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Abstract

Although the science and practice of clinical supervision receives relatively little attention in the professional literature (Mintz, 1983; Worthen & McNeill, 1996), some theorists and researchers have proposed different supervisory models based on bona fide therapeutic approaches. While the various approaches all seem similarly effective (Goodyear, Abadie & Efros, 1984), evidence supports the need for training programs that take an integrated, holistic approach to supervision (Dlugos & Friedlander, 2001; Worthen & McNeill, 1996). This article will present an Existentialist- Gestalt approach to supervision designed to facilitate an integrated, holistic and effective training paradigm. In addition to theoretical constructs, recommendations for dealing with supervisees' emotional experience in training, cultural variables, and personal and professional developmental considerations will be presented.

An Existentialist-Gestalt Approach to Clinical Supervision

Jerry Novack, MA, NCC

Although the science and practice of clinical supervision receives relatively little attention in the professional literature (Mintz, 1983; Worthen & McNeill, 1996), some theorists and researchers have proposed different supervisory models based on bona fide therapeutic approaches. While the various approaches all seem similarly effective (Goodyear, Abadie & Efros, 1984), evidence supports the need for training programs that take an integrated, holistic approach to supervision (Dlugos & Friedlander, 2001; Worthen & McNeill, 1996). This article will present an Existentialist-Gestalt approach to supervision designed to facilitate an integrated, holistic and effective training paradigm. In addition to theoretical constructs, recommendations for dealing with supervisees' emotional experience in training, cultural variables, and personal and professional developmental considerations will be presented.

Supervision, as it pertains to psychotherapy can be defined as "An intensive, interpersonally focused ... relationship in which one person is designated to facilitate the development of therapeutic competence on the other..." (Loganbill, Hardy, & Dellworth, 1982, as quoted by Ponton, 2005). Other authors have suggested alternative definitions (Massey & Combs, 2002; Ponton, 2006; Starak, 2001; Yogev, 1982). Albott (1984) describes supervision as a teaching practice involving at least two people, occurring in an environment conducive to the process of learning (or teaching) psychotherapy. Resnick and Estrup (2000) suggest that clinical supervision should be multidimensional, helping the supervisee to:

- (a) help the therapist understand his/her client better at both the content and process levels, (b) to help the therapist become more aware of his/her own reactions and responses to the client

- (actual and countertransfereential), (c) to understand the dynamics of how the therapist and client are interacting – from both a clinical and theoretical perspective, (d) to look at the therapist's interventions and the consequences of these interventions, (e) to learn to compare theories of psychotherapy, (f) to explore other ways of working (other models of psychotherapy) ... , and (g) to both validate (support) and challenge the therapist (p. 122).

Resnick and Estrup (2000) also contend that supervision should help the clinician learn professionalism, administration and business practices. However, despite theoretical and philosophical differences, the proposed definitions share some common factors. Each identifies a more senior therapist (the supervisor) and one or more clinicians with less experience or formal training than the supervisor [supervisee(s)] engaged in an interpersonal exercise intended to optimize

the supervisee's clients' psychotherapeutic experience.

Like therapeutic orientations, several effective and valuable approaches to clinical supervision have been created. Also like therapeutic approaches, there seems to be a "Dodo Bird verdict" indicating that despite differences in approach, the various "bona fide" supervisory methods all yield similar outcomes (Smith & Glass, 1977; Wampold, 1997). Goodyear, Abadie, and Efros (1984) studied several clinicians engaged in supervision with either Albert Ellis (Rational Emotive Supervision), Carl Rogers (Person-Centered Supervision), Rudolph Ekstein, (Adlerian/Psychodynamic Supervision) or Erving Polster (Gestalt Supervision). The four supervisory approaches were qualitatively different from one another, and, in response to the supervision, the therapists' approaches to their clients was qualitatively different. Still, intersession scales, outcome measures and measures of counselor effect reported equal effectiveness for each therapeutic approach and equal outcomes for their respective clients. Still, Goodyear, et al. (1984) assert that a theoretical foundation is, at least, as important to supervision as it is to psychotherapy, a sentiment echoed by several others in the field (Mintz, 1983; Resnick and Estrup, 2000). In short, to effectively help his/her supervisees hone their abilities and develop as helping professionals, the supervisor must work from a consistent and meaningful framework which guides his/her approach to clinical supervision.

A given supervisor's approach to supervision need not necessarily echo his/her own clinical theoretical orientation. It certainly can, and in this author's case, it does. A strong proponent of the paradoxical theory of change, the cycle of experience, the constructive use of anxiety, people's ultimate freedom and responsibility and the importance of meaning in our activities, I propose the Existentialist-Gestalt approach to clinical supervision.

Existentialist-Gestalt Model

Combining principals of Gestalt supervision and existentialist psychotherapy results in a holistic model that requires the supervisor to view the supervisee as more than a therapist. The supervisor must experience the supervisee as a complete, integrated person, or, at least a person working toward wholeness and integration (Starak, 2001). This approach takes into consideration the here-and-now relationship between the supervisor and supervisee, a concept supported by Worthen and McNeil (1996) in their investigation of "good" supervision events; the supervisee's ability to maintain professional boundaries and engage in non-work related activities; and the supervisee's continuing educational pursuits. Though counselor reactions, feelings and thoughts remain central in the here-and-now, this approach certainly advocates that proper boundaries be drawn to ensure that experiential supervision drawing on the counselor's emotional reaction(s) to the client does not progress into psychotherapy between the supervisor and supervisee, Dlugos and Friedlander (2001) suggest that this integrated, holistic training approach helps clinicians avoid burnout and remain passionately committed to their work.

Gestalt Supervision

Defined by Starak (2001) as a here-and-now interpersonal process that helps the counselor understand the contact-boundary between him/herself and the client system in order to help the supervisee become more creative and fully alive in the therapy session, the Gestalt supervisor strives to facilitate the therapist's ability to respond to and engage with the client in an authentic, meaningful, therapeutic way. It is vital to understand that this goal is achieved not through specific techniques or "tricks," but through due diligence to the constructs and concepts presented here (Mintz, 1983). While techniques and experiential activities might prove useful and appropriate in

supervision, in the absence of a guiding theory and purpose, they become a “hodge-podge” of serendipitous activities that might or might not result in professional development for the supervisee instead of purposeful, meaningful interactions that effectively contribute to the therapist’s personal and professional development (Harman & Tarleton, 1983).

Gestalt theory understands change as paradoxical (Polster & Polster, 1973; Starak, 2001). The paradoxical theory of change posits that change (read “professional development” in the case of supervision) occurs automatically as long as the supervisee is free to fully own and appreciate who and what (s)he is at the moment (Corey, 2005; Resnick & Estrup, 2000; Starak, 2001). In other words, a counselor in training will automatically grow and improve as long as (s)he is not only permitted to be a novice without judgment or criticism, but encouraged to appreciate, own, even love their current place in the developmental continuum. At the same time, authentic meaningful feedback is vital and central to Gestalt supervision (Harman & Tarleton, 1983; Resnick & Estrup, 2000). Feedback, however, must be provided without judgment, positive or negative, and is intended to facilitate awareness in the supervisee.

Awareness, first suggested as a therapeutic concept by Hypocrites, is central in Gestalt supervision and suggests that the skill, knowledge and ability to become a better clinician already exists within the supervisee (Harman & Tarleton, 1983; Mintz, 1983; Polster & Polster, 1973; Resnick & Estrup, 2000; Starak, 2001). It simply needs to surface and be realized. The supervisory role in this process, then, is not to actively instruct or direct the supervisee toward growth and development, but to facilitate awareness within the supervisee. Once this awareness is processed and integrated into the counselor’s holistic self, development into a more mature clinician will occur automatically (Corey, 2005; Resnick & Estrup, 2000), much the same way that

food, once digested by a toddler, will automatically result in a more physically mature child. To that end, feedback must articulate processes and interactions observed by the supervisor and his/her personal reactions to the supervisee, the client, or the interactions between them without his/her judgment of them.

Authentic, meaningful feedback runs the risk of approaching psychotherapy for the supervisee. The supervisor must ensure that clinical supervision does not violate the boundary between effective supervision and psychotherapy (Bernard & Goodyear, 2009; Mintz, 1983; Resnick & Estrup, 2000). Another important tool in the Gestalt approach, Field Theory, provides the supervisor with a perspective (s)he can use to maintain appropriate boundaries. Field theory concerns itself with the interaction between the object of primary attention (the client, the supervisee, a presenting problem, an interpersonal relationship, etc.) and the context within which that object exists (Polster & Polster, 1973; Starak, 2001; Yontef, 1993). When the supervisee’s emotional reactions to the client surface in supervision, vigilant attention to the field will ensure that such content is used to process the counselor’s countertransference reactions to the client and develop a treatment plan using those reactions for the client’s benefit. Once the client’s benefit falls out of the field, then the supervisor has an ethical responsibility to either reintroduce the client into the field, discontinue that line of interaction, refer the supervisee for individual counseling, or some combination of the three.

Collaboration with the supervisee should also be considered when deciding how to proceed with his/her emotional reactions in supervision (Resnick & Estrup, 2000; Starak, 2001). Dialogue, as defined by Gestalt theory, is the “open engagement of two phenomenologies” (Resnick & Estrup, 2000, p. 126), and it is an expression of both parties’ genuine experience in the moment (inclusion), both parties’ willingness to embrace or join with the other’s while still maintaining their own

centeredness (inclusion), and the willingness to surrender to the interpersonal process which develops in the here-and-now of interaction between the two people without either one trying to control or limit contact with the other, or the interaction's outcome (commitment to the dialogue). By engaging in such open and committed dialogue, the supervisor and supervisee can choose, together, which would be the best course of action. Gestalt theory suggests that dialogue will most frequently result in a more creative and appropriate result or solution than any solution that either party would have thought of without the other (Yontef, 1993).

It is important not to mistake Gestalt's use of field theory and dialoguing in supervision as passive or nondirective, especially when critical and immediate action is required. Whenever possible, the Gestalt supervisor prefers to help facilitate awareness in the counselor, making him/her the architect and engineer of his/her own growth and development. However, when immediate action is required, any supervisor must make paramount the safety and benefit of the supervisee's client (Bernard & Goodyear, 2009). This can be accomplished through the use of any creative and experiential method (Mintz, 1983). For example, if the supervisor is observing a session in which the supervisee does not seem aware that the client is at high risk for suicide, and is not assessing that risk further, the supervisor might join the session and facilitate a growth experience with the client present. In fact, several authors have suggested „In Situ” supervision in appropriate circumstances (Harman & Tarleton, 1983). In this instance, the supervisor might explore the counselor's here-and-now experience of the dialogue with the client. It is likely that counselor might perceive some emotional discomfort, indicating that (s)he might not have been fully present, or might not have picked up on something important. If the counselor does not recognize the important oversight, then the supervisor might turn to the client, assessing his/her experience of the session,

or (s)he might have the counselor and client switch places and role play one another (Glickauf-Hughes & Campbell, 1991; Harman & Tarleton, 1983). A present, effective, creative supervisor will, ultimately bring to the surface that there was “an elephant in the room,” get the client assessed, and process the important oversight with the supervisee during a private supervision session. Of course, this is only one simple example, but the point should be clear: Whenever possible, the Gestalt supervisor will empower his/her supervisee to grow and develop in his/her own way, but when necessary, that same supervisor will intervene with the counselor in a directive and meaningful way for the benefit of the client.

Several specific models of Gestalt supervision have been suggested and most seem to have merit (Mintz, 1983; Resnick & Estrup, 2000; Starak, 2001). What seems vital, is that the Gestalt supervisor always remain cognizant of the field-figure relationship (with regards to the client as well as the supervisee); facilitate awareness in the supervisee through committed, here-and-now dialogue and creative, experiential interventions; and honor the paradoxical nature of change by encouraging the supervisee to embrace and appreciate each stage of his/her professional development and the benefits and struggles inherent in them in a holistic, nonjudgmental way. These conditions can certainly be employed for the benefit of therapists working from theoretical orientations other than Gestalt, but in those cases, the Gestalt supervisor has an ethical responsibility to maintain a working knowledge of the supervisee's orientation of choice, including supervisory recommendations from that orientation (Mintz 1983). (S)he need not necessarily conduct therapy or supervision from that orientation, though. In fact, Resnick and Estrup (2000) suggest that exploring different approaches and theories of psychotherapy might be an important dimension of effective supervision.

Existentialist Theory

Often, in studying Gestalt theory, one will find references to the importance of Existentialist philosophy (Philippson, P., 2009; Starak, 2001; Yontef, 1993), however a literature search using ERIC, PsychINFO and PsychARTICLES yielded no results for Existentialist approaches to clinical supervision. Massey and Combs (2002) include several important existential concepts within the context of their Interpersonal-Systemic and Development approach to supervision, but do not propose an Existentialist supervision theory. This supervisory model, too, will draw on existentialist concepts: the importance of death, life meaning, learning from (and using) anxiety, freedom and responsibility (Corey, 2005; Yalom, 1980).

Existential psychotherapy and Logotherapy suggest that the creation or identification of meaning in one's existence, experience(s) or actions plays a central role in emotional healing (Corey, 2005; Frankl, 1984; Yalom, 1980). This idea can benefit clinical supervision in two ways. First, the supervisor, mindful of the field from which the client (and related client systems) emerges, can help the supervisee explore the factors that might be meaningful to the client. Subsequent meaning-making processes can be employed with the client to help him/her resolve his/her inner-conflicts where appropriate. Second, the supervisor, also cognizant of the supervisee's field, can help ensure that (s)he finds meaning in his/her work by using supervision time to explore the supervisee's experience as a counselor and his/her subsequent reactions to his/her work. Such a practice, while not directly related to the client in question, will ultimately result in a better therapeutic experience for the client because it will likely facilitate the counselor feeling more committed to his/her work and passionate about the psychotherapy process (Dlugos & Friedlander, 2001).

Gestalt supervision makes great use of the supervisee's emotional reactions (both actual and countertransference) to the

client (Resnick & Estrup, 2000). Similarly, existentialism engages the client's anxiety in psychotherapy (Corey, 2005), though anxiety sometimes manifests as a heightened emotional experience, it often appears in the guise of traditional resistances; repression, displacement, rationalization, etc (Yalom, 1980). Like the client in therapy, the counselor in supervision might experience either heightened emotional arousal, or (s)he might intellectualize or rationalize the client's situation, project his/her own issues into the client's field and figure, or avoid central process issues and attend more to content. While easily understood as normal in a developmental context, these tendencies likely result from the counselor reacting on some level (often one that brings his/her mortality into awareness) to the client. Exploration of this emotional experience (or resistance as the case may be) can help the supervisee identify his/her own existential concerns, and by parallel process, better understand the client's experience in therapy. Such developments in supervision can help enhance the client's phenomenological view of the client (vital for both existential and Gestalt psychotherapy) and his/her capacity for authentic empathy.

Existential anxiety, on some level, results from human awareness of mortality and fear of death (Yalom, 1980). Death anxiety can manifest in unpleasant feelings, avoidance and resistance, as mentioned, or as achievement and energy. In the former, the supervisee is made aware of his/her own mortality through contact with the client (Resnick & Estrup, 2000; Starak, 2001). Yalom (1980) suggests that all fears, nightmares, and anxieties bear, at least, death's footprint latent in the other important content. With this awareness surfacing, the supervisee becomes uncomfortable with his/her own fragility and subsequently avoids this underlying content and remains focused on the client's more overt content. However, as humans, death is always in the field and anxiety is viewed, in Gestalt theory, as a close cousin to energy (Polster & Polster, 1973). By helping the supervisee

own his/her mortality, the terror of death anxiety can become the motivation of life meaning. Knowing that we do not have infinite time to complete our work (be it a work of art, science, or interpersonal relations), can motivate us to address these activities in the here-and-now because there might not be a tomorrow (Corey, 2005; Frankl, 1984; Mintz, 1983; Polster & Polster, 1973; Yalom, 1980).

Viktor Frankl (1984) recommended that the Statue of Liberty on the east coast of the United States be paired with a Statue of Responsibility on the west. Existentialist theory believes that people possess ultimate freedom at the most basic levels (Frankl, 1984; Yalom, 1980). Regardless of somebody's situation, (s)he has the freedom to choose how (s)he will think, feel and behave. Frankl (1984) drew this conclusion watching fellow Jews while imprisoned in a Nazi concentration camp. He observed that even though they were all in the same environment, some people turned to "saints" trying to help others who might have fallen ill, while others turned to "swine" stealing food rations from the sick. People often eschew this freedom, though, because with it comes responsibility for our choices. Learning to embrace responsibility, exercise personal freedoms and even make occasional errors is considered movement toward health in Existential psychotherapy (Yalom, 1980).

Gestalt theory, too, echoes this sentiment. According to Resnick and Estrup (2000), the ultimate goal of Gestalt therapy is not change. It is choice. Gestalt techniques such as the famous two-chair, the hot seat, role playing and the empty chair are not necessarily intended to facilitate change in the client (or supervisee), but to help the supervisee become aware of his/her options, each with inherent benefits and limitations, freeing him/her to choose in favor of change or not (Polster & Polster, 1973; Starak, 2001). Additionally, helping the supervisee accept responsibility for his/her choices and to own, even embrace occasional errors honors the paradoxical theory of change and should,

ultimately, result in growth for the supervisee.

Clearly, addressing existential concerns, meaning and anxiety with the counselor can provide rich, fertile material from which the supervisor can help facilitate growth in (or with) the counselor. However, existential content might never surface as a focus of discussion or intervention. In short, existential content might or might not be addressed in supervision, but it is always present in the supervisor's field, the counselor's field and the client's field.

Cultural and Developmental Implications

Gestalt psychotherapy has received criticism for being culturally limited (Corey, 2005). While Gestalt has historically been used by white, middle-class men to treat white, middle-class people, this criticism more accurately reflects the practitioners, or perhaps the mental health field's inability to serve more diverse populations, but not the theory itself. Race, religion, age, physical ability, nationality, gender, sexual preference and other cultural variables all interact with one another to create the field from which figures emerge (Polster & Polster, 1973; Starak, 2001). Field theory represents a primary and central theme in the Gestalt approach (Corey, 2005; Harman & Tarleton, 1983; Mintz, 1983; Polster & Polster, 1973; Resnick & Estrup, 2000; Starak, 2001), and by extension, culture and identity should also be considered central and vital in both treatment and supervision.

Individual supervision with a counselor seeing only one client results in six, possibly seven, distinct fields that must be considered as the backdrop for treatment of the client and supervision of the counselor. The potential fields are as follows:

1. The supervisee's client
2. The supervisee
3. The supervisor
4. The field that emerges in the dialogue between the supervisee and the client

5. The field that emerges in the dialogue between the supervisor and supervisee
6. The field that emerges in the dialogue between the supervisor and supervisee with specific regard to the client
7. A final field that could possibly emerge between the supervisor and client if they have any sort of interaction.

Introduce group supervision with several supervisees, each with several clients, and this perspective can become somewhat daunting until the supervisor becomes comfortable managing the balance between foreground and background. An effective method for managing field perspectives might be to create lists similar to the one above, or to draw diagrams illustrating where the various fields intersect and interact. Creativity is vital in any Gestalt practice, even supervision (Harman & Tarleton, 1983).

Doka (2006) recommends conceptualizing cultural variables as places to start asking questions – not arriving at answers. If one or more factors in any (or several) of these fields is preventing the supervisee or the supervisor from fully understanding the participants, processes or content of the therapy, then (s)he has an ethical obligation to educate him/herself with regards to those factors. This can be done through consultation with colleagues, scholarly literature, or dialoguing with the other participants involved (including the supervisee's client). If cultural variables are understood as part of the field from which the individual, his/her strengths, his/her struggles, and his/her beliefs have emerged, then Gestalt supervision deserves none of the criticism suggested by Corey (2005).

Personal and professional development, too, comprise elements of the field from which figures emerge. A chronologically young clinician with a great deal of experience and training will work from a different framework than a chronologically senior counselor who has

less experience. Similarly, older clients will have different world-views from younger ones. Their perspectives might also be affected by previous counseling experiences, their stage of change and their knowledge of counseling and psychotherapy.

Professional identity development should follow a „spiral“ model (Bruner, 1960 as cited in Yogev, 1982). This model suggests that counselors learn best using a process that explores central themes in counseling processes, identity, relational factors and skill development. As the supervisee achieves a level of mastery, integrating these concepts into a coherent, unified approach to psychotherapy, the supervisee then returns to the beginning of the process again, but at more advanced level (Yogev, 1982).

If a hypothetical Gestalt supervisor has one hypothetical supervisee who is a 26-year-old, Asian American female with a great deal of clinical experience, and is working with a 65-year-old, African American male client; and one hypothetical supervisee who is a 37-year-old, Caucasian male with little training who is seeing a 14-year-old Latina girl, and both supervisees approach the supervisor with the same concern, the supervisor's response to each must be palpably different. Although the content of the supervisees' problems was identical, the different fields interacting with one another (including the supervisor's) makes them very different problems, indeed (Polster & Polster, 1973; Resnick & Estrup, 2000; Starak, 2002; Yontef, 1993).

Conclusion

Worthen and McNeill (1996) found that both, a good relationship between the supervisor and supervisee, and specific attention to skill development were minimally necessary for positive supervision experiences. They also identified four distinct phases common in “good” supervision events. First, there must be an existential baseline set by the supervisee's previous supervision experiences. Then, the

“stage” must be set. That is, supervisor and supervisee must have a clear and purposeful informed consent agreement in which expectations and goals from both the supervisor and the supervisee are clearly articulated. Third, there has to be a good supervision experience which is perceived by the supervisee as “... empathic, nonjudgmental, and validating, with encouragement to explore and experiment...” (p. 28). Finally, the supervision event must culminate with good outcomes defined by improved confidence and professional identity for the supervisee, which results in a strengthening of the supervisory relationship and increased commitment to supervision, realizing a positive feedback loop which transitions into the next “good” supervisory event.

An Existentialist-Gestalt approach to clinical supervision provides supervisors the tools, perspective and process for facilitating such supervisory events. It is important, however, not to mistake a true Gestalt approach for a serendipitous sampling of silly, meaningless “techniques” (Mintz, 1983). While certain techniques and interventions such as: having the supervisee role-play his/her client, in situ supervision (counseling sessions with the supervisor in the room), group supervision, Socratic dialogue, and formal case presentation approaches have been effectively used in Gestalt supervision (Glickauf-Hughes & Campbell, 1991; Harman & Tarleton, 1983; Mintz, 1983; Resnick & Estrup, 2000), the use of techniques or interventions must develop in the here-and-now of the supervision dialogue, appropriately reflect the field and figure, facilitate awareness and adhere to the paradoxical theory of change for the supervision to be truly Gestalt. What’s more, existential ideas such as life meaning, the importance of death anxiety and freedom and responsibility can add depth to the supervisory relationship and process.

While some supervisory approaches avoid the supervisor’s emotional experience and reaction to his/her clients, believing it too close to acting as the supervisee’s

therapist, there is support for a holistic approach to supervision that integrates professional development with concern for the supervisee’s live, hobbies, and experiences outside the counseling room (Dlugos & Friedlander, 2001; Worthen & McNeill, 1996). This evidence suggests that more holistic training paradigms result in supervisees experiencing greater passion for their work, a deeper commitment to supervision, greater confidence in their abilities, greater satisfaction with the supervision they receive and the prevention of professional burnout. Use of the Existentialist-Gestalt supervision model should realize such benefits for the supervisee, supervisor and client.

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