The future of coaching and mentoring:

evolution, revolution or extinction?

Part 2

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Supervision or Super-Vision?

Julie Hay

In this article, I offer an alternative focus on the 'why' of supervision, suggesting greater emphasis on the formative, developmental functions of supervision, rather than risking it becoming largely a normative, assessing function. I focus on the aim of facilitating a super-vision (with a hyphen), or a meta-perspective, for the supervisee, rather than construing supervision as in industry as a watching-over and checking process. I present a model to show how supervisees can be helped to become aware of what they may be overlooking. I include a framework for recognising the impact of transference and countertransference on the process of supervision. And I express the hope that we continue to develop links between the supervision processes of coach/mentoring and those of psychotherapy.

Keywords

Coaching, mentoring, supervision, transactional analysis, psychotherapy, clinical, future, autonomy, self-directed, discounting, transference, countertransference

The invitation to contribute to the special themed editions of the *e-O&P* journal on the future of coaching and mentoring contained some questions for authors to consider. The question "What role will non-clinical supervision have?" prompted me to muse about the meaning of non-clinical supervision – is this supervision done non-clinically or supervision of work that is done non-clinically? Either way, it seems to me that the same psychological processes will still apply, because the coaching, mentoring and supervision are all still being done by human beings, so whatever has been learned about supervision within the clinical professions will remain relevant for coach/mentoring. This paper therefore contains some concepts, drawn from transactional analysis (TA) and other clinical approaches, which I consider valid and useful.

Why supervision?

I will comment first on why we have supervision, to distinguish rationale from functions. As one of the five original co-founders of the European Mentoring and Coaching Council (EMCC) in 2002, I was involved in the early discussions about whether we should be requiring all members to have regular supervision. At that time, we agreed that supervision should be included as a requirement, and I produced an Interim Document (Hay 2004) that is still on the website (although with the copyright date removed). Unlike Garvey's (2014) characterisation of this as being neofeudalistic, it included comments such as "it is likely that the form of this [supervision] (and duration, frequency, etc.) may *vary depending* on the nature of coach/mentoring being undertaken …" These interim *guidelines* therefore contain a brief explanation of the <u>nature</u> of supervision [italics added]. Proctor's(1986) normative, formative and restorative functions were suggested as ways of defining the nature of supervision, with the latter renamed by me as supportive, to reflect that the kind of

client issues experienced by therapists that required such a high level of support (e.g. vicarious trauma) should not arise during coach/mentoring.

The more recent EMCC (2008) Code of Ethics contains a definition of terminology that indicates more emphasis on the normative, assessing role of the supervisor, and hence comes closer to Garvey's neofeudalist characterisation. It also emphasises the possible differences in process, with references to "… the process by which the work of the coach/mentor is overseen and advice/guidance sought. The terminology is the same but the process may differ in significant ways from that undertaken in other professions, such as psychotherapy and counselling." and the "… supervisor, who will regularly assess their competence and support their development." Reviewing these EMCC documents highlights for me how my view of supervision has been influenced by my experiences of TA-based supervision, with its emphasis on encouraging the autonomy of others, and I share Garvey's concern about how far EMCC has moved towards the 'surveillance' functions that he highlights as being contradictory to the ethos of coach/mentoring.

A particular theme of the TA approach is about facilitating others to think for themselves and to 'make their own meaning'- in other words, to construct their own map of the world. Hence, I see it as important to separate the 'why' from the 'what' of supervision. Too much focus on the functions of the supervisor may create an impression that a supervisor's role is similar to that implied within industry, when supervisor refers to the first line of management and is tasked with making sure the worker is doing the job properly. I offer an alternative interpretation of 'why' that links with my preference for referring to super-vision. The reason why we need a supervisor is because we need another person who can notice what we are unaware of, and we need them to do that in a way that means we become more self-aware, so that the supervision process is developing our own super-vision, or meta-perspective. To achieve this, the super-vision of the supervisor may of course be needed but this is an enabling rather than an outcome objective.

Drawing attention to discounting

The reason we need another person to help us develop our super-vision is due to a process which is labelled within TA theory as *discounting*. Defined as minimising or ignoring some aspect of the self, others or the situation, discounting is a normal, healthy process that becomes overdone. If we are to remain sane, we all need to discount some of the stimuli that will typically be bombarding us. For instance, until you read this sentence, you will have been discounting the fact that you need to breathe in and out at regular intervals. At a party, you are likely to discount the background conversations so that you can pay attention to the person you are in conversation with, yet, somehow, part of you is still registering what else is happening, because you will instantly react if your name is said somewhere else in the room.

The problem with discounting is that we tend to do it unconsciously in order to maintain a frame of reference, and our frame of reference inevitably contains limiting beliefs. When those limiting beliefs are somehow relevant to our work with the client, they will limit our effectiveness. I can use another TA concept, the drama triangle (Karpman 1968) by way of illustration. If we have Rescuer tendencies, we will tend to view clients as Victims and want to take care of them instead of challenging them to recognise their own part in any problematic relationships they report.

It is easy for us to see when someone else is discounting. When a colleague describes what is happening for them, we will often have the experience of wondering why they cannot see that there is an obvious solution. Indeed, we may even offer them this obvious solution, only to have them 'yes, but' it as they tell us

why it would not work, even though we know that it could work. We suggest to the colleague who is complaining of overwork that they prioritise, or ask others for help, or alert their manager to the problem. Yet they have an apparently logical reason why each of those solutions will not work, whilst at the same time not doing anything to solve the overwork problem.

Helping a practitioner to recognise their own discounting is, therefore, one of the major benefits of supervision. As described below, the practitioner's discounting may occur at various levels. It is usually unproductive to provide information or advice, rather like the Oxfam motto about giving people fish to feed them for the day or teaching them to fish so they can feed themselves into the future.

For me, therefore, the 'why' of having a supervisor is to enable the supervisee to become increasingly competent at identifying and eliminating their own discounting processes. In other words, it is to enable them to develop their own super-vision of their practice in a way that increasingly leads to recognition of their own

discounting. To assist with this process, I have (Hay 2009) converted a TA-based psychotherapeutic model of discounting, including suggested treatment levels (Mellor & Schiff 1975).   As shown here, in Figure 1, I use this as a metaphor to show how the supervisor needs to work with the supervisee at or below the level of the supervisee's discounting. Failure to do that means that the supervisee will have no comprehension of the meaning of the supervisor's input, and may reject it or hear it only as an instruction.
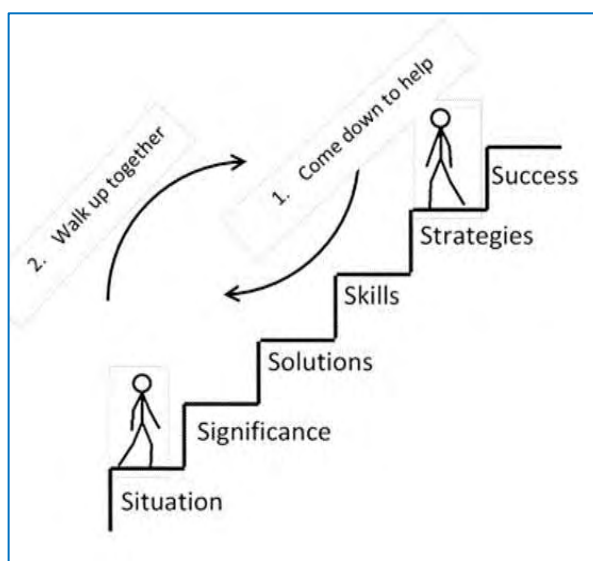

Figure 1: Discounting Steps (Hay (2007 p. 35 reproduced with permission)

Level 1: Situation

This is the most serious level of discounting, in which the practitioner is unaware of the existence of some stimulus within the situation. The practitioner may fail to notice that the client has smiled or is fidgeting, or may appear to ignore something the client says. Discounting at this level means that no change will occur until the practitioner is able to bring the situational factors into awareness. Unless the supervisor is extremely intuitive, or good at guessing, this level will only become apparent if the supervision is based around audio or video recordings.

Level 2: Significance

At this level, the practitioner notices what is occurring in the situation but discounts its significance. So the practitioner notices the smile but fails to realise it was inappropriate to the content under discussion, or spots the fidgeting but assumes it was just an uncomfortable chair, or the practitioner realises they have spoken over the client but don't connect this to the client's wider experiences of being ignored (or the practitioner's own issues).This is the level at which a supervisor or colleague can see easily that someone else has a problem. Hopefully the practitioner recognises the discount once the significance of it is pointed out.

Level 3: Solutions

Once the supervisee knows that there are significant elements of the situation, and accepts that there is a problem, they may have enough awareness to move onto problem solving by themselves. However, they may instead now discount possible solutions. They may claim that clients often smile inappropriately and there is no way to stop them, or that the fidgeting is a necessary release of tension that must be expected, or that practitioners are bound to talk over clients sometimes. There is now the added issue around realising that if solutions do exist, the supervisee could have solved the problem already. So the supervisee may well be struggling to come to terms with feelings of stupidity or shame for not solving the issue sooner. A supervisor may need to suggest some possible solutions, watching out for any 'Yes but' reactions. It may also be that the lack of solutions is not due to discounting but to a straightforward lack of knowledge or experience.

Level 4: Skills

It becomes easier to counter discounting as supervisees move up the levels. However, they may still seek to maintain a frame of reference that includes the ongoing problem, this time by discounting that they or others have the requisite skills. Someone else might be able to pick up on an inappropriate smile, but not them, or their client lacks the skills needed to stop fidgeting anyway, or they doubt they could ever learn to stay silent long enough not to interrupt such a talkative client. The challenge now for the supervisor is to prompt consideration of what skills are needed and how these can be acquired. The potential trap is of joining a supervisee within a frame of reference that has some people being incapable of learning and changing.

Level 5: Strategies

At this level, supervisees have become aware of what is happening and how to resolve it, of what skills will be needed and how to acquire them. If their frame of reference still calls for them to maintain the status quo, they will be discounting around strategies for implementing solutions. Their comments now might be along the lines of being too busy to take on new learning tasks at this time, or perhaps they have so many new clients at present that they can't find time to plan the necessary behaviour change. Confrontation may be needed for them to recognise these discounts.

Level 6: Success

This final stage is where everything seems to be sorted out but something is still preventing movement. A supervisee may comment vaguely about doing it later. Another may seem highly motivated and enthused, but still put off the final implementation. By now, the supervisor may judge that some overt exploration of the supervisee's map of the world is called for, with particular attention paid to beliefs about success and failure. What are the hidden benefits of taking no action and what are the hidden disadvantages of changing?

Transference and Countertransference

Lest you think that discounting will only occur for relatively unimportant aspects of the practitioner/client and supervisor/supervisee dynamic, another useful concept from the clinical world is transference. Again, I have simplified the clinical theory and this time my examples relate to supervision. The same model may be applied to practice, and often there may be a parallel process (Searles 1955, Hay 2007) operating that can then be explored within supervision.

Everyday use of English tells us that 'transfer' means something gets shifted across – as in footballers joining new teams. From a TA perspective, transference is the term for what is happening when we shift across the characteristics of one person (ourself or someone else) onto another. We may project our own good or bad points onto somebody else, or it may be the characteristics of someone else that we transfer, as when we relate to authority figures as if they are parents.

Countertransference is the term used for the ways in which a practitioner responds to the transference of their client. However, this will sometimes instead be the practitioner's own transference. Feelings of wanting to take care of the supervisee may be a realistic, here-and-now reaction, the result of the supervisor's own issues (transference) or a reaction to helplessness being exhibited by the supervisee (countertransference).

For coach/mentoring supervision purposes, I suggest that we can categorise on two dimensions that generate a simple four-mode model as shown in Figure 2 below:

- projecting elements of ourself or of someone else (a third party) onto the person we are interacting with;

- projecting so that we appear to get on well with the other person or so that we have a problem relating to each other.

Project self

Competitive	Concordant
We project elements of our own Child or Parent ego state onto the other person and then get into a competitive state of symbiosis about whose Child or Parent will take precedence	We project elements of our own Child or Parent ego state onto the other person and then believe they are just like us and we are empathising with each other
Conflictual	**Co-dependent**
We project elements of 'a third party' onto the other person and then feel we must 'fight' in a Parent-Child or Child-Parent interaction	We project elements of 'a third party' onto the other person and then seek a Parent-Child or Child-Parent symbiosis

Have problem in relating (left side)   **Appear to get on well together** (right side)

Project someone else

Figure 2: Transference Formats (Hay 2007 p. 16, reproduced with permission)

Concordant transference – there is a risk that those of us engaged within the coach/mentoring community may assume that we are all very similar because we have a shared set of principles. A supervisee may choose a supervisor because of perceived similarities, and hence lose the opportunity of the learning that might come from interacting with someone different.

Competitive transference - a very experienced practitioner may unconsciously compete with the supervisor, particularly if they feel they are being told what to do with the client rather than being helped to reflect and analyse. Alternatively, they may feel competitive about proving that the kinds of clients they are working with are more challenging than the clients the supervisor has.

Conflictual transference – within a professional context, the supervisor is in a position of authority because they have a responsibility to ensure that supervisees are complying with professional norms. This may lead to supervisee 'rebellion'. An experienced practitioner from a different approach (e.g. a management consultant with a psychotherapist supervisor) may instead attempt to occupy the authority position, especially if they think the supervisor has less experience, or less relevant experience.

Co-dependent transference – this is probably the most common transference to occur within supervision. The supervisor may well be more experienced than the supervisee, will already have obtained professional qualifications, may be older than the supervisee, and probably know more people within the professional community. The supervisee may project on to the supervisor the face of a teacher or any other authority figure, and then expect to be taken care of. The opposite may also occur with a very experienced practitioner and a beginning supervisor, or a supervisor who is learning how to give supervision in a field of practice in which they have not worked themselves.

Therapeutic Coaching/Mentoring

In conclusion, I want to add that I am currently a member of two associations that are focused on therapeutic coaching. Originally initiated (as far as I can see) by therapists who were adding coaching to their repertoire, it makes sense to me that coach/mentors need an awareness of therapeutic dynamics. Currently the emphasis has been on this as necessary so coach/mentors avoid doing therapy, but I think that needs to be revised. There are many therapeutic, or clinical, concepts and approaches that can add considerably to the competence of coach/mentors, and to the positive impact of their supervision. My hope is that the perceived barriers between the professional approaches to the development of people will continue to dissolve in ways that lead to better outcomes for clients.

For me, the theories of coach/mentoring add considerably to my psychotherapeutic competence and vice versa. My expectation with coach/mentoring clients, and with supervisees, is that they will remain in the here-and-now during our work together, and I will use my skills to invite them back to that when the inevitable regressions occur. It is only if the regression persists that I would consider referral for therapy, which I see as using different methods rather than different theories. I see coach/mentoring, and supervision, as therapeutic in a different way – each time we successfully change behaviour, cognitive dissonance (Festinger 1957) ensures that our beliefs (or in TA terms our script) will also change.

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