainee characteristics, and counterproductive events. Research indicates that trainee satisfaction relates to supervisory processes and outcome as well as the therapeutic processes. Counterproductive events in supervision may provide valuable information for psychotherapy training programs. Perhaps an awareness that counterproductive events may be inherent to supervision and that working through them can facilitate growth could lead both trainees and supervisors to discuss them more freely in supervision.

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- For the Journal of Educational Psychology, submit manuscripts to Karen R. Harris, EdD, Department of Special Education, Benjamin Building, University of Maryland, College Park, MD 20742.

- For the Journal of Consulting and Clinical Psychology, submit manuscripts to Lizette Peterson, PhD, Department of Psychological Sciences, 210 McAlester Hall, University of Missouri—Columbia, Columbia, MO 65211.

- For the Journal of Personality and Social Psychology: Interpersonal Relations and Group Processes, submit manuscripts to John F. Dovidio, PhD, Department of Psychology, Colgate University, Hamilton, NY 13346.

- For Psychological Bulletin, submit manuscripts to Harris M. Cooper, PhD, Department of Psychological Sciences, 210 McAlester Hall, University of Missouri—Columbia, Columbia, MO 65211.

Manuscript submission patterns make the precise date of completion of the 2002 volumes uncertain. Current editors, Kevin R. Murphy, PhD, Michael Pressley, PhD, Philip C. Kendall, PhD, Chester A. Insko, PhD, and Nancy Eisenberg, PhD, respectively, will receive and consider manuscripts through December 31, 2001. Should 2002 volumes be completed before that date, manuscripts will be redirected to the new editors for consideration in 2003 volumes.