Several writers have suggested that a key to supervisor training is helping counselors assume the role and identity of a supervisor. In particular, they assert that a pivotal skill in this role transition is the cognitive shift from thinking like a counselor to thinking like a supervisor. This article focuses on one aspect of training that seems basic to the success of the variety of supervision training programs. The thoughts and behaviors of supervisors who have and have not made the role transition are contrasted and interventions that facilitate the cognitive shift are described. Included are illustrations drawn from experiences as a supervisor educator in academic and inservice settings. It is suggested that effective supervisors think of their counselors and of themselves as educators who create appropriate learning environments. It is claimed that beginning to think like a supervisor is the first step toward a larger goal of developing a cognitive map or conceptual framework for conducting supervision. The article concludes that the cognitive shift of thinking like a supervisor should be a conscious goal of supervision training; when trainers think like supervisor educators, their trainees will learn to think and behave like effective supervisors. (Author/ABL)
Learning to Think like a Supervisor

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Abstract

Several writers have suggested that a key to supervisor training is helping counselors assume the role and identity of a supervisor. In particular, they assert that a pivotal skill in this role transition is the cognitive shift from thinking like a counselor to thinking like a supervisor. This article (a) contrasts the thoughts and behaviors of supervisors who have and have not made the role transition and (b) describes interventions that facilitate the cognitive shift. Included are illustrations drawn from the author's experiences as a supervisor educator in academic and inservice settings. It is suggested that effective supervisors think of their counselors as learners and of themselves as educators who create appropriate learning environments.
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Other participants of this symposium on supervision training are describing academic courses and structured training programs. In contrast, I will focus on one aspect of training that seems basic to the success of the variety of supervision training programs. My experiences as a supervision trainee and trainer, reading of the literature, and preliminary analysis of data collected last semester, have indicated that a pivotal "skill" that supervisors must develop is a cognitive shift "from thinking like a therapist to thinking like a supervisor" (Heath & Storm, 1983, p. 36). Although making this conceptual shift may sound relatively simple, the transition from the counselor role to the supervisor role often seems confusing, even arduous for some. In addition, untrained professionals don't necessarily make this shift on their own, simply as a result of experience as a supervisor. As a matter of fact, some "experienced" professionals seem to have more difficulty changing their thinking than do doctoral students and advanced master's students in academic courses.

In this paper, I will summarize my observations about this conceptual skill. First, I will briefly discuss some aspects of learning to think like a supervisor, and then describe some interventions that have facilitated the development of this conceptual skill.
Thinking like a Supervisor

What thoughts and behaviors differentiate between those supervisors who think like a counselor and those who think like a supervisor? Perhaps the most obvious change is a shift in focus from the client to the counselor. For family therapy supervisors, this means broadening one's systemic thinking beyond the family subsystem to the therapeutic and supervisory subsystems (Breunlin, Liddle, & Schwartz, 1988; Liddle, Breunlin, Schwartz, & Constantine, 1984). To illustrate differences that characterize this cognitive shift, I will share some specific observations.

Supervisors who think like counselors seem to take one of two approaches. Some make thorough, copious notes about the client when they review counseling tapes. They generate numerous hypotheses about client dynamics and several ideas for working with the client. They come to supervision sessions well-prepared to tell the counselor what they would do with this client. Supervision is primarily a monologue or mini-lecture, and supervisees become surrogate counselors who carry out supervisors' plans for counseling.

At times, these supervisors hardly seem aware of their counselors during the session. They sometimes fail to notice counselors' reactions to their deluge of suggestions or hear whatever responses counselors manage to interject. They also forget to determine whether counselors can perform the
interventions they have suggested. As a result, counselors may feel overwhelmed by supervisors' feedback and insights, and even begin to doubt their ability to help the client.

Other supervisors focus on the counselors, but see them only as clients. Depending on their counseling orientation, these supervisors may be very attuned to personal issues and give more attention to developing counselors' self-awareness than counseling effectiveness (e.g., skills, case conceptualization). Others may assume that counselor dynamics are the sole reason for shortcomings in counselors' performance. These supervisors are prone to ask, "What keeps you from doing that?" or "Is that true in other areas of your life?" They forget to consider whether the counselor knows how to perform a certain skill (as opposed to being afraid to do so) or has the knowledge needed to recognize and respond to certain client issues (e.g., recognizing symptoms of abuse or chemical dependency).

While these behaviors of "supervisor-counselors" also may be characteristic of persons motivated by needs to be experts or to wield their power, I am only referring to those who are naive about the effects of their behavior and who truly believe they are being helpful. The challenge, then, is to help these supervisors understand that, to be truly effective, they also must think of their counselors as learners and of themselves as educators who create learning environments.
Competent supervisors not only are competent counselors; they also are skilled educators who convey their counseling knowledge and skills in ways that promote counselors' effectiveness and professional identity. They apply their counseling skills, along with their teaching and consulting skills, in a new context, toward new goals (cf. Borders & Leddick, 1987). Rather than make plans for counseling the client, they devise strategies that will help the counselor be more effective with that client (assuming there is no harm to the client). Supervisors who think like supervisors ask themselves, "What supervisory intervention will help this counselor perform differently with this client?" and "What change can I make that will help the counselor be more effective with this client?" (Borders, in press; Breunlin, Liddle, & Schwartz, 1988; Ivey, 1977; Williams, 1988). These supervisors are educators in the best sense of the word; they not only impart knowledge and skills, but also educe or draw out the counselor's "inherent and natural skills so that he or she does not merely repeat what the master or others have done before" (Ivey, 1977, p. xi).

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What interventions facilitate the cognitive shift from thinking like a counselor to thinking like a supervisor? A variety of strategies is possible, depending on the preferences and creativity of the trainer, and the parameters of the training program and training setting. Below are some representative
examples of the interventions that I have used in academic courses and inservice workshops. Some are one-time interventions, while others are part of the overall approach to supervision that is taught during training.

Tape review. One fairly simple, but pointed, method that helps supervisors change their thinking involves an introductory review of a counseling tape. Supervisors are asked to take notes on the session as if they are going to meet with the counselor the following hour. After watching 10-15 minutes of the tape, I stop and ask them to look over their notes. They count the number of statements about the client, and then the number about the counselor (or some variation of this). Typically, participants report very few if any statements about the counselor. This is especially true of experienced clinicians in inservice workshops. Then I remind them that they will be meeting with the counselor, not the client, during the next hour. What are they going to do during the supervision session to help the counselor? They are to keep this question uppermost in their minds as they review the remainder of the session. Then we compare notes and devise plans for supervision.

Planning for supervision. Another way supervisors get practice thinking in their new role is through deliberate, educational planning for supervision sessions. The emphasis on planning begins in the initial session, when supervisors help counselors write three to five learning goals. As part of this
process, supervisors review a counseling tape and list strengths and areas for improvement. They also assess counselors' developmental issues and stages (cf. Loganbill, Hardy, & Delworth, 1982; Stoltenberg, 1981). Supervisors use counselors' learning goals and their own assessments to guide their feedback on future tapes. These assignments force supervisors to focus on the counselor rather than the client, and promote consistent planning for supervision sessions.

To facilitate sequential, long range planning, supervisors are encouraged to consider how they plan for counseling, teaching, or consulting experiences. The steps and procedures they already follow can be adapted to plan for supervision sessions (cf. Borders & Leddick, 1987). For example, supervisors may view the supervision sequence as parallel to steps in the counseling process. Thus, they assess supervisees' skill-level and developmental issues, determine a contract and goals, devise a "treatment plan" (educational plan) of appropriate interventions, and evaluate effectiveness of supervision (and counseling). (It should be noted that this planning approach is not synonymous with an isomorphic view, which emphasizes the direct transfer of counseling skills to supervision [see Breunlin et al., 1988; Liddle et al., 1984]).

Others may plan for supervision by following the procedure a teacher uses to create unit and lesson plans. They assess learning needs and learning styles, write concrete objectives,
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device instructional strategies, create a learning environment, evaluate learning outcomes, and provide ongoing feedback. Frequently, this approach to planning also helps alleviate some anxiety; it allows supervisors to use familiar terms and procedures, gives them a concrete framework for planning, and helps them recognize the supervision skills they have developed already.

Supervisors also often need practice in making realistic plans for their sessions. For example, as we read through their notes on a counseling session, we prioritize their observations, identifying which skills or issues must be attended to first. They choose up to three themes or objectives for a session, including at least one of the counselor's learning goals, and then plan several ways they can meet their objectives.

A recent session of a new supervisor illustrates several of these principles for planning. The supervisor was working with a beginning, master's-level intern who wanted to use Reality Therapy with clients at a drug rehabilitation agency. The supervisor's review of the tape of her first session revealed that she had made very few responses; she reported feeling frustrated but unsure about interrupting her client. The supervisor decided to apply a Reality Therapy approach with the intern. He asked her, for example, to identify what she was doing during the session and asked if that was working for her. He had chosen several points on the tape where the intern could
have made a Reality Therapy response. He played these and brainstormed possible responses with her. Then he role played the client and gave the counselor immediate feedback on her responses. Finally, they devised a way ("cheat notes") the counselor could remember the steps of Reality Therapy in her next session.

Case notes. Supervisors are asked to write case notes that include goals for the supervision session, a brief summary of events, and an evaluation of their performance. An example may best explain how this approach can help supervisors focus on the counselor. For three weeks one highly experienced and skilled clinician continued to write case notes that were summaries of the client and the counseling session she had reviewed, despite my repeated explanations. These notes paralleled her focus on the client during supervision. It was as if some switch in her brilliant brain was malfunctioning. Finally, we wrote the case notes for one supervision session together. The switch finally clicked on. "Oh," she said, "I have to think about my supervisee." This approach not only helped her write appropriate notes; it also helped her begin to focus on her counselor during supervision.

Live supervision. During live supervision of supervision sessions, trainers can phone-in reminders to think like a supervisor. These messages, for example, may point out that the counselor looks overwhelmed by the supervisor's feedback, or
remind the supervisor to check out whether the counselor can perform the counseling intervention being suggested.

**Counselor feedback.** Direct feedback from the counselor can be a potent way to redirect a supervisor's attention. I observed one supervision session in which a doctoral student shared with a beginning counselor a minute-by-minute commentary (covering all ten pages of her notes) on the tape she had reviewed. Then she gave an extensive case conceptualization and a detailed account of what she would do with the client during the next session and over the course of the semester. The few times she asked the counselor a question, she usually didn't wait for his answer. The counselor said less and less (she interrupted him when he did), and looked more and more discouraged.

As the supervisor began to close the session, I knocked on the door and asked if we could briefly review the session. I made a few remarks about how committed each of them were to learning this semester and how open they were to feedback. I noted how much time the supervisor obviously gave to preparing for these sessions, an indication of her intense desire to help the counselor. Then I asked the counselor to give her some feedback. His responses were highly supportive, remarking on her vast knowledge and almost magical insights. Dropping back to punt, I asked him to recall his thoughts and feelings during the session, and then tell her three things she could do differently. I waited while he reflected. This time he asked that she give
him time to respond and listen to him more. In particular, he said he'd already tried some of the things she had suggested. He also had wanted to talk with her about a new client. Maybe, he added, she could ask him each week if there was anything he needed to discuss during supervision. I asked the supervisor to repeat his suggestions, and facilitated their brief discussion of his feedback.

After he left, the supervisor and I discussed what changes she needed to make to be more attentive to her counselor (than to her notes). She later reviewed the videotape of the session, this time taking notes on the counselor's nonverbal behaviors and his attempts to interrupt her. Interestingly, in her final self-evaluation the supervisor reported she was pleased that the counselor "was able to interrupt me, stop me, back me up, and ask me questions."

Similarly, Interpersonal Process Recall (IPR; Kagan, 1980) has been used to elicit counselor feedback and identify unexpressed thoughts and feelings during the supervision session.

**Peer feedback.** Counselors' reactions also can be the focus during peer group review of videotaped supervision sessions. Following a structured format (Borders, 1989), the supervisor identifies goals for the supervision session and requests specific feedback about his/her own performance. Peers are assigned a particular task or perspective for reviewing the preselected videotape segment. For example, group members may
focus on supervisor and/or counselor nonverbal behaviors. Other peers may assume the role of the counselor and then give their feedback from that perspective (e.g., "As the counselor I'm feeling discouraged. I thought I was doing well with this client, but now I think I ought to refer her to you. I wonder if I did anything right."). In ir feedback, group members also give particular attention to the goals and requests of the supervisor. This structured procedure indirectly trains supervisors to observe a counselor's nonverbal behavior and to consider what a counselor may be thinking and feeling during supervision sessions.

**Modeling.** Finally, I have become acutely aware of how much modeling can and does occur during my sessions with supervisors. I very consciously try to model what I am teaching them to do (as opposed to "Do as I say, not as I do"!). We assess the skills they have developed already that are applicable to their new role (cf. Borders & Leddick, 1987) and write learning goals for their supervision internship. I begin individual and group sessions by identifying my objectives and asking for their agenda items. I refer to at least one of the supervisor's learning goals in my feedback, giving concrete observations and examples. Together we determine what interventions are needed to help the supervisor make desired changes. We may role play, use IPR to review a portion of the tape, or I may make a specific assignment (e.g.,
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review the videotape without sound and use their observation skills to identify counselor's nonverbal messages).

Sometimes there is a deliberate "meta-modeling" of a particular skill or approach. In this case a specific intervention is chosen to parallel the intervention the supervisor (and sometimes the counselor) needs to make. In one instance a counselor, who problem-solved and provided answers to his clients, looked to his supervisor for an evaluation of his feedback to clients. The supervisor, who was thinking like a counselor, willingly obliged with monologues about client dynamics. In turn, the supervisor looked to me for feedback about the accuracy and completeness of her case conceptualizations. She was confused when, instead, she was asked to describe the counselor's view of the counselor role and his perspective of his clients, and then to determine ways she could help him expand those ideas.

Similarly, a counselor brought tapes that evidenced a lack of direction and random questioning in sessions. The supervision session also wandered here and there, and the supervisor reported feeling lost and bored. In structuring our session, I asked her to identify goals for the counselor and brainstormed with her ways to teach the needed skills. Near the end of the session, she remarked, "This is the kind of structure I need to provide for her, isn't it?" After a brief pause, she added, "And she needs to do the same with her clients."
Supervisors do not always recognize "meta-modeling"; in these cases, it is important to point out the purpose of these interventions to maximize supervisors' understanding and transfer of learning.

**Additional Observations**

Those who have extensive clinical experience seem to have the most difficulty focusing on the counselor and seeing themselves in a more educational role. Once they make the shift, however, these supervisors provide rich experiences for their supervisees. They have much knowledge to share, and their clinical skills make them acute observers of the supervisory relationship.

Those who have extensive teaching experience seem to have the least difficulty with learning to think like a supervisor. They already have learned how to focus on others as learners and to create learning environments. There is a tendency, however, to give mini-lectures, and ask leading questions that apparently have "right" answers. They seem to have less difficulty assuming the evaluative responsibilities of the supervisor, but may take on an authority role and over-structure supervision sessions.

Finally, for doctoral students, learning to think like a supervisor can be a pivotal experience in the development of their professional identity. They realize how much they know and have to share about counseling. Taking on the responsibility for the development of another counselor often propels them toward a
higher level of professionalism. As they integrate their counseling, teaching, and consulting skills in this new role, they begin to identify a core, individual "style" of thoughts and behaviors in all these helping roles.

Conclusion

Beginning to think like a supervisor is the first step toward a larger goal of developing a cognitive map or conceptual framework for conducting supervision (Borders, in press). Those who have not made the first "conceptual leap" have not yet identified "assumptions, goals, or behaviors that are unique to supervision" (Bernard & Goodyear, in press, p. 3). In contrast, supervisors who have such a framework are aware of what they are doing and why. They have a repertoire of supervisory roles and interventions, and a scheme for matching interventions with the learning needs of a particular counselor. They are systematic, intentional, and proactive, yet also are flexible and able to individualize their supervision.

Interventions that help one think like a supervisor need to be individualized or adapted to the particular supervisor, counselor, and setting. The main point of this paper, however, is that this cognitive shift should be a conscious goal of supervision training. Trainers need to devise deliberate learning strategies that help supervisors develop this perspective. When trainers think like supervisor educators,
their trainees will learn to think and behave like effective supervisors.
References


