IPS SUPERVISION AS RELATIONALLY RESPONSIVE PRACTICE

Jeff Chang and Joaquin Gaete

Clinical supervision has historically been conceptualized in top-down terms that, in our view, underemphasize the interpersonal space between the supervisor and the supervisee (Bernard, 1997; Morgan & Sorenkle, 2007; Noren, Magnuson, Wilcoxon, & Arbel, 2006; Stoltenberg & McNeill, 2010; Watkins, 1997). With rare exceptions (Arthur & Collins, 2008; Chang, 2013a; Holloway, 1995; Winslade, 2003), the relational, institutional, and cultural contexts of supervision have been largely overlooked. In this chapter, we explore the potential of conceptualizing clinical supervision as a relationally responsive practice by reinterpreting extant ideas in supervision in terms of interpersonal Patterns (IPs).

Typically, supervisors are more experienced than supervisees, have the institutional responsibility to assure quality services to clients, and must evaluate supervisees and make decisions that can significantly affect their careers (Bernard & Goodyear, 2013). These institutional purposes create a power differential. In our view, a relationally responsive approach to clinical supervision can minimize, but not erase, power and hierarchy in supervision. This chapter comes out of our relationship, which has evolved from supervision to co-vision (Rombach, 2000). I (Jeff) have supervised students and licensure interns in agencies and private practice for 25 years. I also serve as the training coordinator of a graduate counselling education program. Recently, I have described my approach to supervision (Chang, 2013a, 2013b) and was fortunate enough to supervise Joaquin for an 8-month doctoral practicum in counselling psychology at the Calgary Family Therapy Centre (CFTC).

I (Joaquin), in turn, was fortunate to have Jeff as my clinical supervisor. Since then, I have been conducting research on supervision at the CFTC toward my doctoral degree in counselling psychology at the University of Calgary. Taking a relational view of supervision, I am examining how supervisees’ professional development is jointly recognized and brought
forth in supervision conversations. The conversations we have had co-authoring this chapter have helped us to thicken our respective views of clinical supervision.

In this chapter, we first describe some historical conceptualizations of clinical supervision. Then, we describe some aspects of a relationally responsive approach to supervision with some examples of how supervisors and supervisees might initiate and maintain stable interpersonal patterns that are generative.

**Historical Conceptualizations of Supervision**

Earlier in this volume (see Chapters 1 and 3), we described the figure that can alternatively be seen as two faces facing each other or as a chalice. Our emphasis on IPS invites us to conceptualize supervision as an interpersonal process—what goes on between people. Conversely, we think the bulk of the current supervision literature focuses on one of the two faces—usually the supervisee’s. We are much more interested in the chalice (the interpersonal space). Before we unpack our IPScope-informed approach to supervision, we will briefly review how existing approaches to supervision have largely overlooked the interpersonal space between supervisors and supervisees.

**Psychotherapy-Based Approaches**

Approaches to supervision solely based on theories of psychotherapy represent a bygone era. Referring to the state of supervision almost 20 years ago, Watkins (1995) stated, "Psychotherapy-based models of supervision have generally shown...stability over the last 25-30 years, with...limited changes or revision" (p. 570). With rare exceptions (e.g., Winters, 2003), psychotherapy-based approaches underemphasize the relational and contextual influences in supervision (Bernard & Goodyear, 2013; Falender & Shafranske, 2004; Holloway, 1995; Watkins, 1995).

**Developmental Stage Models**

Proponents of developmental stages models suggest that supervision should be delivered in accordance with supervisees' level of development (e.g., Stoltenberg & McNeill, 2010). Counsellor development is seen as a linear process of predictable, universal, and qualitatively different stages (Chagrin & Rossell, 1995), which explain how the interpersonal space between supervisors and supervisees unfolds. For instance, Stoltenberg and McNeill (2010) state "Level 1" supervisees are typically anxious and focused on themselves; "Level 2" supervisees can focus more on the

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**IPS Supervision as Responsive Practice**

client and less on themselves and implement basic skills; and "Level 3" supervisees can exhibit empathy for the client, engage in metacognition about their therapeutic work, and apply their knowledge "in the moment." Here, the developmental stage of the supervisee, as assessed by the supervisor, drives the supervisor’s relational responses neglecting contextual influences. Thus, despite the intuitive appeal of this approach, the interpersonal space between the supervisor and the supervisee—the chalice—is underemphasized.

**Social Role-Based Models**

Bernard’s Discrimination model (Bernard, 1997) is a prominent example of a social role approach to supervision. It combines the supervisor’s roles as teacher (instructing, modeling, or providing feedback to a supervisee), counsellor (inviting supervisees to reflect on their thoughts, emotions, or actions), and consultant (acting as a resource) to focus on intervention skills (observable supervisee behaviors), conceptualization skills (making sense of client presentation, treatment planning, and intervention design), and personalization skills (warmth, ability to engage clients, and non-defensiveness).

Conceptualizing clinical supervision as the purposeful use of specific roles can assist supervisors to manage the complexity of supervision but portrays supervision as the supervisor intervening upon the supervisee. As Garte and Ness (2012) suggested, proponents of social role models treat supervisors' moment-by-moment "positionings" (e.g., monitoring, consulting, teaching) as predetermined roles they are supposed to act out, ignoring how positionings are responsive to supervisees and to actual supervisory situations.

**Common Factors and the Supervisory Alliance**

Morgan and Sprenkle (2007) have distinguished factors common to effective supervision. Like common factors in therapy (e.g., Wampold & Budge, 2012), the supervisory alliance is assumed to contribute to effective supervision, regardless of theoretical orientation (Ladany, Lehman-Watson, Molinaro, & Wolgast, 1999; Patron & Kivlighan, 1997). However, this approach tends to reify the supervisory relationship as monolithic instead of attending to how it presents moment-by-moment during supervision.

**Competency Profiles**

In keeping with the North American trend toward outcome-and competency-based education (Hoge, Huey, & O’Connell, 2004), professional associations have developed competency profiles in psychology (Canadian Psychological Association, 2004; Rodolfa et al., 2013), marriage and
family therapy (Nelson et al., 2007), and counselling (Council for the Accreditation of Counseling and Related Educational Programs, 2009; Task Group for Counsellor Regulation in British Columbia, 2007), which specify desired outcomes of training. While potentially helpful in managing the "whats" or "outcomes" of supervision (i.e., supervisees' performances compared to a competency profile), competency profiles tend to overlook the "hows" or process of supervision. In our view, competency profiles offer little to help us understand how interpersonal dynamics between supervisors and supervisees hinder or facilitate supervisees' competence. In fact, to the extent that competency profiles invite supervisors to approach supervision outcomes as disconnected from process (e.g., supervision Transforming Interpersonal Patterns, TIPs), they may interfere with supervision.

**A Relational Approach to Supervision**

We were captivated by a series of studies by Magnuson, Wilcoxson, and Noreen (Magnuson, Wilcoxson, & Noreen, 2006; Noreen et al., 2006; Wilcoxson, Noreen, & Magnuson, 2003) describing "lousy" and "stellar" supervision outcomes. It is rare for us to describe supervision in such extreme terms; in our experience, most supervision pairings function somewhere in between. However, our reaction to the starkness of the lousy-stellar distinction is to wonder what is going on between supervisor and supervisee rather than just describing lousy or stellar supervisory outcomes in terms of particular behaviors on the part of either the supervisor or supervisee. The IPScope provides a way to focus on interpersonal patterns—the chalice—rather than intrapersonal characteristics or decontextualized behaviors. We believe supervision is a very complex professional activity, with multiple aspects that the IPScope was not designed to consider.1 We appreciate the IPScope as a framework for supervision, as it helps us to bring forth some interconnected features of supervision that we value. In particular, we value that by looking through the IPScope, we can render supervision as a relational, responsive, participative, reflexive, and transformational practice.

**Coupled Invitations**

By conceptualizing supervision in terms of IPSs, we can see a series of familiar practices inviting or anticipating other familiar practices. For instance, a supervisee engaged in defending might be better understood as a response to a supervisor engaged in criticizing (i.e., a Pathologizing Interpersonal Pattern, PIP). Alternatively, a supervisee engaged in enacting professionally valued competencies might be better understood as responding to a supervisor selectively noticing such enactments (i.e., a Wellness Interpersonal Pattern, WIP). We believe that by conceptualizing supervision as coupled invitations (i.e., IPSs) we can actualize more fully a core claim made by proponents of the previous supervision models. An IPScope framework helps us to acknowledge not only that the supervisory relationship is probably the most relevant factor influencing supervision outcome but also how the relationship might be specifically facilitating or hindering supervisees' learnings.

At its heart, clinical supervision is a relational practice. We believe there is a temptation of power (Amundson, Stewart, & Valentine, 1993)—a temptation for supervisors to get supervisees to "see things their way," placing canonical ideas, rather than relationships, in the central position. As I (Jeff) reflect on my early supervision efforts, I acknowledge that, as a well-practiced and enthusiastic, solution-focused therapist, I was interested in getting supervisees to think and practice as I did and became frustrated when they did not seem to "get it." I thought supervision was a "one size fits all" endeavor. I did not bother to inquire about what a supervisee already knew, how he/she preferred to work, or his/her particular interests or goals.

Probably, my "lousy" practice invited supervisees to feel ignored, and to share with me neither their interests nor their perceived strengths/challenges. We think that: by using the IPScope, we can conceptualize this type of supervisee experience as a "relational chalice," opening potential for more generative pathways. We could describe such a supervisee experience as a Deteriorating Interpersonal Pattern (DIP, shown on the left of Figure 9.1), which if not interrupted could develop into a stable PIP (on the right of Figure 9.1).

Using the IPScope as an interpretive framework, we believe a more productive pattern could be initiated with a TIP, which could stabilize into a WIP, as shown in Figure 9.2.

In my (Jeff) role as training coordinator for a graduate counsellor education program, I recently encountered a more problematic example.

<table>
<thead>
<tr>
<th>DIP</th>
<th>PIP</th>
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<tbody>
<tr>
<td>Ignoring or neglecting to ask about</td>
<td>Maintaining inappropriate expectations;</td>
</tr>
<tr>
<td>entering competencies</td>
<td>perceiving supervisee as incompetent</td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Avoiding disclosure of competencies,</td>
<td>Hiding/withholding lack of skill and</td>
</tr>
<tr>
<td>or lack thereof</td>
<td>performing poorly</td>
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Figure 9.1 Describing supervisee's experience as an interpersonal response.
Inviting Reflection

Researchers of counsellors' professional development (Carroll, 2009, 2010; Jennings, Goh, Skovholt, Hanson, & Banerjee-Stevens, 2003; Jennings & Skovholt, 1999; Ormiansky & Ronnestad, 2003; Skovholt & Ronnestad, 1992) suggest that supervisors can best facilitate supervisees' professional development by fostering reflection. Starting from the maxim that supervisees know more than they can tell, some authors have developed strategies for supervisors to invite supervisees to reflect on their own practices (Carroll, 2009, 2010; Neufeldt, 2007; Orchowski, Evangelista, & Probst, 2010). In alignment with these endeavors, we see the IPScope framework as an invitation for supervisors and supervisees to engage in inner and outer dialogue fostering reflexive (Andersen, 1991) and reflective practice (Schön, 1983). Striving to conceptualize supervisory interactions through the IPScope does not provide certainty but provides a useful heuristic for supervisory dialogue, conceptualizing, and learning from the moment-by-moment interaction in supervisory conversations.

At times, I (Jeff) have noticed myself becoming impatient with a supervisee as I observed from behind the mirror. Perhaps the supervisee permitted family members to be dismissive of one another in what I considered a destructive way, or missed openings to inquire about potential TIPs that I noticed, or I may have noticed the supervisee regress and have difficulty with a situation that I had seen him/her previously manage well. This might be punctuated this way (see Figure 9.3, left) but, if permitted to deteriorate, could stabilize into a PIP something like the one on the right (see Figure 9.8).

We believe that one of the most relevant benefits supervisory dyads can get from participating in supervisory TIPs is reflective dialogue. First, we suggest that supervisors and supervisees engage in outer dialogue or

<table>
<thead>
<tr>
<th>DIP</th>
<th>PIP</th>
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<tr>
<td><img src="image" alt="Showing frustration with supervisee's counseling skills" /></td>
<td><img src="image" alt="Judging supervisee as incompetent" /></td>
</tr>
<tr>
<td><img src="image" alt="Performing with hesitance" /></td>
<td><img src="image" alt="Defending one's efforts and conceding concerns or errors" /></td>
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</tbody>
</table>

Figure 9.3 A possible DIP slipping into a PIP

As we suggested previously, from an IPScope-informed approach we can, as supervisors, position ourselves as active participants, even in our seemingly most neutral judgments. We believe that from this participatory stance we can further reflect, within ourselves (i.e., inner dialogue) and with supervisees and colleagues (i.e., outer dialogue) about our participation. In our inner dialogues, the IPScope may help us, as supervisors, in noticing our noticing, reflecting on our thinking, and if we feel frustrated (e.g., behind the mirror), articulating our bodily responses/emotions as we observe supervisees.

Additionally, we believe supervisors' internalized TIPs in their inner dialogues may be fruitfully interconnected with outer dialogue with supervisees (Andersen, 1991). Imagine an (outer) post-session supervision dialogue, following a supervisor's attempt to initiate a TIP: “I noticed what the husband said about his wife—would you see that as a type of blaming or did you see it differently? How comfortable do you feel with how you responded? If you could go back to that situation, how would you like to have responded differently?” I (Joaquin) believe this TIPish path is similar to one of the supervisory conversations I witnessed as a researcher at the CFTC. The supervisee had shared she wanted to be more “in the position of a facilitator” rather than teaching people strategies to solve “family problems.” The supervisor noticed the supervisee asked clients questions starting with “Have you tried . . . ?” which was usually construed as making suggestions. In the supervision session, the supervisor invited the supervisee to reflect:

**Supervisor:** (nods) OK, so like the other day with the other couple? You know, I forgot what you asked them, but you said, "Well, have you tried?"

**Supervisor:** Mm hm.

**Supervisor:** "Have you tried?" So, do you see that more as facilitating? Or . . .

We believe this type of supervision conversation could be framed as enacting the following TIP (see Figure 9.9, left), leading to potential WIPs (see Figure 9.9, center and right).
A practicum student and his supervisor developed a conflictual relationship in which I was asked to intervene. I asked the student and the supervisor for a written list of the changes needed to create a context for the student to succeed. Among other things, the supervisor wrote, "Robert (pseudonym) must stop fighting with me about whether narrative therapy is appropriate for certain problems." All the supervisor's comments reflected that she had punctuated the issue individually—as the student's shortcoming in not honoring her expertise or authority. Thus, two possible ways to conceptualize this situation in terms of TIPs are shown in Figure 9.3.

In this situation, had I been asked to consult with the supervisor, I might have asked questions to invite her to reflect on how TIPs, supported by individualistic thinking, enabled the conflict (i.e., a deconstructive TIP; see Chapter 5). Alternatively, I could have attempted a constructive TIP by asking the supervisor to simply notice what was occurring when the supervisee "did not fight as much" or was less defensive. The reader might see this as a solution-focused question. Whatever the origin, the question invites the supervisor to notice possible WIPs. If the supervisor noticed she was contributing to these WIPs, I would invite her to reflect upon the benefits of continuing in this direction. The supervisor could ask questions about the supervisee's theoretical ideas. These attempts to initiate TIPs have the potential to be useful if asked out of genuine curiosity, not to cross-examine the supervisee or colonize the supervisee to the supervisor's way of thinking. I might have suggested that the supervisor explore options for re-engaging with the student with TIPish questions:

- What is it that is so appealing to you about narrative ideas?
- What other ways of handling X do you know?
- How are these ways similar or different to a narrative approach?
- If these approaches could be seen as complementary, in what ways could you make sense of this?
- What kinds of difficulties do you find when handling X?
- Would you be willing to explore other ways to handle X?
- What is it about narrative ideas that tell you that they are not robust enough to handle difficult problems like X?
- How does narrative therapy help you to orient yourself with families who are in a great deal of distress?

As we illustrate next, we think asking these types of questions might have been helpful to invite the emergence of TIPs between the supervisor and the supervisee, focused on the issue of theoretical exploration and development, possibly enabling the emergence of a Healing Interpersonal Pattern (HIP, an "antidote" to the PIP), and perhaps even propelling the supervisory relationship more broadly into a WIP (see Figure 9.4).

### Responsiveness

By using the IPscope as a framework for supervision practice, supervisors do not act out any particular decontextualized predefined practices, fixed roles, stage-relative interventions, or even relational patterns. Supervisors using the IPscope acknowledge that what they do with supervisees depends on what a particular supervisory situation "calls for" (cf. Short, 2014). Thus, IPscope-informed supervision does not involve following a pre-established recipe for developing and delivering certain ingredients, traits, skills, roles, or behaviors to accomplish certain supervision outcomes (cf. Stiles, Honos-Webb, & Surko, 1998). Rather, in an IPscope-informed approach, supervisors respond to supervisees in the moment, based on the situation.

### Surprising directions

In my (Jeff) first meeting with a new supervisee, I usually ask about what theories and models guide his/her work, how he/she has been supervised in the past, and what he/she would like to learn. Sarah (pseudonym) surprised me by explaining with great energy...
and many tears that this was the first full day she had spent apart from her 11-month-old son, inviting her to doubt whether she ought to be doing this practicum, or doctoral studies at all. Working to be responsive, I shared how my stepdaughter was experiencing a similar dilemma. Throughout the 8-month practicum, I tried to position myself as a catalyst and professional mentor (Chang, 2013a) to acknowledge Sarah’s concern about not spending as much time with her son as she would have preferred, and clarify her motivation for doing a PhD. In our initial meeting, we initiated a TIP (see Figure 9.5, left), which led to a stable WIP (see Figure 9.5, right).

Convergent conversations. In my (Joaquin) research on supervision at the CFTC, I have also focused on supervisory dyads’ situational responsiveness. In doing so, I have noticed how supervisory dyads develop their own idiosyncratic language to identify and track the particular challenges of a given supervisee’s professional development. The dyads may start by describing supervision goals or tasks in a general way. However, as they customize the supervision relationship to their unique situation, they jointly develop a common language to monitor and reflect upon recurrent issues.

For instance, one dyad developed the capacity to recognize that the supervisee struggled when clients shared strong emotions. In discussing these struggles, she shared feeling uncomfortable and fretting about not knowing where to go next. Together, supervisor and supervisee started to refer to the supervisee’s task in a particular, jointly acceptable way, which they called “staying there.” In jointly monitoring and reflecting on “staying there,” they noticed more ways to recognize when “it” (the supervisee’s discomfort with strong client emotion) was present. When discussing clients, the supervisee started referring to “it” nonverbally. She would simply make a facial gesture, which her supervisor recognized and responded to. Sometimes the supervisor responded simply by gently smiling, showing that she understood the supervisee’s challenge. At other times, the supervisor responded by spontaneously asking TIPish questions, which invited the supervisee to explore the issue (e.g., “So when that happened, what did you notice?”) or comments (e.g., “Oh really! So you did something different this time!”).

Participation

By conceptualizing supervision with the IPScope, we assume supervisors and supervisees are jointly involved in forming their perceptions and judgments about supervision. What supervisors and supervisees notice is not neutral but a function of the distinctions they select and enact. Supervisors’ and supervisees’ observations are shaped by their expectations, interests, and theoretical and interpretive frameworks (the IPScope included). Conceptualizing supervision as a relational recursive process invites both supervisors and supervisees into a stance of participation. As participants, supervisors and supervisees can never step out of their histories, trainings, and particular circumstances to make objective judgments—think of the previous supervisor stating, “Robert is fighting with me.”

Imagine a situation in which Josefina, a supervisor, judges that Lana, her supervisee, has important theoretical gaps in understanding her clients. Accordingly, I need to instruct her on her theoretical development.” Far from being a detached, objective judge, we believe Josefina is actively
participating in what she observes, judges, and reports. If Josefina sees her job as delivering content or “training” to Lana, this may already create a context to view Lana as deficient in how she conceptualizes her clients’ situations. Without noticing it, Josefina might be inviting Lana into a PIP (e.g., prescribing how to act as a therapist coupled with feeling dismissed and inadequate). Participating as a more appreciative type of observer, Josefina could initiate constructive TIPs (see Chapter 3), to bring forth areas of potential growth for Lana. Josefina could ask the following questions:

- How would you make sense of [client’s] situation?
- Would you agree it has been challenging for you to make sense of [client’s] situation?
- Do you have any ideas about how you may get better at . . .?
- Would you be open to discuss some theoretical ideas that might be helpful?

In the long run, and informed by co-developed learning goals, Josefina and Lana could participate in a WIP such as noticing enactments of a particular goal for development coupled with strengthening skills related to that particular goal.

In a similar vein, Wilcoxon et al. (2005) described how some supervisors view supervisees considered deficient in therapeutic skills and theoretical fluency: “Either [supervisees] come in with pretty good innate, mechanical skills or they don’t” (p. 44). By emphasizing a supervisee’s shortcomings, a supervisor might inadvertently initiate a less than optimal relational context. We would see such participation as inviting a possible DIP shown on the left in Figure 9.6. If the supervisor persists in focusing on the supervisee’s deficits without distinguishing potential positive developments, the supervisee would be gradually less inclined to take up the supervisor’s suggestions. This might be interpreted by the supervisor as “lack of motivation,” or perhaps as the student actively “resisting.” This could stabilize into a PIP, as shown on the right in Figure 9.6.

On the other hand, because participants’ observations are not neutral, we choose to orient to supervisees’ skills and competencies. We must keep supervisees’ needs for development (both what they wish to learn and their disciplinary requirements) in mind. And because supervisors are gatekeepers to our professions, we are required to identify and help remediate areas in which a supervisee’s performance does not meet institutionally-produced requirements for competence. Our preferred way to operate is to hold essential professional competencies in mind, while intentionally noticing skills and competencies that can be utilized as a foundation for further development (see Figure 9.7).

When a supervisee’s performance falls below institutionally defined standards, the supervisor is responsible to deliver feedback to remediate the supervisee’s performance. Our preferred ethical posture (Tomm, 2010) is empowerment, which would be characterized primarily by asking reflexive questions from a posture of mutual reflection. However, in cases where we judge the supervisee’s performance as inadequate in relation to institutionally defined standards, we may take a different ethical posture. We may move to a more strategic posture, or even to direct confrontation. In any case, that would speak more about our own incapacity as supervisors to take our preferred ethical posture (i.e., an empowerment posture that resulted in TIPish interactions). We believe part of our role as supervisors is to reflect on our thinking and actions, acknowledging that sometimes our preferred ways of working may not match with what we judge the situation requires from us professionally and ethically. Using alternative ethical postures as a framework for decision-making supports supervisors to be intentional, responsive, and ethical in their relational positioning.
it is also shaped by the future anticipated by the supervisee and supervisor. Through time, a “spirit” of coevision (Rombach, 2000) develops, so to speak. Supervisors can open space to bring the future into the present and facilitate a process of dialectic contradiction (Taylor, 1973), a contradiction between “what the [relationship] concerned is aiming at or is meant to be, on one hand, and what it effectively is on the other” (p. 130). We invite supervisors to use their power to minimize their power, opening space for the supervisory relationship to evolve, into a relationship of equals—“coevision,” as opposed to “super-vision.” Here, we would like to share how some seeds of coevision grew in our supervisory relationship.

A Dialogue: From Supervision to Cevion

**Jeff:** Do you remember a seed of coevision that you would like to share in this chapter?

**Joaquin:** The first one that pops up is that I remember, at the beginning of my practicum, wanting to divorce from my “strategic self” as a therapist. I think I was expecting you to help me with that from the beginning.

**Jeff:** I actually remember you talked about that in our very first meeting. I asked about what you were expecting and anticipating from this practicum.

**Joaquin:** Yes. So I thought you would join me by taking the same negative attitude toward being strategic—which you didn’t! (Smiles). I’d say it wasn’t just that you were respectful of that strategic way of being, but you were pretty appreciative about that. I think this might be an example of coevision, not because you took exactly my view, but because I learned from your more appreciative view to be more appreciative myself with all that practical knowledge that I had.

**Jeff:** Well that’s interesting, because I actually think that I was intending that (laughs). I normally try to do that—try to meet students where they are at; use what they already know ... I wonder though if we got “PIPsh” at some point about that, like, if it was frustrating for you, or if you thought things like, “What’s with this guy insisting on me about being strategic?” or ...

**Joaquin:** Well, at the beginning it felt a bit like that. Maybe we did get DIPsh at some point, but I think we didn’t go all the way to a more stabilized PIP. At the very beginning, and because I noticed you noticed my strategic stuff in session with clients, I remember wondering if I was going to be put in a box, like “You are the strategic guy,” but it didn’t get to the point of being frustrating (see Figure 9.10).

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**Figure 9.9** Conceptualizing empowering supervisory conversations

**Transformational and Wellness Potential**

Conceptualizing supervisory interactions through the IPscope provides a useful heuristic for supervision that is more focused on moment-by-moment supervisory interactions than “set piece” supervisory interventions. We hope that, by attending to the TIPsh and WIPsh possibilities presented previously, the reader can already envision the transformational and wellness potential that an IPscope-informed supervision practice invites. We believe the IPscope can help supervisors and supervisees engage and develop preferable relationship patterns (i.e., TIPs and WIPs) that help accomplish the goals of supervision. We conceptualize “stellar supervision” residing in the relationship—the capacity of supervisors and supervisees together to create TIPs and WIPs, forming a sustainable context for the supervisee to develop professionally.

We think supervisors have the main (but not only) responsibility and power to create stellar supervision. As we mentioned earlier, we believe the institutional contexts in which supervision is typically embedded structures the supervision relationship as a hierarchical one, which can be quite limiting. Supervision has multiple aims (e.g., developmental, gatekeeping, assuring quality of services) which may conflict (Gaete & Ness, 2012). Collaborative supervisors are expected to be more responsive practitioners while respecting the knowledge of supervisees and clients (e.g., Anderson, 2005; Bernard & Goodyear, 2013; Sinclair & Pettifor, 2001).

To invite supervisors to acknowledge and navigate through some of these tensions, we would like to conceptualize supervisory practice or spirit with a dialectic attitude. By dialectic attitude we mean that, given the power differential, supervisors can take the lead in acknowledging that the supervision relationship is not a monolithic, hierarchical entity but is always “becoming.” The supervisory relationship has a history, but
Jeff: Well, that’s cool because I want to invite our supervisees not to replace what they know and are coming with, but rather, start from there, and be able to reflect on their own practice. They can start to see their own practice from whatever perspective they want to learn more about—being more collaborative, in your case—so that they can feel more oriented and intentional in their future practice and learnings.

Joaquin: Absolutely. I think that reflective space gave me room to learn the other more collaborative ways of working that I was looking for. It felt like I could do both, strategic and collaborative, even when they seemed to be contradictory in my head (see Figure 9.11).

Jeff: Normally try to utilize whatever the supervisee already knows and build upon it. This wasn’t necessarily your situation, but more generally, students often say that they experience feeling “de-skilled” at the beginning (at the CFTC), because they see family therapy as completely different from individual counseling, so I try to help them realize how they know can be integrated with family therapy skills.

Joaquin: Oh! And there is another experience I remember that might be relevant in terms of co-creation. It is related to what I have been noticing from our research on supervision here at the CFTC; I would call co-creation in evaluation. I remember both of us reflecting on my practice when we were filling out that evaluation form sent by the director of training of my PhD program at that time, remember?

Jeff: Oh yes, that form based on the [Canadian Psychological Association] accreditation standards. It can be quite annoying sometimes having to fill that form with standards that, I believe, are not the most relevant sometimes to evaluate trainees at the CFTC, and that just doesn’t fit with how I see the world.

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**Figure 9.10** Theoretical integration as a WIP

Jeff: OK, that’s interesting. Do you remember a particular time when I noticed what you would call strategic stuff in session with a family, and we were able to reflect on that?

Joaquin: I actually do. I was working with a family with a teenager, a mom, and a dad, and dad really wanted to spend more time with his son, but the son just wanted to hang out with his peers. This was consistent with my feeling during the first session that the adolescent wasn’t as motivated as dad about coming to therapy. I remember that family.

Jeff: Well, by the end of the session, the son was willing to do a little “noticing homework,” about how dad was able to hear his concerns and needs, and how we were trying to be more respectful of his space. The son was pretty excited about the homework (and I myself was too!). However, dad wanted to “add a little piece” to it (something like “OK, and maybe if he sees I’m pulling my weight he could spend some more time with me.”). Influenced by my strategic framework, my inner dialogue was probably something like “Dad is getting ambitious. Be paradoxical; prescribe not changing, so it’s a win-win situation next session. Try to stop him right now!” I remember coming back to the back room after the end of a session and you gave me a high five because of that move at the end.

Oh! Did I? *(Laughs)* So did we talk about that? Or what did you, or do you, make of that?

Joaquin: Yes, we did. We talked about the main PIP being *pursuing coupled with avoiding*, and how my “gently stopping dad” at the end was a good way to stop that PIP and continue in the HIPish direction of the homework (i.e., dad’s ... dad’s empathizing with the son may invite the son’s noticing and acknowledging dad’s effort, and maybe empathizing with dad). So I think your selective noticing and our joint reflection actually helped me in interpreting my own practice from a richer and preferred perspective.

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**Figure 9.11** Co-constructing preferred ways of practice through a WIP

| WIP |
| Selectively noticing practice consistent with supervisee’s goals |
| Reinterpreting practice in a preferred manner |
Joaquin: Yes! So I remember precisely the feeling of both of us trying to make sense of the form, building some of our own preferred way of talking about practice to interpret the neutral language of the form. So I remember us doing a bit of discursive work later on, when meeting with my director of training in trying to translate our shared view, with our shared language, to more standard type of language, one that she could relate to from her position.

Jeff: That's interesting because I usually have a rather negative view of those forms, because I see evaluative criteria in those forms of being driven by the dominant discourse—ideas about what psychologists need to know, which is not a fit for how I think, we both see therapy, and how we prefer to view things at the CFTC. What are your thoughts on this?

Joaquin: This reminds me of a common remark in the Christian tradition in which I was raised: "Give Caesar what is due Caesar, and give God what is due God" (Mark 12:17). That is to say, every language is developed to be responsive to different kinds of phenomena. The important thing is to be aware of the goodness that each discourse makes available to us, and not trying to colonize one with the other. As long as practicum experiences are not reduced to the neutral language of microskills and macrocompetencies, I think those evaluative forms are a good resource (these more sharable languages make more available for us a sense of a professional community that cares about similar standards for the sake of the public). But my research on professional development in supervision has made me more aware that there is no such thing as neutral language. What do you think?

Jeff: I like your idea of making our languages responsive to particular situations of practice, serving different, yet equally important ends. I think it is easier for supervisors not fully "submitting to imposed discourse" to respond in a TIPish way, like "rebelling," which would only invite more "imposing" practices. For example, it is easier for supervisors to either submit to neutral language at the expense of their students' particular learning needs and what they bring as they enter supervision, or to rebel, like, "I'm going to just rate you excellent in everything, because I don't believe in this discourse." Personally I think there is another way. I think it is a good idea to take these forms as an opportunity for joint reflection.

Joaquin: More like in a "TIPish" way.

Jeff: Right! Supervisors and supervisees can jointly craft their responses to those forms, and in doing so create TIPish space for bringing forth supervisees' learning. And I do think that supervisors, in their more powerful position, should take the leadership in that process (see Figure 9.12).

A Final Reflection: From Parallel Process to Isomorphism to Relational Responsiveness

Perhaps a word about isomorphism is in order here. It is necessary for supervisors to consider the interactional patterns inherent in a therapeutic system—that is, the supervisor-supervisee-client system. Parallel process, originating from psychodynamic theory (Bernard & Goodyear, 2013; Giordano, Clarke, & Borders, 2013), is an intrapsychic phenomenon in which the relationship in one context (i.e., therapy) is unconsciously replicated by the supervisee in another context (i.e., supervision), occurring when the supervisee unconsciously identifies with the client, and re-enters the client's defensive behavior in supervision. On the other hand, isomorphism is a systemic concept signifying how the supervisee's interactional patterns with the client system are replicated in supervision. Breunlin, Liddle, and Schwartz (1988) suggest that a supervisor can use isomorphism to intervene with the supervisee by the supervisor shifting the pattern of his/her responses to the supervisee, which in turn alters the pattern of the supervisee's in-session behavior. Supervisors tend to notice isomorphic interactions when supervisees get into relational tangles with clients.

In our view, a relationally responsive approach both brings isomorphism alive and deemphasizes it as a specific phenomenon. Relational responsiveness opens space for unique and novel interactions to also arise. We view all interactions between the supervisor and the supervisee as influencing their relationship, as well as the relationship between the supervisee and the family. Accordingly, both isomorphism and novelty
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are everywhere. Approaching supervision as a relational practice invites supervisors to be aware of interpersonal patterns in an ongoing way, not just when supervisees slip into troublesome interactions with their clients.

Conclusion

In this chapter, we presented some ways that the IPScope can help supervisors orient themselves and conceptualize the endeavor of clinical supervision. We presented the IPScope as a framework that supervisors and supervisees can use to enhance their capacity to distinguish supervision as a relational, responsive, participative, reflexive, and transformational practice. Using the IPScope toolkit, supervisors can practice as involved reflective practitioners. We think supervisors can use the IPScope to make useful distinctions that help them become more responsive (as opposed to merely reactive) to supervisees’ relational invitations.

This is not to say that individual differences or behaviors are irrelevant. In situations when supervisors intend to exercise “power over,” abusing their supervisees to accomplish their objectives, we would not be tempted to account for such behavior as responding to supervisees. Fortunately, these instances are rare. In most supervisory situations, supervisors care very much about what supervisees do — and vice versa. Our main interest here is to invite readers to consider the benefits of accounting for “good” and “bad” supervision using the IPScope framework. Rather than seeing supervision outcomes in terms of reified characteristics of supervisors and supervisees (the “faces” in the figure), we build upon the IPScope to sustain our preferred view that, in relationally responsive practice of supervision, it is more important to attend to the shape of the chalice.

Notes

1 This is why we do not consider the IPS-supervision a supervision model. For a broader and compatible conceptualization of supervision, see Chang (2013a).

2 I would try to ask these questions in non-prescriptive ways; otherwise, I might risk inviting, isomorphically, a similar PIP (imposing coupled with rejecting) to this new interpersonal space between myself as a training coordinator and the supervisor.

3 Note that WIP 1 in the middle could also be framed as a HIP to counter a PIP like the one mentioned right above it (i.e., assuming supervisees’ incompetence coupled with responding defensively and concealing concerns or errors).

4 During my masters in Chile, I (Joaquim) was trained in a strategic model of family therapy first developed at the Mental Research Institute in Palo Alto, California.

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