

Exploring Psychoanalytic Psychotherapists' Experience of Supervision: An Interpretative Phenomenological Analysis Study

By

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MA

Thesis submitted in part-fulfilment for the award of Doctor of Philosophy

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April 2021

Declaration:

I hereby certify that this material, which I now submit for assessment on the programme of study leading to the award of PhD is entirely my own work, and that I have exercised reasonable care to ensure that the work is original, and does not to the best of my knowledge breach any law of copyright, and has not been taken from the work of others save and to the extent that such work has been cited and acknowledged within the text of my work.

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Date: 06/04/2021

Acknowledgement:

Many people supported me in my PhD. I would like to thank my supervisors Dr Gerard Moore and Dr Gemma Kiernan for all their guidance and support throughout my PhD journey which enabled me to grow as a researcher.

I am also very thankful to the 14 psychoanalytic psychotherapists who participated in the study interviews and shared with me their supervisory experiences. Without their agreement and sharing their invaluable narratives this study would not be possible.

I am also grateful for the support provided by the members of the Global Interpretative Phenomenological Analysis (IPA) Qualitative Forum. Their discussions and supports have remarkably improved this study.

Finally, I would like to thank my family. I cannot thank enough my wife, Eli, for giving me continued support to follow my dream. I would also thank my mother, Sidi, and my father, Guli, for all the support they gave me.

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Exploring Psychoanalytic Psychotherapists' Experience of Supervision: An Interpretative Phenomenological Analysis Study

Ali Khoshfetrat

Abstract:

Studies aimed at exploring psychoanalytic psychotherapy supervisees' experience of supervision, have often been focused on novice and trainee therapists whose supervisory needs, tasks and consequently their supervisory experiences differ from those of accredited experienced practitioners. Experienced therapists have accumulated supervision experiences that put them in a position to identify long-lasting and sustainable effects of supervision. Hence, experienced therapists can contribute to our understanding about how psychoanalytic supervision is experienced in the fullness of time. This study aimed to explore a group of accredited psychoanalytic psychotherapist supervisees' experiences of supervision. Using purposeful and snow-ball sampling, fourteen psychoanalysts (seven female and seven male) accredited by the Irish Council for Psychotherapy were recruited. Data were collected using a semi-structured interview.

Interpretative phenomenological analysis was employed for data analysis. The four superordinate themes that emerged from the analysis were "providing illumination", "harmonizing emotional experience", "noticing unmet needs" and "grappling with relational experiences". Good and effective psychoanalytic supervision appeared to be both insightful and emotionally supportive, while problematic psychoanalytic supervision neglected the participants' needs and was characterised by an uncomfortable relationship. The findings from the study point to several considerations for practice and future research. Of particular note is that the supervisors are recommended to democratize the supervision relationship so that supervision can be conducted in a way that is meaningful for the supervisee. Given that supervision is a triadic practice, future research is required to study the supervisors and the clients, which will extend the findings from the current study. This study is unique as it is the first study to provide a nuanced understanding of the experienced psychoanalytic psychotherapy supervisees' supervision experiences in an Irish context.

Chapter1. Introduction

1.0. Introduction

Psychoanalytic supervision is the “very crux of psychoanalytic education” (Watkins, 2016a, p.50) and is the chief means by which psychoanalytic treatment is taught and transmitted (Eitingon, 1923; Ogden, 2005; Ferro, 2013). Its purpose is to translate a theoretical understanding into psychoanalytic practice (Zachrison, 2011). Psychoanalytic supervision provides practitioners with a supportive space for self-reflection, which in turn contributes to the formation of a psychoanalytic identity. It provides a bridge for trainees to become independent psychoanalytic therapists (Watkins, 2013a).

Although there is some evidence that supports the positive effects of psychoanalytic supervision on the development of psychoanalytic therapists, only a few studies have explored psychoanalytic supervisees’ experience of supervision (Sant & Milton, 2015; Stromme, 2012). However, they are mainly focused on trainees who have different supervisory needs and are unlikely to represent more experienced supervisees. The aim of this study is to explore accredited psychoanalytic psychotherapists’ experience of supervision.

The purpose of this chapter is to provide a general introduction to this study. It begins with the definition of the key terms used throughout the study. Following this, the international and the Irish context for the practice of supervision will be discussed. Subsequently, the formats and models of supervision will be described. Next an overview of the study will be presented. The final section concerns the researcher’s reflexivity about the reasons why the researcher conducted this study.

1.1. Definition of Key Terms:

This section describes and defines the main concepts used throughout the study. It aims to introduce some basic tenets underpinning psychoanalytic psychotherapy supervision. Of those, transference and countertransference, parallel process and supervisory alliance are fundamental to address because they are proposed to be the main factors through which the supervision relationship takes form (Watkins, 2015a).

1.1.1. Supervision

As a complex and nuanced process, supervision is central for learning psychotherapy (Stovel & Steinberg, 2008) and is considered fundamental to ensuring the client receives good therapy (Falender & Shafranske 2004). In Ireland, the Health Service Executive (HSE) published guidelines for practitioners involved in mental health and professional caring. Based on this policy, professionals are required to engage in a regular and effective supervision relevant to their profession (HSE, 2015). Psychotherapy bodies such as the Irish Council for Psychotherapy (ICP) that accredit psychotherapists have similar policies requiring members to be supervised in order to be recognized as a psychotherapist practitioner.

Supervision is more than teaching and less than intervention (Bernard, & Goodyear, 2009). Different definitions have been proposed for psychotherapy supervision. Bernard and Goodyear (2014) view clinical supervision as an intervention in which a more senior member of a profession guides a more junior colleague or colleagues who typically (but not always) are members of that same profession. They proposed that “this relationship is evaluative and hierarchical, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the junior person(s), monitoring the quality of professional services offered to the clients she, he, or they see, and serving as a gatekeeper for the particular profession the supervisee seeks to enter”. (p. 9)

1.1.2. Psychoanalysis

Psychoanalysis was founded by Sigmund Freud (1856-1939) in the late 19th century. He considered *the Studies on Hysteria* the beginning of psychoanalysis as a theory and practice, where he and his colleague Joseph Breuer (1842-1925) discovered mental and psychological, rather than physical and neurological, factors behind hysteric, nowadays called conversion disorder (Shahidi et al, 2015). Freud (1923) defined psychoanalysis as “the name (1) of a procedure for the investigation of mental processes which are almost inaccessible in any other way, (2) of a method (based upon that investigation) for the treatment of neurotic disorders and (3) of a collection of psychological information obtained along those lines, which is gradually being accumulated into a new scientific discipline” (p. 235). From the psychoanalytic perspective, the mind’s internal conflicts are essential to understanding human behaviour (Milton et al. 2011).

The unconscious internal conflict is the fundamental principle on which psychoanalytic theory and treatment are based. The way people deal with these unconscious conflicts results in the formation of certain psychological symptoms. Symptoms are the product of

a compensation process to solve the conflict (Loeffler-Stastka, 2014). Using a simplistic example, psychoanalytic theory holds that a person who always develops problematic relationships with others, and, in analysis, he/she recognizes that these relationships stem from a need to be punished, a need that originates in childhood when s/he was constantly criticized and devalued by parents. Thus, s/he unconsciously carries the expectation of punishment into adult relationship and behaves according to that expectation.

The terms “psychoanalysis” and “psychodynamic psychotherapy” are frequently used interchangeably. The term psychodynamic psychotherapy was introduced for the first time in a medical seminar after World War II (Shedler, 2006). The intention was to secure a place for psychoanalysis in the psychiatry residency curriculum, while not alarming psychiatrists who viewed psychoanalysis an ineffective long-term treatment. Shedler (2006) stated “the term psychodynamic was something of a ruse”. Nowadays, it refers to a range of treatments based on psychoanalytic concepts and methods (Shedler, 2010). Fonagy and Kachele (2009) define psychodynamic psychotherapy as a treatment that is a predominantly verbal, interpretive, and insight-oriented approach that aims to modify or re-structure maladaptive relationship representations.

There has long been a debate around the terms psychoanalysis and psychodynamic psychotherapy. It has been suggested that the frequency of therapy sessions required for proper psychoanalysis lies at the heart of this debate (American Psychological Association, 2017). In psychoanalysis, the depth of the work on the internal dynamics, transference and countertransference necessitates regular sessions. This frequency also relates to the time in-between the sessions that allow for intensive work on the psychoanalyst-patient relationship, whereas psychodynamic psychotherapy normally involves a session per week. In psychodynamic psychotherapy external realities are as important as the internal world of the patient engaged through clinical work (British Psychoanalytic Council, 2018).

In addition, while contemporary models, often known as psychodynamic psychotherapies, do not use a couch in therapy sessions and also propose a shorter duration for therapy, some classical psychoanalysts still prefer using the couch and hold the idea that the adequate number of sessions required for patients in analysis can never be predicted in advance. Recently, studies pertinent to psychodynamic therapy revealed that this model of therapy often takes on average less than 20 sessions (Abbas & Katzman, 2013).

The focus of the current study is on psychoanalytic psychotherapy supervision. Nevertheless, both psychoanalysis and psychodynamic psychotherapy will be used

interchangeably in the literature review because the articles reviewed have not distinguished these two forms of therapies/supervisions and it is not clear which one the authors are referring to when using the words psychoanalysis or psychodynamic. The researcher attempted to be true to the sources.

1.1.3. Psychoanalytic-based Supervision

Psychoanalytic-based supervision involves supervisory techniques and skills used across various forms of psychoanalytically oriented therapies from psychoanalysis proper to contemporary models such as Davanloo's intensive short-term dynamic psychotherapy (Said, 2000) based on psychoanalytic principles. Nevertheless, some authors have attempted to define it in a way to cover the main features of these varieties. Watkins (2011a) defined psychoanalytic psychotherapy supervision as "an educational method or intervention where a more knowledgeable, experienced, and senior member of the psychoanalytic profession enters into a relationship with a less knowledgeable, less experienced, junior member of the psychoanalytic profession to enhance the professional functioning of that junior member's practice and conceptual skills; that professional relationship typically is evaluative and hierarchical, extends over time, and involves monitoring of quality and quality control" (p.402). Considering that psychoanalytic treatment has evolved since Freud and there are different forms of psychoanalytic treatments, it stands to reason that psychoanalytic supervision has also evolved and may take different forms. This thesis aims to acknowledge this diversity and to use the word "psychoanalytic psychotherapy supervision" to refer to the supervision conducted by psychoanalytic supervisors from different psychoanalytic orientations. Nevertheless, the author believes that the unifying factor across all psychoanalytic supervisions, similar to psychoanalytic treatments, is the Unconscious. Watkins (2019) stated that psychoanalytic supervision forever prioritizes making sense of the unconscious dynamics. Based on the author's personal supervisory experience and his familiarity with the supervision literature, psychoanalytic supervision enhances the supervisee's understanding of the client's, and at times the supervisee's, unconscious processes. This deepens the supervisee's capacity to listen to the unconscious meanings (Watkins & Milne, 2014). Two fundamental elements of psychoanalytic supervision are to focus on the unconscious processes of transference (Haan, 2011) and countertransference (Frederickson, 2015).

1.1.4. Transference and Counter-transference

Transference and countertransference are essential part of both psychoanalytic therapy and supervision. Transference refers to the patients' feelings and attitudes, related

to significant others in the past, projected to the physician and therapist in the present (Freud, 1910; 1959). Psychoanalytic theory holds that these feelings and attitudes, which can be either friendly or hostile, originate in childhood and that patients project these childhood fantasies and magical expectations onto the therapist. Patients then begin to treat and challenge the therapist in the way they did with significant others in the past. Freud (1905) when describing Dora, one of his published case studies, stated: “ ... it was clear that {Freud} was replacing {Dora’s} father in her imagination” (p. 108). However, he admits that some parts of transference might be real and related to the one the transference is projected onto i.e., in this case physician or psychotherapist. Freud initially considered transference a barrier against the process of treatment and something to be overcome, while later he discovered that it is a decisive part of treatment and “the battlefield on which all the contending forces are to meet” (2010, p. 10). The resolution of transference leads to the resolution of neurosis (Freud, 1912).

Freud’s students and later psychoanalysts developed the concept of transference to a considerable degree. Melanie Klein (1952) believed that patients can push the therapist to take on characteristics similar to the original source of transference. This idea regarding transference was a significant development. Freud admitted that transference stems from unconscious forces that distort reality, however simultaneously he sees some real characteristics of the therapist as a root of transference. Klein’s conceptualisation goes one step further, when she proposes that patients can provoke the therapist to treat them in a way their significant others treated them in the past. Macalpine (1950) talked about aggressive transference, and Gill and Hofmann (1982) emphasised the analysts’ actual behaviours in therapy. These theories view transference from different perspectives and emphasise different aspects. However, they all see the handling of transference as a vital part of treatment. The interpretation of transference is one of the active treatment elements and it is the one that is believed to lead to long-term and sustainable change (Gabbard & Westen, 2003).

Investigators have found evidence to support the existence of transference in different areas. Anderson and colleagues (Andersen & Saribay, 2005; Andersen & Chen, 2002; Andersen & Berk, 1998) developed a two-session examination in which this concept within cognitive and social psychology can be studied. They asked participants to describe a significant other in the first session, and then they were asked to rate/describe others exposed to them in the second session. This study showed that the characteristics of the significant other were represented by a new target or person. The authors found a tendency for people to perceive new others in consistency with pre-existing significant other representations. In the attachment theory realm, Brumbaugh and Fraley (2006,

2007) discovered how past romantic relationships can affect current perceptions of new people. Findings indicated that people transfer past attachment representations not only to a new romantic partner resembling the past romantic partner, but also to one not resembling the past partner. This suggests both a specific and general transference. However, investigators found that “participants did so to a greater degree when the target resembled their past partner, indicating a specific transference process” (p. 393). Psychotherapy process-outcome research is another area that offers evidence supporting transference as a therapeutic tool. It is believed that psychotherapies, particularly those designed for personality and chronic disorders, have to take into account the manifestations of transference in therapy sessions (Yeomans, Levy & Caligor, 2013). Evidence shows that working on transference will lead to sustained and long lasting therapeutic outcome (Radcliffe & Yeomans, 2019). Taken together this evidence supports the existence of transference and the important role it plays in both society and therapeutic settings.

Psychoanalytic psychotherapy supervision aims to improve the supervisee’s understanding about the client and the way the client relates to the analyst i.e., transference. Unpacking the client’s transference is one of, if not the most, important supervisory tasks, particularly where supervision is conducted mainly in the classical way (Frawley-O’Dea & Sarnat, 2001). Haan (2011) states that the mainstream psychoanalytic psychotherapy supervision follows the idea that supervision should assist the supervisee in understanding the client’s transference. Thus, it is necessary for a study focused on psychoanalytic supervision to address the therapist supervisees’ experiences of unfolding transference.

Like transference, counter-transference emerged from the psychoanalytic tradition. Unlike transference related to the client’s experience, the construct of counter-transference is pertinent to the psychoanalyst’s experience. Freud (1910) defined counter-transference as the analyst’s reactions to the client’s transference. These reactions are based on the therapist’s unresolved conflicts. According to this definition, counter-transference is a reaction in the person of the therapist that contaminates the process of therapy. Thus, its disruptive effects need to be managed and controlled by extensive personal analysis through which the analyst can recognise its origin and manifestations.

The concept of countertransference has been revised and interpreted by different theorists over time. Paula Heimann (1950) is perhaps the first to make a significant development in our understanding of the concept. Heimann proposed that the therapist’s emotional reaction to the client can be seen as a way to understand the client’s

unconscious. This perspective is known as the totalistic view and encourages therapists to see counter-transference as a therapeutic tool rather than a barrier against the process of therapy. At a similar time Winnicott (1949) stated that counter-transference has two sides: objective and subjective. Objective counter-transference refers to those reactions that are a realistic and normal responses to the client. It is based on the client's earlier and childhood object experiences, whereas subjective counter-transference includes reactions triggered by the therapists' unresolved conflicts. However, like other concepts, the scope of counter-transference has been expanded by subsequent theorists (see e.g., Kiesler, 2001; Gelso & Hayes, 2007).

Some researchers had attempted to examine counter-transference and its role in the therapist's perception of therapy. Cutler (1958) assessed therapists' blind spots to see how they perceive the client when s/he alluded to his/her issues related to these blind spots. Cutler found that therapists tended to avoid the materials representing their blind spots. There is evidence to support the idea that counter transference is present in all psychotherapy formats and is a key part in the therapeutic relationship (Brown, 2001; Ellis, 2001; Kaslow, 2001).

It is still a controversial discussion as to whether psychoanalytic psychotherapy supervision should require the supervisee to explore his/her countertransferential feelings and thoughts, even though it has been proposed that countertransference, at least at some stages, needs to be addressed in supervision (Frederickson, 2015). Considering the idea that most of the clinical problems the psychoanalytic psychotherapist supervisee faces are perhaps down to their blind spots and countertransference (Frawley-O'Dea & Sarnat, 2001), the supervisor should be a good psychoanalytic psychotherapist too in order to identify the effects of the supervisee's blind spots and the unconscious mind on their work. The necessity of working on the supervisee's countertransference is of further importance when it comes to the relational-based psychoanalysis, which is a common approach among Irish psychoanalytic psychotherapists. Thus, it was important for the current study to cover the supervisee's experience of working on their countertransference in supervision.

Although transference and countertransference have been developed and often discussed in terms of the psychotherapy processes, both concepts seem to be present in the supervisory processes too (Gorman, 1999). The supervision relationship, which is a key factor in the supervisory interaction, is primarily influenced by the supervisee's transference and the supervisor's countertransference (Bennett, 2008). The supervisee and the supervisor, similar to the client and the therapist, may develop transferential and

contertransfere ntial feelings toward each other. What makes the matter more important is that these dynamics move out from supervision sessions to therapy room and vice versa (Cassoni, 2007) denoting one of the points where supervision and therapy relationships are related. For example, a supervisee who has a criticising client may be critical of and judgemental about his/her supervisor. Likewise, a judgemental supervisor may lead the supervisee to be critical of the client. This phenomenon is called parallel process (Sarnat, 2019).

1.1.5. Parallel Process

Parallel process, as alluded to above, has its roots in the psychoanalytic concepts of transference and counter-transference and refers to a particular supervisory relationship the supervisee and the supervisor develop (Morrissey & Tribe, 2001). The first reference to this conception was made by Searles (1955) when he suggested that the supervisee in supervision might behave in the same way his/her client did in therapy. Searles believed that the emotions supervisors experience appear to be the same as those of the supervisee in therapy. That is, the supervisee brings a particular manner, identified with the client, from therapy to supervision. He labelled this phenomenon “reflection process”. Although Searles alluded to some supervisors’ reactions, that originated in the supervisor’s past as part of reflection process, it was not the main focus of his theory.

Doehrman (1976) believed that the reflection process is not the whole story and is limited in scope. While the reflection process is a single domino theory, parallel process could be bidirectional. According to Doehrman, the supervisor, can also contribute to the development of parallel process and the supervisor’s reactions, in turn, can be replicated by the supervisee in therapy sessions. In other words, the supervisee not only brings his experiences with the client to supervision, he also transfers his supervisory experiences with the supervisor to therapy with the client. Drawing upon psychoanalytic literature, Zetzer et al. (2018) defined the parallel process phenomenon as “a supervisee’s unconscious re-enactment of therapy session material within the supervisory dyad” (p. 10). Thus, the supervisee reactions transcend the reflection process and include both bottom-top i.e., from therapy to supervision, and top-down dynamics i.e., from supervision to therapy. This is an unconscious production that illustrates “correspondence between the supervisory and treatment relationships” (Brown & Miller, 2002, p. 812).

Several theories, the majority of them psychoanalytic, have been proposed to explain the reason why parallel process occurs. Sachs and Shapiro (1976) considered this process a form of non-verbal communication, where words cannot be used. The

supervisee through actions rather than words tells the supervisor what happened in therapy with the client. Doehrmann (1976) sees an unequal relationship between dyads supervisor-supervisee and supervisee-client as the main reason behind parallel process, particularly when authority and power become issues. Wolstein (1984) stated that the supervisee employs the client's defensiveness to cope with the anxiety of being in supervision. These theories help to further our understanding of parallel process. However, it is noteworthy that there is no consensus, even among psychoanalytic theorists, as to why parallel process occurs.

Although the precise reason for parallel process is not explicit, both the supervisor and the supervisee play a crucial role in its development. Both parties are subjects of the unconscious. While the supervisee contributes to the development of parallel process through bringing their transference from clinical work and countertransference from supervision, the supervisor may impact on the supervision endeavour through their own blind spots, unresolved internal conflicts or inappropriate expectations, a process referred to as, super-transference (Teitelbaum, 1990a).

Regarding the lack of evidence supporting the causality of parallel process, it might be more useful to explore how parties involved in supervision experience it (Zetzer et al., 2020). Like other supervisory interventions, exploration of parallel process is intended to facilitate the supervisee's learning. When it emerges, Carroll (1996) stated that the supervisee should be helped to focus on what was happening in the therapeutic relationship. He further proposed that parallel process can also help supervisors to see how they relate to the supervisee. It is believed that if the supervisee is helped to examine their interactional patterns beyond the therapist-client dyad, parallel process, in turn, can enhance their self-awareness of the contextual issues. It is obvious that exploring and working on these issues needs a secure and supportive space. This is what makes psychoanalytic psychotherapy supervision therapeutic but not therapy (Morrissey & Tribe, 2001).

Although working on parallel process appears to be a facilitative factor for the supervisee's learning, trainees or early career stage therapists might be too vulnerable to work on their blind spots. Given that there is often a low level of insight and self-awareness among beginner and novice supervisees, confrontation can lead them to feel anxious (Stromme, 2012); thus, working on parallel process can be a hindering rather than a facilitative factor. Supervisees with more experience seem to be more suitable for this confrontational work as they have more experience of working clinically, being supervised, and have greater self-awareness. Despite more experienced supervisees' suitability to

working on these issues, some of them have been found to have minimal knowledge and experience of working on these issues in supervision (Morrissey & Tribe, 2001). However, this process as a training tool should not be overused and supervisors should not consider any supervisory dynamic a type of parallel process (Feltham & Dryden, 1994). At the same time, it should not be ignored. Both overusing and ignoring parallel process should be avoided because “neither of which is helpful for the supervisee” (Morrissey & Tribe, 2001, p. 107). The concept of parallel process accentuates the relational element of psychoanalytic psychotherapy supervision i.e., supervisory alliance.

1.1.6. Supervisory alliance/relationship

The terms “therapeutic relationship” or “therapeutic alliance” are often used interchangeably, even though the alliance is a more general word that includes therapeutic relationship along with other elements, i.e., agreements on and mutual understanding about goals and tasks of therapy (Bordin, 1979). Therapeutic relationship/alliance has been considered a vital part of therapeutic (Lambert, 2015), and later supervisory (Watkins, 2015a), practice. There are a number of meta-analyses that support the idea that therapeutic relationship plays an essential role in the process and outcome of psychotherapy (Luborsky, Singer & Luborsky, 1975; Smith & Glass, 1977; Stiles et al., 1986). For example, in a meta-analysis of hundreds of psychotherapy process-outcome studies, Orlinsky, Grawe, and Parks (1994) found that therapeutic relationship more than any particular form of psychotherapy could predict a positive outcome. Consequently, theorists have proposed that it is the therapist, e.g., his relationship with the patient, not the treatment per se that leads to the therapeutic outcome (Wampold, 2006). After the therapeutic relationship gained acceptance in psychoanalytic thought, the subsequent question was: “How might the construct of alliance also apply to the psychoanalytic supervision relationship?” (Watkins, 2015a).

This question was addressed by Fleming and Benedek (1964, 1966) who introduced the concept of “alliance” to supervision literature. According to Fleming and Benedek (1966), a bond of trust and confidence between psychoanalyst and the patient is initiated due to expectations of giving and receiving help. Analytic work cannot proceed without this bond. They stated that:

“ ... In supervision, there exists the same necessity for acceptance of a mutually shared educational goal and the same need for confidence that the expectations of teacher and learner can be satisfied. The term *learning alliance* describes the essential characteristic of this relationship.” (pp. 52–53).

Then the learning alliance in supervision came to be seen as equal in importance to the therapeutic alliance in psychotherapy. They firmly believed that a good learning alliance is necessary, if not absolutely necessary, for supervisory learning. It is now well-established that supervisory alliance is an indispensable element of helpful supervision (Alonso, 1985; Hyman, 2008; Sarnat, 2012). Thus a study that explores analytic supervisees' experience of supervision needs to look at the supervision alliance in order to understand how this vital element of supervision plays out and is experienced by the supervisees.

Psychotherapy supervision and psychoanalytic psychotherapy supervision are common practices among psychotherapists worldwide. The section below concerns the prevalence of these practices internationally and in Ireland.

1.2. Prevalence of Supervision in the International Context:

The majority of psychotherapists attend supervision as psychotherapy related societies around the world require practitioners to participate in supervision during and post- training (American Psychological Association, 2014; British Psychological Society, 2013; Roth & Fonagy, 1996). However, it has been found that some therapists post training are reluctant to continue receiving supervision (Gabbay et al., 1999), while supervision is an ongoing educative process and contributes to the development of their self-awareness and practice. Hence, practitioners are encouraged to continue participating in supervision to maintain the process of learning and understanding (Carroll, 2011; Hawkins & Shohet, 2012).

Supervision is a globally common practice, a shared endeavour among mental health professionals. For instance, studies have shown that working as a supervisor is a common activity among psychologist psychotherapists in and outside the U.S. Ronnestad, Orlinsky, Parks, and Davis (1997) surveyed 1600 therapists of various orientations in different countries. Using the Development of Psychotherapists Common Core Questionnaire (DPCCQ), they reported that just over half of the respondents (51%) were involved in providing supervision. Norcross and Rogan (2013) have studied members of Division 29, i.e., psychotherapy, of the American Psychological Association (APA) to identify their therapeutic orientation and everyday activities. They began this study in 1981 and replicated it at 10-year intervals. The methodology and the questionnaire used when the study was repeated were the same. On each occasion, supervision was found to be the third most frequently endorsed profession, following psychotherapy and assessment/diagnosis. Regarding the members' orientation, they found psychodynamic

and psychoanalytic psychotherapy as the most common model applied by psychologists in 2012 and 1991, whereas it was the second model in 1981 and 2001 following integrative/eclectic psychotherapy.

Although no empirical study has been conducted to investigate how common supervision is among psychoanalysts, supervision has been given a great deal of attention by psychoanalytic communities over the recent decades; the International Psychoanalytic Association (IPA) dedicated three pre-congress meetings to discuss supervision (Amsterdam in 1993, San Francisco in 1995, and Barcelona in 1997). Journals often contain research studies pertaining to psychoanalytic psychotherapy supervision, as well as discussion of issues relevant to it and specific sections allocated to discussing the issue (Pegeron, 2008; Cabaniss et al., 2001; Hill et al., 2015,2016; Nelson & Friedlander, 2001; Wulf & Nelson, 2001; Holloway & Neufeldt, 1995; Knox et al., 2006). Current critiques of aspects of psychoanalytic training, including supervision, are widely available (Kernberg, 2000, 2007, 2010; Reeder, 2004; Szecsody, 2003).

Supervision has continued to be a formal part of education in psychoanalysis, since its inception (Szecsödy, 2013). The supervisee is typically required to work with a certain number of certain cases for a specific time period. According to the American Psychoanalytic Association (APA), in addition to didactic education and personal analysis, the following is regarded for supervision:

“Three adult non-psychotic cases, including both male and female patients is the minimum number of cases needed to meet this requirement. The supervision of each of at least three cases should occur over a sufficient length of time to allow the candidate to develop sufficient knowledge and skill to independently and competently conduct psychoanalysis”. (Board on the Professional Standards of the American Psychoanalytic Association, 2010, p. 6).

It is notable that the principles informing psychotherapy and psychoanalytic psychotherapy supervision may vary from country to country. The section below addresses the psychotherapy and the psychoanalytic psychotherapy supervision practiced in Ireland.

1.3. Patterns and Prevalence of Supervision in the Irish Context:

The process of regulating the psychotherapy profession in Ireland is underway. This regulation will make supervision a mandatory task (Quality and Qualification Ireland, 2016). While it is not obligatory yet, some settings and psychotherapy bodies may set attending supervision as an employment condition. In 2015, For example, the HSE presented its policy regarding supervision- *HSE/Public Health Sector Guidance Document on Supervision for Health and Social Care Professionals*- that requires all health and social care professionals to attend “regular, high quality, consistent and effective supervision that is appropriate to their profession” (HSE, 2015, p. 5).

Due to a lack of evidence regarding supervisory models practised in Ireland, it is difficult to ascertain what kind of supervisory approach is commonly practised by psychotherapists. However, it seems that British supervisors have largely influenced supervision in Ireland as many Irish psychotherapist supervisors pursue training in supervision in the UK and many British supervisors conduct a training program in Ireland (Creaner & Timulak, 2016). Seemingly, the supervisory approaches common in Ireland are based on a conceptual framework rather than empirically validated models and frameworks, which guide supervisors on how to navigate the supervisory process (Creaner & Timulak, 2016).

Similar to the international level, studies indicate a high rate of psychotherapists/psychologists attending supervision in Ireland. It was reported that two-thirds of psychologists who practice psychotherapy received supervision for at least 2 hours per month (Booth et al., 2010). In a more recent study, McMahon and Errity (2014) distributed an online survey nationwide to Irish psychologists to find out how common and satisfactory supervision was. The majority of participants were clinical (47%) and counselling (23%) psychologists. it was found that 91% of Irish psychologist psychotherapists were receiving supervision. Of these, two-thirds were dissatisfied with the supervision they received. Ellis, Hutman, Creaner, and Timulak (2015) found that 79% and 40% of participants were currently receiving “inadequate” and “harmful” supervision respectively; this increased to 92% and 51% when investigators considered participants’ experiences of receiving supervision across their professional lives. This finding indicates a high prevalence of problematic supervision provided for supervisees in Ireland. This is consistent with McMahon and Errity’s (2014) study. Ellis et al.’s findings parallel those found in other countries (Ellis, et al. 2015 in the U.S. and Son & Ellis, 2013 in the South Korea), which implies that “inadequate” and “harmful” supervision may be an internationally prevalent issue. In addition, it can be suggested that this might be in part

related to supervision itself as there is a limited but growing body of research pertaining to supervision.

Although psychotherapy, and consequently psychoanalytic psychotherapy, has yet to be regulated as a profession in Ireland, psychoanalytic associations have been involved in accrediting Irish psychoanalytic oriented therapists. Several psychoanalytic groups of therapists exist in Ireland. Jonathan Hanaghan was sent by Ernest Jones (1879-1958) to Ireland in 1926 to introduce Irish practitioners to psychoanalysis (Hamilton, 2017). In 1942, he founded the Irish Psycho-Analytic Association (IPAA). He trained a small group of analyst. From this group of people, the second generation of psychoanalysts emerged in the 1980s. This new direction for psychoanalysis included younger psychoanalysts who read Freud, Klein, Winnicott and others and later founded the Irish Forum for Psychoanalytic Psychotherapy (IFPP). Numerous training programs were established for those interested in child and adolescent work and those interested in group work. They later went on to establish the Irish Forum for Child and Adolescent Psychoanalytic Psychotherapy (IFCAPP) and the Irish Group Analytic Society (IGAS). A number of IFPP members were interested in Jacques Lacan's (1901-1981) work that established psychoanalysis on linguistic foundations. This group of analysts founded the Irish Association for Psychoanalysis and Psychotherapy in Ireland (APPI) where they read Lacan's seminars under the guidance of Cormac Gallagher who had attended some of Lacan's seminars in Paris. The IFPP and the APPI are affiliated to the Irish Council for Psychotherapy (ICP) an umbrella community for psychotherapy bodies in Ireland that follows the European Association for Psychotherapy (EAP).

Consistent with psychotherapy societies in Ireland (IACP, 2013), psychoanalytic psychotherapy bodies consider supervision a mandatory task. Based on the IPAA guidelines, a minimum of 150 hours of working under supervision provided by an IPAA recognized analyst is required to be accredited. This supervisory work needs to be undertaken for at least three years, equivalent of over 400 hours of clinical work. The IFPP asks members to have completed at least once weekly individual supervision for a minimum of 150 hours. Members are also required to have received supervision from two different supervisors who are a full member of the IFPP or another psychoanalytic psychotherapy body. IFPP members are required to continue attending individual supervision for at least two years post-training in order to maintain their eligibility for full membership. APPI requires practitioners to participate in a weekly individual supervision for four years under a training program. Additionally, according to the APPI guidelines,

practitioners are asked to be in an ongoing supervision for all periods while they are involved in clinical work.

As advised by the Irish psychotherapy bodies such as IFPP (<http://ifpp.ie/membership-criteria/>) and APPI (www.psychotherapycouncil.ie/members/supervision/), therapists need to attend individual supervision during their training and post training. However, clinical supervision in general and psychoanalytic psychotherapy supervision in particular can be conducted in different formats, and the individual form of supervision is only one, albeit the most common, type of psychotherapy and psychoanalytic psychotherapy supervision. The section below describes different forms of supervision that aims to highlight the differences between individual supervision, as the focus of the current study, and other formats of supervision.

1.4. Formats of Supervision:

Clinical supervision takes place in one of these three forms: individual (one-to-one), triadic (two supervisees with one supervisor), and group (three or more supervisees with one supervisor) supervisions. Psychotherapy models of supervision, including psychoanalytic psychotherapy, can take place in each format.

Individual supervision, consisting of a supervisor and a supervisee, has been found to be the most widely used form of supervision (Carroll, 1996). It provides the supervisee with the supervisor's full attention that contributes to the development of her/his therapeutic skills and general professional development. It also provides plenty of opportunities for the supervisee to develop supervisory alliance on which supervision is based (Milne, 2007). This is of further importance in the psychoanalytic form of supervision because exploring transference and countertransference issues needs a safe space (Moloney, Vivekananda, & Weir, 2007). Additionally, it has been reported that supervisees participating in individual supervision perceive it as being more effective than those participating in triad supervision (Newgent, Davis, & Farley, 2004). Moreover, and according to a more recent study (Borders et al. 2012), supervisees that take part in all three formats perceive individual supervision more favourably as they can delve into questions in more details. With regards to these factors, it is imperative to examine supervisees' experiences of individual supervision. The current study is focused on this form of psychoanalytic psychotherapy supervision.

Group and triadic supervisions contribute to vicarious learning while supervisees observe peers' work. Proctor and Inskipp (2001) state that the true "economy" is related to an opportunity given to observe other's work free of charge. This is of great importance as supervisees learn better from peers than skilled therapists (Hillerbrand, 1989). However, from a psychoanalytic point of view, group and triadic supervisions, like group therapy, can activate certain experiences and behavioural patterns, and trigger anxieties that stem from childhood experiences and family relationship with, for example, siblings or parent/authority figures. These experiences are influential on how each member perceives group dynamics (Ogren et al., 2001). These supervisory dynamics perceived on the basis of earlier experiences can result in a rivalry, increased defensiveness and shame (Glickauf-Hughes & Frye Campbell, 1991; Scanlon, 2000). Moreover, sometimes much time might be devoted to issues less relevant to the members' interests. Unlike group as well as triadic supervisions, the individual format is likely to provide the supervisee with a confidential and secure space in which s/he can more easily disclose, as opposed to group supervision, and receive support. This is what the current study is focused on. Given different experiences that might result from group or triadic supervision, the scope of this study is limited to explore psychoanalytic psychotherapist' experience of individual supervision. Thus, supervisees' experiences of receiving group and triadic supervision were excluded from this study.

1.5. Models of Supervision:

Supervision is an activity involving a complex interaction between participants (Smith, 2009). Different models of and approaches to supervision have been developed, over the last century (Glover & Philbin, 2017). Clinicians have attempted to develop theories, based on their own orientations, to provide a coherent framework for this complexity. With regards to the purpose of the current study i.e., exploration of psychoanalytic therapists' experience of supervision, only psychotherapy-based models of supervision are discussed.

1.5.1. Psychotherapy-based Models of Supervision:

Supervision, the same as intervention, is provided based on theoretical approaches to psychotherapy (Bernard & Goodyear, 2009; Stoltenberg et al., 1998) due to a lack of empirically based guidelines for supervision. Thus, theories of psychotherapy navigate both therapy sessions and supervision. The theory of therapy informs supervision in selecting and giving priority to clinical materials to discuss (Beck et al., 2008). Falender and Shafranske (2008) stated that "Theoretical orientation informs the observation and

selection of clinical data for discussion in supervision as well as the meanings and relevance of those data” (p. 9). Hence, despite the commonalities across psychotherapy orientations, supervision, like an intervention, in each therapy model differs from other models. Regarding a need for having specific supervisory interventions, theory-based models of supervision began to develop to address this need.

The section below introduces the reader to psychotherapy-based supervision models commonly used. As psychoanalytic psychotherapy supervision will be discussed in detail in the next chapter., the section below is restricted to two commonly used models namely Cognitive Behavioural Therapy (CBT), and Person-Centred Therapy. In a nutshell, the aim of this section is to stress the differences, as opposed to the similarities, between psychoanalytic and non-analytic supervisions and justify why the study is focused on psychoanalytic supervision, not on, CBT, for example.

1.5.1.1. Cognitive Behavioural Therapy-based Model of Supervision: Cognitive conceptualization of the client lies at the heart of all cognitive behavioural therapies (CBT) (Dharmender & Sharma, 2014). The client’s emotional and behavioural reactions are understood concerning their perceptions of the conditions influenced by their understanding of themselves, others and the future (Knapp & Beck, 2008). Accordingly, CBT-based supervision helps the supervisee identify problematic cognitions. More recent CBT supervisory theories have emphasized the role of Socratic questioning (Rosenbaum, & Ronen, 1998) and challenging the supervisee’s cognitions and misconceptions (Ellis, 1989). It should be acknowledged that CBT is still evolving, e.g., incorporating relational concepts therapies (Safran & Muran, 2000) and meditation as well as Buddhist thinking (Segal et al., 2002) into cognitive therapy; thus, it is expected that these developments in therapy will also affect supervision.

Although supervision in CBT like other psychotherapy-based models aims to improve the supervisee’s ability in integrating theory and practice, it differs from psychoanalytic and other models in that many of the foundational principles used in psychotherapy are directly applied in supervisory session. It is intended to place attention “on supervisee attributions and beliefs, the effects of such beliefs on psychotherapy practice, behavioral techniques to reduce anxiety and to enhance skill development, directed and structured activities during supervision sessions, and the use of between-session assignments to facilitate learning and skill development” (Beck et al., 2008, p. 69). Unlike CBT, the psychoanalytic psychotherapist supervisor places the emphasise on understanding the clients’, for example, transference rather than offering specific techniques and interventions to the

supervisee. In addition, the CBT supervisor, unlike the psychoanalytic supervisor, is concerned about the level of mastery the supervisee demonstrates and the level of fidelity to the treatment structure.

1.5.1.2. Person-centred-based Model of Supervision: The person-centred approach originates in humanistic psychology, which “views people as capable and autonomous, with the ability to resolve their difficulties, realise their potential, and change their lives in positive ways” (Seligman, 2006, p.3). Carl Rogers, a major contributor to the person-centered approach, believed that a therapist should provide the client with congruence, unconditional positive regard, and empathic understanding. These three factors are core concepts of this approach to psychotherapy (Rogers, 1980), which promote the client’s self-esteem and authenticity in their lives and help the client to develop their strengths (Seligman, 2006).

Bowen (1986), by contrasting two kinds of supervision, clarifies the nature of supervision conducted by person-centered supervisors. He asserts that the first type of supervision is the one in which the supervisor operates less or more as an educator and this supervision is in nature educational. In this form of supervision, the main focus is on the client’s needs and helping the supervisee to identify and address them. In the second type of supervision, which he calls “philosophy-of-life-oriented supervision”, the focus is on the supervisee’s internal locus of evaluation, while the supervisor trusts his inner resources and intuitions. Rogers, in a personal interview, showed his preference for the latter one (Goodyear, 1999). In the life-philosophy-oriented supervision, the supervisor “respects the autonomy and the unique personalities of both the supervisee and the client, considers the supervisee as being ‘the one who knows’, and creates a helping climate in order to facilitate the supervisee’s personal and professional development” (Callifronas & Brock, 2017, p. 3). It is believed that the improvement of the relationship between parties in supervision will improve the performance of the supervisee in therapy and will improve the therapeutic outcome. Thus, the person-centred approach to supervision aims to: trust the supervisee, keep it in difficult professional moments, and provide an appropriate place for growth (Callifronas & Brock, 2017). One may liken philosophy-of-life oriented supervision to what commonly is known as psychoanalytic supervisee-centred supervision (Frawley-O’Dea & Sarnat, 2001), discussed later in the next chapter, in that both aim to enhance the supervisee’s self-awareness and contribute to her/his practice. Supervisee-centred supervision nonetheless may focus on the supervisee’s unconscious conflicts and help her/him to identify these internal conflicts.

As it is obvious, all models of supervision share several fundamental similarities. Supervisees bring materials to supervision. Supervisors help and support them in their clinical work. Supervisees are monitored by and receive feedback from supervisors. Supervisors need to be empathetic and warm. However, some features, absent or less emphasised in other models, seem to characterise psychoanalytic psychotherapy supervision. While CBT supervision places a great deal of attention on teaching techniques and Person-Centred supervision prioritizes offering empathy and warmth to the supervisee, psychoanalytic approach to supervision focuses on understanding and identifying the effects of the unconscious mind on the client's manifestations and the supervisee's performance.

1.6. Thesis Conspectus:

The aim of this study is to provide an understanding of a group of experienced psychoanalytic psychotherapist supervisees' experience of supervision. This thesis consists of six chapters. Having introduced the study in Chapter 1, Chapter 2 presents a review of the search strategy used to identify studies for the literature review and the search results. Also, the chapter presents a theoretical framework namely psychoanalysis for the current study. Chapter 3 reviews the studies identified and critically discusses them and on the basis of this the rationale for the study is detailed and specific objectives are outlined. Chapter 4 concerns the methodology of the study namely qualitative, phenomenological with IPA and outlines the strategies used to conduct the study. Chapter 5 presents the study findings that includes the super-ordinate themes with their related themes. Chapter 6 discusses the study findings with reference to the study aim/objectives and critically appraises them in light of empirical studies and theories. It presents both the strengths and limitations of the study, and points to a number of considerations for practice, future research, education, and policy.

1.7. Researcher's reflexive comment – why this study?

Reflexivity is considered an integral part of a qualitative study (Shaw, 2010) because it addresses one of the main criticisms of qualitative studies, namely the issue of credibility and rigour. It is defined as the ability to recognise the researcher's influence on the way research is conducted (Fook & Gardner, 2007). It is the acknowledgement that the researcher does play a significant role in the process of knowledge production. The researcher's role in interpreting data and knowledge is often viewed as a form of

contamination, in the respect that he or she may distort the results of the qualitative research.

The possible effects of the researcher's subjective experiences on the qualitative study requires an ongoing process of reflexivity throughout conducting the research (Coolican, 2004). However, the reflexivity process in IPA differs from those of more traditional models of phenomenological approaches. In the latter ones, the researcher is supposed to discern and identify his/her own presumptions, expectations and values in order to set them aside (Barker, et al. 2002), while the concept of bracketing in IPA is controversial (Biggerstaff & Thompson, 2008). IPA acknowledges the fact that it is impossible for the researcher to maintain a neutral stance to the subject researched (Willig, 2001). IPA gives way to interpretations and consequently an IPA researcher is required to keep a reflexive diary that may shed light on the origins of emergent interpretations (Biggerstaff & Thompson, 2008). In IPA, "...journaling is used to enact bracketing" (Vicary et al., 2017, p. 557).

I chose psychoanalytic psychotherapy supervision, as the topic of my study, for both professional and personal reasons. In relation to professional reasons, supervision is a fundamental part of and plays a crucial role in the development of every psychoanalytic-oriented psychotherapist, whereas research in supervision has been given significantly less attention than other aspects of psychotherapy. I perceived this as a meaningful gap in the psychoanalytic supervision literature that required further attention. With regards to personal reasons, psychoanalytic psychotherapy supervision was itself an emotive topic for me, because I had had both frustrating and positive experiences with it. Although I personally found supervision to be a beneficial practice overall, and one that contributed to my clinic, I also had negative experiences with it, and not just as inadequate and ineffective but as a hurtful and harmful engagement. In light of these ambivalent feelings I had towards the practice, I was curious about it and I was interested in studying supervisees' experiences empirically.

I personally do not acknowledge the dichotomy of Teach-Treat in supervision. "Treat" is inherent in the supervision process and is part of teaching. I firmly believe that psychoanalytic supervision, at times, needs to and should shift the focus of supervision onto the supervisee because some clinical issues mirror the supervisee's own conflicts. In my opinion, clinical but also supervisory issues may be caused by the psychology of the supervisee. Psychoanalytic supervision may therefore become therapeutic, which will result in blurred boundaries between supervision and treatment/personal therapy. Therapeutic supervision nonetheless cannot replace personal therapy because the level

and scope of therapeutic work in supervision differs from that of personal therapy. The supervisee's psychodynamics can only be addressed in personal therapy. To put this another way, I believe psychoanalytic supervision helps the supervisee understand the implications of the unconscious mind within clinical work, while personal therapy enhances the person's self-awareness about the unconscious processes that affect their life. This is further discussed in detail in Section 6.1.2. *Helpful Psychoanalytic Supervision* under the section Discussion.

1.8. Conclusion:

This chapter offered an introduction to the study. It presented definitions for the key terms used throughout the study that included supervision, psychoanalysis/psychodynamic psychotherapy, psychoanalytic-based supervision, transference and counter-transference, parallel process, and supervisory alliance/relationship. The chapter included some details on supervision practised internationally and in Ireland and addressed a lack of data about dominant supervisory approaches in Ireland. It was also highlighted that the rate of inadequate (ineffective) and harmful (traumatising) supervision in Ireland is high. The chapter presented three forms of supervision namely individual, group, and triadic supervision and described psychotherapy-based models of supervision. The thesis conspectus was presented that provided an overview to the thesis. The chapter ended with the researcher's reflexivity.

Chapter 2: Literature Review/ Theoretical framework

2.0. Introduction:

This chapter encompasses an overview of an integrative literature review and presents a theoretical framework for the study. The current literature review was informed by the principles of an integrative framework proposed by Toronto and Remington (2020). Consistent with the integrative literature review, it included a wide range of studies i.e., qualitative and quantitative, with diverse methodologies. The chapter begins with defining an integrative review. Then, it outlines terminology, search strategy and search results. Subsequently, the chapter will describe the theoretical framework of the study.

2.1. Defining an integrative literature review

Three of the most common approaches to conducting literature reviews are: narrative review, systematic review, and integrative review. A narrative review is the traditional way of reviewing research studies. Lacking a systematic approach to locating and analysing targeted studies, consequently the process of review is not transparent. This does not allow for replication (Conner, 2014). Systematic review, designed for a narrowly defined specific question, follows a systematic approach to reviewing quantitative or qualitative studies, which makes a systematic review replicable (Ibid). Integrative literature review is similar to systematic review in that both follow a transparent and rigorous approach to reviewing research studies. Integrative literature review nonetheless utilizes a broader approach and is focused on broadly defined purposes, as opposed to systematic review narrowly focused on a single clinical question (Toronto & Remington, 2020).

An integrative literature review is defined as a framework in which “past research is summarized by drawing overall conclusions from many studies”. (Broome, 2000, pp. 47). Researchers employ integrative literature review to scrutinize and evaluate the current state of knowledge to understand what has been known, what the quality of the known is, what remains to be known, and what is the future direction for research (Russell, 2005). This enables the researcher to gain a comprehensive understanding of the topic under investigation (Toronto & Remington, 2020).

Borrowing Cooper’s (1984) framework, Toronto and Remington (2020) propose a six-step protocol that guides the reviewer. First, the reviewer is required to formulate review aims/questions, aims/questions that are required to be broad and well-defined. The aim of

the review was to identify studies on psychoanalytic psychotherapists' experience of supervision. In addition, it aimed to source articles on effective, inadequate/harmful supervision and prevalence of supervision. In the second step, searching literature systematically, using a comprehensive searching approach e.g., using two or more databases, will minimise biased conclusions (Whittemore, 2007). The third stage is quality appraisal, which aims to mitigate the likelihood of including low quality studies and ensures the strength of a review's findings (Coughlan & Cronin 2017). The next stage, analysis and synthesis, consists of analysing similarities and differences across studies and synthesizing them to create a conceptual level of knowledge. The stage discussion and conclusion requires the reviewer to discuss what the review findings mean with a reference to the relevant literature and provide a conclusion about their major findings. The final stage called dissemination refers to the reviewer presenting the findings to targeted audiences (Merriam Webster Dictionary, n.d).

Although there are many integrative literature reviews undertaken without a theoretical framework, recent researchers advocate that integrative reviews be informed by theoretical frameworks (Torraco 2016; Fisch & Block 2018). A theoretical framework can serve as a structure for review (Toronto & Remington, 2020). It can identify, for example, the search terms and inclusion and exclusion criteria. Given the contributions of a theoretical framework to a study, psychoanalytic theory was identified as the theoretical framework for the current study, presented later in this chapter.

2.2. Terminology and the Selection of Studies for this Review

The main issue when selecting relevant studies is the fact that different definitions of psychoanalytic psychotherapy have been introduced by different psychoanalytic/psychodynamic schools. The lack of agreement regarding definitions of psychoanalysis makes it challenging to identify and select the specific and the most relevant literature. As already mentioned, since Freud, it has been a controversial debate among psychoanalytically oriented therapists - a comprehensive and widely accepted definition for psychoanalysis. Different schools of thought have highlighted some elements of Freudian theory, while overlooking other parts. Because of these variations in the definitions of psychoanalysis and the potential that the current study participants and their supervisors may have been educated/trained in different schools of psychoanalytic therapy, the researcher decided not to adhere to a specific definition as this may have limited the broader range of literature available to him and consequently his understanding and analysis of the participants' speech.

Although some psychoanalytic communities, e.g., British Psychoanalytic Society, distinguish psychoanalysis from psychodynamic psychotherapy, these two terms are often used interchangeably by practitioners in practice and investigators in research studies. Thus, in searching for and selecting studies, those studies in which investigators used either psychoanalysis or psychodynamic psychotherapy to study supervision have been selected for this literature review.

2.3. Search Strategy

An integrative literature review advises the reviewer to consult with a librarian to increase the specificity and comprehensiveness of searches (Toronto & Remington 2020). The librarian can assist with identifying and using comprehensive databases. Following a consultation with a librarian, the researcher conducted this stage by searching literature systematically. The databases used to identify research relevant to this study were as follows: PsycINFO, PsycArticles, PsycBooks, MedLine and PsycNET. The researcher also employed search engines such as Google Scholar. The literature search included only English language materials and no date parameters were applied. The researcher used Boolean operators “or” and “and” to connect the keywords.

The librarian also assisted with respect to identifying and utilizing comprehensive search terms. The literature search was employed to identify studies relating to the main focus of the current study: *psychoanalytic psychotherapist supervisees' experience of supervision*. In this stage, phrases and concepts used interchangeably were taken into consideration. In order to maximise the likelihood of finding published studies pertinent to the psychoanalytic supervisees' experience of supervision, several words commonly used to refer to “psychoanalysis”, “supervisee”, and “experience” were employed. Concerning psychoanalysis, as already outlined, psychoanalytic psychotherapists use different terms interchangeably when referring to their therapy models. To find all relevant studies, the terms “psychoanalytic supervision” and “psychodynamic supervision” were used. Regarding the supervisee, as pointed out by Russell (2005), efforts were made to identify and include research studies that represent the study populations. To do so, the words and phrases often used to refer to the “supervisee” i.e., “trainee”, “student”, “learner”, and “experienced and accredited supervisee” were all used. Also, the terms “perception”, “understanding”, and “perspective” were used to find studies related to “experience”. In addition, the terms “effective”, “effectiveness”, “efficacy”, “benefit”, “beneficial” along with “psychoanalytic supervision”, “psychodynamic supervision” and “psychotherapy supervision” were used to find studies that demonstrate the effects of supervision. Also,

the words “psychoanalytic or psychodynamic or psychotherapy supervision” with “ineffective”, “useless”, “inadequate”, “traumatizing”, and “harmful” was used to find studies that addressed the negative side of supervision. Details about search results are presented in Table 1.

Table 1.

Keywords Used in the Search Strategy

Key Terms “And”	Key Terms “And”	Key Terms “And”
Psychoanalytic supervision Or psychodynamic supervision	Experienced and Accredited Supervisee Or trainee Or student Or learner	Perception Or understanding Or perspective
Psychoanalytic supervision Or psychodynamic supervision Or psychotherapy supervision	Effective Or effectiveness, efficacy Or benefit, Or beneficial	
Psychoanalytic supervision Or psychodynamic supervision Or psychotherapy supervision	Ineffective Or useless, inadequate Or traumatizing, Or harmful	
Psychoanalytic Supervision Or psychodynamic supervision Or Psychotherapy supervision	Prevalence Or common	

2.4. Search Results

As demonstrated on Table 2, the initial search yielded hundreds of studies. Following an integrative review guideline (Toronto & Remington, 2020), inclusion and exclusion criteria were used to prevent the targeted literature from becoming too broad or too narrow. Research studies were included if they were empirical studies, focused on individual psychoanalytic psychotherapy supervision, and explored the supervisee's experiences. The majority of studies included in Table 2 were irrelevant to the focus of the study and were ultimately excluded. They were mainly theoretical studies, on which the authors presented their own attitudes toward psychoanalytic supervision, as opposed to research based studies. In addition, there were some research-based studies that were focused on group supervision, which was out of the scope of the current study. Some other studies focused on supervision experiences from the supervisor's, as opposed to the supervisee's, point of view. These studies were excluded. The relevant data were extracted from the search results. 28 studies met the criteria and were included in this literature review. Table 3 reveals the number of the extracted studies.

Table 2.

The Results from Online Databases

Database	Search results
PsycInfo	1077
MedLine	171
Psycnet	59
PsycArticles	41
PsycBooks	8

As demonstrated in Table 4, a total of 10 studies were also included in the search results, which were not discussed in the Literature review chapter. These studies were used in other chapters of the thesis i.e., studies demonstrating the rate of inadequate and harmful supervision and studies showing the prevalence of supervision among

psychotherapists at an international level and in an Irish context. A different table (Table 4) presents details about these studies.

Table 3.

Studies with Reference to Psychoanalytic Supervision Experiences and Supervision Effectiveness

Psychoanalytic supervisee experiences	Psychoanalytic and psychotherapy supervision effectiveness
11	16

Table 4.

Studies with Reference to Supervision Formats/Models, Prevalence of Supervision and Inadequate/Harmful Supervision

Prevalence of supervision	Inadequate and Harmful supervision
7	3

Following Toronto & Remington’s (2020) propositions, a table was used to include a summary of all extracted studies that provided a brief organization of data that “facilitates comparison among studies in specific topics, such as problems, variables and characteristics of the sample” (De Souza et al., 2010, p. 105). The summary of studies included: authors, the year of publications, aims/objectives of the study, study design, sample, data collection method and main findings (Appendix 9).

As already mentioned, it has recently been proposed that a theoretical framework can serve as a structure for an integrative literature review (Torraco, 2016; Fisch & Block 2018) through identifying, for example, the key terms or inclusion and exclusion criteria. The section below concerns the theoretical framework of the study.

2.5. The Theoretical Basis of the Study:

For a research study, a theoretical framework from which knowledge is produced and constructed is necessary (Grant, & Osanloo, 2015). Thus, a theoretical framework was needed to underpin the current study. It was expected to include the notions and variables with which this study is concerned. The current study aims to examine psychoanalytic therapists' experience of receiving supervision. Psychoanalytic supervision, like other types of psychotherapy supervision, is principal-driven (Watkins, 2017). Principles of psychoanalysis underlie psychoanalytic supervision and provide a groundwork on which psychoanalytic supervision is delivered. Psychoanalytic theory guides the supervisee and the supervisor in selecting and prioritizing clinical materials e.g., affective reactions or defences, for supervisory discussions (Beck et al., 2008). In addition, psychoanalytic theory helps the supervisory dyad to make sense of data and it informs supervisory interventions (Falender & Shafranske, 2008). This section describes psychoanalytic psychotherapy supervision and the theory upon which this study is based, namely psychoanalysis, and the rationale for this choice.

2.5.1. Psychoanalytic Psychotherapy Supervision:

Psychoanalysis is not only the first theory of psychotherapy, but it was also the first school to develop and recognise the importance of supervision. Freud reports how he started to train psychoanalysts. It began in 1902, when "a number of young doctors gathered around me with the express intention of learning, practising, and spreading the knowledge of psychoanalysis" (1914/1986, p. 82). Unlike his theory of psychoanalysis, Freud did not develop a model of supervision (Jacobs, 2007; Leader, 2010), however he was the first person to grant a place for supervision in therapy work. He hosted "Wednesday night meetings" in his house where his students discussed clinical cases (Freud, 1914). Additionally, he trained Little Hans's father, Max Graf, and provided him with information on the unconscious mechanisms of the mind to help him understand and treat his son's phobia. The former is considered to represent the beginning of informal supervision, whereas the latter is considered the beginning of more formal supervision (Watkins, 2015b).

Psychoanalytic psychotherapy supervision, similar to other models, aims to prepare clinicians for practice. There are three distinct processes of learning psychoanalysis namely didactic curriculum (i.e., know your theory), personal therapy (i.e., know yourself), and supervised client analysis (i.e., know your practice) (Dewald, 1997). Zachrisson (2011)

stated that each element in this three-way process has certain functions. A didactic program aims to familiarize the candidate with psychoanalytic knowledge and help him/her understand clinical materials from a psychoanalytic perspective. Participating in seminar discussions that focus on clinical cases enables candidates to establish a playground for psychoanalytic reflections. Personal-therapy is completely confidential and a central part of learning psychoanalysis. It contributes to self-awareness and provides an opportunity to work on neurotic problems and blind spots. In addition, it provides an opportunity for candidates to personally experience forces triggered by the psychoanalytic situation such as the therapeutic relationship and transference. Moreover, candidates, during the process of personal-therapy, learn how the analytic situation is established, how to deal with clients and how to interpret clinical materials. The positive effects of personal therapy on the growth of the therapist and his/her work are empirically supported within psychoanalysis (Åstrand & Sandell, 2019) and psychotherapy in general (Bike, et al., 2009; Sheikh et al., 2007). Supervision is a place where the candidate applies their theoretical knowledge and personal experiences to real cases and psychoanalytic action (Zachrisson, 2011). Among these three learning processes, supervision plays a greater role (Hill et al., 2015). It is argued that psychoanalytic psychotherapy supervision's special contribution is to provide candidates with an opportunity for their own clinical work to be scrutinized in detail and in-depth. Zachrisson calls this co-operational work "learning by doing".

Watkins (2015b) emphasizes the role psychoanalytic psychotherapy supervision plays in the development of practitioners as psychotherapists. He believes that supervision becomes a "highly reflective space within which all aspects of the therapist/patient interaction can be freely examined – including the patient's transference and therapist's countertransference experiences, possible enactments that may emerge for either party, and any other conscious and unconscious forces and factors that come into play over the course of the treatment encounter" (p. 6). It may therefore include some therapeutic work. Supervisors might be interested in and focused on the supervisee and their personal/professional issues. The supervisor might help supervisees to work on their counter-transference in therapy and their transference in supervision. A psychoanalytic supervisor may focus on the supervisee's regressive experiences present in supervision - similar to what the therapist does in analytic therapy (Baudry, 1993; Sarnat, 1998; Glover, 2002). The "learning regression", a term used to refer to the supervisory regression experience (Watkins, 2013a), is an emotionally intense, cognitively primitive and often non-verbal experience (Frawley-O'Dea, 2003). Sarnat (1998) stated that this type of regression is a controllable task and the supervisee needs to decide how much of his regression he allows to develop. This indicates the centrality of unconscious dynamics

worked through in supervision. It is a core function of psychoanalytic supervision to assist the supervisee in understanding the unconscious processes that may emerge from both analytic sessions i.e., countertransference to the client, and supervision i.e., transference to the supervisor (Ungar & Ahumada, 2001). Psychoanalytic supervisees are therefore provided with a space where their unconscious anxieties are heard and attended to (Szecsody, 1997; Ungar & de Ahumada, 2001).

The supervisory actions, mentioned above, are quite similar to what a therapist supervisee would do in therapy. Thus, psychoanalytic supervision appears to contain elements that would be expected in a therapeutic session. Considering these therapeutic aspects, the current study was not confined to examining the supervisee's experience of didactic and pedagogic aspects of supervision, where the supervisor is deemed to be a mentor. This study examined the therapeutic aspects of psychoanalytic psychotherapy supervision e.g., working on the supervisee's countertransference, where the supervisor is considered to be an analyst too.

Psychoanalytic psychotherapy supervision points to the reality that there are some characteristics shared by both psychoanalytic supervision and therapy. As Yerushalmi (2016) stated, both entail relationships where one individual attempts to help another. In both situations the helped person is encouraged to organize his thoughts and the helper is responsible for this process, even when supervision is guided by relational-based approaches and the authority is mutually shared. Furthermore, participants of both are believed to deepen their perception of human phenomena such as emotional experiences and relationships which enables them to develop their identities. Moreover, in both settings the experienced one provides the less experienced participant with an inter-subjective environment that contributes to the process of personal growth.

These similarities between psychoanalytic treatment and supervision mean concepts from treatment can be borrowed and incorporated into supervision, which in turn reveals the reality that psychoanalytic supervision is informed by psychoanalytic theory.

2.5.2. The Theory of Psychoanalysis:

Like other modalities, psychoanalytic schools of thought involve a number of diverse theories with certain principal tenets. These principles have been developed and modified through movements that occurred in the history of psychoanalytic thought. These movements appear to have triggered the same evolutions in psychoanalytic supervision

(Watkins, 2015c). New concepts and developed principles which resulted from advances in psychoanalysis have been subsequently employed by psychoanalytic supervisors. This section scrutinizes these developments in the principles of psychoanalysis and the subsequent section will address the way through which these developments inform psychoanalytic psychotherapy supervision.

Freud's theory, along with some subsequent theories (Brenner, 1982; Fenichel, 1941; Gray, 1990; Eissler, 1953), has commonly been defined as classical psychoanalysis, which refers to those psychoanalytic theories that employ one-person psychology to understand the mind's functioning and treat the patient. The singularity of the person and what goes on inside the person is the central focus of one-person psychology (Rickman, 2003). The patient's dynamics are assumed to be intra-psychically and entirely constructed by her/him. Additionally, in classical psychoanalysis, the analyst is represented with power, knowledge, and authority. He is in a position to understand and interpret the content and the mechanisms of the patient's mind. The analyst is neutral and viewed as someone who competently translates the client's problems into an understandable language for the client. If the patient objects to or disagrees with a particular interpretation, it is likely to be seen as a defence against the process of analysis.

It is evident that Freud's students attempted to revise and develop his initial ideas and bring them to new areas. Although they introduced new concepts into psychoanalysis and widened its scope, for the purpose of this section that aims to identify those principles that inform analytic supervision, particular attention needs to be paid to Ferenczi's theory. His theory led to developments not only in theory but also in supervision. His main contribution was in leading psychoanalysis towards two-person psychology (Frawley-O'Dea & Sarnat, 2001). This form of psychology puts the emphasis on the reciprocal relationships present "when two persons are in a more or less closed region and are tied to one another by simultaneously acting aims, tasks, or needs" (Rickman, 2003, p. 110). In 1938, Ferenczi stated that the transference situation is not stimulated spontaneously by the patient; rather, it is created artificially by the analytic technique (Dupont, 1988). He identified the relational nature of psychoanalysis in which therapeutic dynamics are co-created. Ferenczi privileged the therapeutic role of the relationship over interpretation and believed that a disclosure from the analyst's side, regarding his personal and professional life, considerably helped the patient.

Freud and Ferenczi developed their own theories regarding health, psychopathology, and treatment. If we imagine a continuum beginning with authority and power from the left side, Freud is located there, while Ferenczi should be located at the end of the opposite

side. Subsequent theorists have attempted to adhere, less or more, to either poles. Contemporary changes in the broader context has resulted in another movement in psychoanalysis called relational psychoanalysis, and this is the third and the last evolution in psychoanalytic theory discussed here that informs psychoanalytic supervision.

It has been suggested that, since the mid-1980s, psychoanalysis has increasingly been influenced by new ideologies, constructivist philosophy and postmodern thought. Additionally, it is believed that psychoanalysis has been influenced by feminist thinking (Aron, 1996). The latter effect was in part mediated by the gender shift inside psychoanalysis. This model of therapy used to be provided by male therapists for female patients, as the majority of Freud's circle was male colleagues and friends, while nowadays many practitioners, and consequently many supervisees, are female. Besides this biological gender change, theoretically rigid conceptions of male and female have been changing in favour of flexibility. Aron (1996) argues that the change in socio-cultural context has triggered the same change in psychoanalysis, where theory and practice have been more relational-based.

The three aforementioned shifts in psychoanalytic theory and practice have contributed to the development of psychoanalytic supervision. The section below aims to clarify "how psychoanalysis and developments in the tenets of psychoanalytic theory just discussed has informed and continues to inform psychoanalytic supervision".

2.5.3. Psychoanalysis as the Theoretical Base for the Study:

Psychoanalytic supervision appears to be informed by psychoanalytic theory, within each of the three movements. Following the first movement, classical psychoanalysis' assumption that the analyst was a figure of authority, power, and knowledge was implied in the type of supervision delivered by Freud. Max Graf, one of Freud's students participating in the Wednesday night meetings, stated that "the last and the decisive word was always spoken by Freud himself. There was the atmosphere of the foundation of a religion in that room. Freud himself was its new prophet who made the heretofore prevailing methods of psychological investigation appear superficial" (Gay, 2006, p. 174–75). It is obvious that Freud's methods of supervising his students were informed by psychoanalytic theory. In his supervision, Freud possesses the authority and knows the truth and the supervisee is in turn expected to receive rather than to co-create knowledge. Similar to how patients are viewed by classical psychoanalysis, the supervisee's refusal to accept the supervisor's offer is seen as a limitation in the supervisee. Neither the

supervisee's ability to produce knowledge nor the supervisor's role in making mistakes are considered in this form of supervisory practice (Frawley-O'Dea, & Sarnat, 2001).

This approach to psychoanalytic psychotherapy supervision is often called patient-centred supervision (Watkins, 2013b). The patient-centred model provides the supervisee with an opportunity to learn the theory and technique very well and understand the patient's mind function. It also appears to provide a conflict-free situation for the supervisee as the temperature of the supervision is low (Jacobs et al., 1995). Thus, it is likely to be a good model for beginners who are more exposed to their inner dynamics and anxieties and have low levels of self-awareness. It is similarly comfortable for the supervisor and keeps her/his anxieties low. The supervisor is likely to perceive this model as more secure and safe. The model, however, seems to be limited by its inflexibility. When the supervised treatment or the supervisory process goes badly, it is difficult to address and manage the problem.

Patient-centred supervision conducted by classical analysts based on authority, power, and knowledge has been and continues to be used by analytic supervisors (Frawley-O'Dea & Sarnat, 2001), however, subsequent models began to mitigate the supervisors' authority in favour of a more collaborative work. This shift in supervision, which parallels the second shift in psychoanalytic theory more generally, owes much to Ferenczi and his students' contributions to the development of psychoanalysis.

Following the second movement in psychoanalytic theory and supervision, Ferenczi's method of supervision in which the supervisee, just like the patient, is given an opportunity to have his voice, inspired numerous subsequent supervisors. Among them, Michael Balint is perhaps the most well-known student to have expanded his teacher's supervisory style. With regard to how Balint developed Ferenczi's thought, Balint's model represents Ferenczi's thinking on authority, power, and knowledge. He was always concerned with the supervisors' abuse of power. Balint (1968) stated that the supervisee is influenced by the supervisor and this can lead him to accommodate to what the supervisor expects of him rather than being an independent analyst with his own voice. A child potentially can learn any language, but s/he will learn the one spoken by his/her parents. Like a child, the supervisee will learn the language of psychoanalysis from the supervisor. Unlike Freud, who believed that the analyst knows the truth and subsequently the supervisor is the one who can convey the knowledge, Balint sees supervision as an interactive process through which new knowledge is generated from a mutual negotiation between the supervisee and the supervisor rather than a powerful supervisor. The authority and the power is not equally distributed; however, it is mutually shared between parties. It is evident that this style of

supervision is consistent with the second movement in the history of psychoanalysis, where Freudian theory, based on the therapist's authority, was replaced by Ferenczi's collaborative work between the therapist and the patient.

The second movement in psychoanalytic psychotherapy supervision is commonly referred to as supervisee-centred supervision, which draws attention to the psychology of the supervisee (Watkins, 2015c). The supervisee-centred model addresses the patient-centred model's limitations in two ways. First, it does not ignore the psychology of the supervisee. Second, it provides the supervisor with an opportunity to play more than a didactic role. In addition, it helps the supervisee to get insight into emotional experiences that may hinder her/his work. However, this model ignores the supervisor's contribution to the supervisory dynamics and relationship. As the supervisor is an objective and an uninvolved expert, supervisory difficulties are likely to be understood as related to the psychology of the supervisee. Thus, the supervisee might function as a container for all difficulties that arise in supervision.

Like the two movements and evolutions in psychoanalysis, the relational movement, as the third movement, appears to inform the supervision practised by the relational psychoanalyst in particular and all psychoanalysts in general. Consistent with changes and evolutions in the societal and cultural realms, the practice of psychoanalytic supervision began to change and improve, harmonising with new movements in the psychoanalytic culture as well as the broader social-cultural context. (Frawley-O'Dea & Sarnat, 2001). Thus, analytic supervisors (Sarnat, 1992, 1998; Slavin, 1998; Berman, 1997; Frawley-O'Dea, 1997) began to offer supervision that emphasised mutuality, shared power, and co-constructed knowledge as well as flexibility.

The third approach to psychoanalytic supervision is known as relational-based supervision. The relational model is quite a recent movement in the psychoanalytic psychotherapy supervision area. The supervisee is likely to find this model of supervision more comfortable as any emotional difficulties embedded in supervisory relationships e.g., shame or anxious feelings, can be discussed. However, the emphasis on relational aspect may prevent a supervisor from offering a clear technique. Who would not like to receive a prescribed offer from the supervisor?

The three movements in the psychoanalytic theory have informed the way psychoanalytic supervision is offered. Advances in theory have triggered similar advances in supervision. Because the current study's focus is on psychoanalytic psychotherapists'

experience of supervision, it is therefore reasonable to choose psychoanalytic theory as the theoretical framework for this study.

The three approaches to psychoanalytic psychotherapy supervision, mentioned above, have implications for the current study too. They demonstrate that psychoanalytic psychotherapy supervision is not confined to the client's material. In addition, it may require scrutinizing and working on the supervisee's countertransferential feelings induced by the client. Psychoanalytic psychotherapy supervision may also focus on the supervision relationship co-constructed by the supervisor and the supervisee. It is therefore necessary for studies on psychoanalytic psychotherapy supervision to address these three elements i.e., the contributions of the client, the supervisee and the supervisee-supervisor dyad to supervision. This is a comprehensive approach and can provide the supervision field with valuable knowledge about psychoanalytic psychotherapy supervision. The current study utilized this comprehensive approach and explored the supervisees' experiences of working on the client, themselves and the supervision relationship.

2.6. Researcher's Reflexive Comments: Making Sense of the literature

After I began to identify and compile the relevant research studies, I soon realized that there is no well-established definition of psychoanalytic psychotherapy supervision. The only definition proposed for psychoanalytic psychotherapy supervision (Watkins, 2011a) has been borrowed from Bernard and Goodyear's (2014) general definition of clinical supervision. Accordingly, there was no documented program that details the way a proper psychoanalytic supervision should be conducted. As will be discussed later, it is widely held that the main inconsistency in the realm of psychoanalysis is the lack of an empirically-validated training program to train supervisors (Pegeron, 2008). In other words, it is not very clear what types of materials are supposed to be included-in or excluded-from psychoanalytic supervision.

I was uncertain and concerned about the potential areas the study could address. This made the process of searching for the relevant literature complicated. Reading Watkin's (2011a, 2011b, 2013a, 2013b, 2015b, 2015c) works was illuminating and provided the author with an understanding of psychoanalytic supervision. It gave me a clear idea of the precise nature of psychoanalytic supervisory sessions, and what exactly transpires during them. I gained an understanding of the factors that may characterise psychoanalytic psychotherapy supervision and may distinguish it from other psychotherapy supervisions. This helped me to develop interview questions that could address psychoanalytic elements of supervision such as supervisory work on the client's transference. I brought my initial

ideas to the meetings with my supervisors. They helped me narrow down the scope of the study e.g., excluding group supervision, and articulating the areas that the literature review could cover.

2.7. Conclusion

This chapter described the integrative review. It presented Toronto and Remington's (2020) approach employed in the study. Following their approach, strategies used to search for the studies and the search results were clearly outlined. The chapter also presented the theoretical framework for the study. It outlined psychoanalytic theory and psychoanalytic psychotherapy supervision to demonstrate how the psychoanalytic theory informs psychoanalytic supervision. The chapter concluded with the researcher's reflexivity.

Chapter 3. Literature Review/Study critique

3.0. Introduction:

This chapter, following the Toronto & Remington's (2020) framework for an integrative review, presents a synthesis and critical appraisal of the studies pertinent to supervision. This begins with presenting and discussing research studies that demonstrate positive effects of both psychotherapy and psychoanalytic supervisions on the supervisee and the client. It will also introduce a model that posited to explain how psychoanalytic supervision works. Subsequently, the chapter will critically discuss the studies on psychoanalytic supervisees' experience of supervision. Having discussed the studies, the chapter addresses a gap in the literature and presents a rationale to conduct the current study. Then, the chapter concerns the research aim and objectives. Finally, the researcher presents his reflection on this chapter.

3.1. Research Studies on Clinical Supervision:

The participants involved in supervision, i.e., supervisor-supervisee-patient, can provide researchers with accounts of their experience of supervision. It can be suggested that supervisees are more likely to provide valuable data regarding supervisory experiences because they are recipients of supervision and they are in direct contact with both supervisors and patients; the supervisee is the one who feels helped or not helped, and is the one who decides whether to implement supervisory suggestions; the supervisee is the one who sees the patient's reaction to the intervention proposed by the supervisor. Thus, the supervisee may be well-placed to provide the profession with productive and invaluable knowledge.

The current study is focused on psychoanalytic supervisees' experience of supervision. Consistent with the integrative literature review and to avoid a process commonly known as laundry listing (Knafl & Whitemore, 2017), the studies included in this review are analyzed/synthesized (Appendix 9) and critically discussed. Before discussing the supervisees' experience of supervision, it is sensible to initially address the vital role supervision plays in the process of learning and conducting psychotherapy as one of the study objectives is to illustrate how psychoanalytic psychotherapy supervision contributes to the participants' practice. The section below synthesizes and critically discusses research studies conducted to examine the effectiveness of both psychotherapy and

psychoanalytic supervisions. The subsequent section will synthesize and discuss studies pertinent to the purpose of the current study, which is how supervision is experienced by psychoanalytic supervisees.

3.1.1 How Effective Is Supervision?

The idea that psychotherapy models are required to demonstrate their effectiveness i.e., as evidence-based psychotherapy, has largely affected our thinking about therapy itself and brought about ethical considerations (American Psychological Association, 2006; American Psychiatric Association, 2001). Accordingly, it has been recently proposed that training and supervising psychotherapy need to be evidence-based too (Falender & Shafranske, 2007; Milne, 2009). While the issue as to whether psychotherapy is effective has been raised on several occasions over the last century (Eysenck, 1952; Freud, 1909/1959; Lambert, 2013), a need to demonstrate the effectiveness of supervision is a more recent trend, particularly in the last 30 years (Bernard, 2005). Since supervision was established, questions as to its effectiveness have been raised on numerous occasions, just as they were regarding psychotherapy itself (Inman & Ladaney, 2008).

As outlined in section 3.1.3., below, the question of *how effective supervision is?* has been articulated in two forms: 1) How does supervision affect the supervisee's practice in the therapy room with patients? 2) Does supervision have beneficial effects on the supervisee's patient? The first question is concerned more with the indirect effects of supervision on psychotherapy practice, whereas the second one is directly related to the aim of psychotherapy, i.e., therapeutic outcome. With regard to this first question, there is compelling research to indicate supervision has positive effects on the work of supervisees i.e., the therapy outcome (Watkins, 2011c), however, further research is needed to support the positive effects of supervision on the patient (Wheeler & Richards, 2007). These two questions are addressed below before research studies of "psychoanalytic therapists' experience of supervision" (pertinent to the main purpose of the current study) are discussed.

In relation to the first question regarding "the positive effects of supervision on the supervisee's clinical skills", Holloway and Neufeldt's (1995) review identifies some therapeutic skills positively influenced by supervision. They reported that supervision helped the supervisee with case formulation as well as how to intervene with patients/clients and follow up. Supervision increases the supervisee's self-confidence (Nelson & Friedlander, 2001; Wulf & Nelson, 2001), self-awareness and his/her capacity

to recognise blind spots (Morrissey & Tribe, 2001; Wheeler & Richards, 2007) which in turn enables the supervisee to distinguish between his emotions and those of the patient (Kumari, 2011). When the supervisee fails to manage therapy with a client properly, supervision is somewhere where s/he can receive help and support, somewhere to increase her/his learning and competence (De Stefano et al., 2007). The safety provided by supervision helps facilitate the disclosure of emotions, which reduces the likelihood of the supervisee being distracted by these emotions (Vallance, 2004) and contributes to the process of normalising, through which supervisees normalise difficult experiences (Knox et al., 2006).

Likewise, psychoanalytic/psychodynamic supervision has been reported to contribute to the supervisee's development. Hill and her colleagues (2015) in a mixed method study, examined the effects of a training course of psychodynamic/interpersonal psychotherapy designed to train candidates implementing psychodynamic constructs e.g., insight, dream analysis, and transference/countertransference. Their study, including twenty-three doctoral counselling psychology students, was focused on the training effects on the trainee's change e.g., improvements in using psychodynamic skills. Participants were also asked what they attributed the change to, and many stated supervision as one of the most helpful factors, along with the instructional program and clinical experience. They conducted interviews with nine participants to explore what led to participants' skill improvements, i.e., *self as therapists*, e.g., more self-efficacy as a therapist, *therapeutic ability/skills*, e.g., better able to use skills, and *understanding about being a therapist*, e.g., more curious about client dynamics. Consensual qualitative research analysis (Hill, 2012) revealed that they benefitted from both the supervision part of their doctoral program and their individual supervision in a clinic.

Participants in Hill et al's study identified positive feelings about supervision, specific helpful interventions, and helpful supervisory style as the main supervisory factors that led to their change. Participants mentioned how supervisors provided a secure base that seemed, as pointed out by the investigators, to largely stem from their participation in attachment theory courses during their graduate program. Participants did cite negative aspects to supervision, but without much agreement as to what they were; seemingly negative aspects were idiosyncratic to supervisors and trainees. As the investigators mentioned the supervisors were recruited carefully to the study, so it is therefore not surprising that participants faced less problematic supervision.

Hill and her colleagues' study demonstrates how a training course including supervision leads to improvement in supervisees such as therapeutic ability/skills; this is a valuable study as they examined training effects based on the trainee/supervisees' point of view, which can contribute to the development of new measures to assess the supervisee change, which in turn can assess the quality of training/supervision. Nevertheless, the study was confined to participants from a single clinic within one counselling psychology doctoral program. Moreover, they limited their study to one particular form of psychodynamic psychotherapy. As a further note, their study was focused on training; supervision was treated as a peripheral factor, which, along with other factors, was included as it related to the wider process of learning.

In another study to examine the positive effects of psychoanalytic supervision, Sant and Milton (2015), whose study will be discussed in detail in the next section, concluded that participants experienced psychodynamic supervision as a space for intensive learning on the one hand and as a facilitative factor in growth and development on the other. In describing supervision as a place for intense learning, some participants alluded to a sense of enthusiasm and perceived supervisors as instrumental in creating this space. Watkins (2013a) proposes that effective supervisors are admiring, inspiring and eager to share their knowledge "because they deeply feel that awe and wonder themselves and relish opportunities to share that vision with supervisees" (p. 303). In relation to supervision as a facilitative factor in growth, the authors found that participants did feel they became more competent as a result of the supervisor experience. Their development and new knowledge helped them sit and think more before making interpretations in therapy. They learned to be as fully present as possible in therapeutic sessions and tolerate the anxiety and discomfort that might be triggered by silences in clinical practice. This experience can be understood through Sarnat (2010) when she stated that the distinguishing feature of competency in psychodynamic psychotherapy is the ability to shift from reacting to thinking and well-metabolised intervention. This capacity that leads practitioners to provide a thoughtful intervention is described as "sitting there" with the client rather than quickly jumping into action (p. 24).

The second question regarding "the positive effects of supervision on the patients' outcome" is, in many respects, more important than the first question as the main aim of psychotherapy supervision is to improve therapeutic outcome. This concern was perfectly addressed by Lichtenberg (2007): ". . . the reason for providing supervision and the ethical justification for requiring it are that it makes a difference with respect to client outcomes" (p. 275). It seems that it is needed to demonstrate supervision's positive effects on the

patient's outcome in order to justify the necessity of supervision in training psychotherapists.

Watkins (2011c), using PsychINFO and Google Scholar databases, compiled all research studies that concerned supervision-patient outcome studies published by 2011. Reviewing those studies, he reached the following conclusion: some studies already identified as supervision-patient outcome are not related to the patient outcome; some others were related but methodological problems do not allow to draw reliable conclusions; a few of them used control group and people with specific symptoms, however they were not deficiency free. Taking these conclusions into account, it appears further studies are required to empirically demonstrate the direct link between supervision and patients' symptom reduction and therapeutic outcome. Determining triadic impact is one of the most difficult tasks, i.e., supervision effects on the patient through the improvements of the supervisee's clinical skills. Nevertheless, and as Watkins proposed, these studies, particularly the latter ones, are beneficial as they contribute to our understanding of supervision efficacy, particularly our attempts to study it empirically.

Following Watkins' review, and as an effort to demonstrate the positive effects of analytic supervision on the patient, two studies have been conducted. Hill et al. (2016), in a qualitative study, discovered how psychodynamic supervision contributes to the patient change. Having recruited fifteen supervisees, participants were interviewed to explore how their supervision led to patients' change. Applying consensual qualitative research (Hill, 2012) revealed that some aspects of supervision were considered essential to patient change. Of note were guidance, case conceptualisation, focusing on and supporting supervisees, receiving feedback and being advised to set realistic expectations, and disclosing. These findings are similar to the literature regarding helpful aspects of supervision identified by supervisees (Gray et al., 2001; Heppner & Rohelke, 1984). Although their study discovered the effects of supervision on patient-outcome, no client and supervisors were included in their study. This means an invaluable opportunity to gain a more comprehensive picture of a link between supervision and therapy was missed. Also, because of the complicated nature of supervision and therapy, and the absence of data from supervisors and patients, no causal links between supervision and the patient outcome can be drawn from their study.

In a more recent study, Paine, et al. (2019), using a practice-based research approach, examined the supervision outcome i.e., supervision effects on the client. They recruited fifty-two trainee psychologists, social workers and psychiatrists under psychodynamic

training. Psychology trainees were in their pre- and post-doctoral training, social workers were in their second, third year of and advanced levels of training, and psychiatrists were completing their fourth year of residency. 280 clients were recruited to this study. The researchers utilized Treatment Outcome Package (TOP), which is an instrument with several sub-scales and a routine tool for clinical monitoring (Baxter et al., 2016). TOP is a six point Likert scale with acceptable statistic properties (Paine et al., 2019). The clients completed TOP twice i.e., Time 1 (intake), and Time 2 (during treatment or at termination). The researchers utilized a *t*-test to determine whether there was a change between the scores collected in the two time-points.

Analysis of data indicated that the clients receiving treatments from the therapists receiving supervision improved, from Time 1 to Time 2, in all TOP's subscales i.e., quality of life, social conflicts, sleep, panic/anxiety, depression, sexual functioning and substance abuse. To make the results reliable, the researchers explored both the client's level i.e., the level of the service the client received, and the therapist's level i.e., caseload size and training clinic experiences. No significant relationship was found between the client's change and the client/therapist's levels. Paine, et al.'s study was unique in that, unlike other supervision-outcome studies, it included both symptom reduction and psychological function. However, the lack of a control group precludes inferring a causal relation between supervision and the client's outcome. In addition, the study participants were heterogeneous as they were in their different stages of their development and were from three different fields.

To sum up, there is some evidence showing that supervision improves a range of clinical skills that has been found to lead to better therapeutic outcome (Hill et al. 2015; 2016; Carlsson & Schubert, 2009; Holloway & Neufeldt, 1995; Nelson & Friendlar, 2001). Thus, it can possibly be said, with some confidence, that supervision makes a positive contribution to the career of the supervisee and the profession, despite a lack of strong evidence to demonstrate that therapy outcome results from supervision. The section below presents a model that proposes a mechanism through which psychoanalytic psychotherapy supervision contributes to the development of the supervisee.

3.1.2. How Does Psychoanalytic Supervision Work?

As outlined above, there is some evidence supporting the positive effects of psychoanalytic supervision on the development of the supervisee, (Holloway & Neufeldt, 1995; Nelson & Friedlander, 2001; Wulf & Nelson, 2001; Morrissey & Tribe, 2001; Wheeler

& Richards, 2007; De Stefano et al., 2007), however, the mechanism through which supervision aids this development is not clear; it is unclear how psychoanalytic supervision works and how it affects the supervisee. Recently, Watkins and Callahan (2016b) attempted to develop a model to ascertain the factors that help psychoanalytic supervisees make progression and learn from supervision. They propose that supervision operates in the same way psychotherapy does. They use Wampold's contextualization model (Wampold & Imel, 2015; Wampold, 2001) to outline the process of change in supervision. The contextualization model postulates that psychotherapy outcomes result from both common and specific factors. Common factors such as therapist-patient alliance refer to those that are shared by various forms of psychotherapy, while specific factors refer to those factors that are based on a particular theory of psychotherapy. Based on this model each therapist, regardless of therapeutic orientation, needs to first establish a therapeutic relationship. Then, a therapeutic change can occur through three relationship pathways: a) therapist-patient *real* relationship; this is a personal therapist-patient relationship; in contrast to therapeutic alliance, it is a non-work relationship. It is genuine, realistic and free of transference (Gelso, 2004), b) creating an expectation by providing some treatment, and c) the patient's engagement in healthy actions.

Watkins and Callahan (2016b) developed a model called the "Contextual Psychoanalytic Supervision Model" (CPSM) to outline how psychoanalytic supervision might affect the supervisee. The CPSM, similar to the Wampold's model, is based on two assumptions, that the supervisory relationship lies at the heart of supervisory work (Sarnat, 2016; Szecsödy, 1997) and supervisory change is a co-production of common and specific factors. Common factors refer to supervisory elements shared by different psychotherapy orientations, e.g., learning alliance, while specific factors refer to those interventions, e.g., providing feedback, that stimulate change. The CPSM, as a relational-based model, emphasises the formation and maintenance of the initial supervisor-supervisee bond; it is collaborative and facilitative as well as respectful; the supervisory bond is considered the cornerstone of the alliance. It affects the supervisee learning through three pathways as follows:

a) *Real relationship between two parties*. This pertains to a personal relationship. Conceptually, it differs from learning alliance and transference-countertransference in that it entails a relationship with a sense of genuineness towards one another (Wampold & Imel, 2015; Ain & Gelso, 2008). Social conversation, expressing feelings towards each other during supervisory work, and expressing feelings about an event that occurred in the life of the supervisee e.g., deaths or births, are all features of this real relationship,

b) Creating supervisee expectation. This entails providing supervisory explanations regarding supervisees and cases that supervisees bring to the session. The explanations about the goals of supervision and how they can be achieved create expectations on the side of the supervisee (Moga & Cabaniss, 2014). The creation of these expectations depends on the delivery of specific factors i.e., psychoanalytic explanations (Watkins, 2016b),

c) Supervisee engagement in the process of facilitative educational factors. Supervisory tasks/goals and therapeutic/supervisory actions encourage the supervisee to engage proactively in educationally helpful actions, e.g., participating in ongoing educational activities or taking part in case formulation discussions. It is suggested that the supervisee develop through, what is commonly known as, an internal supervisor (Casement, 1993), which is achieved by maximizing the supervisees involvement in supervision. For instance, a supervisee may use and imitate the supervisor's tone of voice (Geller et al., 2010).

Having been involved in this process, two things are purported to occur: Exposure and Re-organisation. Exposure entails supervisees being confronted repeatedly with new situations and supervisory moments. These, through the supervisor-supervisee bond and the three pathways outlined above, reduce anxiety, shame and self-doubt. When new learnings occur, a re-organising process is required: self-disruption-reorganisation (Wolf, 1989). The re-organisation process contributes to the supervisee outcome through the supervisor-supervisee bond and three pathways. Watkins and Callahan (2016b) state that the purpose of the contextual model is to explore how analytic supervision assists supervisees in alleviating learning difficulties, obtaining therapeutic skills, and improving therapists' identity.

It is vital for psychoanalytic supervision to be guided by a relationally-informed approach that energizes and enriches the process of supervision (Frawley-O'Dea & Sarnat, 2001). Psychoanalytic supervision puts the supervisory relationship in front and invites the supervisor to provide an interpersonal context (Sarnat, 1992). Contemporary psychoanalytic supervision considers the supervision relationship to be of equal importance to the therapeutic relationship in psychoanalysis (Watkins, 2016a). Educational goals in psychoanalytic supervision, like therapeutic goals in psychoanalytic sessions, require both parties, namely the supervisor and the supervisee, to work together in order to accomplish shared goals, which guide their interactions and initiate a bond of trust. Psychoanalytic supervision acknowledges the vital role played by the supervision relationship in psychoanalytic supervision, albeit using different terms such as supervisory

alliance (Gill, 2001), working alliance (Gordan, 1996), or real relationship (Watkins, 2011c). Watkins (2011a) argues that it is the nature of the alliance and the quality of the supervisee-supervisor relationship that will ultimately facilitate or hinder the process of psychoanalytic supervision. It is now well-established across all psychoanalytic supervision perspectives that a good enough relationship between the supervisor and the supervisee is an invaluable cornerstone (Watkins, 2013a).

The aforementioned contextual model should lay the foundation for further discussion on how psychoanalytic supervision works. This model, regardless of its limitations and the lack of sufficient empirical support, accentuates the relational context through which supervision helps the supervisee. Thus, it is essential to ask supervisees about their experience of supervisory relationship. Exploring this will provide us with valuable knowledge regarding the relational dimension of supervision. This is one of the main aims of the current study.

3.1.3. Psychoanalytic Psychotherapists' Experience of Supervision

Based on the researcher's knowledge, the first generation of researchers interested in studying supervision began to draw attention to this part of psychoanalytic training in the 1960s. The section below begins with reviewing two seminal works that were undertaken half a century ago (Lewin & Ross, 1960; Fleming & Benedek, 1966). Although they are not directly related to the purpose of the current study, these studies are generally seen as the first attempts to draw attention to psychoanalytic supervision. Having reviewed these seminal works, this section will discuss studies (Cabaniss et al., 2001; Cohen & Hatcher, 2008; Stromme, 2012; Zaslavsky et al., 2005; Sant & Milton, 2015; Ladany et al., 1996) aimed at studying psychoanalytic supervision from the supervisee's point of view. One (Cabaniss et al., 2001) is a quantitative study that compares the supervisors and supervisees attitudes towards supervision. Two (Cohen & Hatcher, 2008; Stromme, 2012) explore student trainees' experience of receiving psychodynamic supervision. One study (Ladany et al., 1996) is included to expand Stromme's finding regarding the supervisees' disclosure. One study (Zaslavsky et al., 2005) is predominantly focused on psychoanalytic therapy, however, authors dedicate a small part of their research to therapists' experience of supervision. The last study (Sant & Milton, 2015) explores therapists' experience of psychodynamic supervision.

The first study in the realm of psychoanalytic supervision was published in 1960 when Lewin and Ross (1960) presented their findings in surveying psychoanalytic supervisees

from 14 institutes and 3 training centres approved by the American Psychoanalytic Association (APA). In their 13-chapter book, they summarised data from students enrolled in 1957-58, e.g., age, previous education, cost of training analysis, etc., and training psychoanalysts, e.g., education and techniques. The authors also discussed organisational aspects of supervision such as curriculum, the clinic and financing. Although they spent hundreds of hours with participants and discussed their supervisory practice, their project said little about the experience of supervision from the supervisees' point of view.

In 1966, Fleming and Benedek published their study and it included a detailed analysis of four hundred supervisory sessions with two supervisees. They reviewed transcriptions to identify the learning process that occurs in psychoanalytic supervision. Their book offers many insightful examples and sheds light on the complexity of supervision including the nature of psychoanalytic formulation and diagnosis, psychoanalytic situation, regression and interpretation in therapy, transference and resistance aspects, and conflict resolution. However, their study comprised a small sample, two candidates, which limits the kind of generalisations one can make from the findings.

The studies reviewed (Lewin & Ross, 1960; Fleming & Benedek, 1966) are considered seminal works in the study of psychoanalytic supervision. They opened up a new area of research, the examination of an essential part of learning psychoanalysis, i.e., supervision. However, they neglected to study the experience of supervision from the supervisee's point of view. Although they certainly provided us with valuable data regarding some important aspects of supervision and supervisory processes, how psychoanalytic supervisees experience supervision was still unstudied.

The Columbia Supervision Project (Cabaniss, Glick, & Ross, 2001) seems to be the first study which considers the supervisee when studying psychoanalytic supervision. Cabaniss, Glick, and Ross (2001) undertook a project to study how supervisors and supervisees operate in and find supervisory practice. They sent the same questionnaires to 35 candidates and supervisors involved in supervision practice at the Columbia University Center for Psychoanalytic Training and Research. The questionnaire asked both parties about their participation in supervision, e.g., the frequency of and preparation for supervision and their supervisory interactions, e.g., *How Each Member of the Supervisory Dyad Experiences the Other?* They then interviewed 32 of the participants. The interviews were conducted to explore their experience of completing the questionnaires. Of particular note, and related to the aims of the current study, was the

considerable disagreement between supervisors and supervisees in relation to the useful aspects of supervision. More specifically, there was a difference of 33% when it came to views on the usefulness of discussing theory. Supervisees considered discussion of theory a more useful part of supervision than supervisors. Many will argue that such a differences can be found in other aspects of supervision, which is entirely sensible as both parties might have different attitudes towards e.g., any hindering or helpful factors in supervision. A qualitative study can expand this preliminary quantitative finding so that supervisees can be given an opportunity to freely reflect on their experience of supervision, particularly helpful or unhelpful aspects of supervision.

Cabaniss and his colleagues also found that, in over 50% of dyads, the supervisory relationship was rarely discussed. This finding is important given the fact that this relationship has been found to be a crucial part of supervisory practice and have been found to facilitate or hinder the supervisee's learning (Inman & Ladany, 2008; Worthen & McNeil, 1996). It seems that the lack of discussion about the supervisory relationship is likely to be related to another finding of the study: approximately 30 per cent of dyads had a problematic relationship in some way. These studies propose that supervisees need to be given an opportunity to speak about their experience of supervisory relationship so that a better understanding of this paramount aspect of supervision can be achieved. Considering the crucial role that the supervisory relationship may play in supervision, one objective of the current study was to explore the supervisees' lived experiences of the supervision relationship.

In a similar vein to the Columbia project, that highlighted supervisees' perspectives, Cohen and Hatcher (2008) examined how psychiatric trainees experience a psychodynamic training course. Unlike the former, Cohen and Hatcher's study was a qualitative study in which 12 psychiatrists learning psychodynamic psychotherapy were invited to explore their experience of learning psychodynamic therapy. A semi-structured interview was employed, and they used constant comparison to identify general categories. In reporting the analysis of data, the authors proposed that the central concept that emerged from the study, that linked all the major categories, could be labelled "daunting task". Participants reported that the training process led them to experience difficulties which stemmed from variety of different factors, "supervisor" among them. Regarding supervision and supervisors, participants found significant deficiencies in the supervisors' clinical skills, which led them to feel scared. The majority of participants found it difficult to have access to an appropriate and proficient supervisor. The lack of a good supervisor made participants feel uncontained. In turn, they felt captive to this uncontained

process when working with patients. It is understood because a supervisee may repeat supervisory experiences in therapy sessions and vice versa commonly referred to as the “parallel process” (Doehrman, 1976; Sarnat, 2019). In addition to insufficient supervisory skills, participants complained about ethically unacceptable behaviour from supervisors such as boundary issues, which impacted negatively on the development of their therapeutic self. Trainees expected that supervisors would have the knowledge required to guide a supervisee, and when they found it was not the case they felt betrayed. From a psychoanalytic point of view, negative experiences and feelings emanating from the supervisor, often called *super-transference*, can be strong and impact on “the therapist’s professional development, self-esteem, and work with his or her patients” (Teitelbaum, 1990a, p. 244).

In their short article, Cohen and Hatcher did mention how participants occasionally alluded to some positive experiences; however it was reported that the majority of the themes developed were linked to the adverse experiences of supervision. Their study is a valuable one as it provides supervisees with an opportunity to be heard, however it appears to have some limitations. Their article is very short and does not include any extracts from the actual interviews, not typical for a qualitative study. Using vignettes in psychotherapy research, as a social science, allows for a contextual explanation, clarifies people’s judgements, and reduces the likelihood of personal explanation of sensitive threads (Barter & Renold, 1999). Also, using a single locality to recruit participants is likely to have diminished the robustness of the findings. Furthermore, as the authors mention in the article, the study was mainly focused on exploring the experience of the supervisee’s first psychotherapy case. Thus, from a developmental point of view, participants are located at the beginning of their profession as a psychodynamic practitioner; and their perception of supervision could be considerably different from that of more experienced therapists (Ronnestad & Skovholt, 2003).

In a more comprehensive study, as compared to Cohen and Hatcher’s (2008) study, Stromme (2012) investigated not only the supervisee’s negative emotions resulting from psychodynamic supervision, but also the means he/she employs to handle them. In a longitudinal study, with multiple single-case designs, and an inductive and explorative approach, she interviewed 23 beginner therapists and their supervisors, i.e., nine supervisors. A psychodynamically/psychoanalytically informed semi-structured interview was employed that considers both subjective reports and unconscious signals. It requires the interviewer to use psychoanalytic informed listening and to infer from participants’ projection in the interview. Therapist students were interviewed within four-time points: 3

times during the training practicum that took two years and one follow up one year later, while the supervisors were interviewed twice: in the beginning and at the end of supervision.

Data analysis revealed that supervisors were well-acquainted with the possibility of the supervisee being vulnerable. They addressed and elaborated on this possibility during interviews. Nevertheless, they failed to recognise their own supervisee's negative feelings towards them. Seventeen supervisees had negative feelings towards the supervisors. Eleven of them did not disclose these feelings to their supervisors. With regard to eight of them, their supervisors, when interviewed, did not show any awareness of the supervisees' negative feelings. The supervisors appeared to be overestimating their supervisory alliance and underestimating the supervisee's helplessness and insecurity. This finding is consistent with the non-disclosure literature (Cabaniss et al. 2001; Farber, 2006; Ladany & Caskie, 2010). Ladany et al. (1996), for example, interviewing 108 psychotherapy supervisees, discovered commonalities in the content that was not being disclosed, and the main reasons for non-disclosure among supervisees. They were also able to identify which contents and which reasons for non-disclosures affect supervisees' perception of supervision.

Ladany et al.'s study found that almost 97% of psychotherapy supervisees withheld information from supervisors, predominantly negative reactions to the supervisor (90%) and clinical mistakes (44%). The authors proposed that these negative reactions to the supervisor might stem from issues the supervisee's client faced within therapy sessions, i.e., parallel process. If the client experiences difficulty with the supervisee in therapy, the supervisee is in turn likely to repeat this difficulty with the supervisor in supervision; the reason for this type of non-disclosure was found to be deference to the supervisor. It is part of the hierarchical nature of supervisory practise that the supervisor has authority (Rennie, 1994) and the supervisee should respect it. In order to facilitate the supervisee's learning process, supervisors are encouraged to pay attention to this aspect so that the supervisee can exert her/his needs in supervision (Bordin, 1983). Participants also appeared to withhold information regarding their clinical mistakes, as another type of non-disclosure, because they feared being considered an inadequate practitioner. It is apparent that not presenting these mistakes is likely to negatively affect their performance in therapy. It is sensible to view the lack of a safe and secure place as a reason for non-disclosing self-deficiency. Thus giving an opportunity to supervisees will provide valuable knowledge on how they experience supervision, more specifically the supervisory relationship, that might largely affect their therapeutic practice. This proposition is

supported by another finding in the study, that less satisfactory supervision was related to negative reactions to the supervisor, as a non-disclosed content, and a poor alliance with the supervisor. As the author proposes, this problematic experience is likely to cause the supervisee to feel overwhelmed, not just in supervision but also in therapy sessions. This is consistent with available evidence that considers the supervisory relationship key for supervisory learning (Inman & Ladany, 2008; Worthen & McNeil, 1996).

Returning to Stromme's study, the interview used by the investigator was informed by justifiable psychoanalytic assumptions, in that novice therapists appear unable to express their anxiety verbally (Skovholt & Ronnestad, 1992). Therefore, as the participants were involved in such an emotionally charged process, i.e., seeing themselves as a new therapist, subjective reports might not be the most appropriate way to study their anxiety. This is of greater importance when it comes to psychoanalytically-oriented psychotherapies as it is a basic psychoanalytic assumption that mental processes, namely defence mechanisms, distort subject reports, particularly when the phenomenon under study is an emotional experience (Bowins, 2004). It is also noteworthy that the investigator uses this interview to study a non-patient group and brings a research method based on psychoanalytic assumptions to a non-patient population. Despite these merits, as the investigator stated, it needs to be noted that the interpretation of the interview materials was inevitably influenced by the researchers' own countertransference.

Studies discussed so far (Cabaniss et al. 2001; Cohen & Hatcher, 2008; Stromme, 2012) aimed to explore difficulties that supervisees face in supervision. They, except the Cabaniss et al.'s study as a quantitative study, invited psychoanalytic supervisees to explore their experience of being in supervision. They indicated some challenges supervisees might experience in supervision. Also, it was revealed that some supervisors are often unaware of these difficulties, even though they were theoretically aware that these issues may occur. However, these studies' participants were in the initial stages of their development. It is now evident that supervisees in the initial stages of learning psychotherapy are likely to have different experiences than more experienced ones (Stromme, 2012). Morgan and Sprenkle (2007) pointed out that supervisees in each stage of their development require different supervisory tasks. Novice supervisees are more likely to be vulnerable to distress and prefer a more directive and structured focus, while more experienced ones tend to favor a more collaborative and conceptual focus. Thus, one may conclude that negative feelings and anxiety are typically prevalent among beginners and novice psychotherapists. However, disclosure literature suggests that experienced psychotherapists, like beginners, tend to avoid disclosing information to the

supervisor. The most prevalent type of non-disclosed content was discovered to be negative reactions to the supervisor (Ladany et al. 1996). From a psychoanalytic point of view, hiding information can result from the supervisee's fear of retaliation, which, in turn, result in unconscious attempts to avoid disclosing negative reactions towards supervision and the supervisor (Cabaniss et al., 2001). However, in relation to experienced psychotherapist supervisees, one possible reason for non-disclosure might be their professional experience which enables them to rest heavily on their professional competence. This indicates a new direction for further research: give a voice to more experienced therapists, and allow them reflect on their emotional experience of being in supervision. In addition, the studies discussed so far have neglected to pay sufficient attention to the central part of supervisory practice, i.e., the supervisory relationship, which is thought to play a crucial role in the learning process of supervisees (Inman & Ladany, 2008; Worthen & McNeil, 1996).

A body of evidence has found that the supervisory relationship plays a fundamental role in the process of learning, which necessitates including the supervisory relationship in studies focused on supervision. In their study to examine the concepts of transference and counter-transference, relational aspects of psychoanalytic therapies, in both psychoanalytic therapy and supervision, Zaslavsky et al. (2005) interviewed four supervisors and four supervisees based in an institute of psychoanalysis belonging to a society affiliated to the International Psychoanalytical Association (IPA). Authors categorised the interview materials into three broad groups. The first two sets of data concerned participants' views on utilisation of transference and countertransference in therapy, while the third group concerned how participants approach counter-transference in supervision. Regarding the purpose of the current study, only the latter one is discussed here.

Participants were interviewed through semi-structured interview which allowed them free association on the questions posed. Data gathered were analysed using the method of "Content Analysis", in which all forms of communication are subject to content analysis (Kude, 1997). The investigators used Bardin's (1997) model to conduct the analysis. It was revealed that more than half of the statements (57%), out of the units of meanings from the totality of statements, could be classified under the category "approaching counter-transference in supervision". This theme emerged through analysis of participants' statements on their realization of, and work on counter-transference in supervision.

According to supervisors and supervisees own accounts, the following three sets of indicators were signs of the presence of countertransference in supervision: *emotional manifestations* i.e., examples would include empathy and being at ease, often determined by the atmosphere of supervision, *behavioral manifestations* i.e., such as making a contract or any agreements between both parties, and *identification with the patient and blind spots* such as the supervisee realizing, through personal analysis, his identification with the patient in supervisory practice. The latter one has been addressed by the authors when they refer to the pressure exerted by the patient on the supervisory processes. They observed that these indicators are interwoven as emotional and behavioural manifestations are basic to the projective identification that underlies the supervisee's relationship with his patient, his supervisor, and his analyst. Supervisees were preoccupied with the necessity of approaching countertransference, which is consistent with the finding that supervisees tend to work on the self in supervision (Brito, 1999). Regarding the participants' level of training, which was at an advanced level, this desire to work on countertransference seems likely to have stemmed from the confidential relationship they had developed with supervisors and the institute. Working alliance, a process of teaching and learning, has been found to develop through the relationship supervisees establish with supervisors and training institutions (Vollmer Filho & Bernardi, 1996; Zaslavsky, 1999).

Zaslavsky et al.'s study provides information regarding supervisees' perspectives on two essential components of "transference and countertransference" in psychoanalytic supervision. Despite the study's merits, it is restricted to two concepts and it did not allow the participants to reflect on all the various aspects of supervision that might have been meaningful to them. Additionally, their study uses free association and aims to address unconscious dynamics behind participants' experience. Unconscious dynamics inherent in supervisory processes are certainly considered an important aspect of supervision to study (Stromme, 2012; Doehrman, 1976). However, as the investigators mentioned in their article, due to the nature of the study, the investigators' unconscious mind could not be fully omitted, and it is therefore not unreasonable to imagine their countertransference influenced the research and investigative process, which can be, among other possible limiting factors, a limitation of the study.

As the most recent study reviewed here, Sant and Milton's study (2015), aimed to gain a greater understanding of the supervisory relationship from the trainee supervisee's point of view. They aimed to explore how trainee practitioners experience psychodynamic supervision. The sample recruited for this study included eleven participants, i.e., five men

and six women. Participants were eligible if a) they were currently in training and b) training was provided by an accredited program of studies. The sample comprised a heterogeneous group of participants as they were drawn from a range of different therapeutic disciplines and were all in different stages of their professional training. The reasons behind recruiting a sample of this kind was, as the investigators claimed, it would produce rich commonalities and divergences in participants' accounts of psychodynamic supervision. A semi-structured interview schedule was employed and supervisees were asked about their experience of psychodynamic supervision. Having completed data collection, the authors used inductive thematic analysis to identify semantic themes, whereby "themes are identified within the explicit or surface meanings of the data" (Braun & Clarke, 2006, p. 85).

Data analysis illustrated that the majority of participants emphasised the importance of supervisory relationship on the process of supervisory learning. The use of "we" by participants indicated that they see supervisory work as a dual and shared relationship. Some participants seemed to experience supervision as collaborative work when, for example, they referred to their supervisors being supportive when facing challenges in therapeutic work. This is quite similar to what Winnicott (1968/1986) refers to as the holding environment. Participants appeared to see supervision as an opportunity and secure space where they could identify and raise professional and personal issues for discussion. Supervisees pointed out that the supervisory relationship was more helpful when supervisors shared their own clinical experiences. This can normalise the supervisee's clinical difficulties, particularly those at the beginning of their learning, and participants alluded to this part of supervision as the *nurturing* aspect of supervision. It has been reported that supervisees value this sharing and experience it as a positive factor in supervision (McNeill & Worthens, 1996).

Sant and Milton's study also highlighted another aspect of the supervisory relationship, i.e., *disjunction in supervisory relationship*. This theme encompassed supervisees' experience of problematic relationship with supervisors and their struggles to deal with its consequences. Some complained that supervisors ignored the supervisee's attitude and inner desires, and treated them like children. Some of the other participants mentioned the use of certain metaphors, e.g., one felt "quite infantilised" and seen as a schoolboy. This is similar to Stromme's (2012) study where supervisees and supervisors had a different experience with each other. It is also consistent with the Columbia project's (Cabaniss et al., 2001) findings that found a high rate divergence between the parties when it came to the issue of useful aspects of supervision. Problematic supervision can lead the

supervisee to feel incompetent, lose self-confidence or experience feelings of hopelessness (Ramos-Sanchez et al., 2002). Ellis (2001) made a distinction between inadequate and harmful supervisions with the former meaning simply ineffective supervision, while the latter refers to supervision that is actually traumatising. However, Sant and Milton did not clarify the participants' experiences of problematic events and therefore did not identify whether supervisees experienced inadequate or harmful supervision.

Sant and Milton's study is valuable as they attempted to capture the meaning supervisees obtain from supervisory relationships in psychodynamic supervision. However, it needs to be noted that participants in their study were novice and beginner therapists. The sample was a heterogeneous group of people in terms of participants' professional fields and developmental stages. In addition, although the study illustrated some negative and problematic aspects of supervision, in particular, those related to the supervisory relationship, it neglected to examine the likely adverse effects of these experiences on the supervisees. This is of enormous importance for psychodynamic psychotherapy because it is thought that problematic psychodynamic supervision can have a negative impact on personal as well as professional life (Stromme, 2012).

3.2. Synthesis and critique of the studies reviewed:

The studies reviewed have attempted to clarify the complexity inherent in psychoanalytic supervision. Among their merits, these studies have attempted to look at supervision through the supervisee's lenses (Cabaniss et al., 2001; Cohen & Hatcher, 2008; Stromme, 2012; Zaslavsky et al., 2005; Sant & Milton, 2015; Ladany et al., 1996). The supervisees' perspectives on supervisory experience are invaluable as they are in direct contact with the supervisor to review practice and with the client to employ supervisory advices. Thus, asking supervisees about their supervisory experience, as the studies reviewed did, is likely to provide us with more in-depth and rich data.

Also, these studies indicated that while supervisees found some aspects of supervision facilitative of growth, the discussion of theory in supervision being one, they found other aspects, such as lack of the supervisor's competency, challenging and problematic. In addition, these studies found that supervisees and supervisors disagreed as what aspects of supervision were facilitative and what aspects were problematic (Cabaniss et al. 2001; Stromme, 2012; Sant & Milton, 2015). Furthermore, a tendency not to disclose negative

experiences was found to be common among supervisees. The non-disclosure issues, particularly *negative reactions to the supervisor*, seemed to be more critical when it came to more experienced therapist supervisees as they, compared to beginners, tended to have more negative reactions to the supervisor (Ladeny, 1996). Moreover, supervisors tended to be more optimistic as to the positive results of supervision and their supervisory style than supervisees; although supervisors were consciously and theoretically aware of the importance of the supervisory relationship, roughly half of them failed to recognise a supervisee's problems in their own supervisory relationships (Stromme, 2012).

However, one limitation of some of these studies is that supervision was not the primary and the main focus of the studies being included. Rather, it was the supervisee participants who addressed and highlighted supervision as an essential part of training program (Cohen & Hatcher, 2008; Zaslavski et al. 2005). They accentuated the central role supervision played in the process of their development. In addition, the majority of the participants included in these studies were novice and beginner supervisees (Stromme, 2012; Cohen & Hatcher, 2008). From developmental points of view, they are vulnerable towards distress and consequently they need different supervisory tasks e.g., concrete offers (Morgan & Sprenkle, 2007). Hence, they, as opposed to more experienced ones, are likely to have different experiences of receiving supervision. Thus, a further study is required to include more experienced supervisees. Furthermore, the studies, except Sant and Milton's (2015) study with a heterogeneous group of people, fail to take a close look at the supervisory relationship among supervisees, which is crucial as a supervisory relationship is pivotal to a good supervision (Worthen, & McNeill, 1996). Moreover, none of them was focused on psychoanalytic concepts, which are central in psychoanalytic supervision. Supervisees might work, for example, on the patient's transference or their own countertransference in supervision.

Taking into consideration the studies reviewed, a further study mainly focused on supervision is required, and not merely included as part of a wider study of training psychoanalytic psychotherapists. There is also a need to focus on more experienced psychoanalytic psychotherapist supervisees to determine how supervision is experienced by more experienced and qualified therapists (Watkins, 2015b). Exploring the lived experience of supervisees will provide the supervision literature with productive and valuable knowledge about participants' experience of receiving psychoanalytic psychotherapy supervision.

3.3. Rationale for the Current Study:

The literature review has illuminated a need to study psychoanalytic supervision from experienced supervisees' point of view. To the researcher's knowledge, no study has been conducted to examine psychoanalytic therapists' experiences of supervision in Ireland. Given that the regulations process of psychotherapy profession in Ireland is underway and considers supervision a mandatory task, it is timely to examine and contribute to this aspect of training psychotherapy. It is also important to study supervision in the context of Ireland because, consistent with research conducted in the international level, empirical studies demonstrate a high rate of inadequate (ineffective) and harmful (traumatizing) supervision among psychotherapist practitioners in Ireland. In their study, Ellis et al. (2015) reported that 79% and 40% of Irish psychologists who practice therapy were currently receiving inadequate and harmful supervision respectively. When the investigators considered the participant's entire professional life, the numbers increased to 92% and 51%. This is consistent with a more recent study that found that two-thirds of Irish psychologists who practice psychotherapy were dissatisfied with the supervision they received (Booth et al., 2010). Thus, it is evident that inadequate and harmful supervision in Ireland is a common problem and a qualitative study exploring the supervisees' experiences of supervision can expand our understanding of these primary quantitative data.

As discovered in the literature review, the majority of studies on psychoanalytic supervisees' experiences of supervision are related to novice and beginner therapists (Watkins, 2015b) who are heavily dependent on the supervisor. From developmental points of view, these therapists with a lower level of clinical skills and more limited self-awareness are more vulnerable and prone to anxiety (Stromme, 2012). Consequently, they are likely to have different needs in supervision; they, as opposed to more experienced practitioners, are likely to benefit more from direct and concrete feedback (Morgan & Sprenkle, 2007) and more guidance (Haynes et al., 2003). Due to the different needs and consequently different supervisory tasks, it is reasonable to assert that beginner and experienced therapists may have different experiences of receiving supervision. Including a group of experienced participants is essential for two reasons: firstly, they have accumulated experience of receiving supervision and are probably able to better reflect on their experiences. Secondly, experienced psychotherapists have been found to avoid disclosing information, in particular, negative reactions to the supervisor. Thus, examining their supervisory experiences can provide rich insights into psychoanalytic supervision and contribute to the supervision literature.

Evidence demonstrates that psychotherapy supervisees tend to withhold, in supervision, information regarding their experience of receiving supervision. Ladany et al. (1996) found that the non-disclosure issue is more critical when it comes to more experienced therapist supervisees. These supervisees have been found to withhold undisclosed supervisory materials in particular negative reactions to the supervisor (Ibid). In addition, evidence suggests that supervisors tend to be optimistic about the supervision they provide and overestimate the supervisory alliance and underestimate the supervisee's helplessness. Supervisors seem to be theoretically aware of the importance of the supervisory relationship and the likely problems that the supervisee might face in supervision, but in practice some of them fail to recognize these problems (Stromme, 2012). With regards to the high rate of avoiding disclosure among experienced therapists and an accumulated experience of receiving supervision, more experienced therapist supervisees can provide this study with valuable knowledge.

It can be proposed that dissatisfaction with supervision, particularly in psychoanalytic supervision, might be partly related to a lack of a guideline that can guide supervisory sessions. As pointed out by Pegeron, (2008), the main inconsistency and blind spot in psychoanalysis is the lack of a program that can explain the way a psychoanalytic supervisor would be trained. Consequently, there is no well-established model to conduct psychoanalytic supervision. In addition, supervisors do not seem to become more competent as they go along and obtain experience (Ronnestad et al., 1997). A study of this kind will provide the field of supervision with rich data about the recipient's' perception of supervision, which in turn can contribute to the improvement of psychoanalytic psychotherapy supervision.

Supervisory experiences from the supervisee's points of view are of particular importance when it comes to psychoanalytic supervision. It is believed that these experiences can affect the supervisee's professional and personal life (Stromme, 2012). Psychoanalytic supervisees might be engaged emotionally with the supervisory process when supervisees' personal issues hinder the process of learning (Ekstein & Wallerstein, 1972; Morrissey & Tribe, 2001). It is a longstanding idea that the majority of clinical problems with the client originates in the therapist's countertransference i.e, the supervisee's psychology (Frederickson, 2015), which emanates from life experiences. Thus, supervision is likely to bring the supervisory attention to the supervisee's psychology. In addition, psychoanalytic supervisees are assumed to replicate their experience of supervision with the supervisor in therapy with the patient and vice versa (Doehrman, 1976; Sarnat, 2019). Thus, it is of further importance to study psychoanalytic

supervisee's experiences as these experiences are replicated in therapy and impact the quality of the treatment the patient receives.

3.4. Research Aims and Objectives:

The purpose of this study is to explore psychoanalytic psychotherapists' lived experience of supervision.

Research Objectives:

- (1) To understand how experienced psychoanalytic psychotherapists perceive contribution of supervision to their practice
- (2) To explore experienced psychoanalytic psychotherapists' conceptualizations about helpful supervision
- (3) To explore experienced psychoanalytic psychotherapists' conceptualizations about unhelpful supervision
- (4) To gain an understanding of experienced psychoanalytic psychotherapists' meaning making of the supervisory relationship

3.5. Researcher's Reflexive Comments: Making Sense of the Literature Review

I as a psychotherapist myself was well-aware of the importance of supervision for therapists to develop. However, it was incredible and troubling to see the dearth of literature on the supervisee's experience of supervision. The lack of sufficient research indicated a meaningfully important gap in the literature that was motivating for me and cemented my commitment to the study and the experiences of the population of the study i.e., psychoanalytic supervisees.

As already mentioned, I had had both frustrating and positive experiences with supervision. Could these experiences impact on my understanding when reviewing the literature? am I capable of being a clear-headed researcher and putting aside my own experiences and addressing the possible influences my experiences may have on the study? Is it necessary, for me as an IPA researcher, to bracket my feelings? If so, is it possible?

I tried and did my best to be aware of my own subjectivity and its influence on reviewing and synthesizing the studies. I tried not to let my experiences blur my vision when reviewing research studies. For example, I found myself more attracted to studies in which the study participants complained about an authoritarian supervisor. I kept taking notes during the process of the study. I recorded my emotions triggered by the data and kept trying to be aware of the battle between the two. However, it goes without saying that the aim of this journaling was to improve my awareness of the possible effects my subjectivity was having on the process of study, rather than bracketing and putting it totally aside.

3.6. Conclusion:

This chapter presented and critically discussed the literature on psychotherapy and psychoanalytic supervision. Reviewing studies on psychoanalytic supervisees' experience of supervision, the chapter demonstrated that almost all studies on psychoanalytic supervision have been conducted on trainee supervisees, while the literature on more experienced supervisees is scarce. The absence of research on experienced analytic supervisees are important because trainees are unlikely to represent more experienced supervisees. Trainees and beginners have different supervision needs and as such different supervision tasks that will lead to different supervision experiences. Conversely, experienced supervisees accumulated experiences and seem to be more likely to precisely reflect on supervision in long run.

Chapter 4: Methodology:

4.0. Introduction:

Having outlined the study aims and objectives, this chapter will now clarify how the aims will be addressed. The purpose of this chapter is to explain the philosophical underpinnings to and describe the researcher's design of choice, IPA, and outline why it was the most appropriate design to take. Subsequently, the chapter will explore strategies used to recruit participants, to give them pseudonyms, and collect and analyze data. Then, it will discuss how the study addressed ethical considerations. The chapter ends with a consideration of the issue of the quality and the rigour in the study, and the role of the researcher's reflexivity.

4.1. Ontology and Epistemology:

The distinction between a quantitative or positivist approach to research and a qualitative or interpretivist one, is based on each approaches' underlying ontological assumptions. Ontology comes from the Greek word *onto*, which means *being*, and ontology refers to the "study of being" (Crotty, 1998) a study concerned with the nature of the reality (Scotland, 2012). It pertains to *what is*. Guba and Lincoln (1989, p. 83) proposed that underlying an ontological assumption is an answer to the question: 'What is there that can be known?' The assumptions are related to our beliefs about what exists. Ontology covers everything that exists; it is therefore the most comprehensive of all knowledge. Positivist approaches to research adopt an objectivist ontological perspective on being and the nature of the reality. According to this ontology, reality exists independently of human perception and who is undertaking the research. It is there and waiting to be uncovered, and the researcher's job is to uncover it (Coghlan & Brannick, 2005). Positivistic ontology is based on the assumption that, regardless of people's perspective, there is a single reality to any investigation (Hudson, & Ozanne, 1988). An investigator should take a controlled approach by identifying a clear research topic, outlining a suitable hypothesis, and employing an appropriate research methodology (Churchill, 1996; Carson et al., 2001).

Interpretivist or constructionist ontology, the ontological model this current study is based on, takes the opposite position with regard to the nature of reality. Constructionism holds that no objective, discoverable, measurable and quantifiable world exists. Thus, reality cannot be truly known (Pring, 2004). While reality does exist independently of human perception, reality is relative, not absolute (Hudson & Ozanne, 1988). Reality is

perceived by human consciousness and this consciousness gives meaning to our perception of reality. Thus, reality is constructed by our experiences (Crotty, 1998). From the constructionist perspective, knowledge is socially constructed rather than objectively identifiable (Carson et al., 2001). Social phenomena cannot be seen as definitive; rather, these phenomena and their meanings can only be viewed as individual perspectives (Bryman, 2001). When it comes to interpreting research data, constructionists emphasise identification patterns and meanings over universal experiences and truths (Madiill et al., 2000). 'Truth', for constructionists, is constructed and influenced by human interactions and socio-cultural contexts (Gergen, 2001).

The term epistemology originates in the word *epistēmē*, a Greek word for knowledge. It is the philosophy of knowledge and the way we come to know (Trochim, 2000). Epistemology concerns our beliefs about the nature of knowledge (Richards, 2003) and the assumptions we make when it comes to the possibility of knowing more about the world (Snape, & Spencer, 2003). In other words, epistemology addresses what constitutes knowledge, *what it means to know* (Scotland, 2012) and poses questions as to the precise relationship between the knower and what is known. Philosophically, epistemology is closely linked to ontology. While ontology refers to the philosophy of reality, epistemology concerns how we approach and come to know that reality (Davies, 1991).

Epistemologically positivist researchers approach the world impartially, their aim is to discover an objective reality and gain absolute knowledge. Meaning solely resides in objects, and it has nothing to do with the researcher's consciousness. Crotty (1998, p. 8) uses the example of a tree as an illustration:

“A tree in the forest is a tree, regardless of whether anyone is aware of whether anyone is aware of its existence or not. As an object of that kind, it carries the intrinsic meaning of treeness. When human beings recognize it as a tree, they are simply discovering a meaning that has been lying in wait for them all along.”

As should be clear from Crotty's statement, the researcher is held to be independent of the object. He obtains the object's meaning, which exists completely separate from him and the process he uses to obtain it. From a positivist's point of view, this discoverable knowledge is value free and not situated in socio-cultural contexts (Scotland, 2012). Positivist researchers tend to apply scientifically rigorous methods in the study of cause and effect relationships (Cohen et al., 2000).

Epistemological positions informed by constructionism, as opposed to a positivistic epistemological stance, sees knowledge production as a more interpretative process. Subjectivity matters and Knowledge is constructed rather than simply discovered. Regarding the tree example elaborated by Crotty (1998):

“We need to remind ourselves here that it is human beings who have constructed it as a tree, given it the name, and attributed to it the associations we make with trees.” (p. 43)

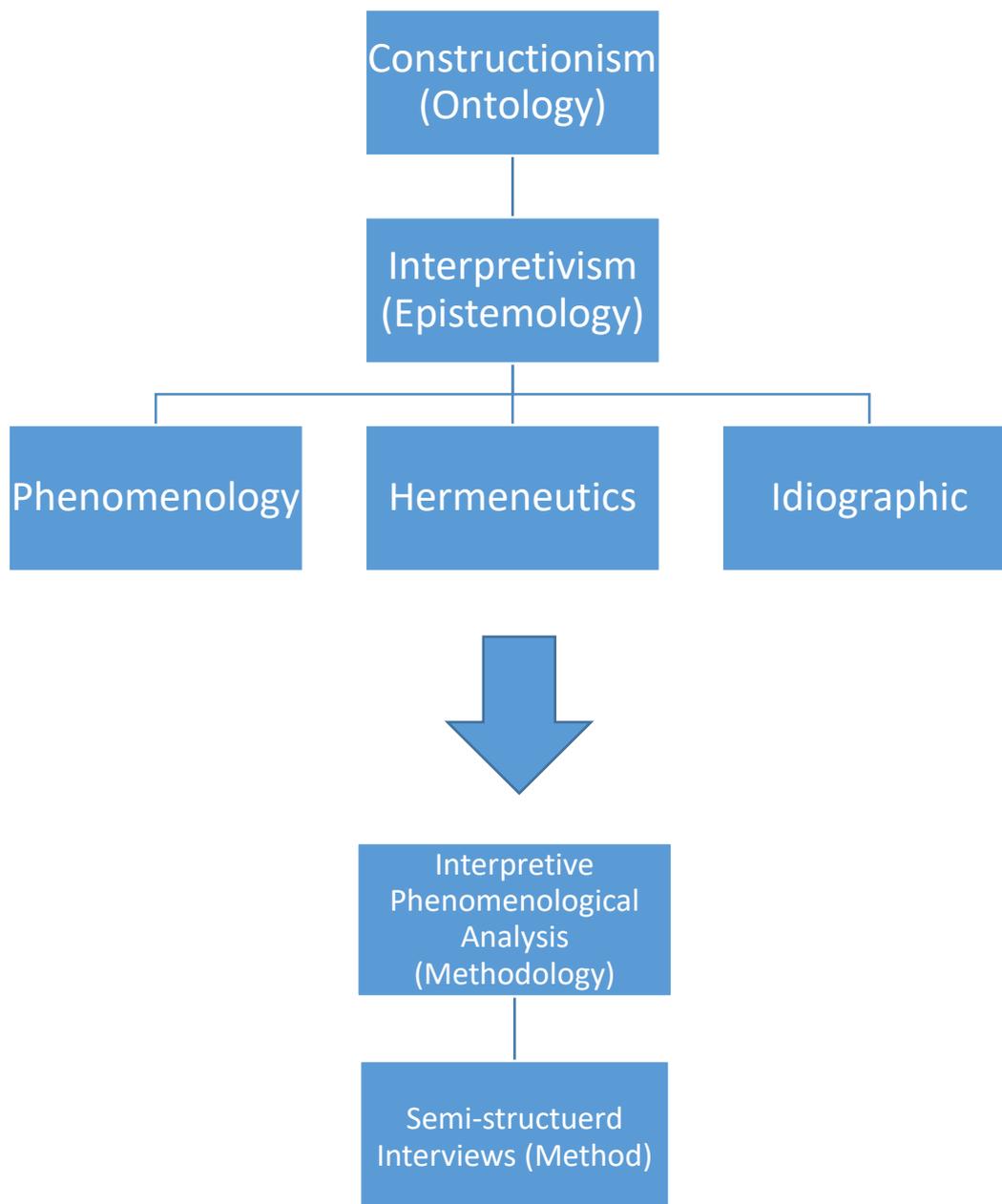
A tree is a tree in reality, however, someone is required to call it a tree. The consciousness constructs meaning through an interaction with the world; meaning is therefore constructed not discovered. Meaning can be constructed in different ways, which can be affected by cultural and historical factors; however, they all are accepted (Scotland, 2012) and truth is a consensus by co-constructors (Pring, 2000). This study is consistent with a more interpretive approach, where *“social actors are seen to jointly negotiate the meanings for actions and situations”* (Blaikie, 1993, p.96). The social reality is therefore socially constructed meaning. As such, human experience is based on a process of interpretation, rather than a material understanding of the external and physical world. It is interpretation that determines the way people behave in the world and the situations they find themselves in. Based on the interpretivist account, understanding and meaning are not automatically present in the social situations; rather, it has to be constructed (Dyson & Brown, 2006). Researchers’ attitudes towards positivism or objectivism and interpretivism or constructionism will guide the entire process of research studies from choosing a topic to discussing study results.

It is evident that researchers who lean towards positivistic ontology and epistemology tend to adopt quantitative methods to define concepts and collect and analyse data, while those in favour of constructivist or interpretive ontology and epistemology embrace qualitative methodology (Muhikul, 2015). The researcher’s epistemological position is consistent with an interpretivist approach to understanding data. He holds the view that truth is subjective. In this study, the research questions were drafted to obtain information on psychoanalyst supervisees’ lived experience of supervision, which is a uniquely subjective phenomenon. The knowledge being sought in this study is what happens within the phenomenon of supervision. Or, more precisely, what within the phenomenon of supervision is uniquely meaningful for the supervisees. In addition, an interpretivist orientation is consistent with the researcher’s approach to psychotherapy, which is psychoanalytic psychotherapy, a school which assumes people, based on their internal

conflicts, develop a certain subjective understanding of the world (Fonagy & Target, 2007). As a result, this current study uses a qualitative methodology, ideal for exploring how participants experience and make meaning of their psychotherapy supervision. Figure 1 demonstrates the methodological approach adopted in this study:

Figure 1.

A Broad Conceptualization of the Philosophical and Theoretical Foundations Underpinning the Study.



4.2. Qualitative Traditions:

Unlike quantitative studies concerned with questions of “how much” or “how many” and focused on measuring and prediction (Tuffour, 2017), qualitative studies generally ask “what”, “why” and “how” and are designed to investigate life experiences and are orientated towards understanding and interpreting (Finlay, 2011). Psychotherapy research was initially qualitative i.e., informed by interpretivist epistemology, in nature (Freud, 1905/1953), but subsequent researchers adopted a positivistic approach, and based their quantitative models on this approach (Danziger, 1990). However, researchers in the 1970s grew dissatisfied with quantitative methods, particularly when applied to psychotherapy, and sought alternative ways to capture clinically rich data (Goldman, 1976, 1979), that was being overlooked by the quantitative methods. This implied a gap between science and practice (Morrow-Bradley & Elliott, 1986). In the 1980s, qualitative research methods re-emerged (Rennie, 2004), inspired initially by humanistic psychologists (Elliott et al., 2013).

The current study is based on a qualitative framework, which has been influenced by three factors: Firstly, the need to obtain a deep understanding about the supervisee participants’ experiences of supervision: Quantitative study has been the dominant paradigm when studying supervision; however, it has not yielded a sufficiently detailed and rich description of the phenomenon, due to the highly complex nature of learning process in supervision (Wheeler, & Richards, 2007; McLeod, 2003). A qualitative approach would help the researcher study the complexities inherent in supervision, including, for example, complexities stemming from the supervisory relationship, by inviting participants to unpack their experiences of receiving supervision in detail.

Secondly, the researcher’s general philosophical orientation and his own perspective on the nature of knowledge: his epistemological position is consistent with an interpretivist approach. He does not believe that knowledge is simply there waiting to be discovered. Rather, it is created and constructed through the communication between the researcher and the researched. That is, they both contribute to the production of knowledge. This was described by Kierkegaard (1846/1992) when he stated that the objective facts are important, but how one relates to them are equally, if not more, important.

Thirdly, a qualitative study is consistent with psychoanalytic oriented thinking, the theoretical basis for the current study, which places a strong emphasis on the inter-subjective nature of knowledge: With regard to the kinship between psychoanalysis and

qualitative research, Kvale (2000) argues that the psychoanalytic position on the production of knowledge is similar to hermeneutical and postmodern perspectives on knowledge and is “*relevant for enriching and deepening the use of qualitative interviews in the social sciences today*” (p. 11). He highlights differences between psychoanalytic and positivistic accounts of knowledge, and argues positivist approaches form the basis of the majority of quantitative methods. There has long been a scepticism among psychoanalysts toward the positivistic approach (Kvale, 1999). While positivism considers scientific concepts to be objective and measurable, psychoanalysis acknowledges subjectivity and questions whether the unconscious mind can ever be observed and measured (Ibid). Watkins (2011c) states that this clash is posed by the nature of psychoanalytic constructs. For instance, how can we quantify and measure transference, countertransference or parallel process in psychoanalytic supervision? There is no easy answer to this question. Otto Kernberg (2006) argues that quantitative studies cannot capture “the wealth of unconscious processes evolving in patient and analyst” (p. 920). It is argued that psychoanalysis is more clinical-oriented and focused on meaning and interpretation. Qualitative studies are more compatible with psychoanalytic tradition, as their concerns are around subjectivity (Brown & Tracy, 2014). Using Toulmin’s (1990) phraseology, there is a distinction between the facts and telling of those facts. It can be suggested that both psychoanalysis and qualitative methods acknowledge the latter i.e., telling those facts.

Kvale (2000) discusses the contributions of psychoanalysis to qualitative studies, particularly its focus on the interpersonal relationship between the analyst and the analysand, where knowledge is constructed. Additionally, Kvale argues that some features of psychoanalytic practice should interest modern and recent qualitative investigators. Of those, he refers to a structural setting where psychoanalysis takes place; it is a form of non-directive communication and the analysand pursues his associations with no limitation; it is led by the analysand’s “free association” and the analyst’s “free floating attention”; the process of producing knowledge takes some time, which in turn allows for a deeper understanding; the analytic situation is emotionally charged, and the therapeutic interaction contributes to the generation of new knowledge; this process is truly “inter-view” where the two parties contribute to the development of “inter-subjective knowledge”.

4.3. Alternative qualitative approaches:

Various qualitative methods have been developed by researchers across different disciplines. Four common approaches to qualitative inquiry are identified and what they

consist of, and why they were not considered appropriate as the methodology of choice for this particular study will be briefly explained.

Grounded theory, as the first alternative approaches for this study, developed in sociology (Glaser & Strauss, 1967) is a qualitative methodology that aims to generate general explanations. The end result is a theory that explains a process or action shaped by large number of individuals (Glaser & Strauss, 1967). As the ultimate aim of grounded theory is to produce a theory, it is very different from IPA, the researcher's methodology of choice, which is, in contrast, concerned with understanding the phenomenon under investigation and determining the essence of "what it is like". In other words, the purpose of IPA is to *describe and also to understand experiences*, while the purpose of grounded theory, beyond the remit of this particular study, is to *generate or discover* a theory.

Narrative research was also considered as a possible approach for this study. Narrative research originated in the humanities and social fields (Daiute & Lightfoot, 2004) and is specifically designed for qualitative studies. Although there are different types of narrative study, it is generally understood as, "a spoken or written text giving an account of an event/action or series of events/actions, chronologically connected" (Czarniawska, 2004, p. 17). It is specifically focused on the stories told by individuals (Polkinghorne, 1995). For Creswell (2013) the aim of a narrative study is to report the life of a single individual, while a phenomenological study, in contrast, describes the meaning of a lived experience, a concept or a phenomenon, that is shared by several individuals. Although the narrative method was partially relevant to the study, the researcher decided it was not the most suitable as identifying the "what was it like" quality of a phenomenon (the focus of this study) is not usually within its remit.

Another form of qualitative research considered as a possible methodology for this study was ethnography. In this approach, the researcher examines patterns in beliefs, behaviours and language that are shared by people located in the same place or in the same social or cultural context e.g., teachers in the same school (Creswell, 2013). An ethnographic researcher studies culture-sharing groups (Harris, 1968) in order to describe learned patterns of values, which is different than the scope of this study. In addition, this study aims to explore participants' lived-experience of supervision, while ethnography research's essential aim is the study of how culture works. Thus, ethnography was not deemed a suitable methodology for the current study. Furthermore, ethnography requires observation of the study participants in their natural setting (Streubert & Carpenter, 2011). As such, the researcher would have needed to observe the supervisees in their

supervisory sessions. This would have resulted in different dynamics and could raise ethical issues. Therefore, ethnography did not match the aim this study.

Case study, as another alternative approach for this study, is familiar to psychotherapists and psychologists as it was used by Freud to describe and write reports about his patients and to develop his psychoanalytic theories. As a research methodology, case study involves the study of an issue across one or more cases within, for example, a setting or a context (Creswell, 2013). In addition, to use the case study method, the researcher would have had access to the transcripts of supervision sessions and conducted multiple interviews with cases over time (McLeod & Elliott, 2011). Given that it was not possible to meet these criteria, the researcher decided case study was not the most appropriate methodology.

Having scrutinized different qualitative approaches, the researcher chose IPA, drawn from the phenomenology tradition. As will be discussed in detail in the next section, phenomenology is an approach that puts emphasis on people's experience. Different phenomenological theories have been developed. In a simplistic sense phenomenological approaches used by researchers can be divided into two broad models: approaches that are characterised by an emphasis on hermeneutics (interpretation) and idiographics (individuals) (Smith et al., 2010) and those that stem from traditional Husserlian approaches and are focused on the descriptive aspects of experience (Giorgi, 2008a). IPA, as the methodology of this study, can be classified under hermeneutic and idiographic models.

With respect to the aim of this study, exploring psychoanalytic psychotherapist supervisees' experience of supervision, IPA was deemed the most suitable approach. Firstly, IPA was chosen for the current study because it is frequently employed when the purpose of the research is to study a group of people's lived experiences and the meaning-making of a particular phenomenon (Smith et al., 2009). The aim of this study was to document a group of psychoanalytic psychotherapist supervisees' experience of supervision and the meaning-making that resulted from it. Thus, IPA was deemed the most suitable method for the study. Secondly, IPA is a psychologically informed approach (Smith et al., 2009) suited to research that studies emotionally-charged practices such as psychoanalytic supervision where supervisees, at times, work on their emotional experiences (Frawley-O'Dea & Sarnat, 2001). This is supported by growing number of published IPA studies focused on aspects of emotions (Yorke & Dallos, 2015; Smith et al., 1997; Eatough et al., 2008). Thirdly, IPA is a flexible approach to study complex

phenomena. As Smith and Osborn (2003) argue, IPA is a useful method specifically “when one is concerned with complexity, process or novelty (p.53)”. The literature review identified that supervision always entails complex dynamics, that are part of the relationship between the supervisee and the supervisor. These dynamics are influenced by, for example, the supervisees’ developmental level, their preferred styles of learning and the supervisory relationship (Bernard & Goodyear, 2009). Thus, psychotherapy supervision is a complex exchange between two parties (Smith 2009) and a flexible method is required in order to obtain a deep understanding. In this particular study, participants were asked to unfold their experience of supervisory dynamics. IPA is therefore considered an appropriate method for the study. Lastly, IPA is consistent, at least in two ways, with the psychotherapy model (psychoanalytic psychotherapy) the researcher is leaning towards. This approach to psychotherapy requires the therapist to listen carefully to the client’s story before attempting to make sense of it. This is congruent with the hermeneutic nature of IPA. An IPA researcher listens to the participants’ account of their experiences of the topic under study before following their responses with subsequent questions. The researcher allows participants unpack their experiences in as much detail as possible (Smith, et al. 2009) before attempting to make sense of their responses. This is similar to what occurs in psychoanalysis. In this study, the researcher is required to follow supervisee participants’ responses, as well as encouraging them to elaborate on their individual experiences of supervision (and meaning-making), before attempting to make sense of their responses. In addition, both IPA and psychoanalysis pay particular attention to the individuality of the person. IPA acknowledges diversity and the unique aspects of people’s experiences, which is consistent with the idiographic element of IPA as discussed in the next section. This resonates with psychoanalysis through acknowledging the singularity of the client and attempting to understand the meaning of the phenomenon investigated from each client’s view (Midgley, 2006).

By choosing IPA, the researcher remained faithful to his epistemological position and the aims of the study. In addition, Smith and Osborn (2003) have argued that IPA is the most suitable method when firstly the researcher is novice, as the researcher is, because it provides a systematic and structured process for analysis, and secondly there is limited number of published studies around the topic under investigation. The latter is the case with psychoanalyst supervisees’ lived-experience of supervision.

4.4. Interpretative Phenomenological Analysis:

IPA is a modern way to conduct a phenomenologically-informed research study (Tuffour, 2017). As the newest entry to the cannon of qualitative methods, IPA was introduced by Jonathan Smith and his colleagues in the UK in the 1990s. IPA was initially picked up as a method to investigate and analyse individuals' experiences in the realm of health and clinical/counselling psychology (Smith et al., 1999); however, it is increasingly used in other fields and has become a popular qualitative approach, not just in the UK but also in continental Europe and the U.S (Pietkiewicz & Smith, 2012).

IPA is used to gain an in-depth understanding of human experience. The aim of IPA is to uncover and explore in detail how a group of individuals perceive their lived-experience of a certain event or object. For Finlay and Ballinger (2006), IPA is a variant of phenomenology that aims to explore individuals' perceptions and experiences. Taking an idiographic approach, the focus is on individuals' cognitive, linguistic, affective and physical being.

People are seen as "self-interpreting being (s)" (Taylor, 1985) and it is assumed that they are not passive entities; rather, they are active agents engaged in interpreting objects. Brocki and Wearden (2006) conceptualized this idea as:

“..human beings are not passive perceivers of an objective reality, but rather that they come to interpret and understand their world by formulating their own biographical stories into a form that makes sense to them (p.87).”

To capture the essence of people's experience, an IPA researcher looks at the respondents' account of the event under investigation (Chapman & Smith, 2002) and attempts to decipher meaning from the respondents' experiences of the interpretative process (Pietkiewicz & Smith, 2012). It is not only the respondent that reflects on and makes meaning of their experiences, the researcher interprets based on what is articulated by the respondent. This process is often known as double-interpretation or double-hermeneutic (Pietkiewicz & Smith, 2012) through which the researcher tries to extend the meaning making of the respondents.

IPA is informed by concepts and ideas that originated in three philosophies of knowledge, namely phenomenology, hermeneutics and idiography.

4.4.1. Phenomenology:

The term "Phenomenology" comes from the Greek "*phainómenon*": "that which appears" (OED, 2001 p.1071). Phenomenology is a movement in philosophy that places a strong emphasis on experience. For Giorgi and Giorgi (2008b), the purpose of

phenomenology is *'to capture as closely as possible the way in which a phenomenon is experienced within the context in which the experience takes place'* (p.26). There are different theories classified as phenomenological. They are broadly categorized as either descriptive or interpretative. Descriptive phenomenology was developed by Husserl and hermeneutic phenomenology is associated with Heidegger (Lopez & Willis, 2004). However, all phenomenological approaches share an interest in what the experience of being human is like. In addition, phenomenologists are particularly interested in discovering how people come to understand what their experiences are like (Smith et al. 2009).

Since the 18th century, the word phenomenology was used in the writings of philosophers. Kant used "phenomenology" to label a chapter in "Metaphysical Foundations of Natural Science" (Kant, 1786/2004). Hegel used this word for his book "Phenomenology of Spirit" (Hegel, 1807/1977). However, it was not until early years of the 20th century that phenomenology became a movement in philosophy and a new way of philosophizing, associated with Edmund Husserl (1858-1938), the father of phenomenology.

For Husserl, phenomenology is the evaluating of human experience. His main interest was to know *"a means by which someone might come to accurately know their own experience of a given a phenomenon, and would do so with a depth and rigour which might allow them to identify the essential qualities of that experience"* (Smith et al. 2009, p. 12). Husserl argued that we "should" "go back to things itself". The "thing" refers to the content of consciousness, namely "experience" (Ibid). The word "should" is important here, as Husserl thought there were certain barriers to the process of going back to things. While we have a tendency to fit "things" within our pre-existing knowledge, Husserl proposed that instead, we focus on each thing in its own right. Here, Husserl differentiated two sorts of attitudes, natural and phenomenological:

Natural attitude

The concept "natural attitude" is one of the most useful phenomenological ideas, as it distinguishes phenomenological attitudes from normal and routine experiences. For Husserl, "natural attitudes" referred to everyday life experiences (Moran, 2018). He argued that we adopt certain attitudes during routine life. Natural attitude is the situation in which we forget ourselves.

Husserl describes the natural attitude:

“The natural attitude is the form in which the total life of humanity is realized in running its natural, practical course. It was the only form from millennium to millennium, until out of science and philosophy there developed unique motivations for a revolution. (Husserl, 1974, 20)”

In everyday life, we are busily engaged and take for granted our experiences. For example, I might see a car passing my window. I might think of who might be driving it, I might wish to have the car, or I may remember seeing it later over dinner. These are happening in everyday life and are informed by natural attitudes. To go beyond natural attitudes one needs to disengage from routine activities and try to adopt a phenomenological attitude.

Phenomenological attitude

Phenomenological attitudes require a movement from the external world i.e., objects, to the internal world i.e., experience. Husserl (1927) states:

“Focusing our experiencing gaze on our own psychic life necessarily takes place as reflection, as a turning bout of a glance which had previously been directed elsewhere. .. when we are fully engaged in conscious activity, we focus exclusively on the specific thing, thoughts values, goals or means involved, but not on the physical experience as such, in which these things are known as such. Only reflection reveals this to us. Through reflection instead of grasping simply the matter straight-out- the values, goals, and instrumentalities- we grasp the corresponding subjective experiences in which we become “conscious” of them, in which (in the broadest sense) they “appear”. For this reason, they are called “phenomena”, and their most general essential character is to exist as the “consciousness-of” or “appearance-of” the specific things, thoughts (judged states of affairs, grounds, conclusions), plans, decisions, hopes, and so forth (p.2)”

Unlike natural attitudes, phenomenological attitudes are *reflective*. Sartre (1956/1943) argues that there is at least a minimal level of awareness even in our most immediate flow experiences. He calls this awareness *conscious of being conscious*. Returning to the example of the car mentioned above, once we stop the routine style of thinking and self-consciously reflect on thinking, wishing, and remembering, we are being

phenomenological. It is not the reality and *essence* of phenomena that appears in our interpretation; rather, it is the actuality of phenomena. Phenomenological attitudes need to be invoked; otherwise, it is only a subjective perception influenced by subjective assumptions that become known (Butler, 2016).

From Husserl's point of view, what is experienced in the individual's consciousness is the focus of phenomenological inquiry. To describe the relationship between the consciousness process and the object for which the process is triggered, Husserl used the term *intentionality* (Napoleon, 2005). It means that consciousness or experience is always oriented to something. For instance, thinking is always thinking of something, wishing is always wishing something, and fearing is always a fear of something. This "something" can be either an external object or an internal, psychological process such as imagination. With the example of the car mentioned above, there is an *intentional* relationship between the object (car) and the awareness in which car appears.

If our ordinary perception of the world is based on natural attitudes, one may ask *how can one individual achieve the phenomenological attitude?* To obtain phenomenological attitudes, Husserl (1927/1990) developed a method that aims to identify core structures of human experience. Firstly, one needs to familiarize oneself with the consequences of taken-for-granted life, which is the everyday world. To overcome this, the person needs to engage in what Husserl called *bracketing*. Bracketing is the process of bracketing biases. To describe this process, Husserl used the term epoché, a term that comes from sceptic philosophers and means "cessation" (Moran, 2000, p.148). Regarding how we posit the existence of the natural world surrounding us, Husserl suggests we 'bracket' and cease (epoché) from it in order to be free of presupposed conceptual and pre-existing categorizations. Bracketing is necessary to put the taken-for-granted world aside and concentrate on our experience of that world. The bracketing process allows one open up to the subjective phenomenon, which enables a return to the things itself i.e., lived-experiences (Smith et al. 2009) and the meanings of what is present (Finlay, 2011). Once this is complete, one is removed from the natural attitude and is in a position to achieve a phenomenological attitude, is able to describe "pure consciousness" (Moran 2000).

Clearly, Husserl's described method involves a series of *reductions* that offer different ways of thinking about the phenomenon. The purpose is to help the inquirer uncover the essence of their experiences. Husserl believes that a reflection on every particularity of a phenomenon should be included in the examination. However, for Husserl, this is just the first step in describing the phenomenological experience of, for example, a particular

house. What Husserl wanted to do was uncover the experience of “houseness” generally. We may have different experiences of different particular houses, however there is a common thread running through these experiences. Thus, Husserl’s task is to understand the core experience of a house i.e., the *essence* or *eidos* of house (Smith et al., 2009). The eidetic reductionism therefore refers to the techniques that help the inquirer locate the essence of his or her experiences. It aims to

“*help one establish the essential features of houseness- that is to establish its essence*” (Ibid, p. 14).

As already outlined, the “thing” in Husserl’s expression “going back to the thing itself”, refers to lived-experiences, not a philosophical conceptualization of lived experience (Ibid). Consistent with Husserl, IPA is concerned with examining subjective experiences, which are always oriented to *something*. Nevertheless, experience itself is a broad term. Thus, it is only reasonable to ask what kind of experiences does IPA study? Smith and colleagues (2009) state that IPA is more concerned with ordinary, and everyday experiences when they become significant moments, which prompt self-reflection in the inquirer and an attempt to make sense of what he or she has just experienced.

Husserl was not the only philosopher whose phenomenological approach contributed to the enhancement of IPA. Sartre was another philosopher whose analysis of humanness has been embraced by IPA. Sartre’s expression “existence comes before essence” (1948, p. 26) means that, for Sartre, the self is an ongoing project rather than being a pre-existing unity; we are continuously becoming ourselves. This understanding of the self as dynamic and in a state of becoming is related to Sartre’s concept of *nothingness*. The things that are absent are just as important as those that are present in determining how we see the world and ourselves. Sartre explains his concept of nothingness through a personal experience he had with a friend who did not make their appointment:

‘...I myself expected to see Pierre, and my expectation has caused the absence of Pierre *to happen* as a real event concerning this café. It is an objective fact at present that I have *discovered* this absence, and it presents itself as a synthetic relation between Pierre and the setting in which I am looking for him. Pierre absent haunts this café and is the condition of its self-nihilating organization as ground. (Sartre, 1956/1943, p. 42)’

For Sartre, nothingness of Pierre alters the meanings of the café. We are engaged in our projects in the world and we inevitably encounter others involved in their projects. Thus, our perceptions of the world are largely shaped by the presence and, at the same time, the absence of others. Sartre also applies this understanding of nothingness to our personal and social relationships e.g., presence or absence of relationships. Sartre provides a clear and extensive phenomenological study of the human condition. In particular, Sartre's work on human encounters and human engagement provide a ground for future IPA studies.

IPA has been criticized by some researchers who debate as to whether it is phenomenological. Van Manen (2017) claimed that IPA is a "therapist-oriented method" (p.777) that requests the participants to describe and interpret their experiences. He argues that phenomenological inquiry should not be confused with psychological inquiry given that psychological approaches, IPA among them, are focused on participants' *emotional* experiences of the phenomenon under investigation, while emotions are not unique to the phenomenon and are experienced in other conditions. He argues that IPA is a psychological method that seeks to examine the researched phenomenon through the participants' experiences, as opposed to the phenomenon itself, while phenomenology aims to explore "the eidetic or inceptual meaning...of a certain phenomenon or event" (p. 778). Hence, he described IPA as Interpretative *Psychological* Analysis. Accordingly, he believes that IPA produces psychological not phenomenological outcomes. Although Van Man nicely described the nature of psychological inquiry, it is not clear what phenomenologically informed inquiry is like. For instance, fear is a human being's fundamental response, and must therefore, if we are to follow Van Man, be the subject of *psychological* inquiry. But how can we really determine whether this experience is phenomenological or psychological? Van Man went on to tell the journal editors not to accept IPA research studies as phenomenological studies. In his rebuttal, Smith (2018) argued that the person is naturally self-reflective. S/he naturally attempts to make sense of her/his experiences and this process of sense-making happens automatically. In addition, he believes phenomenology is a multifaceted entity (p. 1957) and a good work can be both phenomenological and psychological. Pragmatically, it can be suggested that IPA provides a useful framework, albeit not purely phenomenological, to study the person's experiences that contributes to the understanding about a phenomenon under investigation.

4.4.2. Hermeneutic:

Hermeneutic comes from the Greek word “*hermeneuō*” meaning “translate or interpret” (OED, 2001 p.665). Hermeneutics is an art. It is the art of interpretation precisely because the interpreter is not aiming to construct a set of rigid guidelines (Abulad, 2007). Ricoeur describes interpretation as the attempt to decipher the hidden meaning in the apparent meaning and to accentuate different levels of meaning (Ricoeur, 1974). Unlike the phenomenological tradition, which is mainly focused on “description”, hermeneutical approaches reject the idea that a description and an understanding can be anything other than an interpretation (Gadamer, 1979). Hermeneutics began with the interpretation of biblical texts, but it has developed into a process of understanding in a broader sense (Palmer, 1969; Packer & Addison, 1989) and has become one of the most debated topics in contemporary philosophy (Bowie 1998).

One of the first thinkers to develop a ‘hermeneutics’ was Friedrich Schleiermacher (1768-1834). According to Schleiermacher (1998) hermeneutics involves grammatical and psychological interpretation. While the former refers to the meaning of the objective text, the latter pertains to the individuality of the author. Schleiermacher encouraged interpreters to focus on the context in which the text was originally produced, which is very helpful advice for researchers involved in the analysis of qualitative data in a phenomenological study. In addition, he argued that through a detailed and comprehensive analysis, the interpreter could obtain an understanding of the utterer better than the author himself (Schleiermacher, 1998). This proposition may strike many as outdated, as both psychoanalysis and postmodern theory successfully depict the author as either irrelevant or inaccessible (Barthe, 1968/1977). In addition, it is hard to claim, especially from an IPA perspective, that the interpreter knows what the participants are trying to say better than they know themselves.

Martin Heidegger (1889-1976) divided the word phenomenology into *phenomenon* and *logos*. Phenomenon, in the original Greek understanding, means “appear” and Heidegger uses this to denote *appearance* of our being. When something ‘appears’, it is coming to a new state as opposed to the previous state. Heidegger ascribes to appearance two qualities: things with visible meanings and those of hidden meaning. Thus, for him, phenomenology is concerned with things, which are latent. *Logos*, on the other hand, can be translated as discourse, reason and judgement (Heidegger, 1927/1962). Thus, *logos* is analytical, while *phenomenon* is primarily perceptual. The logos and analytic thinking make “the thing itself” appear. The role of the phenomenologist is to facilitate this appearance and makes sense of this appearing (Moran, 2000). Phenomenology becomes an interpretative activity due to the connection Heidegger makes between phenomenology

and hermeneutics. Dasein, a Heideggerian terminology referring to the human being and an entity that represents unique aspects of human experiences (Finlay, 2011), is thrown into a world of pre-existing socio-cultural meanings. Dasein is immersed in these meanings and cannot be fully detached from them. An investigator is, therefore, invited to “ground their stance in the lived world of things, people, relationships and language, and question knowledge outside interpretation because interpretation of people’s meaning-making of their experience is fundamental to phenomenological inquiry” (Tuffour, 2017, p. 3). This is critically important for IPA, as IPA is a form of interpretative phenomenology.

In addition, Heidegger contributed to the development of IPA through his notion of *fore-conception*. He argued that interpretation is never pre-suppositionless (Heidegger, 1962/1927). “Fore-conception” (Heidegger, 1962/1927, p.195) or pre-structures e.g., prior assumptions and experiences, are always there and are introduced by the analyst and the reader. This explicitly contradicts Husserl’s *bracketing* and may encourage IPA researchers to re-evaluate the role bracketing can play in the process of analysis and potentially conclude that it is only something that can be achieved partially. Finlay and Gough (2003) argue that, through a mixture of realistic bracketing and reflexive “journaling”, qualitative studies can reveal the process of knowledge production.

IPA is heavily influenced by the hermeneutical aspect of phenomenology. IPA’s primary focus is analysis, and this is fully captured by Heidegger’s concept of “appearing”: the IPA researcher’s detective work is required to uncover the phenomenon, before proceeding to make sense of it. An IPA researcher listens to participants’ account and interpretation of their lived experiences. Then, it is the researcher’s role to make sense of it. In other words, he/she is not a passive entity; rather he/she is actively engaged in the process of analysis. This is, as already mentioned, often called double hermeneutic or dual interpretation (Pietkiewicz & Smith, 2012).

Some researchers critique the hermeneutic aspect of IPA. Giorgi (2010, 2011), giving examples of hermeneutic works, asserted that the IPA workers refer to the hermeneutic tradition only when they feel there is a similarity between an idea expressed by the tradition and what they are doing. He concluded that the way IPA researchers attempt to relate their work to the hermeneutic tradition is “vague, loose and ultimately, superficial” (Giorgi, 2011, p.207). Accordingly, he questions as to whether an IPA researcher can bring her/his interpretations to the study. He claims that the role of the researcher being an interpretative agent is not sufficiently explored. Smith (2010) argues that Giorgi has based his critique on only two chapters, while the relation between IPA and the hermeneutic tradition and as

such the researcher's role have extensively been explained and can be found in a number of papers. With regards to the researcher's role, Giorgi seems to point at a meaningful issue that can impact on the validity and rigor of study findings. However, IPA puts strategies in place to bring transparency, through the researcher reflexivity, to the process of knowledge production.

4.4.3. Idiography:

"Idiography" originates in the Greek word "idios", meaning "own" or "private", and refers to those psychological experiences that make each person unique (Pagnini et al., 2012). Idiography is the third principle on which IPA is based. It is concerned with the particularity of individuals, and it can be viewed as a necessary counterweight to the nomothetic approaches to research prevailing in psychology and psychotherapy. Allport (1940) argues that idiographic perspectives can be side-lined in favour of nomothetic approaches that aim to identify general rules of human behaviour. He stated:

"An entire population (the larger the better) is put into the grinder and the mixing is so expert that what comes through is a link of factors in which every individual has lost his (sic) identity (Allport, 1937, p. 244)."

Although idiographic approaches tended to be marginalized, today interest in ideographically informed methods such as single case experimental designs (Barlow, Nock & Hersen, 2008; Barlow & Nock, 2009) and research strategies that emphasize natural and real settings when recruiting research participants (Conner et al., 2009; Hurlbert, 2011; Hurlbert & Heavey, 2015) is growing in mainstream research. These developments can be seen as a way of counterbalancing what Allport (1940) called the province of "one-sided tests of method" (p. 17).

IPA is committed to the idiographic approach that allows the distinctive voices of the participants to be heard. The idiographic nature of IPA requires the researcher to acknowledge variations in the participants' lived-experiences (Willig, 2008; Wagstaff et al., 2014), which distinguishes IPA from other forms of phenomenology (Gill, 2014). Malim, Birch, and Wadeley (1992) view IPA as idiographic because the IPA researcher endeavours to highlight the particularity of each person and prioritizes obtaining a comprehensive and detailed picture. IPA's commitment to this particularity is evident on two different levels: first, IPA is intended to carry out an in-depth and detailed analysis. Consequently, analysis must be comprehensive and systematic. Second, IPA aims to understand how particular perspectives in a particular context have experienced a particular phenomenon, such as a particular encounter or a relationship (Smith et al.,

2009). That is why IPA requires a small sample size, which is purposively-selected. A sample of this kind allows the researcher the micro-level reading that facilitates an in-depth understanding of the participants' accounts (Smith & Osborn, 2015).

Although IPA focuses on particularity and employs an idiographic approach, there is also an onus on the IPA researcher to identify common patterns across the cases and to identify what is shared by participants (Rizq, & Target, 2008). Shinebourne (2011) argues that individuals' particularity can "illuminate a dimension of a shared commonality" (p.47). Firestone (1993) introduces a typology of generalization that entails comparing statistical generalization and analytical generalization. Unlike statistical generalizations that underpin quantitative studies, analytic generalizations are often linked with qualitative theory. In-depth scrutiny and analysis leads qualitative researchers to develop conceptualizations around processes and human experiences. Qualitative researchers can achieve generalizability by enhancing the credibility of analysis through confirmatory strategies. Thorne and colleagues (2009) elaborated on this by saying that:

'When articulated in a manner that is authentic and credible to the reader, (findings) can reflect valid descriptions of sufficient richness and depth that their products warrant a degree of generalizability in relation to a field of understanding" (p. 1385).

Smith and colleagues' (2009) argue that IPA's analytic process does allow researchers, working in that method, to make more general statements. Owing to Warnock (1987) (*delving deeper into the particular also takes us closer to the universal*), they propose that the general can be deciphered from an exploration of the particular. This reminds us of Schleiermacher's (1998) view when he noted that "everyone carries a minimum of everyone else within themselves" (p.92-93).

Some researchers wonder whether the idiographic element of IPA is practically applicable. Their criticisms are centred on identifying individual experiences in group settings where the study aims to understand a group of people's experiences (Tomkins & Eatough, 2010). The dilemma to represent both the convergent and divergent data is reported as "uncomfortable dualism" (Wagstaff et al., 2014, p.11). The current study has overcome this dilemma through excluding group and triadic supervision experiences.

Taking the aforementioned together, IPA is phenomenological in so far as it aims to provide a detailed analysis of individuals' lived-world. Its focus is the personal experience of an event, as opposed to obtaining objective statements about the event itself. At the same time, IPA is interpretative in so far as it emphasizes the role the researcher can play in the process of analysis. On the one hand, the participant is invited to explore his/her

own experiences and to make sense of them. On the other hand, the researcher tries to make sense of participants' perceptions i.e., double interpretation. Thus, IPA is strongly influenced by theories of hermeneutics. IPA is also idiographic because its focus is the individuals' unique experience of phenomena under investigation. It aims to explore the particularity of each participant's experience (Smith & Osborn, 2007).

4.5. Strengths and limitations of IPA:

Like other qualitative research methods, IPA has its proponents. However, opponents argue that IPA methodology has restrictions, due to its theoretical and practical limitations. Both sides are discussed below:

4.5.1. Strengths of IPA:

IPA is now a popular method of research among investigators due to its accessibility and flexibility. It offers an accessible approach to phenomenological research and it follows guidelines regarding validity (Pringle et al., 2011). The main strengths of IPA are as follows:

Firstly, IPA is a flexible approach to data collection. Researchers involved in qualitative methods may encounter limitations e.g., geographical distances, and the necessity of using different ways to collect data. Brocki and Wearden (2006) conducted a review study to scrutinize the ways used by IPA researchers to collect data. They identified a series of diverse methods, ranging from face-to-face interviews to daily diaries. They concluded that an IPA approach was flexible, allowing the researcher employ diverse data-collection methods.

Secondly, IPA allows for deep understanding of a phenomenon. As opposed to quantitative methods, qualitative studies aim to gain a deeper understanding of the topic under investigation (Creswell, 2013). This is critically important to IPA, as the inquirer is an active agent tasked with making meaning of the participant's meaning-making. It is this active involvement that facilitates a deeper understanding of and allows the uncovering of, or the "bringing into the light", of what the participant was trying to say (Pringle et al., 2011).

Thirdly, IPA provides more room for creativity. It is widely accepted among qualitative researchers that the researcher is a necessary, and more importantly an indispensable, part of the knowledge production process. Salmon (2003) stated that '*results of psychological research reflect the researcher as much as the researched*' (p. 26). Nevertheless, this idea is of even greater importance when it comes to IPA. Regarding the

researcher's active role, IPA gives more room to and provides more freedom for the researcher than other approaches (Willig, 2001). This is of particular importance when unusual groups or unusual situations are contemplated.

Lastly, IPA contributes to the development of theory. Like other qualitative studies, IPA may be criticised for a lack of generalizability. Nevertheless, IPA's in-depth analysis and its method of identifying commonalities across cases can lead to useful insights with wider implications. Caldwell (2008) stated that IPA can contribute to theory in a wider "lower case", even though "Theory" (with capital T) is not the purpose of IPA. IPA results in theoretical dialogue, which can contribute to the development of "Theory".

4.5.2. Limitations of IPA:

While researchers from across different fields increasingly use IPA, there are some criticism of this approach (Tuffour, 2017). Some of the common criticisms raised by opponents of IPA can be listed as follows:

First, there are issues around bracketing. Following the phenomenological tradition, IPA requires bracketing to identify the essence of experience (Pietkiewicz, & Smith, 2012). Many argue it is difficult to discard and disregard prior knowledge and control its effects on subsequent experiences (Theobald, 1997; Finlay, 2008). However, Smith et al (2009) argued that provided researchers follow the steps outlined this can happen. Nevertheless, they acknowledge that previous experiences will influence the process of analysis.

Second, as a general criticism of phenomenological approaches, IPA is criticised for not acknowledging the integral role of language (Willig, 2008). It has been argued that language is not merely a tool to describe reality; rather, it constitutes reality; it is relative to meaning; and as consequence, it is not going to constitute a true reflection of experience itself (Willig, 2001). In their response to this criticism, Smith et al. (2009) noted that although description of experience takes place through narratives, experience is always intertwined with language.

Third, as a phenomenologically informed approach, IPA is purely focused on "the experience", which removes it from contextual issues such as the "why" of experience (Willig, 2001, 2008) e.g., the conditions that triggered the issue. In other words, it is not sufficient to share the experience. IPA needs to transcend a mere description of the experience and identify explanations. However, Smith et al. (2009) argued that IPA, by

acknowledging the particularity of people, and through the use of interpretation and contextual analysis, secures an understanding of the cultural contexts of experiences.

Lastly, IPA is criticised for its weak theoretical foundations. Unlike the criticisms discussed so far, this last one comes from inside the tradition of phenomenology. Giorgi (2010) argued that the theory and practice of IPA are not based on the philosophy of phenomenology. In his rebuttal, Smith (2010) accused Giorgi of selectively reading IPA sources. He argued that IPA has solid foundations in phenomenology and hermeneutics. Later, Giorgi (2011) admitted that IPA is more aligned to Heideggerian phenomenology (hermeneutic), while his own approach and allegiance is to Husserlian phenomenology (descriptive).

IPA is a quite new approach and it needs time to develop before it is at the stage of other qualitative methods (Howitt, 2010). It is also true that criticisms of IPA are not solely negative, forwarded by opponents convinced IPA is a negative phenomenon, they are also constructive, necessary pre-requisites that will ultimately lead to the enhancement of IPA.

4.6. Suitability of IPA for studying Supervision:

Although IPA is relatively a new paradigm in psychology and psychotherapy, a search reveals numerous supervision studies have successfully employed IPA and obtained rich data regarding supervisory experiences (e.g., Gubi, 2007; Nel & Fouche, 2017; Wedlock & Turner, 2016; Krupka, 2017; Cook & Sackett, 2018; Dawson & Akhurst, 2013; Bell et al., 2017; Stefania, 2018). Reading these studies, albeit none of them focused on accredited psychoanalytic psychotherapist supervisees, indicated the applicability and the appropriateness of IPA for the research objectives. In addition, reading about IPA and the contributions that it can make to the understanding of a group of people's lived experiences convinced the researcher that IPA is an appropriate method to study a group of supervisees' supervision experiences.

The researcher was aware that the study participants were professionals who had experience working as psychotherapists. Consequently, he speculated that the participants were unlikely to be stuck in the process of explaining their supervisory experience and making sense of it. It became clear very soon that they were able to explain their experience in detail. For example, they articulated their emotional experiences in detail, used metaphors, idioms, and emotionally charged words that provided a rich set of data. This is deemed very valuable data for an IPA study. The section below explains how IPA was employed in the current study.

4.7. Method:

4.7.1 Design:

This study is a phenomenological study. In accordance with IPA guidelines (Smith, & Osborn, 2007), a small, homogeneous, and purposive sample (accredited psychoanalytic psychotherapist supervisees) was selected, from which data were collected through semi-structured interviews. Data were then analysed utilising an IPA approach (Smith et al., 2009).

4.7.2. Participants:

It is broadly accepted that there is no right sample size for qualitative studies (Smith, & Osborn, 2008). Creswell (1998) recommends 5-25 participants as adequate, while Morse (1994) believes a sample should include, at least, six participants. Consistent with the idiographic approach, some other authors even encourage single participant studies (Smith et al. 2009). In harmony with the qualitative tradition, IPA requires a small sample size. Its focus is the detailed interpretation of the individual's experience, which realistically can be achieved with a very small group of people - one is sacrificing breadth for depth (Smith, 2007); thus, a small sample allows for a detailed and time consuming case-by-case analysis. Smith et al (2009) noted that "It is more problematic to try to meet IPA's commitment with a sample which is *too large*, than with one that is *too small*" (p. 51).

A critical review of IPA studies in 2006 (Brocki & Wearden, 2006) revealed that the sample size ranged from 1 to 35. It was also illustrated that the majority of studies fell in the middle of this range. A subsequent review revealed this trend continued (Cassidy et al., 2010). The review included 136 IPA studies conducted between 2006 and 2009 and found that the mean sample size for studies was 12. The current study included a purposeful sample of 14 participants. This sample size was postulated to be adequate for several reasons:

- a) IPA's commitment to the idiographic principle requires a small sample size. It involves the in-depth and case-by-case analysis of individuals (Smith et al. 2009).
- b) Several studies conducted to explore supervisees' experience of supervision have demonstrated that a sample of 14-18 participants can lead to the rich data (e.g., Bottrill et al., 2010; Reichelt, & Skjerve, 2001; Burkard et al., 2009).
- c) This sample size is adequate to accommodate publication. As already mentioned the mean sample size for published IPA studies was 12 participants (Guest, Bunce, & Johnson, 2006). Hence, a sample larger than

this i.e., the current study's 14 participants, would be considered an adequate sample size for publication.

The sample in an IPA study needs to be as homogeneous as possible (Smith & Osborn, 2007). With regards to the idiographic aspect of IPA, homogeneity is supposed to ensure that any differences shown among participants are down to the individual, not e.g., socio-cultural differences. The extent to which homogeneity is achievable depends on the focus of the study (Smith et al., 2009). If the researcher is looking at a phenomenon that is fairly universal e.g., experience of being in General Practitioner's (GP) private office, the scope of the study will need to be confined to some factors, such as the patient's age or economic status. The researcher might be interested only in, for example, adolescent patients' experiences of being in GP and look for adolescent participants.

The sample in this study included a homogeneous group of participants in the sense that they were experienced psychoanalytic psychotherapist supervisees working in Ireland. They were all members of the ICP, the national umbrella body for psychotherapy in Ireland. It was a defined sample for which interview questions about psychoanalytic psychotherapy supervision experiences were significant.

Inclusion and exclusion criteria for participants were as follows:

Inclusion criteria:

- Be an accredited practitioner recognized by Association for Psychoanalysis and Psychotherapy (APPI) and/or the Irish Council for Psychotherapy (ICP), psychoanalytic section as a) members are required to be supervised prior to registration, and b) psychoanalytic psychotherapists typically continue to participate in post-accreditation supervision.
- Be currently receiving individual supervision from a psychoanalytic supervisor.
- Be based in Ireland.

Exclusion criteria:

- Student members.
- Attending group supervision as group supervision supervisees are likely to have different experiences to supervisees in individual supervision. Moreover, group supervision seems to generate some powerful and uncomfortable emotions that stem from rivalry and competition (Crick, 1991).

- Attending supervision with a non-psychoanalytic supervisor.

Table 5.

Demographic Characteristics of the Participants

Participants	Age	Gender		Currently frequency of supervision		Years attending supervision	Academic qualification	
		Male	Female	Weekly	Monthly		Masters	PhD
Brian	60	✓			✓	12	✓	
Simon	47	✓		✓		20		✓
Rose	51		✓		✓	14	✓	
Rita	36		✓	✓		6	✓	
Patrick	51	✓			✓	15	✓	
Rob	62	✓		✓		22	✓	
Patricia	71		✓		✓	20	✓	
Teresa	41		✓		✓	15	✓	
Michael	73	✓		✓		12	✓	
Evelyn	61		✓		✓	10	✓	
Liz	51		✓		✓	18	✓	
Liam	71	✓			✓	25		✓
Ann	54		✓		✓	12		✓
Mark	37	✓			✓	12	✓	

As Table 5 demonstrates, the number of male and female participants was the same (seven females and seven males). The age of participants ranged from 36 to 73 years old (Mean: 54.7, and SD: 12.2). All participants were given pseudonyms. The youngest and the oldest participants were Rita and Michael, respectively. All participants had studied for a Masters in Psychotherapy or a cogent field, apart from Ann, Liam and Simon who were PhD graduates. With the exception of Rita, who had 6 years' experience, all participants had been delivering psychotherapy for more than 10 years. Among them, Liam was the most experienced psychoanalytic psychotherapist, with 40-years' experience in clinical work. Liam and Rita were the most and the least experienced supervisees with 25 and 8 years' experience of working under supervision, respectively.

In terms of the average length of time in clinical psychotherapy practice, Rita and Ann currently spend the least and the most time weekly. Rita approximately works 10 hours, while Ann works for more than 32 hours. With the exception of Liz, all participants attend supervision either once weekly or once monthly. Liz takes part in supervision fortnightly. Brian was the only participant who has stayed with one supervisor from the beginning.

This was understandable, as he frequently mentioned the good relationship he had developed with the supervisor.

The fourteen participants are introduced briefly here. Identifiable information has been omitted and pseudonyms have been used to protect the identity of participants.

Teresa

Teresa is a 41-year psychoanalytic psychotherapist in Dublin. She has a masters in psychoanalytic psychotherapy and has been involved in clinical work in both public and private practice for 15 years. She is particularly interested in working with people who have experienced traumatic events. Since the beginning of her clinical work, Teresa has been in supervision with five different supervisors, some of whom she says she found challenging. Teresa works with clients for an average of 15 hours per week and receives supervision once monthly.

Ann

Ann is in her 50's and has been involved in psychotherapy practice over the last 20 years. She describes herself as a psychoanalyst who has a desire for analysis (psychoanalysis) and supervision contributes hugely to this desire. Ann stopped participating in supervision for a few years because she believed that she was able to manage her clinical work herself. However, she resumed it in 2008. Ann practices psychotherapy for more than 32 hours per week and takes part in supervision once monthly.

Patricia

Patricia is a 71-year old psychoanalytic psychotherapist and a qualified supervisor. She is interested in Buddhism and believes that people need to get to know their truth. This desire to know who we are has led her to the realm of psychoanalysis. Patricia has stayed with her supervisor for a long time and moved to a different supervisor due to an unwanted i.e., geographical, reason. She began to work as a psychoanalyst 20 years ago. Patricia is currently working 10-15 hours weekly, for which she attends supervision once monthly.

Rita

Rita is in her thirties and is a psychoanalytic psychotherapist based in Dublin. She has been involved in private practice since she completed her postgraduate degree in 2011. She classifies herself as a flexible psychoanalytic psychotherapist and believes her accumulated clinical experience has led her to move away from being a strict therapist. Although she was unhappy with her first supervisor with whom she worked for six months, Rita moved to a new supervisor when the first supervisor's schedule was very busy and could not take on further supervisees. She works approximately 10 hours weekly and attends supervision on a weekly basis.

Rose

Rose is a 51-year-old psychoanalytic psychotherapist. Rose initially studied psychology and trained as a cognitive behavioural therapist before she began to train psychoanalytically oriented treatments. Unlike psychology, Rose believes psychoanalysis enables her understand what is going on between her and the client. She was required to take verbatim notes of her sessions with her clients and to bring them to discuss in supervision with her supervisor. Rose works approximately 22 hours weekly, for which she currently attends supervision once monthly.

Brian

Brian is 60 years old and has 12 years experiences of delivering psychotherapy and receiving supervision. Brian classifies himself as an integrative psychoanalytic psychotherapist and believes that psychoanalysis should be based on scholarly scientific study and be constantly questioned. He is in private practice and works clinically 30 hours weekly. Brian attends supervision on average once monthly.

Patrick

Patrick is a 51-year-old psychoanalyst. He has been involved in psychotherapy practice and supervision for 15 years. He works with patients with a wide range of mental disorders. Patrick is interested in recently developed theories that use so-called hard science, namely neuroscientific findings to provide psychoanalysis with evidence that is more reliable. To survive in the competitive world, he believes it is necessary for psychoanalysis to be supported by scientifically valid evidence. He works clinically 15 hours and attends supervision once weekly.

Mark

Mark is 37 years old and has been involved in psychotherapy and supervision over the last 12 years. He works closely with agencies that refer patients to psychotherapists. Mark works with children adolescent and adult patients. His special interests are anxiety disorders, sexuality issues and trauma related problems. He is concurrently in supervision and personal-analysis, Mark believes that his concurrent participations in self-analysis and supervision provided him with a comprehensive understanding about supervision. Mark delivers psychotherapy 14 hours weekly and participates in supervision once weekly or fortnightly.

Liam

Liam is a 71-year-old psychoanalyst and holds a PhD in clinical psychology. He initially worked in a hospital setting but now is mainly involved in private practice. Liam is multilingual, speaking Italian, German, French and English, and he maintains that enables him to look at psychoanalysis practiced in different countries. He has been practicing psychotherapy for 40 years, 25 years of which he has been receiving individual supervision. Liam provides psychotherapy at an average of 10 hours weekly and attends supervision once every three weeks.

Evelyn

Evelyn is a 61-year-old psychologist and psychoanalytic psychotherapist. She began to work psychoanalytically in 2009 and has been constantly receiving supervision throughout her clinical work. She is interested in psychological problems associated with life stressors and traumas. Evelyn works with a wide range of issues, in particular anxiety, depression, and relational problems. The average of her clinical work is 14 hours weekly and she typically receives supervision once monthly.

Michael

Michael is 71 years old and works in private practice. He has been delivering psychotherapy over the last 12 years and has been in supervision throughout his clinical work. Michael views himself as a flexible supervisee and therapist who should not be

blinded by the formal theory. When his initial supervisor became seriously ill, he had to move to a different supervisor, with whom he had very different experiences. He highlighted his various experiences with the two supervisors. Michael's average clinical practice is 10 hours weekly and he participate in supervision once weekly.

Simon

Simon is a 47-year-old psychoanalyst. He has 20 years' experience of delivering psychoanalytic psychotherapy and receiving supervision. For Simon, it is essential to be in supervision with supervisors who hold different psychoanalytic approaches as he considers they broaden supervisees' clinical lenses. As a consequence, he is currently in supervision with two different psychoanalytic supervisors who hold different ideas about psychoanalysis. Simon spends 20 hours for clinical work weekly. Simon attends supervision on a weekly basis.

Liz

Liz is a 51 years old psychoanalyst and is currently doing a PhD. She has been involved in psychotherapy practice and supervision for almost 16 years. Liz integrates concepts from other psychoanalytic modalities and tries to assimilate different techniques in her analytically oriented work. Consequently, she has been in supervision with different supervisors who practiced different therapy models. Overall, she has worked with four different supervisors. Liz is also a supervisor and has two trainee supervisees. Liz currently works 28 hours weekly and is in supervision with a psychoanalytic supervisor once fortnightly.

Rob

Rob is 62 years old. He has 22 years' experience of working clinically under supervision. He has been in supervision with different supervisors and holds the belief that a supervisee should move to a new supervisor when it "had gone as far as it could". He believes that working with different supervisors has enabled him to reflect more precisely on his supervisory experiences. Rob currently works with clients 20 hours weekly and normally attends supervision once weekly.

4.7.3. Recruitment Procedure:

As the participants required for the current study needed to be psychoanalytic psychotherapists, they were recruited through organizations representing this particular model of psychotherapy in Ireland. Generally, there are two broad psychotherapy organizations in Ireland, the Irish Council for Psychotherapy (ICP) and the Irish Association for Counselling and Psychotherapy (IACP). To be an accredited psychotherapist, one needs to be officially recognised by either ICP (<http://www.psychotherapycouncil.ie/>) or IACP (<https://iacp.ie/>). ICP involves several psychotherapy bodies under the relevant sections, including the psychoanalytic psychotherapy section. This section includes seven psychotherapy bodies: Association for Psychoanalysis and Psychotherapy (APPI) (<http://appi.ie/>), Irish Analytic Psychology Association (IAPA) (<http://www.jungireland.com/>), Irish Forum for Psychoanalytic Psychotherapy (IFPP) (<http://www.ifpp.ie/>), Irish Forum for Child and Adolescent Psychoanalytic Psychotherapy (IFCAPP) (<http://ifcapp.com/>), Irish Psycho-Analytic Association (IPAA) (<https://irishpsychoanalyticalassoc.wordpress.com/>), Irish Group Analytic Society (IGAS) (<http://www.igas.ie/>), and Northern Ireland Institute of Human Relationship (NIIHR) (<http://www.nihr.org/>).

With respect to the aims of the study, the last two organizations were excluded because the study was focused on the experience of individual supervision and participants needed to be based in the Republic of Ireland. Having excluded them, the researcher began to identify potential participants through the other organizations' websites.

The researcher used both purposeful and snowball sampling methods to recruit participants. The recruitment phase of the study began in February 2019. He began with IFPP and APPI because their websites include the highest number of practitioners. He prioritized therapists who worked in Dublin because it was easier and more convenient for him to conduct interviews in Dublin. From Feb 2019, the researcher began to recruit participants by sequentially contacting by phone practitioners whose names were listed on the IFPP's website. After the first participant agreed to participate in the study, he sent two documents to her: an invitation letter (Appendix 6) and a Plain Language Statement (PLS) (Appendix 7). The appointment was made for the subsequent week in the Healthy Living Centre (HLC) in Dublin City University (DCU) so that she would have sufficient time to read the documents, sign the informed consent form and prepare for the interview. This was a pilot interview, but it was included in the interviews for analyses because very few changes were made to the interview schedule following this interview. Following on snowball sampling rules, this participant passed information about this study to her colleagues and

two participants interested in the study contacted the researcher to take part. They were sent the two documents and they agreed to participate in the interviews in the following weeks. After the researcher conducted the first three interviews, he continued contacting IFPP members, from March until July 2019. In total, he contacted the first twenty-five participants, based in Dublin. Eight did not respond to the call, and of the seven that did respond, six agreed to participate in the study. Each participant was sent the necessary documents at least one week before his or her interview was scheduled to take place.

Simultaneously, the researcher called sequentially the first fifteen practitioners listed on the APPI website. Six of them declined to participate in the study, but the others expressed interest and requested more information. He sent them the invitation letter and the PLS. Ultimately, one agreed to attend the interview. He continued to contact members of APPI, based on the sequence of their names on the list. Three participants gave positive responses and they were sent the invitation letters and the PLS.

The study still needed one more participant. To secure the final participant, the researcher sent an email to the administrator of the IFPP in July and asked them to circulate his email among their members. When he did not receive a reply, he proceeded to contact the remaining IFPP members by phone. By the end of July, he received a positive response and conducted this interview in the last week of August 2019. Thus, all fourteen interviews were conducted between February and August 2019.

Both the invitation letters and the PLS provided participants with necessary details pertaining to the study. In the invitation letter the researcher introduced himself, outlined the main aims of the research and invited them to take part in an interview with him. The PLS included detailed information pertaining to the study. Through the PLS, participants were informed of the importance of the research topic in the wider context i.e., psychotherapy. They were notified on all matters pertaining to confidentiality, and the legal limitations of confidentiality was explained. This provided the recipients with assurances regarding ethical principles, which in turn increased the likelihood of their honesty (Gill et al., 2008). The PLS outlined the role they would assume in the proposed interview and they were informed that the interview would take around one hour. In terms of the location for the interview, participants were advised that they could choose either their own offices or the Healthy Living Centre (HLC) in DCU (<http://hlc.dcu.ie/>). Through both the invitation letter and the PLS, participants were advised to contact the research supervisors or the researcher to indicate whether they wanted to participate or not or with any queries.

4.7.4. Data Collection:

The data collection approach most suited to IPA is a method that invites participants to provide rich and detailed data (Smith et al., 2009). Consequently, this study employed in-depth semi-structured interviews.

4.7.4.1. Semi-structured Interview

Researchers involved in qualitative approaches usually obtain data through interpersonal contact, often through interview. As a consequence, interviews are the most common and popular methods (Legard et al., 2003). There are three forms of interviews: structured, semi-structured, and unstructured (Fontana & Frey, 2005). They differ in terms of the power held by the researcher (Adhabi, & Anozie, 2017). Structured interviews include a list of predetermined questions and often lack scope for follow-up questions (Gill, Stewart, Treasure & Chadwick, 2008). Unstructured interviews begin with predetermined questions; however, due to its excessive flexibility, they are not suitable when an in-depth understanding of a certain *experience* is required. Likewise, semi-structured interviews begin with already developed questions. However, in this type of interview, there is no rigid adherence and the course of the interview depends on the responses the interviewee provides (Adhabi & Anozie, 2017).

Semi-structured interviews are popular with researchers requiring flexibility. This interview format helps disclose important and often hidden aspects of human behaviour (Qu et al., 2011). It is the most effective form of data collection (Kvale & Brinkmann, 2009) because it is based on human conversation. It allows the researcher to open-up the scope of the conversation in order to evoke the fullest responses from the interviewee, and to help him or her fully understand what the interviewee is trying to convey. It is most optimally employed when open-ended questions require follow-up queries (Newcomer, Hatry et al., 2010). In addition, semi-structured interviews allow the interviewer to articulate questions in the way people think and use language (Qu & Dumay, 2011). Consequently, the semi-structured interview is often, understandably, the preferred form of data collection for researchers involved in qualitative study.

The semi-structured interview format follows from the basic concerns of IPA. The interviewer's interest has been established and s/he has some questions ready. At the same time, the IPA interviewer wishes to enter the psychological and social world of the interviewee. Therefore, the interviewee, who collaborates more closely in the direction of interview, may highlight an issue that the interviewer had not thought of. Thus, the interviewee can be viewed as an expert and should be given sufficient opportunity to tell his or her own story (Smith & Osborn, 2007).

4.7.4.2. Interview Schedule:

The interview used in this study was semi-structured (Appendix 8). Fifteen non-directed and open-ended questions were included in the interview schedule. They were drafted to help explain the phenomenon under investigation i.e., participants' experience of psychoanalytic supervision. The literature review and the study aims informed the design of the interview schedule.

Research questions aimed at exploring participants' experiences fell under three general categories: the contribution of supervision to their practice, helpful and unhelpful aspects of supervision, and the supervisory relationship. The researcher organized interview questions in their logical sequence. The first question was a general one, aimed at developing rapport between the interviewer and the interviewee. The neutral questions were included first, while questions that may prompt the participant into divulging emotional and sensitive stories were included in the last part of the schedule. For example, the researcher planned to ask questions about negative supervisory experiences, after positive aspects had been explored. The last question was structured to give the participants an opportunity to share something that had yet to be raised in the interview and to allow them to elaborate on something of relevance that they could potentially like to go back on and discuss further. In addition, there were prompts for some questions to encourage participants to expand on their experiences. The interview was adaptable and the overall trend of the interview was guided by the responses participants provided.

4.7.4.3. Pilot Interview:

A pilot interview is a useful part of conducting qualitative research. It helps improve the research instrument, in this case the interview schedule. Piloting the interview can strengthen interview protocols (Castillo-Montoya, 2016) and help the interviewer to identify, if there are any, limitations in the interview schedule. This allows for modification of the interview schedule (Kvale, 2007).

The researcher conducted three pilot interviews between December and February 2019. The aim of conducting the pilot interviews was to find out whether the questions were well-structured and whether there was a flow to the sequence of the questions (Cohen, Manion & Morrison, 2007). Two of them were face-to-face interviews conducted in DCU, and the other one was an online session through Skype. On the one hand, it became clear that some questions were too strictly focused. They narrowed the range of potential responses and they did not allow participants to expand on their stories. Through piloting interviews, the researcher noticed that some questions triggered very short answers. For example, asking participants for a metaphor or a word that came to mind when thinking about supervision often provoked one word responses. Thus, these

questions were refined and re-structured in a way that encouraged more detailed and elaborate responses.

On the other hand, the pilot interviews emphasized the need to embed more “prompts” for some questions, as the interviewee perceived them as being very general and broad. These broad questions did not appear to facilitate exploring their experience and failed to help them make sense of it. With regard to the open-ended nature of IPA informed questions, there was an uncertainty as to when a question had been fully answered (Smith et al., 2009). Consequently, it was thought that inserting prompts would help participants to identify incidents where they faced significant moments, significant from a supervisory perspective. For instance, the initial plan was to ask participants to highlight material that they had found difficult to raise during supervision. In the process of piloting, the researcher did not get the detailed responses from some interviewees he had hoped. Nevertheless, when he followed the initial question by a prompt such as asking more explanation, they began to provide me with more rich data.

In the process of piloting interviews, some questions were modified, some were discarded and some prompts were inserted into the interview schedule. The schedule initially included 19 questions, but after piloting the list was refined and modified, narrowing it down to 15 questions (Appendix 8).

4.7.4.4. Interview Process:

As already mentioned, participants were given the option as to where i.e., the HLC in DCU or their own offices, they would prefer to be interviewed. The majority of them (11 participants) opted to have their interview conducted in their own office.

Participants were provided with the PLS, at least one week before the interview. At the beginning of the interview, they were given an opportunity to raise any queries or concerns they had and request further information. The researcher briefly described the areas that were to be addressed in the interview and he reminded them that the interviews were to be recorded, as is customary in IPA studies. He explained his adherence to confidentiality rules. They were then asked to complete the demographic information sheet (Appendix 3) and to sign the consent form (Appendix 5), before the interview could begin.

It is recommended that an IPA interview begins with a question that encourages the interviewee to talk at length (Smith et al., 2009). Additionally, it is a good idea to begin the interview with questions that are more general and neutral. These help put the interviewee at ease and help develop rapport (Ibid). Thus, the researcher began the interviews, as

already mentioned, with a general question about their overall recollection of supervision practice, before moving to more specific, and probably more emotionally charged areas, such as the supervisory relationship and negative experiences.

The researcher built trust through actively listening to the participants, as well as trying to avoid a judgemental attitude. He tried not to be intrusive and endeavoured to establish a relationship of equality, through friendly communication and allowing sufficient time to develop rapport. Participants were told that there was no right or wrong answer. They were given time to develop and articulate their answers. The researcher made a conscious effort to monitor any sign of discomfort and to facilitate the interviewees' opening-up. In his view, this contributed to the quality of the interviews and they were able to, for example, openly share some undisclosed supervisory experiences.

All participants were given an opportunity to reflect on their experiences of having partaken in the interviews. The majority of them were glad they decided to participate in the interviews and admitted that studying supervision was important and necessary. They were thanked following the completion of their interview and were informed of the possibility that the researcher may contact them in case any of their answers required further clarification. As it happened, no one was contacted.

The length of interviews ranged from 45 to 90 minutes. The first two interviews were quite short (45 minutes), perhaps because the researcher was less experienced on how to manage an interview session and how to follow up on the interviewee's responses. As the time went by, the researcher felt more comfortable and was able to go deeper and ask the interviewee for more details.

All but two interviews were conducted in one session. When interviewing the two participants, the interviewer could not cover all questions on the interview schedule because a certain time dedicated for the interviews had elapsed and a further session was required. Thus, the second interview for both participants was scheduled for the following week.

4.7.5. Data Management and Data Analysis:

All interviews were recorded on a digital device before being saved on an encrypted laptop. Following this, interviews in the digital device were erased. The interviews were then transcribed, but participants were given a pseudonym and all identifiable information was removed. Consent and demographic information forms were kept in a locked cabinet, separated from transcripts. A file including identification numbers and names was created

in the laptop. According to DCU’s ethical guidelines, transcripts will be kept for five years after submission of thesis.

With regard to IPA principles, the analyst is encouraged to apply a systematic method to understand participants’ psychological worlds (Smith & Osborn, 2003). IPA is “a *systematic and practical approach to analysing phenomenological data*” (Barker et al., 2002, p.81) and aims to reveal varied accounts, common patterns, and an analysis of distinctions on themes (Smith et al., 2009). IPA is a highly structured, qualitative method (Braun, & Clarke, 2006), and provides the researcher with a clear method by which s/he can conduct analysis (Barker et al., 2002).

Table 6.

The Process of Analysis

Steps	Analysis
Step 1. Reading and re-reading	Getting immersed in and familiarizing oneself with the data
Step 2. Initial note taking	Pulling out exploratory notes i.e., descriptive, linguistic and conceptual, for each participant
Step 3. Developing emerging themes	Identifying interrelations between initial notes to develop emerging themes
Step 4. Searching for connections across emerging themes	Grouping emerging themes together
Step 5. Moving to the next case	Spending sufficient time to conduct detailed analysis for each case, before moving to the next case. A narrative summary was written for participants at the end of each analysis (Appendix 2).
Step 6. Looking for patterns across cases	Identifying the themes shared by participants

The method of analysis the researcher used in the study followed the guidelines proposed by Smith et al. (2009). It included a six step-by-step analysis guiding the analyst throughout the process of analysis from the beginning to the phase of writing-up. Consistent with the IPA's idiographic commitment, the researcher followed the steps with each case separately. That is, he analysed a case in detail, before he moved to the next case (For an excerpt see Appendix 1). Then, he conducted analysis across cases. Table 6 illustrates the six-step analysis used in this study.

As table 6 indicates, in the first step, the researcher immersed himself in the original data; active engagement with data facilitated an understanding of the participants' world; this step took him away from the habitual reading of texts i.e., reading and summarizing complex info quickly. The second stage, as the most detailed and time-consuming stage, involved identifying three sets of data known as exploratory notes. The researcher identified: a) descriptive comments describing what the participant said (normal text) b) linguistic comments referring to the specific use of language by the participant e.g., metaphors, and c) conceptual comments focused on a more interrogative/conceptual level.

This was conducted by paper-pencil that involved marking exploratory notes and provided a comprehensive and detailed set of notes. In the third stage, the researcher reduced the volume of data through mapping the interrelationships within each participant's account. He attempted to connect exploratory notes and identify patterns between them; it was to fragment the transcript to chunk themes. The fourth stage involved the researcher identifying how the themes may fit together. The researcher no longer adhered to what order comments were delivered in and instead concentrated on how they matched the themes being identified. There are some strategies to group them (Smith et al., 2009): *abstraction* (identifying common patterns among and developing superordinate themes), *subsumption* (emergent becomes super-ordinate themes) *polarization* (identifying oppositional themes), *contextualizing* (identification of narrative elements, pertinent to life events), *numeration* (identification of the frequency of themes), *function* (specific function of themes for the individual). He used some of these strategies, at different stages, to bring themes together. Following the guidelines, in the fifth stage, after the researcher did the analysis for the first case, he wrote a narrative summary for each participant, following their interviews. The purpose of this was to allow him create a narrative for how supervision was experienced by each participant. He moved onto the next participant's transcript and repeated the process. He made effort to bracket his ideas emerging from the previous case and treat the next case on their own terms and individuality. In the last stage, after the researcher completed analysis for all cases, he

began to look for common patterns across cases; this deals with questions such as, what are the connections across cases? How does a certain participant's theme illuminate a different case? The researcher maintained interpretive focus. A sample of this analysis is included in Appendix 1.

4.7.6. Ethical Considerations:

Research ethics is a vital part of research today and researchers are required to protect study participants' dignity (Fouka & Mantzourou, 2011). Key ethical considerations for this study as well as the strategies employed to address them, are outlined below:

4.7.6.1. Sensitivity to the Participants:

Unlike a questionnaire, the interviewer in an in-depth interview intends to uncover the interviewee's undisclosed experiences, which can lead to ethical concerns (Allmark et al., 2009). Topics discussed by the interviewers and the interviewees can make conversations emotionally intense (Hess, 2006; Clarke, 2006). This implies potential harms for both the parties (Foss & Ellefsen, 2004; Borbasi et al., 2005).

With regards to the study participants who were professional psychotherapists, this study was deemed to be low-risk. However, strategies were in place if the participants were to become distressed during interviews. If the interviewees appeared distressed, the researcher would initially stop the interview to debrief with the participant. If they wanted to proceed with the interview after debriefing and a break, then it could be continued, if not and they wished to end the interview they would be given the option of rescheduling or withdrawing. In addition, in the unlikely event that they become distressed, they were to be advised to contact their clinical supervisor, as the initial support, as soon as possible following the interview sessions. Additionally, they could be given access to a supportive advisory psychotherapy session in the HLC which were to be provided free of charge, by the study supervisor Dr Gerry Moore who is a registered psychoanalytic psychotherapist. The interviewer and his supervisors were psychotherapists who had experience of assessing and managing risks that was an additional safeguard in the conducting of this study.

One participant (Patrick) told stories that, from his perspective, indicated his supervisor's unethical behaviour. They were in an organizational relationship, in addition

to the supervisory relationship, where they had a disagreement about a new movement in the organization. This disagreement led the supervisor to suspend supervision, which left Patrick feeling upset. The supervisor was supposed to adhere to the ethic's code of the ICP, the psychotherapy body Patrick is affiliated to, that says- The supervisory process occurs within the context of a professional relationship therefore dual roles should be avoided if at all possible (Irish Council for Psychotherapy, n.d). This issue, at a lower level, was present in Patricia's experiences where she described her early supervision experiences as dishonesty i.e., not disclosing in supervision, because her supervisor assumed double roles, Teacher-Supervisor, she didn't feel comfortable with disclosing the interventions she made with her clients. However, Patricia did not conceptualize her supervision as unethical and her experiences as harmful.

When Patrick, at the initial moments of our interview, alluded to this incident, as an unethical aspect of his supervision, I did not ask him for further clarifications and moved on, deciding to come back to this point later after we had explored his positive experiences. When we discussed the incident later, I carefully listened to his remarks and tried to be as neutral as possible. I did not interpret his accounts and did not judge and interrupt him, hoping he would feel heard. I endeavoured to put aside my psychotherapy background and to resist the temptation to ask therapeutic questions. I remained in the researcher role given that therapeutic features in an interview can lead to sensitive questions and can potentially cause harm (Richards & Schwartz, 2002). Unlike Patrick and Patricia's supervisors, I made efforts not to engage in dual roles i.e., Researcher-Therapist.

With respect to the ethical issues to the interviewer, it is suggested that the researchers conducting in-depth interviews are research instruments and therefore need to be in supervision (Richards & Schwartz, 2002). Following this advice, the interviews conducted for this study were consistently supervised and monitored by the researcher's supervisors.

4.7.6.2. Anonymity and Confidentiality:

Anonymity refers to a process whereby identifiable information provided by respondents is not included in the presentation of the findings. This is achieved by a variety of means, including refraining from referring to the participants by their actual names (Mugenda, 2011). Confidentiality is guaranteed when anonymity is observed (Akaranga & Makau, 2016). It seems to be difficult, if not impossible, for a researcher to totally guarantee the anonymity and confidentiality of participants, particularly when the project is a small-scale research project and participants are recruited from one organization.

However, the researcher attempted to employ strategies to protect subjects' confidentiality.

All participants were informed that the information disclosed in the interview would be treated with the utmost confidentiality. They were also reassured that no identifiable information will appear in the study. This reassurance appeared to be very important during the interviews with Teresa and Rose. It was made clear to them that none of the information they provided which could identify either their supervisors and colleagues would be included in the thesis, and all quotations would be selected carefully.

All participants were informed about the data management strategies that were in place to protect confidentiality and anonymity. Recordings would be erased as soon as they were transferred to a password-encrypted computer provided by DCU. Interview transcripts would be given a pseudonym, rather than interviewees' actual names. Only the researcher and his supervisors have access to the transcripts, and, if requested, the examiners. All participants were informed of these data management strategies and precautions.

4.7.6.3. Informed Consent:

Informed consent is a process by which a participant gives consent to take part in a study after s/he has been informed of its risks and benefits (Bulger, 2002). Ideally, the participant would fully understand the information pertaining to the study before s/he could give conscious consent for the project to continue. This is a major ethical steps in the process of researching, which implies that "*a person knowingly, voluntarily, intelligently, and in a clear and manifest way, gives his or her consent*" (Arminger, 1997, p.330). It goes without saying that all researchers are obliged to obtain information truthfully. However, this can only happen when the researcher provides the respondent with sufficient information about the study being undertaken. It is advisable that the researcher attempts to develop rapport, which in turn enhances the reliability of data collected.

Participants' consent to participate in this study was sought after they were provided with sufficient information about the study. Participants' consents were obtained for:

- a) Purpose of the study: Participants were informed of the aims of the study and why the study should be carried out. In addition, benefits of the study were explained to participants.
- b) Voluntary participation: Participants were repeatedly informed that their participation was voluntary, and they could pull out of the study up to the stage of data analysis without negative consequences.

c) Potential risks: It was made clear to participants that the interview would be similar to a professional conversation.

d) Confidentiality: The researcher made it clear that the information provided by participants would be treated as strictly confidential. They were informed that the informed consent form and the demographic information form would be kept in a locked cabinet and the recordings would be saved in the researcher's DCU Apps Google Drive account, which is encrypted.

4.7.6.4. Ethical Approval:

On the 5th of October 2018, the researcher submitted the study to the Research Ethics Committee (REC) in DCU. Minor changes were requested notably on the informed consent form. After the required amendments were made, the study was sent back to the REC. They reviewed the amended version and granted approval for the study to proceed on the 2nd of November 2018 (Appendix 4).

4.7.7. Quality of the study:

4.7.7.1. Ensuring rigour

Different criteria have been used that evaluate the quality of qualitative research (Elliot et al., 1999; Yardley, 2000). The researcher chooses Yardley's approach to assess the validity of qualitative research because it involves transparent and simple criteria:

For Yardley, a good qualitative study should meet the following four criteria. First, it needs to be *sensitive to context*. Sensitivity to context can be assessed in different ways, including awareness of relevant literature and the quality of the material collected from the participants. The second criterion is *commitment* and *rigour*. Commitment entails a prolonged engagement with the topic, while rigour refers to the thoroughness of the research study. The third criterion is *transparency* and *coherence*. This pertains to *how transparently and coherently the study was written?* The last criterion is *impact* and *importance*, which is a requirement that the qualitative research aspires to produce something significant.

The current study was sensitive to context as the researcher immersed himself in the literature on supervision in psychotherapy. He also endeavoured to be fully aware of the processes that influence data collection (e.g., how empathy contributes to the richness of

data,) and data analysis (e.g., how an immersive engagement in data contributes to data analysis). Data is the most important context in IPA research, and it is paramount that the researchers is sensitive to it (Smith et al., 2009).

In relation to commitment and rigour, the researcher fully engaged and read methodological guidance regarding conducting an IPA study. He was attentive and committed in order to help participants remain comfortable during interviews. He also made a considerable effort to obtain the skills necessary to conduct good IPA research e.g., skills of doing structured analysis. He endeavoured to conduct a rigorous study through, for example, carefully and purposively selecting participants that match the research questions and conducting a systematic analysis that displayed both commitment and rigour.

With regard to transparency and coherence, the researcher clearly described, for example, how participants were recruited, how the interview schedule was developed, how data was collected, transcribed, stored, and analysed, and how a systematic approach was used in the analysis of data. All processes were discussed with his supervisors to ensure everything was sufficiently transparent. He made extra effort to write the thesis in a coherent and clear way. To aid his efforts in this regard, a draft of the study was proof-read by his supervisors.

Concerning with impact and importance, the researcher believes the study has made an important contribution to the study of psychotherapy supervision. The study produced original knowledge within the field of supervision. The findings may provide supervisors with a clearer picture of what is actually going on in supervision from the recipients' point of view. The study may also be used as an example of how an IPA study can be conducted to explore psychotherapist supervisees' experience of supervision. Furthermore, the findings will be disseminated through the relevant journals that will be available for other researchers.

Smith (2011) lists seven features that addresses the quality of an IPA study. These features are essential to and characterise good IPA research. According to Smith, a good IPA study should have a **clear focus**. The current study had a specific aim that allowed for participant to clearly understand the purpose of the study. A good IPA study needs **strong data**. Rich data derives from high quality interviews. Several years of working clinically and attending supervision had prepared the researcher to conduct the interviews. He believe that he provided the participants with comfortable and non-threatening situations that made them feel at ease. A high-quality IPA study needs to demonstrate **rigor**. He endeavoured to represent participants' experiences accurately through the

super-ordinate themes and the themes. The researcher provided many quotes to support the super-ordinate themes and their corresponding themes.

The researcher made efforts to provide sufficient space for **elaboration of each theme**. He discussed the themes in great details to demonstrate where they were coming from and how he ended up in the final super-ordinate themes and the themes. To make the study outputs transparent, he provided an excerpt of one of the interviews in Appendix 1 so that the reader will understand the process of analysis that led to the super-ordinate themes and their relevant themes. He attempted to conduct **an interpretative rather than descriptive analysis**. Consistent with the hermeneutic element of IPA, the researcher endeavoured to transcend the words spoken by the participants in order to reveal the unarticulated dimension of their remarks. All super-ordinate themes have interpretative flavour; nevertheless, one i.e., Harmonizing emotional experiences, has a descriptive level too (See chapter 5).

Following the idiographic element of IPA, the researcher attempted not to lose the individuality of the participants and tried to highlight both **divergent and convergent** experiences. The individual differences have been pointed throughout the study. For example, while the participants accentuated the benefits of working on the client's transference, Liz valued understanding male transference in particular. The researcher allowed the participants' voices to be heard. He believes that the analysis was **carefully written**. The participants' meaning-making of supervision was written in a transparent manner that will allow the reader to connect with the participants' conceptualizations about their supervisory experiences.

Smith et al (2009) recommend that an "independent audit" (p.183) is the most optimal way to ensure the study has validity. They state that this independent auditor could be anybody from an expert not involved in the project to the student's supervisors. The researcher's supervisors constantly monitored the study. They audited the study from its inception up to the submission of the final version. They contributed to the research development process and the drafting of the interview questions. They also provided him with corrective comments on the collection and analysis of data as well as advice on the writing of the thesis. Thus, the researcher believes this study meets the high validity standards required for a good IPA study. However, it should be noted that the purpose of an independent audit is to ascertain whether the knowledge produced is a credible one, rather than *the* credible one (Ibid).

4.7.7.2. Reflexivity

I have worked as a psychotherapist for several years and consequently I have undergone supervision with different supervisors. I have experienced, using Ellis's (Ellis et al., 2015) phraseology, both inadequate (useless) and traumatizing (harmful) supervision. It goes without saying that similar situations may give a rise to emotions I have experienced with inadequate and harmful supervisors. This is particularly important when it comes to situations where supervisees share their negative experiences. I tried my utmost to bracket my feelings sufficiently in order to do this study justice. I believe I have succeeded in this endeavour.

First, in the beginning of the study, I identified the areas where I might have been more willing (voluntarily) to hear from my participants. It is clear that if a researcher has experienced inadequate supervision with their supervisors in the past, they may be particularly interested in hearing similar stories from the participants. This can cause the researcher to overemphasize a certain part of supervision e.g., negative supervisory relationship, when questioning supervisee participants, which in turn may result in a bias. I had a previous experience of being in supervision with a supervisor whose approach to supervision was authoritarian. In my interview with Brian, I hesitated when he described his relationship with his supervisor. He has stayed with one supervisor for many years and he did not pinpoint even one example of a negative experience. However, I quickly became aware of my bias and recognized that my own negative experiences with supervision were influencing my tendency to repeatedly quiz him about negative experiences in supervision. Thus, I acknowledged his descriptions and moved on to the next question. I recognized how my bracketing helped me be present for myself, which in turn made me present for the participant's account.

The second, and perhaps the most important, factor that may have affected my understanding of the participants' account was my own background as a therapist. I was the interviewer and researcher, and my attitude to the participants' responses should be informed by the study aims and not by the philosophy of therapy I trained in. I was attentively aware of this two different roles and I made a considerable effort not to blur the boundaries between both. For example, when Patrick began to share how his supervisor suspended his supervision, I was able to identify anxiety signs that were channelled into physical expressions e.g., a deep breath. I was to invite him to explore his emotions, but I quickly realised what I was doing, and pledged to avoid therapeutic interventions and remain in the researcher's role.

In addition, my experience of being a therapist could have affected the study in a different way. In clinical work, I often allocate a few sessions to developing good rapport

with my clients, so that they would be more likely to open up. However, on this occasion, I was to conduct just one session with each participant. Consequently, I initially felt a little bit anxious, and I was worried I would not be able to develop good rapport. However, it became clear that my empathetic and non-judgemental approach contributed to and enhanced our communications

Third, in the first two interviews I found myself a little bit anxious. I followed the interview schedule strictly and as a result it dictated, rather than guided, the interview. As a consequence of this, responses were often short and each interview took less than one hour. In the following sessions, I began to articulate questions in more detail, use prompts to ask them follow-up questions and I invited them to expand on their responses. I believe this helped participants open-up and it helped ease my anxiety, as well as the rigidity and inflexibility caused by it.

The final factor that may have affected the data collection and the data analyses phases were language barriers given that English is not my first language. Like other languages, the English language has many words that are synonymous and used interchangeably. However, synonymous words may be used differently based on the context. From a psychoanalytic point of view, people may avoid using a certain word and use a synonymous word instead, because the synonymous word, albeit meaning the same thing, may be experienced, by people, as neutral and consequently help them detach from their unpleasant feelings (Freud, 1937). There is a possibility that I may have missed this nuanced function of the English language, which would have affected my follow-up questions in data collection i.e., interviews, and my analysis of in data analysis.

4.7.8. Conclusion:

This chapter began with an overview of the ontological and epistemological underpinnings of qualitative study in general and IPA in particular. Subsequently, the chapter aimed at outlining qualitative method and its different methods to justify the suitability of IPA as the design of choice for the current study. Afterward, some of the main strengths of and issues around IPA were outlined. The chapter described the method e.g., recruitment of participants, data collection, and data analysis, employed for the study. Then, it addressed ethical considerations and the criteria that assess the quality and the rigour of qualitative study in general and the current study in particular. Finally, the section

outlined my reflexivity that aimed at clarifying the process through which the study was conducted.

Chapter 5: Findings

5.0. Introduction:

This chapter describes the study's findings, illustrating the participants' meaning-making of psychoanalytic psychotherapy supervision. The chapter outlines four superordinate themes and the corresponding themes within each that emerged from the analysis of the transcripts. The superordinate themes were: **Providing illumination; Harmonizing emotional experiences; Encountering frustrating moments; Grappling with relational experiences.** Verbatim quotes are provided to illustrate the themes throughout. The chapter ends with reflections on the process of analysis.

5.1. Superordinate themes:

The study participants have been anonymised through the use of pseudonyms and further guarded by the removal of any identifying data such as specific dates or place names from the transcripts. Four superordinate themes that encapsulate the participants' experiences of psychoanalytic psychotherapy supervision were identified. Table 7 presents the superordinate themes, their related themes and the number of participants who responded to each particular theme. Two out of the four superordinate themes demonstrate how the participants spoke highly of some aspects of supervision. The superordinate theme **providing illumination** revealed that the supervisory processes were clarifying and insightful. Providing illumination encapsulated both *illuminating the self* i.e., improving self-awareness, and *illuminating the client* i.e., gaining an insight into the client. The superordinate theme **harmonizing emotional experiences** explicated supervision experiences that helped participants manage the emotional consequences of clinical work. This theme encapsulated three elements: *containing difficult emotions* i.e., the participants were helped in the processing and managing of emotions stemming from clinical work, *feeling supported* i.e., the participants felt supported, and *normalizing difficulties* i.e., the tendency of supervisors to share their personal and professional stories put the participants at ease, as it was helpful for them to realise that their supervisors had faced similar difficulties.

The other two superordinate themes illustrate unpleasant, unwanted, and unhelpful experiences. The superordinate theme **encountering frustrating moments** refers to the experiences that revealed participants' unmet needs. This theme involves two experiences: *Hurting deprivation* i.e., the participants experienced a lack of positive feedback, and *disappointment and dissatisfaction* i.e., the supervision failed to provide the

supervisees with, for example, answers to their questions. The superordinate theme ***Grappling with relational experiences*** illustrates the relational issues that the participants encountered. It encapsulates two themes: *Holding back* i.e., how the

Table 7.

Super-ordinate Themes and the Corresponding Themes

Super-ordinate themes	Themes	Number of participants
Providing illumination	<i>-Illuminating the client</i>	10
	<i>- Illuminating the self</i>	13
Harmonizing Emotional experiences	<i>-Containing difficult emotions</i>	9
	<i>-Feeling Supported</i>	4
	<i>-Normalizing difficulties</i>	3
Encountering frustrating moments	<i>- Hurting deprivation</i>	3
	<i>- Disappointment and dissatisfaction</i>	4
Grappling with relational experiences	<i>-Holding back</i>	9
	<i>- Struggling with power</i>	7

participants avoided opening up, and *struggling with power* i.e., how the supervisor acted in an authoritarian manner.

The section below presents superordinate themes and the relevant themes using quotes to illustrate and support the findings.

5.1.1. Providing Illumination:

Participants talked about how psychoanalytic psychotherapy supervision provided them with illumination. The superordinate theme *providing illumination* was about the participants' experiences of understanding themselves and their clients. It split into two themes: *illuminating the self*: how supervision helped the participants understand themselves more, through, for example, understanding their own blind spots. They described supervision as an engagement that improved their self-awareness, which in turn contributed to their understanding of themselves. The other theme was *illuminating the client*: how supervision helped the participants understand the client through, for example, making sense of the client's transference. Using theoretical concepts, participants were encouraged in supervision to conceptualize the clients' presenting issues, which contributed to their understanding of the client. Thus, psychoanalytic supervision provided the participants with an illuminating psychological profile of themselves and their clients. The section below describes these two themes:

5.1.1.1. *Illuminating the self*:

The theme *illuminating the self* refers to participants' experiences with analytic supervision that helped them get to know themselves better and gain an insight into their own blind spots. Participants discussed how supervision helped them improve their self-awareness. The participants referred to situations where the client had activated their unconscious e.g., paternal countertransference, sexual feelings, kindness, and empathy. The participants' unconscious stimulated by the client appeared to be blurring the participant's vision, when working with clients. Raising and discussing these blind spots in supervision helped supervisees gain a more realistic perspective on themselves. As a result, they could identify and manage the effects of their own psychology on their work. In other words, supervision was not simply based on the client, it involved some work on the supervisee too. Supervision therefore was supervisee-centred as well as client-centred. It invited the participants to take a look at their own countertransferential thoughts and feelings. Participants felt this contributed to their self-awareness and their *illumination of the self*.

For Patrick and Rose, this improved self-awareness included a process through which they identified and understood the paternal and maternal countertransference that they had developed toward their clients. For both, psychoanalytic supervision was a place to work through their countertransference. Patrick provided an example to illustrate how his supervision may have improved his awareness of his countertransferential reactions in his therapeutic work with his clients. He recalled a female patient who strongly activated

something inside him. He experienced a paternal feeling toward this patient, and felt a powerful urge to hold her. He was surprised by this powerful feeling stimulated by the patient. He raised the case for discussion in supervision:

“Well I remember talking about it in the supervision and about the really strong urge to protect this person. And the fact that it was so strong and then as we talked about it there were pieces that had come to mind that I might not have caught in the verbatim piece, so another additional piece that was left out maybe”. (6, 18)

There were missing things that tie to the blind spot e.g., “urge to protect” and “strong”. The quote conveys a sense that supervision brought those missing parts together. He added:

“There were other bits that I had left out of the verbatim account that came back to mind... with this person it was about infidelity and being betrayed by someone they were close to. And we {Patrick and his supervisor} kind of worked out that that was linked to my own experience. And yes that was helpful”. (23, 18)

Patrick had clients who have had experiences similar to his own (*infidelity and being betrayed*). Listening to narratives that were tangible and familiar to him, could trigger these or other emotions. In supervision, he could unpack his countertransference and track where his emotions, activated by the client, came from, which in turn improved his self-awareness.

Enhanced self-awareness, as a result of attending psychoanalytic psychotherapy supervision, seemed to fit well with Patrick’s conceptualization of supervision. For him, psychoanalytic supervision was an encounter through which the supervisee’s self-awareness is enhanced, because it, *“Is about improving or noticing things, discovering blind spots”* (19, 27). *“The focus {of supervision} on what was going on in me, how I felt with my patients”.* (41, 14). Working on and discovering blind spots is a meaningful part of supervision for Patrick because, from his point of view, it is precisely what makes supervision psychoanalytic. Following the main aim of the study, I was interested to hear about Patrick’s meaning-making of the process of getting insight into the self. He addressed this subject at length:

“It is great, I feel a huge relief, I feel like I discovered something, it is that kind of feeling. It is like the clichéd ‘ah-ha’ moment, it is a bit like that and there is a relief and there is a relief because very often in these cases, in these instances I should say, it is the bits that are stuck that are brought into supervision and I don’t feel stuck anymore. I feel like there is hope, supervision gives me hope with really difficult cases.” (5, 19)

Clinical challenges with the client became challenges with the self. This was a vague experience and Patrick was puzzled by it. This was illustrated by a certain expression he used: “*the clichéd 'ah-ha' moment*” - an expression which often suggests grappling with dark and unknown things. Supervision helped bring clarity and, consequently, it helped him see things clearly. An ‘ah-ha’ experience suggested a flash of illumination and being released and freed-up. This was evident in Patrick’s repetitive references to “relief”. The quote illustrates a sense of stuckness. It is like there is a sense of wonder to it, there’s movement. For Patrick, being freed-up by supervision meant becoming more optimistic about his work with difficult clients. There is nonetheless a dramatic perspective shift here- from being stuck to being freed up and having an optimistic perspective on the ongoing work. The extreme language “really difficult” demonstrates how psychoanalytic supervision was experienced as having a transformation effect for this participant from a “really difficult” experience into a hopeful one. He was *hopeful* that supervision would continue to free him up if he found himself caught up again.

Rose referred to a maternal countertransference that she had developed with one of her clients. She demonstrated how her psychoanalytic supervision had been helpful with the countertransference she was caught up by. Initially, the client had availed of a low cost option for her therapy sessions and was paying less than the normal fee. However, in year three of the interim, the client got a full-time job. At that stage the client was earning a lot more money than Rose was, but continued to pay her the low fee. The supervisor questioned that situation and queried whether it was OK:

“And my supervisor would have said, 'be always careful of the client who impresses you the most.' And so it was almost as if I thought this was my special, I think maybe in the transference I was sort of in the role of the maternal, but it was almost like as if I was given this client special treatment”. (26, 37)

Rose seemed to have clients who impressed her more than others. The fact that that particular client received *special treatment* confirmed this. Rose’s supervisor was objective to her subjectivity that allowed the supervisor see her countertransference. With regard to that particular client, she stated that supervision helped her identify what it was about the client that made her act the way she did. This clearly demonstrated how psychoanalytic supervision helped her turn her attention inside, which in turn led to greater self-understanding. Rose valued the importance of improving self-awareness: “*I suppose a key part has been to be aware of my blind spots*”. (36, 42)

Rose believed that the enhancement of the supervisee’s self-awareness depends upon a third-party, namely the supervisor, because one is subjective to his/her experiences:

“It is really important to have somebody who will see your blind spots. ... the supervisor has better capacity to see your blind spots because they are more objective than your subjectivity”. (18, 11)

The necessity of having a third-party to help identify blind spots was echoed by some other participants. They considered themselves subjects who could not see their own subjectivity. Similar to Rose, they felt that one needs somebody (the supervisor) outside who is objective to their subjectivity. Evelyn, Rob and Patricia emphasised the importance of psychoanalytic supervision in illuminating their blind spots. Evelyn referenced numerous supervisory moments where she was helped to see parts of herself she had been previously unaware of. Evelyn admitted that she would not have been able to see those parts without a *third eye*. She said:

“I think it {supervision} sheds a lot of light on your blind spots, the things you don't see because... the parts of oneself that only the other can see... So being able to see myself more from the perspective of others.”. (24, 38)

When it came to observing her own mind, Evelyn saw her supervisor as a more neutral observer. This suggests the supervisor could observe things about Evelyn that Evelyn could not observe herself. This indicates the crucial role her supervision played in helping her obtain a better understanding of her-self. Evelyn reportedly used her propensity for taking responsibility to explicate how psychoanalytic supervision enhanced her understanding about her-self. When describing this propensity, quoted below, she seemed to be talking about a sense of self-idealization or even omnipotence; she may have thought that she could obtain perfect therapeutic results over a very short period of time:

“And I remember my supervisor once said to me, 'you know you don't have to cover the full leaving cert course in the first few sessions or in every session.' And I thought yes she captured something of me in that, giving it too much overtaking responsibility” (19, 38) {...}
“Well I was a bit ashamed to see myself in that light but it was a very useful piece of learning”. (34, 38)

The quote revealed that Evelyn had put high standards and expectations on herself. Her supervision had her see these self-posed expectations. This insight was reported as feeling *a bit ashamed*. When something unknown about herself becomes known, this seemingly made Evelyn feel ashamed. This perhaps indicates her fear of being discovered by the supervisor and illustrates what it was like for her when she is discovered in supervision. She nonetheless got something out of feeling ashamed. There is also a sense of supervision transference here. Evelyn wants her supervisor to think well of her and feels ashamed when she may not have been as good a therapist as she is aiming to be. She

is seeking approval and feels shame when she has a sense of not meeting the mark, being the best, she can and even letting her supervisor down. So, shame is also about a sense of not being good enough or a failure.

Rob mentioned how difficult it was for one to see her/his own countertransference and blind spots and addressed the fact that they could not be identified by the supervisee him/herself:

“Supervisor sees something that I am blinded to or I don’t see, or is able to identify something in my behaviour, response to the patient where I am acting out countertransference unconsciously”. (14, 5)

Rob’s recollection of his supervision seemed to be similar to that of Evelyn’s, particularly her description of the *third eye*. I was curious about his meaning making of this experience (understanding blind spots). He responded:

“The supervisory experience enriches my understanding of my own psychic process, my own object relations with my patients and with myself and in a wider basis than with others. My supervisory experience deepens my self-understanding in a way that benefits me personally in a kind of subliminal way often.”. (32, 28)

With regards to the *subliminal way*, psychoanalytic supervision appeared to be an insight-oriented process that could illuminate unknown things. The new understanding could make Rob not just a good therapist but also a better human. His supervision and its related understanding, as he later admitted, could untangle him. Using the word “untangle” was perhaps his way of demonstrating the important role working on the *self* had played in his supervision. He believed that a part of the self is being processed in supervision and it is necessary to address it:

“The supervisor has to be able to refer to this {the supervisee’s self} and look at it”. (33, 27)

Like Evelyn and Rob, Patricia contrasted the objectivity of the supervisor with the subjectivity of the supervisee, particularly with regard to the psychology of the supervisee. Patricia, who was interested in Buddhism, a spiritual approach that encourages people to get to know the truth of themselves, believed that psychoanalytic supervision operated in a similar way to Buddhism and helped her get to know the truth of her self. She believes beneficial supervision helps you find out who you are. In conjunction with psychoanalytic therapy:

“Good supervision gives you, I think it works together {with psychoanalysis} to give you more insight about what it is to be human and what your humanness is, what your particular weaknesses and blind spots are”. (41, 36) {...} “It, {supervision} along with psychoanalysis would have been hugely helpful to making me more aware of my blind spots”. (3, 37)

From Patricia’s perspective, psychoanalytic supervision was insight-oriented practice. She experienced supervision and psychoanalysis as parallel process. Psychoanalytic supervision went beyond working on the client and, similar to psychoanalysis, contributed to her self-awareness. She also referenced *human* and *humanness*. She seemingly saw humanness as a barrier against therapy. Humanness needed to be worked through and supervision helped her with that. From Patricia’s point of view, this was an essential step in becoming a therapist. Also, it was clear to me that Patricia mistakenly said “*would have been*”, because she frequently highlighted, throughout the interview, the value and usefulness of working on blind-spots and its resultant self-awareness. For example, she said:

“... I think there may be a little bit of an ouch feeling but mostly it {working on countertransference} is gratitude”. (15, 39)

Unlike Patrick who described self-awareness as relief and Evelyn who believed self-awareness brought up feelings of shame, Patricia made sense of her self-awareness as “ouch feeling” that almost suggests physical pain. In other words, it is about objective feelings which, unlike subjective experiences, people can easily imagine and understand. She used this word to convey her sense of emotional pain. Her meaning-making of illuminations around the self appeared to be emotionally painful. However, she was happy with its outcome. It can be suggested that the process and the function of working on countertransference and blind spots contradicted each other. While the process of it was like an ouch feeling, she referred to the outcome as “gratitude”. Also, gratitude is a word aimed towards someone else rather than being a personal feeling that may reflect her positive transference to her supervisor.

Patricia distinguished between the improvement of self-awareness in life and work. For Patricia, whereas psychoanalysis improved her self-awareness in life, psychoanalytic supervision helped with her blind spots at work:

“I think the psychoanalysis course is hugely good for blind spots but then supervision helps you when you are actually working with somebody else and you don't see the blind spots in the work”. (21, 37)

Patricia's point that any supervisory work on the supervisee should be confined to those aspects of the supervisee that are related to his/her work was echoed by Simon. Simon perceived his supervision as being confined to self-analysis. He described supervision as an engagement that could involve some work on the supervisee too, if needed. Repeating Patricia's point, he argued that the supervisee could be treated as the patient in some circumstances. However, this work would be confined to those aspects of the self-e.g., concerns involved in clinical work; *"they {the supervisor} would only speak of it if it was to understand something in terms of the client I was discussing"*. (47, 31). This would have improved Simon's self-awareness, as he later explained in more detail:

"Supervision was really helpful for me in terms of filtering out here is the bit that is about my anxiety or my desire or me and here is the bit that is about them. So that in the clinical work I could focus on what needed to be about them and not get caught up in my own anxieties, fears, emotions, worries, whatever that might be". (21, 18)

Simon referred to a lot of unpleasant feelings when talking about himself. He used words like "anxieties", "fears", "emotions", "worries" when referring to his own emotional states. However, he was more opaque when referring to the client, only using the expression "about them". This was perhaps his way of highlighting how he may have been affected by the client and how important psychoanalytic supervision was in order to understand his own psychology. From the beginning of his clinical work, Simon wanted to distinguish between what was his and what was the client's. This was a necessary task for him. Simon's supervision seemed to have aided this task by distinguishing him from the client and improving his self-understanding.

With regard to improvements in self-awareness, Liam and Teresa discussed how psychoanalytic supervision was beneficial in helping them identify and understand what their delusions and defences were. That is, supervision appeared to be experienced as a place to discuss and make sense of countertransference. Liam stated this explicitly:

"I think supervision is a bit like psychoanalysis because I will often say to my clients, if something is difficult to talk about that means probably you should talk about it. And I would apply the same rule to myself". (7, 19)

Or:

"It {supervision} is not entirely like it {psychoanalysis} but it is a bit like it in the sense that there is a discovery". (39, 7)

Given the insight-oriented nature of psychoanalysis, likening supervision to analysis implies that supervision enhances self-awareness. The use of the word "discovery" makes

this clear. In the interview, he discussed the thought-provoking nature of supervision and specifically referred to a delusional state called folie a deux:

"It does make me think, it makes me think about what I am doing and it forces me to communicate what I am trying to do. And I think that is so important because you can drift off with your client into a folie a deux, you know that expression folie a deux, you go off and..." (27, 16)

Using "*folie a deux*", Liam tried to demonstrate how an inappropriate therapeutic relationship may emerge. It may have been delusional and he could have been a victim of the delusion. This differs from the supervisee-supervisor relationship where one party (the supervisor) has an objective perspective on the therapy relationship and is able to see, for example, delusions. Folie a deux and supervision are considered to be two totally different experiences. While the former one gradually leads two isolated people to develop shared delusions, the latter one moves in the opposite direction, providing a shared space that "forces" the supervisee to think. Liam seems to have been trying to accentuate the illuminating aspect of his supervision, he is valuing it as a process that guards against him entering into collusion with the client or even misleading the client and aimed at enabling both the supervisee and the client to maintain a clear focus. The objectivity, absent in therapy, is present in supervision. Liam may have been unconsciously, using Rob's expression, entangled by clinical work and its delusions, but, thanks to psychoanalytic supervision, he could think precisely about himself. This is perhaps what Liam called self-awareness and mindfulness, early in his interview.

When Liam discussed his supervision's contributions to his self-awareness, I was curious about what this experience was like for him. When asked about that, he said:

"That is helpful. It does create a sense of... I think when you talk about your countertransference in a way it neutralises it a bit, I think it is a very good thing to do. I always say how I feel about what my feelings are, what is going on in me, because I work a bit with my countertransference." (38, 23)

Neutralises suggests that supervision reduced the effects of Liam's countertransference on his clinical work. Frequent use of the expression "a bit" suggested that he was probably trying to distinguish supervision from psychoanalytic sessions; ie. to say that his countertransference work occupied "a bit" of his supervision sessions.

For Teresa, it was a defence mechanism that revealed how psychoanalytic supervision contributed to her self-awareness. She regarded analytic supervision as a beneficial encounter, and one that helped her figure out how her unconscious may have affected her

vision when working with clients. She described her supervision as analytic, in that it involved working on countertransference and internal object relations. When she made a clinical mistake, her supervisor reportedly would try to clarify the unconscious implications of the mistakes she had made. One of her male clients was confused about his sexuality and sometimes described himself as a gay man, while on other occasions he denied any homosexual desires. Teresa found herself thinking alongside the client and accompanying him in this *flip-flopping*. She raised this during supervision and the supervisor pointed out that it was actually her identification with the clients' projection:

"So for a while I couldn't hear it. I could hear it but it wasn't meaningful to me. So this went on and eventually she was like, 'you are identified with a projection". (4, 6)

Referring to "projective identification" as a defence mechanism indicated that her supervision was insight-oriented and it helped her notice and deactivate the defence. It makes perfect sense that losing a defence, which is an unconscious barrier against consciousness, would have contributed to self-awareness. The supervisor's comment appeared to have illuminated for her a feature of her own unconscious. She valued this experience:

"So then once I heard it, so when I went back to my client I didn't do anything differently but... So for example when he was sort of over here saying, maybe I am gay and panicked... And then when he was on this side, so because I was still and being able to more integrate these aspects of him and not flip flopping with the projection". (9, 6)

psychoanalytic supervision stabilized her and illuminated the client for her. It prevented her from being manipulated by the client. She explicitly noted that she would not have been able to manage and work with this client, if the supervisor had not helped her identify and see her projective identification.

Similar to Teresa, Rita discussed how addressing and meaning-making of her clinical mistakes increased her self-awareness. She talked about the benefits of psychoanalytic supervision that enhanced her awareness of the way she acted:

"It {supervision} also helps me to understand why I do certain things or what is holding me back or what is the defence mechanisms or why I am making these mistakes". (12, 12)

It seems that Rita was trying to highlight how she could reflect on her clinical work. In supervision, she was able to step back and evaluate her own work from a distance.

For me, there seemed to be an idiographic element to her experience of *understanding the self*. She talked about a certain mechanism i.e., *projection*. Sometimes she may have

projected her feelings toward the supervisor and the supervisor would in turn help her identify it. In fact, her supervision may have been focused on the relationship that she and the supervisor had developed. She experienced the process of understanding the self as *comfortable*:

"I find it really good. I am very comfortable with her. I am not sure I would be as comfortable with a supervisor who ... was completely all about talking about your clients". (3, 12)

Rita's words here could be interpreted as indicating a newly established form of psychoanalytic supervision called relational-supervision (Frawley-O'Dea, & Sarnat, 2001) in which supervision work may include the relation between the supervisee and the supervisor. Perhaps that is why Rita referred to her supervision, on one occasion, as a *second analysis*.

As the last participant who addressed the issue of understanding the self, Michael stated that he was interested in making sense of the clients' impacts on him and was willing to discuss this in his supervision. Work of this kind was crucial to him because it helped him understand a certain experience he had in therapy: *"Is yourself and why you are experiencing this maybe so strongly"* (17, 21). He explained this point by saying:

"That is disturbing me and why is it disturbing me? It could be something about myself. But going into supervision and pulling that apart means I can take the bit that is myself, that is fine, that is me, that is okay and then this is the client bit. So it settles it". (8, 37)

The quote demonstrates how psychoanalytic supervision was experienced as a place where Michael's countertransference reactions could be worked through. He made his point using a question mark (*why is it disturbing me?*) which implies that he may have been initially confused by his reactions to some clients. Attending supervision and making sense of his reactions expanded his self-awareness, cleared up his confusion and *settled* him.

To illustrate how supervision improved his self-awareness, Michael provided an example. He referred to certain thoughts and feelings that had been activated by one of his clients. In a session with this particular client, an image of a tank came to his mind:

"I remember once sitting with a client, she was describing something and I had an image of a tank, the gun pointing and ready to blow up. ... I brought it to supervision and we talked about why that image came, why I experienced it, the violence of it and then looked at some of the material and thought oh yeah that is how that fit in". (12, 20)

This image clearly demonstrates how his supervision helped him make sense of his reactions to the clients i.e., how the client could trigger an image in his mind. An idiographic aspect of Michael's experience of understanding the self was that he was keen to know why he was willing to discuss some clients in supervision, while excluding others:

"What I do find very interesting at this stage though is with all the clients that I am seeing why did I bring this one to supervision this week? And so I find that really worthwhile thinking about. So it isn't just about the material, it is also about what is going on for me".
(15, 29)

It goes without saying that there might be some unconscious factors behind why Michael chose certain clients over others. The fact some cases may have triggered something inside Michael may partially explain his reasons for selecting them for discussion, while he may have unconsciously avoided talking about some other cases. Addressing these tendencies and avoidances would have contributed to his understanding of the self. This was evident from his answer to my query about this topic; '*Massively yes*'.

The participants' conceptualizations around psychoanalytic supervision revealed that they experienced it as a practice of *illuminating the self*, which contributed to the improvement of their self-awareness. In conjunction with the enhancement of self-awareness, the participants conceptualized their supervision as a way to understand the client. The section below addresses illuminating the client.

5.1.1.2. *Illuminating the client:*

The theme *illuminating the client* refers to those supervisory experiences that helped the participants make sense of the client. Participants found that supervision helped them understand their clients better. For the participants, psychoanalytic psychotherapy supervision was neither a case of simply providing the supervisee with some techniques, nor categorically advising them on what they should or should not do with the client. Rather, participants explained that psychoanalytic supervision helped them to understand why the client acted in the way they did.

Some participants explicitly described their analytic supervision as a practice where they were helped in making sense of what was going on with their clients rather than offering them a technique and a certain intervention. Patrick and Michael were very explicit on this point. Patrick explained that his supervision had nothing to do with what he did right or did wrong in therapy with his clients; rather it was about making sense of what was happening

in the therapy session. Patrick calls that *free association* and described it as uniquely psychoanalytic action. He stated:

“When I am telling him {supervisor} maybe about the case ... something will pop into their mind about a case they had and then they will share that with me. And there is usually something really important and valuable and nearly always makes a difference the next time I meet that patient” (14, 11).

What the supervisor did i.e., free association, appeared to be similar to what the client undergoing psychoanalysis is supposed to do. Both the supervisor and the client share with Patrick what pops up in their mind and he found this helpful. Later he explains the supervisor’s *free association* more explicitly, citing what the supervisor used to say:

“It is just this comes to mind with me {supervisor}, I wonder is this happening with your patient. I {Patrick} love that, I think that is really helpful” (14, 11).

It is evident that the supervisor did not offer Patrick a technique or prescribe what he should do with the client; rather, she helped Patrick gain a greater understanding of his client. She was the person who noticed the missing pieces in Patrick’s account. It was evident in his remark: *She is picking up my patient through me, I really feel that with her-*. The supervisor, probably a gifted one, was able to see what Patrick could not. After receiving the missing pieces, Patrick had a more accurate picture of the client. Receiving an insight into the client is what he meant by *‘I love that’*.

Likewise, Michael agreed that the supervisee has to go beyond learning techniques in order to be an effective therapist. He believed that psychotherapy is not simply about doing something (with the client); it is about understanding the client. Consequently, psychoanalytic supervision is about helping the supervisee make sense of the way the client behaved in therapy. This is what he learned from supervision. To explicate what he meant by understanding the client, he referred to one of his clients, diagnosed as suffering from depression, for whom he attended supervision:

“If I came in and said, ‘I don’t know what to do with my client.’ She {supervisor} would say, ‘it is not about doing” (2, 27).

With regards to the depressed client, Michael, as he admitted, did not know what to do or to say in the session. This conveyed a sense of uncertainty that he may have experienced with this client. Michael was advised to pay attention to the client and figure out what was going on in the session. This seemed to have helped him address his sense of uncertainty. Perhaps, that is why he described understanding the client as his *biggest* achievement in supervision.

For some other participants, understanding the client took place through the process of making sense of the client's transference. Patricia, Brian, Simon, Liz, and Rob all emphasised their experience of working on transference. Patricia addressed the centrality of analytic supervision for her clinical work, by referring to how it contributed to her understanding of the client through making sense of transference. She recalled a client who had thrown her bag towards Patricia's face because Patricia had cancelled their last session. The client's reaction was apparently his/her transference to Patricia. She raised this for discussion during her supervision:

Interviewer: *So you found the supervisor helpful to understand this?*

Patricia: *"Extremely {helpful} because I haven't been brought up with physical violence and that was the first time anybody had thrown anything at me" (10, 7).*

Here, Patricia confirms the benefits of analytic supervision for her; it helped her understand the client's reactions in therapy. More specifically, as is evident in the quote, she referred to new and different manifestations of transference, namely physically violent transference, and supervision helped her understand this. She valued this supervision experience and said: *"I feel very grateful to it" (14, 8).*

Likewise, Brian referenced working on the client's transference as an important aspect of his supervisory experiences. One of Brian's clients was psychologically enmeshed with his mother. He discussed the case in supervision:

"My supervisor was asking me about the nature of the transference that he and I, this man, had and...I hadn't thought about it, it occurred to me how the relationship he was having with me in theory was very similar to the relationship he was having with his mother. So in fact he was repeating something within. And I hadn't quite noticed it that clearly on the day I was in supervision...So that was very enlightening, I found that very useful." (18, 4).

The supervisor made Brian pay attention to a transference pattern, going on in the client's life. The repetitive pattern was present in therapy sessions too but Brian was unaware of that. Brian described the supervisor's action as "enlightening". There is again the sense of the unseen and the sense of participant through supervision seeing something that was previously hidden from them. The supervisor via their knowledge and insight posed questions and the questions allowed Brian to re-evaluate his conceptualisation of the relationship with the client. Brian expresses this as enlightening a word that encompasses learning, new insight, and clarity of vision.

It was “useful” because it shed light on the way the client communicated with Brian in therapy sessions. Later, he clarified he was talking specifically about negative transference:

“It is very difficult sometimes to recognise a negative transference from the analysand and particularly new people, and that only becomes obvious when they decide to stop... I want to retrace my steps as to what it was that I had been doing, without realising it or saying rather, that caused the person to stop”. (35, 11).

Poor-relationship e.g., negative transference, can result in the client’s drop-out (Piper, et al. 1999). By addressing the client drop-out, which is one of the main anxiety-provoking factors for psychotherapists (Piselli, Halgin & MacEwan, 2011), he highlights the importance of participating in psychoanalytic supervision and illuminating transference, in particular negative transference. Perhaps that is why he described working on transference as the most useful part of his supervision.

Teresa highlighted working on transference when she was attempting to demonstrate the centrality of supervision in her work:

“what I find really beneficial is he can offer me a lot of insight to what is happening at the transference...”. (15, 12)

Using the word ‘*insight*’ indicates that what Teresa valued above all was the interpretations offered by the supervisor. She frequently mentioned how she preferred getting the supervisor’s interpretation to the supervisor’s encouragement and support:

“She would always offer better interpretation, not just to critique the one I had made but she would offer me something more in keeping with what, in her view, I ought to have said”. (12, 4)

Interpretations were seemingly complementary (*something more*) and they covered missing parts in Teresa’s interpretations. She stated that the supervisor’s interpretations added to her own observations and interpretations. She described her sense of getting interpretations by:

“If you can name it you can tame it, so if you know what the problem is you are half way there”. (22, 4)

As it is evident from the above quotes, Teresa highlighted the importance of interpretations in her supervision experiences. Undoubtedly, they helped her, evident from her remark that receiving interpretations from her supervisor was what made her supervision psychoanalytic.

Liz put emphasis on her experiences of working on the client's transference. She referred to her initial and premature understanding of transference and how supervision helped develop her understanding, illustrating for her how she could understand the client through unpacking transference:

"At the beginning .. I would have been extremely cognitive so if they {clients} were smiling and seemed happy it seemed to me that they liked me .. I have become better at bringing it in and describing it. So I think my supervisor had to figure stuff out for me more in that regard". (33, 13)

It is clear that analytic supervision deepened Liz's knowledge in conceptualizing the client. Her vision was no longer blurred by a simplistic perspective; rather, supervision provided her with a deeper understanding.

For me, there seemed to be an idiographic element to Liz's experience of *illuminating the client*. It related to her curiosity around masculinity; she used to struggle with understanding men, and consequently the way men operated in therapy. She said it was a question mark for her:

"Asking him {supervisor} how do men operate, how do they think about things?..{...} I would bring work that I was doing with men who were coming and he would explain things in terms of the masculine mind-set". (15, 9)

Liz seemed to have considered men and women as two totally different creatures. She was seemingly curious about it. The quote indicated that for her, supervision was an opportunity to explore her curiosity about masculinity. Supervision provided her with illumination not just about (male) clients but also males in general.

Rob, to illustrate how psychoanalytic supervision helped him with his clinical work, put the emphasis on the client's transference. With regard to the psychoanalytic approach (i.e., object relation) Rob adhered to, everything relates to transference. Consequently, it was expected that transference would be a vital part of his supervisory experiences, as it is understood from the example offered by Rob:

"If the client is talking about servitude and being indentured to someone in the kind of way we have talked about, what does that mean in relation to her feelings towards me as the analyst? Does she feel that she is in servitude in therapy". (42, 8)

Although there is no reference to supervision in the quote, it was part of Rob's response to my question about his experiences of discussing transference in supervision. In addition to that, Rob used certain words such as fog, confusion, and mist, when talking about

therapy, and more specifically about the client. By attending supervision, he resolved his confusions and consequently he could hear and see more. It is evident from Rob's statement above, that supervision helped illuminate for him the way the client related to him.

For some participants, illuminating the client necessitated translating theoretical notions into practice. Liam and Rose observed that psychoanalytic concepts helped them understand their practice i.e., the client. Liam stated that:

"Well often the supervisor would reframe what I am saying into some kind of theoretical framework". (29, 19)

It is sensible to suggest that Liam was actually talking about translating theory into practice. What he brought to supervision could be *reframed* or translated using psychoanalytic theories.

What I found particularly striking about Liam's experiences of supervision was his tendency to avoid discussing certain aspects of the client. He, due to a certain discomfort, was (perhaps unconsciously) reluctant to see the client's darker sides e.g., *aggression, sadistic behaviours, self-harm, cutting and suicidal attempts*:

maybe I would be more somebody who would, when I am dealing with my clients, likes to find a reconciliation or a peaceful outcome for when there is problems in relationships that the client has and maybe I am more inclined to want to take a constructive... my supervisor might say well maybe you need to be able to work more with the dark side of things" (17, 25)

It is not easy to determine the precise reason why he avoided seeing the client's darker sides. However, the result is clear: he may have failed to fully understand the client. As it is explicit, the supervisor would turn his attention to the reality of the client, which in turn would have contributed to his understanding of the client.

In a similar way to Liam, for Rose, the process of understanding the client occurred through translating theory into practice. By attending supervision, she developed the skills required to conceptualize clinical materials by using theoretical notions. This seemed to have covered the gap between theory and practice:

"So it is matching theory into practice (16,20) {...} your supervisor might say, oh.. it {client's action} might be splitting or it might be the paranoid schizoid position ...or it might be a sibling rivalry or whatever". (9, 20)

Also later, when talking about a challenging client who was *being really, really angry with me*, Rose said:

“We talked about a Kleinian notion of envy and the pure hatred in the envy. And I thought about that, she said that was something worth thinking about so rather than giving me advice... And then it really came to the fore with the client... It was quite threatening actually being in the room, I felt, but again once I was able to name the envy piece and the envy of his/her envy of my femininity I think it let the air out of the tyre”. (28, 35)

The expression *it let the air out of the tyre*- demonstrated how understanding the client through theoretical concepts, in this case *envy*, helped reduce the pressure when working with challenging cases. It is important for another reason. Rose alluded to a *really, really angry* client to explain her experience of understanding the client through theory. It is therefore sensible to propose that this has been a meaningful experience for Rose. For both Rose and Liam *illuminating the client*, particularly in relation to challenging cases, happened through the process of translating theoretical concepts into practical settings.

Although all participants addressed how psychoanalytic supervision assisted them in deciphering the client’s unconscious, Evelyn explicitly and directly pointed this out by saying:

“I think that the focus on the unconscious processes with the client, I suppose that would have been the major facet that was psychoanalytic and... a lot of that of course included working on dreams that the clients brought”. (1, 26)

Later she said:

“The supervisor was useful and helpful where I wasn’t sure about certain things. I had a suicidal case one time, well several suicidal cases, but at the beginning it was very helpful so I found the supervision really useful in cases like that”. (17, 11)

By describing herself as *not sure*, it seemed that Evelyn was talking about a sense of confusion she may have experienced with suicidal cases; it suggests a sense of uncertainty with difficult clients. However, her statements do highlight the necessity of attending supervision to understand challenging cases. This was similar to Brian’s account, where supervision proved useful in dealing with the client’s drop-out, which would ordinarily have left Brian with enormous uncertainty.

Rita and Ann seemed to have experienced the role of psychoanalytic supervision in *illuminating the client* quite differently from the other participants. They referred to how the

supervisor helped them understand the way the client used language. Rita talked about her and her supervisor trying to understand the client through the language the client used:

“One of the main things is the transference and signifiers, I talk an awful lot about signifiers and different words and how they might mean different things and the unconscious and the unconscious motivations behind it... and I would be like, ah-ha, that was why”. (5, 10)

For Rita, deciphering the language and the signifiers used by the client was the main psychoanalytic aspect of her supervision. Evidently, deciphering the signifiers helped her make sense of the client’s unconscious. Perhaps that is why she viewed this part of the work as the analytic piece of her supervision.

Likewise, Ann viewed psychoanalytic supervision as a place where she could grasp signifiers used by the client. She was always aware of and focused on the signifiers the client used when, for example, they cancelled a session:

“The signifiers that they used in order to cancel this session are the very signifiers that they might have used when they were talking about their father, their mother, their sister or their wife or something”. (18, 13)

Ann’s experience of it was:

“God that is very interesting because I haven’t thought about that before or I haven’t been listening out for that”. (36, 17)

Ann found the supervisor’s comments thought-provoking, and they helped her decipher the client’s language. From her expression it was clear that she was amazed by the supervisor’s grasp of the signifiers. She felt surprised when she finally gained insight into the signifiers used by the client. This was very similar to Mark’s experiences in that Mark accentuated the questions, not necessarily the answers, offered by the supervisor. When talking about usefulness of supervision, he said:

“It {supervision} gave rise to the question rather than address it”. (4, 15)

Similar to Ann, Mark talked about gaining an understanding of the client and feelings of surprise he experienced during supervision. This is obvious from his use of the expression “eureka moments” to indicate surprising events and insights:

“Sometimes to me the experience is as though well the supervisor has had a eureka moment, shall we say, has had an insight, an understanding and the session is concluded based on that”. (1, 33)

Mark's meaning-making of eureka moments parallels with some of the other participants, like Michael, who stated that psychoanalytic supervision is not a place where the supervisee is offered techniques. Rather, supervision encourages revised conceptualization of the client, which expands and enhances the supervisee's understanding allowing the supervisee to consider alternative perspectives. This process is what Mark makes sense of it as eureka moments, which appears to come about not by the supervisor being instructive in the respect that they offer the insight for free but instructive via carefully crafted questions that cause the supervisee to reconsider their perspective. Like other participants, Mark valued the fact psychoanalytic supervision shed light on the client. The aforementioned quote reveals insightful moments in his supervision that contributed to the understanding about the client.

5.1.1.3. Concluding remarks:

In sum, the superordinate theme *providing illumination* illustrates that the participants conceptualized psychoanalytic psychotherapy supervision as a way to understand both themselves and their clients. They were helped to know themselves better through, for example, making meaning of their countertransference, and to know the client through, for instance, conceptualizing transference. In addition to its contribution to their understanding of themselves and the client, supervision helped the participants with their difficult emotions too. The next superordinate theme addresses this aspect of their supervision.

5.1.2. Harmonizing emotional experiences

Participants discussed how psychoanalytic psychotherapy supervision harmonized their emotional experiences. The superordinate theme *harmonizing emotional experiences* addresses how participants dealt with the emotionally-charged nature of their clinical work as well as how supervision helped them cope with and manage the emotional consequences of their work. The participants highlighted several difficult situations including violent clients or a client dropping out, experiences that had given a rise to unpleasant emotions like anger and frustration. They admitted that supervision was beneficial in helping them deal with these difficult situations and the difficult emotions that came as a consequence of them. Their experiences fell into three themes: *containing*

difficult emotions: supervision helped them hold difficult emotions when they faced challenging situations that necessitated grappling with and holding such emotions. *Feeling supported*: the participants highlighted the support they received when they were emotionally overwhelmed. *Normalizing difficulties*: this theme refers to how supervision helped to, from the participants' point of view, normalize clinical difficulties, such as feeling stuck with a client and the strong emotions that come as a consequence of this experience.

5.1.2.1. Containing difficult emotions:

The theme *containing difficult emotions* refers to how participants used psychoanalytic psychotherapy supervision to hold unpleasant emotions, as revealed through their narratives. Participants highlighted the containing function of analytic supervision. It helped the participants deal with, and manage, the strong emotional reactions that stemmed from both their clinical work and personal life. This function of supervision indicated blurred boundaries between personal therapy and psychoanalytic supervision. Psychoanalytic supervision, at times, could transcend didactic learning and become therapeutic in that, like personal therapy, the participants' anxieties became the centre of supervision sessions. Both the participants' conscious lived experience and their unconscious were implicated in the supervision process. Hence, the participant, in addition to the client, became the ready target for supervisory interventions. The participants experienced containment in different ways. For example, some participants (such as Rita), in an attempt to reveal how their emotions were contained in supervision, referenced how anxious they were; while others (such as Patrick) discussed how the effects of containment were not just confined to their clinical work but were also felt in their personal life, for example, in family relationships. They all valued supervision containment and conceded that, without it, they would have had more difficult clinical experiences. In some cases, they admitted that, without it, their clinical work would have adversely affected their personal life.

To highlight their supervision containment, some participants alluded to the anxiety-stimulating nature of clinical work. Rita and Patricia referred to the anxiety-provoking nature of their work to illustrate how analytic supervision was beneficial when it came to managing their anxiety and negative emotions. Supervision for Rita was an encounter that, at least in some stages, was focused on helping her address her own anxieties, in addition to the client's materials. During her initial years of being a psychoanalytic psychotherapist, Rita had clients who would trigger her anxiety. From her description, it was clear that she had felt tremendous anxiety during her initial years. She had a client with whom she – “was very, very, very anxious and he made me quite fearful”.(14, 28)

With this anxiety-provoking client, the supervisor had advised her not to ring the client. The supervisor said that Rita was too anxious to ring. She was advised to send a text and the supervisor stated the exact words Rita needed to text to the client. She followed what the supervisor had advised. This, she admitted, lessened her anxiety. She said:

“It is a holding environment, it is a container so it contains your anxieties, it contains your different emotions and feelings. When I feel for her she would contain a lot of my anxieties so in that way I would feel secure”. (18, 29)

Frequent use of the word *anxiety* in the quote, which was frequently used throughout the interview, demonstrated that she was an anxious person. Rita’s anxiety often took the form of self-criticism, as she admitted. Perhaps that is why containing her anxieties made her feel *secure*. However, it would become clear that the containment was not simply related to anxieties arising from clinical work. In addition, there were times when she did not want to discuss her clients; she was fed up, or she was tired or exhausted. Sometimes she had bad days and was not in the mood to talk about her clinic. The supervisor would listen to her and agree to take a break in order to discuss the issues Rita was struggling with at a later date. The supervisor would say:

“Tell me a bit about your life, a bit about what is going on for you at the moment”. (14, 5)

Although Rita could raise personal issues and difficult emotions during supervision, she said she was not comfortable discussing the issues in detail. She was comfortable just talking to her supervisor about how she was feeling and what was happening in her life on a more general basis. There was a sense that her supervision could be about addressing her own anxieties and negative emotions, if she needed help in managing her own emotional experiences.

Likewise, Patricia viewed psychotherapy work as an emotionally charged practice where the analyst’s emotions could be stimulated by the client. She described one of her aggressive clients and the way that client behaved in the session. The client attacked her physically and *I was knocked off my perch really*. Her use of this expression and later narratives revealed the anxiety and fear that she may have experienced. Patricia referred to the emotional aspects of her clinical work in demonstrating how important supervision was for her:

“Sometimes you are carried away with the emotional reaction and that is why it is so important to have a third person {supervisor}”. (31, 8)

Patricia alluded to the emotional consequences of her clinical work (*carried away*) to emphasise the necessity of attending supervision. She also described her supervision as an emotionally-charged practice:

"I suppose you have found this in your own life with your wife and with your family, when you have had an experience as frightening, when you start to tell the experience again the feelings are brought back as if you are being traumatised a second time. So I remember telling him {supervisor} and feeling again the fear really". (21, 10)

Patricia's example i.e., emotional experiences with wife and family, revealed the emotional nature of psychoanalytic supervision. In addition, she used (repeatedly) "You" rather than "I" perhaps because her emotions made her feel uncomfortable. Using "You", was perhaps her way of normalizing her emotional experiences; her way of saying that other people (such as you) may have experienced emotions in the same way she did. Consequently, she could distance herself from her own emotions

Patricia referred to clients of hers who came from chaotic backgrounds and had criminal records. From her point of view, these clients were difficult cases to deal with, however:

"I have found it wonderful just to know again that I am held every month, my person is there and I can spill all this horrible stuff out". (6, 25)

As is clear from the above quote, Patricia seemed to have experienced supervision as a space where she could experience emotional catharsis and process emotions that had stemmed from her work with clients. Patricia's experience of containment as spilling horrible stuff out was very similar to that of Liz. Liz spoke of some challenging clients who may have manipulated her. To demonstrate this, she offered an example:

"I suppose the example that would illustrate it best would be work with clients where it becomes very difficult to contain myself perhaps because of what is going on for them or the amount of projections that are involved in the work, that it can become very stressful or frightening". (41, 15)

The expression *become very stressful or frightening* was indicative of her efforts to highlight challenges she may have experienced when working with the challenging clients. These clients reportedly conveyed, she admitted, a sense that she was not a good therapist or she was unimportant. In her efforts to deal with these clients, Liz emphasised the importance of containment in supervision on several occasions. For example, she said:

“It provides space for me to air out anything that is bothering me in the work. I think what I value most about it is the containment of it I think”. (18, 2) {...} “It has helped me build up my own robustness and work through my own things and therapy of course”. (21, 16)

I could sense the presence of difficult emotions for which she needed *space* i.e., supervision, to *air out anything bothering* her in the work. It was about trying to lighten the load. Considering the powerful effects of clients’ projections on Liz, it is not difficult to guess why she reportedly experienced containment as the most valuable part of supervision. In her interview, when discussing containment, she used certain words such as feeling *empowered, equipped, or being in a sturdier place*; words that reveal how she may have built up her own *robustness*.

Some other participants identified speaking-out in supervision as the process through which they experienced containment. Liam and Michael explained how speaking out in supervision felt containing. Liam discussed difficult work, particularly certain cases i.e., people with severe personality disorders who were hospitalized, to illustrate how containment had been an important experience for him. For him, containment took place through speaking out and disclosing his worries and concerns:

“There is a sense of when you worry about something, when you talk it out it feels, afterwards, that you have unburdened, you have projected some of yourself onto the other person. ...one feels a bit less burdened. If you don't do that you are more likely to carry it in your body, the stuff that is going on with the patients and clients, analysands or whatever, but it feels like it is in your body, in your tummy or your neck. And when you transfer that from the soma, the body, into the verbal it seems to lighten the physical impact so there is less somatisation of what is happening with clients.” (3, 6)

His experience of containment was mainly based on himself revealing his own concerns rather than getting the supervisor’s advice. Using “unburdened” and “projected” conveyed a sense that Liam experienced clinical work as a weight on his shoulders that he was forced to carry. References to “tummy”, “body”, and “neck” suggested that a burden of this kind could impact on his physical health. With regard to his reference to transferring into *verbal* in the aforementioned quote, he, in his interview, used Bion’s phraseology to outline his point. He said, through talking about worries, beta elements became alpha functions; worry became thinking and raw feelings were transformed into thoughts. Supervision conversations seemed to have facilitated this process of verbalizing emotions that could help him with managing his emotions.

Likewise, Michael referred to a process of containment, which was, for him, based on speaking-out. He would feel anxious, particularly during his early days, but supervision

was helpful in containing these anxieties. When talking about containment, he referred to one of his clients with whom he was experiencing difficulties. The client had a problematic relationship with his father and had placed Michael in the position of bad and angry father, and, due to the client's inability to develop a balanced relationship, Michael was never going to be seen as a good father. He brought this (experience of being bad father) to supervision "*Yeah brought that in and it was very clear*". (43, 19)

Based on what he said subsequently, it was clear that psychoanalytic supervision provided him with the necessary space where he could raise and discuss these negative emotions. Speaking-out seemed to have contained him. When he spoke in supervision about himself being emotionally challenged by the client, it helped change the subsequent session's dynamics. It was helpful:

"Once something was out in the room between us it changed the dynamic about what was going on when I went back into the session. Because it was said out in supervision I could go back into the session and just be in a different place with it, not as stuck maybe or as embarrassed or whatever it might be". (27, 16)

The quote reveals how psychoanalytic supervision could give him a space in order to be clear-headed, which indicates the transformative nature of analytic supervision. It sounded like containment empowered him; he was well-equipped to deal with unpleasant emotions; he was no longer struggling with emotions like embarrassment. With regard to the contributions of containment, he said:

"Oh [supervision is] vital, for me I would say absolutely {supervision affected me}, because they contain me. There are various things I do to look after myself in terms of taking breaks or whatever it is or mentally washing my hands when I leave the room and that kind of thing". (22, 33)

The metaphor "mentally washing my hands when leaving the room" suggested that for Michael, analytic supervision prevented therapeutic work from adversely affecting his personal life. This was clear from the following quote:

"I can be quite disturbed if there is a lot of disturbance going on in the work and I can get distracted. So if I go home I mightn't be able to watch television, mightn't be able to engage with my family, whatever it might be". (4, 34)

Here, Michael claims supervision is beneficial from the standpoint of his family relationships. Psychoanalytic supervision was, explicitly, the practice that freed him up. It helped him from constantly thinking about his clinical work. He said that without supervision his mind would be full and he would have been caught up; supervision helped

him unpack it and allowed him to be more available for family members. He continued, saying that knowing he was going to have a supervision relieved him of those mental engagements.

The theme of how containment effects the supervisee's personal life, evident in Michael's account, was addressed by some of the other participants. Patrick, Rob and Teresa made sense of their experiences of being contained by alluding to the effects of psychoanalytic supervision on their personal life. Patrick outlined the emotional experiences that he may have had when working with his clients. He stated that his past personal experiences e.g., childhood difficulties in his relationship with his parents, could be activated by his clients. He could bring these emotional difficulties to supervision and discuss these with the supervisor. His experience of bringing emotional experiences to supervision succeeded in containing his feelings:

"I suppose the aspect of containment is the big thing, feeling contained. So if there is a very difficult case or very difficult aspect, just feeling that there is somebody else there holding it in their mind as well is really helpful I think. That is probably the most helpful thing". (18, 22)

Repetitive use of "very difficult" highlighted the challenging nature of his clinical work. The presence of the supervisor and their containment makes the difficulties bearable. When it comes to what a psychoanalyst supervisee can achieve in supervision, gleaned from the supervisor's psychoanalytic interpretations about the client is usually considered the most important. Although Patrick valued the supervisor's psychoanalytic conceptualizations too: *"That {containment} to me is more important as opposed to the actual interpretation... the containment is a big thing". (38, 23)*

Patrick explicitly stated that containment was the most important part of his supervision experience, and speculated as to whether it was because he felt safe in supervision. It could be suggested that it was the opportunity to deal with his personal issues like his negative experiences from childhood (which were activated by difficult cases) and how they could be brought to supervision and supervision could ground and settle him down, that caused him to perceive psychoanalytic supervision as a safe place. For instance, when discussing difficult clients, Patrick referred to one of his clients who was- *"really horribly ritually abused and that was very, very difficult, very difficult material. It was really difficult to even have in your mind and". (13, 23)*

There is a shift here from "You" to "I". This is important because Patrick was probably experiencing unpleasant emotions when talking about this *poor person*, and I could tell this from his facial expressions and his tone of voice (which went down). I asked how

supervision containment was like for him when working with such a horribly abused client. He answered by saying:

“I feel relieved, I feel really relieved that a weight has been taken off and I am aware as well of the effect that these kind of cases can have on you and how they have a way of slipping out sometimes in your own life. And I have a young enough family so I am always very aware of that and so I feel that is an important thing too, I feel it helps me to kind of protect my family. It helps me to separate out, particularly things of that nature, sexual abuse...”. (20, 24)

Patrick likened difficulties of clinical work to a weight that could impact on professional and personal life. As such, his recollection of containment, similar to Michael, clearly goes beyond professional life. It is not just a professional life which was contained; his personal life and his relationships with family members also benefited from supervision. Psychoanalytic supervision appeared to have helped him separate out work related materials from everyday life. It protects both Patrick and his family.

Likewise, Rob talked about the effects of containment on his personal life. He referred to this aspect of supervision when discussing how he struggled to deal with issues in his personal life. There was a period in Rob’s life, some years ago, when he was going through something very stressful, somebody very close to him was very ill. Bringing this to supervision and discussing it was helpful:

“And that experience was really incredible for me (4, 16) {...} Certainly in relation to when someone belonging to me was very sick, I was very vulnerable at that point and I felt very contained. There is a relief there, there is a sense of being heard.”. (32, 24)

As can be expected, he felt tremendous anxiety in that situation and analytic supervision seemed to have lessened his anxiety. Perhaps that is why he referred to his experience of being contained as relieving: *“It is just containing. There is a relief there, there is a sense of being heard”*. (28, 25)

These were his reasons for seeking supervision. With regard to containment, Rob also discussed challenging clients who triggered unpleasant emotions. Supervision and its containment played an important role when he was at his most stressed and challenged. For example, just before our interview, he had a session with a client who referred to a low-paying job in an impolite way. A close member of Rob’s family had been engaged in similar employment several years previous, and he therefore felt angry with the client. Generally, when working with challenging cases:

“What I needed immediately when I was most stressed and therefore most important was containment”. (22, 23)

Like Patrick and Rob, Teresa referred to the impact psychoanalytic supervision had on her personal life in order to demonstrate how important containment was. She believed that, due to the nature of her work with her clients, her relationships and family-life would have been adversely effected had she not attended supervision. She worked with a particular group of clients with certain conditions. When she described some of the clients she had worked with, it was clear to me that they were highly traumatized people and they had experienced overwhelming traumatic events in their lives. From Teresa’s point of view, normal things and close, family relationships would have become distorted, had she not brought her emotional experiences of working with this certain group of people to supervision, and worked through them. She said:

“Think that {working with clients} can potentially bleed into my personal life, maybe relationships with my children or with my partner and I think supervision helps to catch that and bring it back, ...otherwise I think it would leak much more, seep into my life”. (24, 19)

And:

“So I would have this doubt or this dark thought and I would be able to open up about this in supervision and obviously it would lessen and I would feel more balanced again”. (22, 20)

The quotes convey a sense of the pain of holding emotions and how it could adversely impact on her personal life. Her supervision had perhaps therapeutic functions for her in that it lessened her anxiety and stabilized her. It was therapeutic in that it contributed to the improvement of her relational life through managing her emotions. Her supervision helped her deal with the emotional consequences of her clinical work, which would have otherwise adversely impacted her personal life: *“It helps me not to burn out”. (25, 17)*. Highlighting the therapeutic function of supervision containment was the main theme in Evelyn’s interview too.

Among all the participants, Evelyn, more so than other participants, discussed her experience of being contained in great detail. Considering the heavy emphasis she placed on supervision containment, I speculated, at the beginning, that she would return to this topic again as we proceeded. My expectation turned out to be true as she returned to the topic several times.

After 8 years in psychoanalytic supervision, she began to work with her supervisor who, as Evelyn admitted, was very helpful in the respect that the supervisor contained her. She

had two challenging clients who were traumatized and left Evelyn feeling quite anxious. They lowered her system of *tolerance* and her *thresholds*. She said that:

"Their {two patients} process seemed to catalyse my own process very quickly so that I found that I wasn't separating from them in the sessions".

She was seemingly confused about how to handle the two challenging clients. In these situations, the supervisor reportedly asked questions like where do you feel physically your feelings? At what point do you feel like this, when you are in the room with those clients or now, when you are talking about them with me? The supervisor encouraged her to identify parts of the body involved in emotional experiences. This was helpful for her in managing her emotions:

"So I found it extremely helpful that I was able to connect the headache or the twitch in one of my eyes to the woman's narrative, my client's narrative...But I actually think it was the fact that I could tell her that she was a containing and receptive presence for me, I think that is what helped me to lower my anxiety. And not anything in particular that she said, although what she said of course was useful too". (41, 18)

Evelyn seemed to talk about two aspects of containment here. First was the supervisor, who may have invited her to become introspective and identify physical aspects of her emotions. Second, it was herself speaking out that helped her with managing emotions. However, it is clear that the result of both being introspective and speaking-out were the same. She felt contained and could deal with her emotions and lessen her anxiety. She discussed the effects of containment on managing emotions, which in turn helped her with some physical diseases. She talked about this in more detail later on:

"So I find her extremely containing. When I went to her initially I was actually having quite a few I suppose somatic symptoms, which I now realise was due to over work, I was taking on too much. And I had recurring infection, headache and I knew myself it was to do with accumulative stress. And very soon into this new supervisory relationship I noticed the levels of stress went down quite dramatically". (30, 17)

Supervision, or more specifically containment, has certainly contributed to the harmonization of Evelyn's emotions and her personal health. However, she also pointed out how containment was helpful for her professional life. She described it as the most important feature of supervision for her, and said:

"I think it is the most important because it is the most important function in one's own work as a therapist. And so being contained oneself in the outer circle is essential to bring containment to the inner circle, that is one's work with the client". (8, 31)

The quote suggests that boundaries became circles, with different layers of self freely moving between supervision and therapy sessions. She was clearly trying to highlight the dialectical relationship between the experience of being contained in supervision and the ability to contain the client in therapy. With regard to the contributions of containment to her clinical work, Evelyn also said that it was *validating*:

"It {containment} was validating, it allowed me to grow which of course is what we try to do with our clients, it allowed me to grow. It gave the green light to being good enough...So it made me feel like a good enough, back to Winnicott, a good enough trainee or a good enough therapist in progress". (4, 33)

For Evelyn, analytic supervision appeared to be similar to therapy sessions in that the supervisee, like a client, is helped to grow. Reportedly, this was *validating*, improved her self-esteem and made her see herself as a *good enough therapist*.

The participants' narratives demonstrated that they made sense of their psychoanalytic supervision as a way of *containing difficult emotions*, which helped them with unpleasant emotions. The participants also told stories that revealed that their supervision was helpful with their difficult and unpleasant emotions through a sense of being supported by the supervisor. The next theme elaborates on that aspect of their experiences.

5.1.2.2. *Feeling supported:*

The theme *feeling supported* refers to the participants' experiences of feeling accompanied and sustained. Participants talked about how they experienced support in psychoanalytic psychotherapy supervision. This aspect of supervision was relevant in some situations, situations where the participants faced difficult experiences and needed to be, and were, supported by the supervisor. The participants also highlighted job difficulties, which may have generated difficult emotions. Knowing that the supervisor was there, available and willing to support them, if needed, caused them to feel reassured. Supervision conveyed a sense that the participants were not on their own. A supervision of this kind made them feel sustained, which in turn helped them harmonize their emotional experiences.

For Patricia and Brian, feeling supported sometimes pertained to their experience of having the supervisor available. Patricia mentioned the supervisor's availability and how this made her feel; the fact that someone was accompanying her when she faced

challenging experiences. When she was a beginner therapist, she took on a few clients, one of whom was quite psychotic. From her descriptions of these clients it was clear how challenging they were. This was evident in her remark:

"I don't think I would be able to... I do not think I would have been able to deal with the challenges, especially in my early years of meeting various psychotic, very disturbed suicidal patients without the support of excellent supervisors". (6, 34)

Patricia discussed her early years, but she also discussed difficult cases, such as disturbed clients on the other hand. By referring to difficult situations, she was perhaps trying to highlight the critical supportive role supervision played in her career.

She could ring her supervisor and, for example, reveal the fact that the client *is threatening to commit suicide and what do I do?* Just having that phone number and someone to ring day and night, was *wonderful* for her. The supervisor would call Patricia regularly and guide her step-by-step on how to manage her violent psychotic case. From her description, it was clear that suicidal clients had become a challenging situation for her. Patricia described her feelings as *messianic*; her thought processes were like messianic; the client needed her and she should be available for multiple sessions because the client was going to kill herself or kill somebody else. That appeared to be a parallel process; the client needed to talk to Patricia, while Patricia urgently needed to speak to her supervisor too. What she heard from the supervisor was: *'come on, you are not the Messiah, you are not in charge here just calm down and I will help you step by step.'* The supervisor reminded Patricia that she was not omnipotent and responsible. The supervisor appeared to accompany her on her journey through clinical work, where she perhaps felt helpless as a result of her work with difficult clients. I was curious and asked her about the essence of her experiences. She described it as:

"It is a great comfort to know that I am going to talk to a wiser and more experienced person in two days... that support that you are not on your own when you have a difficult client". (36, 23)

She also said:

"The supervisor is my father figure, my minder. And also just a good support to me and I feel very grateful to it". (11, 7)

Patricia used several words when referring to her analytic supervision. Words like mother, father, older brother, sister, and minder were used to illustrate her perception of the supervisor as somebody who supported her when she needed help. She was not on her own with clinical challenges. There was a supporter in the *background* who she could

contact whenever needed. When talking about the supervisors' support and their availability, Patricia also used words like *consistency* and *fidelity*:

"It is the consistency that no matter what that person will be there for me at that time, that consistency, that fidelity that I think every human heart longs for, there is somebody there just for me for that 50 minutes. That fidelity and that consistency, that is not a matter of ringing up saying, 'I can't be there, I will be away'". (20, 24)

It seems that Patricia was referring to how she could rely on and trust the supervisor. She distinguished it from her usual, day to day life relationships. Perhaps that is why she used "*fidelity*".

Similar to Patricia, Brian spoke of his experience of having the supervisor available and the related sense of support:

"They are a great support because you know you have a supervisor there should you need one and when you need one". (32, 26)

Brian also seemed to have experienced psychoanalytic supervision as a space where he could be sure he was not going to be criticised or dismissed. He described his supervision as supportive and he always felt comfortable in raising and discussing whatever needed to be shared with the supervisor: *I knew it would not be criticised ..I knew it would be done in a respectful way, in an intelligent way". (22, 18)*

Brian discussed the different perspectives he and his supervisor may have held. Reportedly, they may have disagreed on certain clinical issues but, as is evident in the quote above, if disagreements did arise they were dealt with in a respectful way. This made him feel secure and able to rely on the supervisor. The supervisor's support and respect seemed to have been reassuring for Brian:

"I find it quite, in terms of metaphor or picture, I find it quite reassuring, I find it very I suppose supporting in a way that you don't get from other, you know, you don't get it from seminars". (22, 3)

Liam highlighted the supportive aspect of analytic supervision by addressing the supervisor's engagement in collaborative thinking with the supervisee. For him, there was a difference between thinking by yourself and thinking alongside somebody else, namely the supervisor. . He said:

"There is a sense of camaraderie, there is a sense of when you worry about something...The other person {the supervisor} is worrying with you, you are worrying together, or thinking about it". (10, 6)

This is clearly an example of what the participants called 'being accompanied'. Repetition of "worrying" indicates emotional difficulties Liam needed support for. Supervision appeared to be a collaborative work where he and the supervisor co-operated. He and his supervisor are standing side by side. The supervisor is not remaining separate.

The supportive function of psychoanalytic supervision seemed to have been very important to Liam when he worked with violent patients in a hospital. The patients were unpredictable and acting out was very common among them. Dealing with such a disturbed group of people was difficult. He highlighted the importance of receiving support whenever he worked with these patients: "*it {support} was very important*". Liam is retired now and no longer works in the hospital, but he still values supervision. He said that he needed supervision because it conveyed a sense of being supported and sustained by the supervisor:

"I don't have any major sense of discovering something entirely new or different. So that is certainly the case, but nevertheless I think without it it would be a rather lonely experience". (27, 3)

Here, Liam seemed to highlight the objective he wanted to achieve in supervision the most. He didn't necessarily need somebody (a supervisor) to learn from, but rather he needed somebody to support him so he would not be forced to work alone.

Likewise, Rob argued that support was the most important aspect of his supervision experience. It was the result he wanted to obtain the most from his time in supervision:

"I don't want something that just reinforces me, I want something that supports me, is empathic with me". (15, 25)

Rob's emphasise on "empathy" can perhaps be explained by his background, as he came to the psychotherapy profession from a different field, although he had worked with clients in a non-psychoanalytical context. For him, it was necessary for the supervisee to be supported by the supervisor when learning a new way of looking at clinical materials. He explained the concept of support in great detail, using the metaphor of a swimming pool:

"What I mean by supportive is that one can gradually move away and move away from the side of the swimming pool knowing that the analytic supervisor holds one and understands what is happening and supports the actually...and supports me in my development into that deeper area of the pool. Where the risk of getting out of one's depth is mitigated by someone being ready to come in and rescue somebody". (2, 4)

The metaphor of the swimming pool was an interesting juncture in Rob's interview. The notion of moving from one side to the other side of the pool revealed that Rob considered the development of a therapist to be like a journey. It implies that someone is ready to dive in and rescue the swimmer, enabling the swimmer to move forward. Similarly, the supervisor who was ready to save Rob was present and Rob could therefore move on. Feeling supported took different forms. While some participants wanted and valued accompaniment in terms of the supervisor being available, worrying and thinking with them, for Brian support is the one letting him go but ready to rescue him, if needed. In addition, Rob's interview also made it clear that his experience of support seemed to have followed a developmental pattern:

"After I gained the clinical diploma and the relationship became more relaxed, supportive, collegial gradually over time. And there was a change in the dynamic which felt much more freer and supportive". (13, 2)

The aforementioned quotes revealed that the participants made sense of their supervision experiences as *feeling supported*. Similar to feeling supported, the participants told stories about their supervisor and how they helped them gain a more realistic perspective about the difficulties of clinical work. The next theme presents the participants' experience of normalizing difficulties.

5.1.2.3. Normalizing difficulties:

The theme *normalizing difficulties* was identified to highlight supervision experiences pertinent to the participants obtaining a more realistic perspective on clinical difficulties such as the client drop-out and unsuccessful therapies, that helped them manage emotional experiences. Patricia, Rita and Rose's supervisors reportedly tended to share their difficult experiences, similar to those experienced by the other three participants. Based on the participants' narratives, it seemed to me that the participants' supervision was helpful because it resulted in *normalizing difficulties*.

Patricia stated that a function of her supervision was to help her deal more effectively with clinical challenges. One difficulty she found particularly challenging was clients' dropping out. Some of her clients left treatment prematurely and she found that experience difficult to bear. As a therapist, the expectation would be that clients disappearing after a few sessions would have negatively affected her. When discussing the drop-out problem in supervision, the supervisor:

"I think it {supervisor's self-disclosure} helps me hugely. And He will also tell me his vulnerability. When I talked about some client came and then disappeared after three sessions and I tried to work out what I had done wrong. And he immediately said, 'oh yes I have had that experience, someone comes and you think this is really interesting and I am really helping and then they don't come back". (10, 20)

Patricia could have chosen a different example to discuss the normalization process. But, she referred to the drop-out problem, which has been found to be one of the most threatening factors for psychotherapists (Piselli, Halgin & MacEwan, 2011). The issue of the clients leaving treatment prematurely made her feel vulnerable. Perhaps she referred to this problem because she wanted to highlight the important role normalization had played when she was struggling with a major problem – *"I think it {supervisor's self-disclosure} helps me hugely"* (9, 20). For Patricia, the supervisor's disclosure was an act of humility, something necessary for one to flourish. Patricia believed that this created a model for her work, which she found helpful because she looked up to the supervisor.

Rita's experience of psychoanalytic supervision was beneficial in that it reduced her unpleasant emotions, particularly anger, when facing frustrations in her clinical work. From her description of the supervisor, it was evident that her supervisor was very good at helping Rita manage the emotions triggered in her by unsuccessful therapies. The supervisor achieved this by sharing the similar experiences and difficulties she had faced. Rita highlighted supervisory moments where her supervisors shared their own clinical mistakes. When Rita made a mistake. The supervisor would react by saying: *'we are all human*. In addition, the supervisor discussed the mistakes made by famous psychoanalysts:

"I {supervisor} know some of the greatest analysts in the world have made mistakes.' And we often refer to Lacan and all his escapades that he done in his office, and Freud as well, he made his fair share of mistakes too". (38, 6)

I was interested in the essence of Rita's experience. I was curious about what this experience was like for her. She elaborated on it:

"I {supervisor} have made mistakes plenty of times'. And sometimes she {supervisor} would share the mistakes that she made with her clients and she would say, 'I done this the other day and I done that.' And This would really put me at ease, it is fine, I am doing okay, I am making mistakes but it is good, it is fine, we will get over it (18, 18) {...} It is also useful to trash out, in other words to get out your anger, release your anger, your frustration and your annoyance". (19, 19)

There seemed to be a sense of self-doubt in her remarks. Rita seemingly felt dependency. She was uncertain as to whether what she was doing with the client was right. The quote indicates her need for her supervisor's validation and confirmation. It was helpful for her to see the supervisor opening up and to know that her supervisor made clinical mistakes too. This put her *at ease* perhaps because that normalized the difficulties, which was a meaningful aspect of psychoanalytic supervision for Rita. In addition, there seems to be an implicit feeling of shame in this quote and the supervisor's self-disclosure freed her from feeling ashamed and inadequate. The presence of shame in Rita's supervisory experiences was explicit throughout her interview. For instance, she said: "*I was a bit intimidated if I made mistakes in my practice I was very reluctant to tell my supervisor out of fear of being judged. Or if I didn't have any clients again there was that fear of being inadequate*". She was concerned that the "Other" namely the supervisor and their constant judgements. might see her as she see's herself namely inadequate. The supervisor's self-disclosure, as she admitted, was experienced as a lessening of her anxieties and it put her at ease. Her feeling of *ease* was evident in her tone of voice and her demeanour. She was smiling when talking about the supervisor's disclosure and I could recognize how pleasant and helpful this self-disclosure was to her.

To address her experience of the normalization process, Rose referred to one of her male clients she was struggling with. In terms of the fee, she seemed to have given him special treatment. From her description, it appeared that she had become trapped in the relationship and was unable to transition into something resembling a normal, therapeutic relationship. When discussing this case: "*The supervisor then shared with me a time that she had done the same*". (33, 37)

In her interview, she also discussed what this experience (the normalization process) was like for her. She highlighted the benefits of it several times, which is evident from, for example, the quotes below:

"So I think that {disclosure} is useful in supervision (6, 33). {...} it was very nice for the supervisor to share that with me and say this is what happened to me (17, 38). {...} The other bit that I found useful would be when a supervisor would share something about her own experience. (40, 32). {...} I was actually glad about the sharing on her part for that". (36, 38)

As is clear from the quotes, Rose did not use the term "normalization". However, the supervisor did help her understand that the problem she was experiencing with that particular client was not exceptional or unique to her. This seemed to have broadened her perspective and would help normalize the challenge she faced with that particular client.

5.1.2.4. Concluding remarks:

In sum, the super-ordinate theme *harmonising emotional experiences* demonstrated how the participants' supervision experiences may have helped them with emotional difficulties. For the participants, psychoanalytic supervision was like a container that contained their difficult emotional experiences. The atmosphere of supervision was conceptualized as supportive and sustaining. Psychoanalytic supervision also eased and normalized the clinical difficulties, causing strong emotions, they were faced with within their therapy sessions. For all the participants, the outcome of these processes was the same: assistance with harmonizing emotional experiences.

Although the participants of the study talked about the benefits of their analytic supervision, they also addressed some unwanted and unhelpful aspects of their supervision. They complained about frustrating moments in supervision and talked about their struggle with their uncomfortable relationship with the supervisor. The subsequent rest of this chapter presents the participants' narratives about their frustrations and their uncomfortable supervision relationship.

5.1.3. Encountering frustrating moments

Participants discussed their frustrations with their psychoanalytic psychotherapy supervision. The superordinate theme *encountering frustrating moments* conceptualizes the participants' failure to fulfil in meeting their needs in supervision. Their complaints around unmet needs were organized into two themes: *Hurting deprivation* related to their experience of the supervisor withholding positive feedback and reinforcement from the participants. *Disappointment and dissatisfaction* concerned participants' experiences of encountering unsatisfying supervision where they received, for example, disappointing answers to their questions.

5.1.3.1. Hurting deprivation

The first theme that encapsulates the participants' experiences of their frustrations was *hurting deprivation*. Teresa, Michael and Evelyn's stories illustrated how their need and desires to be encouraged and affirmed were left unmet. They felt that their supervisors withheld positive feedback and did not give them reinforcement.

Teresa described her psychoanalytic supervisor as not sufficiently encouraging. Teresa complained and was not happy with the way the supervisor offered her feedback on her work:

“Yes there was never positive feedback so if there was no feedback it was okay, so there was only feedback when it was wrong. There was only feedback to correct” (20, 12).

Teresa distinguished between corrective and positive feedback in order to demonstrate how her supervision lacked positive comments and encouragement. She seemed to be trying to highlight the way the supervisor communicated with her. She needed a supervisor who took a softer approach. Later, she explained this more clearly:

“But she could have softened a little bit, it would have been I think beneficial to have a slightly softer more encouraging approach” (38, 11).

From the language Teresa used in the interview to describe the lack of encouragement, I could sense how frustrated she was with the fact her needs were not being met. She explicitly needed reinforcement and acknowledgement and did not receive what she expected. Perhaps that is why, when I asked her about her reaction to the lack of positive feedback, she said *yes, I just got used to it-* or *Yes, I adapted [laughs]*. There was a sense of learned helplessness, which is a concept psychologically linked to feeling frustrated. People often give up when faced with difficult tasks and repeated frustrations, caused by a lack of encouragement in this case. This frustration and giving-up is evident in Teresa’s expression: *“I just got used to it”*. Teresa was apparently describing an unpleasant experience and her probably passive reaction to it; however, her facial expressions and her laugh were not compatible with her inner feelings. Interestingly, Teresa also began to laugh when she later used the expression *you would be fileted, like a fish [laughs] just like cut-* to express how much her supervision was lacking in encouragement and, at some stages, even criticising. It was clear that Teresa, most likely unconsciously, laughed to cover her anxiety and negative feelings (Frederickson, 2013) about being in supervision with a supervisor who withheld encouragement.

Likewise, Michael’s stories demonstrated his overriding need to be encouraged during the initial years, but his supervisor was not the kind of supervisor to give encouragement. It needs to be noted that when he began to train in the institution, his initial supervisor was supportive and encouraging and seemed to be perhaps the best supervisor Michael had ever worked with. However, this supervisor became seriously ill and died soon after. He was allocated another supervisor, but worried that the new, second supervisor was going to have a different approach to his first one. As he predicted, he had a totally different

experience with the second supervisor. Unlike the deceased one, Michael never received encouragement from the second supervisor:

“A couple of times I would have given interpretations, particularly dream interpretations and felt that it was good and it met all of the pieces and it was some kind of insight on my part, it was just as if it never happened. She wouldn't say it was wrong, that is what I mean by it, if it was wrong she would say it but if it was right she wouldn't say it was wrong.” (9, 29).

The quote indicates simultaneous self-evaluation and expectations. Michael seemed to have thought that he had done a good job and the supervisor would have given him positive feedback. However, the supervisor did not apparently provide the feedback he expected. He said:

“I never experienced encouragement, I was never told that was a really good point, ever. Which is very difficult to take” (28, 12).

There seems to be an unfulfilled wish in this quote. The repetition of “never” and using “ever” illustrate what is probably a total frustration with supervision, particularly its failure to meet Michael's need for encouragement and affirmation. These statements illustrate a major problem Michael had with his supervision. Close to the end of the interview, he returned to this point, which demonstrates how significant this apparent lack of encouragement was in Michael's experience of psychoanalytic supervision:

“It would be very helpful if there was some degree of acknowledgement and encouragement rather than just a kind of a focused on the material. So that piece, that is not helpful” (33, 29).

With regard to Michael's experience, two things in particular struck me: the first one was the words used to describe how his supervisor failed to praise or encourage e.g., *filleting* (a fish), or *awful*. The expression filleting a fish suggests that the supervisor was not encouraging him, which made his experience of supervision hurtful. To fillet a fish includes cutting out its backbone and removing the supportive skeleton. In this case, Michael's choice of expression clearly indicates that he feels as if he has been taken asunder and left without any supports. The second was that Michael announced that the lack of encouragement was an unsatisfactory feature of his supervision. These two points reveal how a lack of encouragement from his supervisor stimulated unpleasant emotions in Michael.

Receiving no encouragement appeared to have been an important supervision experience for Evelyn too. Evelyn's stories about not receiving positive feedback were very similar to those of Michael and Teresa:

"I felt there was never really approval and if there was it was very implicit, it was never spoken. (2, 5) {...} So not giving any reassurance, not giving any praise. Being perhaps quick to point out what was wrong, being slow to point out what was right" (13, 5).

When describing these experiences and trying to explain and justify her view on psychoanalytic supervision, Evelyn used theoretical concepts. She believed that offering no encouragement stemmed from the supervisor's theoretical approach i.e., Kleinian, and it was Kleinian theories that informed this *depriving* supervisor. It occurred to me that perhaps her rationalization was a way of reducing anxieties caused by the supervisor. Clearly, Evelyn found it difficult to get along with her supervisor. Evelyn referred to the lack of encouragement as *harshness*. She thought it was an example of harshness because, although she was a student, she was not that much younger than the supervisor. It appeared that Evelyn was trying to say that when the supervisee and the supervisor are almost the same age, both should acknowledge the fact, and a lack of acknowledgment, as well as a lack of encouragement, makes for an unsatisfactory experience of supervision.

The participants' aforementioned quotes revealed their supervision encounter to be *hurting deprivation*. In addition, they complained about their dissatisfaction with their supervision and how they, sometimes, left their supervision while their questions remained unanswered. It is the aim of the next theme to explain their experience of not receiving convincing answers for their questions.

5.1.3.2. Disappointment and dissatisfaction:

The theme *disappointment and dissatisfaction* refers to how participants felt either their supervisor or their overall experience of psychoanalytic psychotherapy supervision was unable to provide answers. The participants could bring their issues to supervision, but sometimes supervision was disappointing, and their questions turned out to be unanswerable and they went away without the answers they needed. For Brian, this experience was the fault of the supervisor i.e., the supervisor was unable to address his questions, whereas for Liam and Liz, it was the fault of both the supervisor and the analytic theory that informed the supervision i.e., either the formal theory lacks an answer, or the

supervisor does not know the answer. Mark's failure to have his questions answered was mainly related to the shortness of his supervision sessions.

On certain occasions, Brian went into supervision with some specific questions, for which he did not receive answers. He may have had issues with a client which he hoped supervision would help him make sense of. He admitted that sometimes supervision was unable to provide answers for some clinical issues. He referred to this experience as frustrating:

"There are times when you go with an issue where there is no easy answer so you come away frustrated. So supervision doesn't answer all questions" (33, 20).

And:

"You have shared the frustration you might have at not being able to come to your own answer and then you go to supervision and you realise well the supervisor on this occasion probably doesn't have the answer either" (38, 12).

The quote illustrates Brian's dissatisfaction and disappointment with supervision. The word "frustration" reflects how he failed to receive answers to his questions and how supervision was unable to fulfil him. For Brian, the supervisor appears to have been somebody who is supposed to know the answers. He hoped that supervision was going to help him solve clinical issues. However, sometimes the result was not as good as he had hoped. He came to the realisation that supervision was not going to answer all his questions. One of his clients suffered from relational problems. The client had great difficulty relating, and was unable to form satisfactory relationships with others. He raised this case in supervision, but the supervisor did not have the answer. Brian referenced clients who were difficult in various ways in order to demonstrate how ineffective his supervisor often was. He said: *"The supervisor might be as puzzled as you are"* (17, 21).

Liam discussed various schools of psychoanalysis, which informed different approaches to psychoanalytic supervision, as theories with their own limitations. They have *-no monopoly on truth*. Based on his experiences, he did not believe that psychoanalysis is the only way to examine and understand the human psyche. As a result:

"So I allow myself to be influenced by many other currents including biology and genetics" (10, 28).

Liam is clearly addressing the limitations of psychoanalysis and psychoanalytic supervision. Interestingly, he did not just refer to the deficits and inadequacies of particular psychoanalytic theories, he also discussed the fact there are so many different theories.

When the supervisor is armed with too many theories, she/he can be blinded by them and fail to see the supervisee.

Liam seemed to have experienced some of his supervisors as practitioners with limited visions. They, unlike Liam, could not speak different languages and were therefore unaware of how analysis conducted by analysts varies from country to country. When he was discussing the limitations of psychoanalytic supervisors in addressing some clinical issues, I felt that he viewed these limitations as an unavoidable part of supervision, as illustrated in the quote below:

"I mean one is not going to get a perfect supervisor, there is no more than a perfect psychoanalyst, they don't exist" (13, 31).

This conveys a sense that Liam had apparently come to the realization that psychoanalytic supervision had its own limitations; he was not going to obtain all he needed. Thus, this frustration and disappointment had been an element of his supervision experiences. Similar to Brian and Liam, Liz discussed the limitations she had encountered in her supervision. She used the phrase "theoretical blind spots" to illustrate those limits. For Liz, there were two types of blind spots; one was emotional i.e., individual, and the other was theoretical blind spots. The latter one refers to certain conditions where no structure or theoretical framework of understanding has been developed. For Liz, that was *like feeling that we are stuck or going around in circles*. The expression "going around in circles" is typically used when people, in this case Liz, are pessimistic about a positive outcome; when there is no hope; when there is frustrations. She referenced children with autistic parents, as an example, to demonstrate theoretical blind spots. There is no theory capable of fully understanding how these children, think, behave, perceive how relationships work etc:

"I haven't come across a theory or a piece of research that talks about that {children with autistic parents} and how that translates into a therapeutic relationship" (2, 10).

Liz later added:

"There is a huge gap in psychoanalytic theory for modern day expressions of sexuality, the internet, communication electronically as opposed to people relating that way as opposed to multiculturalism". (16, 10)

This quote indicated that what Liz was discussing transcended the theory-practice gap that supervision is supposed to cover. Her complaints were actually about the lack of psychoanalytic theory when it came to understanding certain phenomena. Liz was aware

of this inadequacy in theory. She was therefore aware of the fact that she was not going to receive answers for all her questions. This was clear when she said:

“There is the realisation that my supervisor is not, doesn't know everything either and there isn't the theory for everything either”. (27, 9)

Liz noted, throughout her interview, that the lack of a formal psychoanalytic theory was the only limitation in her supervision. However, her remark *my supervisor is not, doesn't know everything either-* revealed that it was not simply just theoretical blind spots that were preventing her receiving the answers. Receiving no answers for some questions may have been the fault of the supervisor too. She hinted at this in her remark:

“The only limitation of it is that it doesn't have all the answers, that there are things that there aren't the theories for or he doesn't know the theories for”. (20, 22)

Using Liz's own terminology, the supervisor, similar to the formal analytic theory, appeared to have their own *blind spots*. Similar to the theoretical blind spots, the supervisor's blind spots seemed to have prevented Liz from obtaining answers for some of her questions.

Mark's frustration to have his questions answered was mainly related to his short time supervision sessions. He made it clear that he and his supervisor had agreed to have one-hour sessions. However, their sessions rarely took one hour. Sometimes, Mark's supervisor ended their sessions directly after giving an insight into, or uncovering something important about, the client, while Mark's questions had not been solved yet. This was unsatisfactory and he remarked:

“The idea that a supervision session would be treated almost like an analytic session where the moment of insight is the moment to conclude is not something that I would find particularly satisfying”. (23, 32).

And:

“To leave a supervision session on an enigmatic ending for me is unsatisfactory. To leave an analytic session with an enigmatic ending, that is different, that gives rise to different questions”. (23, 33).

Mark distinguished between supervision and personal analysis. While the former one could be conducted in a short session, the latter one could not. Short sessions were common in the psychoanalytic approach Mark practiced; however, unlike short psychoanalytic sessions that leave the client with unanswered questions, he did not think that the same rule could be applied to supervision. What was satisfying in therapy sessions appear to be dissatisfying when it comes to supervisory sessions. As the quote suggests,

short sessions with enigmatic endings did not make him think, while, in analytic sessions, they could have. Short sessions clearly caused him to feel, as he admitted, unsatisfactory. The enigmatic quality that may be created by cutting a psychotherapy session was not welcome when it came to a supervision session. This emphasised the different expectations participants put on personal therapy and supervision. The former is recognised as somewhere provocative questions about the self can be raised, while the former is somewhere questions about the client can be answered. He never discussed this with his supervisor. Rather, he used to reflect on it after the sessions were over:

“What I try to do is maybe think about it so I spend the hour's journey in the car either home or where I am going to work thinking about it”. (31, 33).

However, I think there was more to what Mark was saying than an unhappiness with short sessions and being left with unanswered questions. He was also drawing attention to the fact that, after his session had ended, he would ruminate and brood over how unsatisfactory it had been. In his attempts to get to his supervision session in time, Mark had spent about an hour in heavy traffic, and he expected the supervisor to recognize his efforts. As discussed later within the theme *holding back*, he did not bring up this issue to supervision. However, as the session was over so quickly, Mark seemingly felt that he had been treated unfairly. It was probably an emotionally difficult experience for Mark. It is evident that his unsatisfactory experiences induced intensified emotions. Perhaps this can explain why he brooded over how unsatisfactory his experience with supervision was when he was back in his car.

Similar to Mark, Ann complained about short sessions. She likened supervision to exercise; she felt the sessions had been ineffective, mainly due to their short time-span. Using the expression ‘going through the motions’, she tried to conceptualize her experience of being in short sessions. She suggested that a short session was not an encounter that could be of any benefit to her. She said:

“Honestly I didn't feel it was value for money because he only worked by the half hour, which again is kind of a parody of the analytic session, the so called short Lacanian sessions, half an hour is ridiculous for supervision”. (19, 19).

Like Mark, Ann clearly distinguished between a psychoanalytic session and a psychoanalytic supervision. I sensed that Ann was trying to say that insisting on such short supervision sessions was unfair on her. She was mistreated as a customer. In addition, considering the strong words Ann used i.e., *parody of the analytic session* and *ridiculous*, it appeared that she may have been annoyed and even enraged by the supervisor cutting the sessions short.

Ann is a supervisor too, and referred to the way she operates as a supervisor to illustrate how, in her view, a proper supervisory session could not be conducted within a short time-frame. She suggested that supervision should be sufficiently long enough so:

“You can really develop your thoughts on a case or even maybe two or three cases, you can speak a bit about each one. But half an hour, that wasn't helpful”. (31, 19).

Ann was trying to illustrate how time constraints negatively affected the quality of supervision she received. In her interview, she mentioned how they chatted for 20 minutes before they addressed the supervisory materials. Her intention was to illustrate how insufficient the time allocated to the supervision was, and how unsatisfactory short sessions have been for her. Otherwise, she would have received more from supervision.

5.1.3.3. Concluding remarks

To sum up, participants made sense of their psychoanalytic psychotherapy supervision as a place where they encountered and experienced frustrating moments. The participants' stories reflected their needs and they expected praise, affirmation, approval, and encouragement from their supervisor. But their supervision was experienced as hurtful deprivation in that the supervisor left their needs unmet. In addition, they discussed the supervisory moments which caused their supervision to be unsatisfactory. Considering the notion parallel process, it can be suggested that these negative experiences may be transferred, by the therapist supervisees, to and enacted on during therapy sessions. The next theme presents the participants' stories around their complaints about their uncomfortable supervision relationship.

5.1.4. Grappling with relational experiences

Participants highlighted challenges related to their relationship with their supervisor. The superordinate theme *grappling with relational experiences* pertained to aspects of the participants' narratives that addressed their struggles with sustaining a positive relationship with their supervisors. These experiences were represented by two themes: *Holding back* which relates to how participants tried to avoid sharing with their supervisor, for example, supervision transference. *Struggling with power*, which concerns the hierarchical nature of their psychoanalytic supervision relationship..

5.1.4.1. Holding back

The theme *holding back* related to participants' experience with the difficulty of opening up in supervision. Participants told stories that revealed their fear of opening up, in early years of their career, when, from their point of view, it was difficult to share with the supervisor certain experiences, because of the feelings the supervisor provoked in them i.e., supervision transference. Avoiding disclosure could also be connected with the tendency of some supervisee's to edit verbatim notes in order to be seen as a competent therapist, which was explicitly a form of *performance*. To achieve this, they may have excluded, for example, clinical mistakes that they had made in their clinical work. Some other participants also alluded to feelings stimulated by clients, which were difficult for them to share with the supervisor.

Mark, Teresa, Rita, and Rose explained, in great detail, the supervisory experiences they found difficult to share with their respective supervisor. Although the four participants referenced different types of undisclosed material, they all appeared to have avoided disclosing their feelings toward the supervisor i.e., supervision transference. They alluded to feelings provoked by the supervisor and explained how they were reluctant to bring their transference to supervision discussions.

Mark admitted to the presence of supervision transference in his supervision, as well as a simultaneous reluctance to share it with the supervisor. He chose an example to illustrate how he experienced his transference to the supervisor. He recalled an incident where he was annoyed by the supervisor and the way the supervisor was behaving toward him. One week, after arriving at his supervisor's door for a session (the previous session had been cancelled) the supervisor delayed in answering the door. This made him *angry*. He was nonetheless reluctant to raise those feelings with his supervisor. He speculated that he was not going to be heard by the supervisor:

"If I said, 'I am really annoyed that you made me wait for so long to answer the door.' I wouldn't expect an explanation on the part of my supervisor, I wouldn't expect her to say, 'sorry I was in the toilet, I was busy doing something else.' I would only expect further enquiry about my emotional state, and maybe not even that". (29, 22)

There seemed to be confusion around the boundaries between psychoanalysis and psychoanalytic supervision. Mark didn't feel sufficiently comfortable in his relationship with his supervisor to reveal his own feelings toward the supervisor. He repeatedly mentioned the fact that he was not interested in expressing his feelings- *And the last thing I wanted was to have that focus being back on me*. Consequently, there was no point in disclosing the feelings provoked by the supervisor.

Mark also appeared to struggle with opening up when it came to aspects of his supervision that were, from his point of view, not *satisfying*. I asked him about his reactions to aspects of his supervision that were less than satisfactory and whether his perspective was shared by the supervisor:

"No I don't say, 'hold on, I want you to clarify that.' I don't say that". (30-34)

An idiographic aspect of Mark's experiences of holding back was that, while other participants generally demonstrated a willingness to share their undisclosed information and unpleasant feelings to the supervisor, Mark basically rejected the idea that psychoanalytic supervision was a place where the supervisee can reveal their own feelings, including anxieties or feelings toward the supervisor in supervision. As a result, he thought censoring information pertinent to the supervisee was the correct course of action to take. Psychoanalytic supervision, in Mark's eyes, has nothing to do with the supervisee's *countertransference*, because everything related to the supervisee should be taken to personal analysis. Otherwise supervision would become experiential:

"It also makes supervision a much more experiential process, you know, to engage with yourself ... in that way makes it a more experiential process which I don't necessarily, which I wouldn't necessarily look for. I wouldn't pursue that as a way of being supervised". (28, 25)

This is a clear indication that, for Mark, the client is the only one analytic supervision can be dedicated to. This indicated that for him supervision has little to do with the supervisee's countertransference. As such countertransference thoughts and feelings should be withheld from the supervisor.

Teresa's difficulty with opening up appeared to centre mainly around her feelings toward the supervisor and her own personal and private beliefs. She admitted that she had experienced supervision transference. From her descriptions, it was clear that she would have experienced the supervisor as a punitive figure and would have developed negative supervision transference. However, she found it difficult to share them with the supervisor.

"For many, many years, probably for maybe eight years, a long time, seven or eight, I did have a very particular transference to her and it was kind of maybe maternal or super ego but I wouldn't have had that conversation with her" (11, 8).

Referring to the supervisor as super-ego suggests that she was probably fearful while in supervision. She perhaps feared the supervisor's reaction should she have disclosed her transference feelings. She was not comfortable discussing her feelings openly and this

prevented her from discussing supervision transference. When asked whether she had brought those feelings to supervision, she responded: *“No I haven’t done that.”* (37, 16)

In addition to supervision transference, Teresa also discussed how she tried to avoid raising anything personal related to herself in supervision, unless she knew what exactly it was. If the personal thing was, from her point of view, unconscious, she would feel *uneasy* about raising it in supervision. These materials may have exposed her emotionally, and she was therefore reluctant to discuss, for example, her personal beliefs. Teresa repeatedly pointed this out:

“And that would usually be something that might be personal to me rather than a clinical professional skill based thing. So the clinical professional skill based things I am always happy to bring but maybe something more personal, I might be uneasy”. (3, 16)

Teresa went on to explain, in detail, what she had precisely meant by personal and private things. She pinpointed her spiritual beliefs, which had been quite an important part of her life. However, she avoided discussing them in supervision:

“I knew from interpretations of other client’s material that she would see that as magical thinking. So in that way I wouldn’t, so that is an example”. (32, 17)

There seems to be evidence of an identification in the quote. Teresa saw similarities between herself and her clients. Because of these similarities, she felt she could learn from the clients’ experiences. Similar to her clients, she knew what was going to happen if she disclosed those beliefs. The supervisor was going to interpret them, rather than hear and acknowledge them. It was not difficult to speculate what her reactions would have been had the supervisor been dismissive. She said:

“Well what I did was I had to keep that separate then so I didn’t bring it in so it maybe keeps this outside probably to protect me and to protect it. (1, 18) {...} It is not that I hid or it is not that I would deny but I wouldn’t bring it in, I wouldn’t discuss it as part of the clinical aspect because I think it would just be dismissed, so there would be no point” (39, 17).

It is evident that Teresa withheld certain types of information. She explicitly stated that her relationship with her supervisor was the principle barrier to disclosure. Perhaps that is why she could easily disclose to her colleagues because *the relationships are peer so they are even*.

Rita referred to the initial years of her supervision when elaborating on her difficulties about opening up in supervision. She addressed things she did not feel comfortable enough to raise. She discussed some of her *whinges* around supervision and how she may have

discussed them in personal analysis with her analyst rather than in supervision with her supervisor. It was easier for Rita to address her supervision experiences in her personal analysis. When asked whether she discussed her experiences in supervision with the supervisor, her response was:

“No, interestingly I don’t, and I don’t think it is because I don’t want to. I am not sure why, I have just never talked about it. It is something that I am not comfortable openly discussing those feelings”. (40, 24)

There is a sense of hesitation in Rita’s statement. She clearly did not discuss her experiences in supervision with the supervisor, but it is not clear whether it was because she felt uncomfortable. Nevertheless, Rita later mentioned how she had come to the realization that disclosing to the supervisor was not going to be beneficial for her. She admitted that, on occasion, she was very anxious about certain things, and while she was not afraid, she was reluctant to share that information with the supervisor:

“Because she {supervisor} might say it is fine, get over it, you need to push through this and you need to fight your anxiety, let it go. And I suppose for someone who suffers with anxiety, when people turn around and say to you, ‘it is fine, don’t worry.’ It has the opposite effect, you do worry. For someone with an anxiety disorder it is very difficult”. (34, 24)

The two last quotes contradict each other: on the one hand, in the preceding quote, Rita did not feel comfortable enough to discuss her experiences in supervision; on the other hand, in the last quote, she claimed there was no point disclosing this. It seemed to me that Rita’s main reason for avoiding disclosure was her own anxieties, because she iteratively described herself as an anxious person; this was evident, for example, at the end of the quote (*someone with an anxiety disorder*). Psychoanalytic supervision was not a comfortable enough place to allow her easily open up.

She had also found it difficult to share with her supervisor details of clinical mistakes that she may have made in her clinical work. *I have felt nervous and I have felt anxious about talking {about mistakes}*. In this case, it is evident that Rita’s anxieties would have been a barrier to self-disclosure.

From Rita’s interview, it was clear that she avoided disclosure mainly in her initial years, when her relationship with her supervisor would not have been at its most robust. When Rita was asked to distinguish her initial from her later experiences in supervision, she referred to how her relationship developed over time, and explained how, owing to the fact that it had recently been enhanced, it was now easier to share previously undisclosed information.

Likewise, Rose's recollection of her analytic supervision illustrated how she sometimes withheld information from her supervisor during those initial years. She discussed her supervision relationship and how she avoided discussing relational issues with the supervisor. She never discussed those feelings, despite the fact she found it an interesting topic to discuss and think about:

"I have never discussed those feelings, I have acted on them, but never discussed them for what they are, let us name this and what is going here is the transference bit, which is actually really interesting... so I would have reacted in terms of getting upset, crying, shouting, using bad language so she was very aware of my feelings but we never discussed that in terms of perhaps what is happening here and we didn't analyse ourselves in the process". (37, 26)

The quote clearly illustrates her transference feelings towards the supervisor. Her saying "acted on them." demonstrates the unconscious feature of her experiences. Likewise, remarks such as "never discussed them for what they are, let us name this and what is going here is the transference bit" reveals her nonverbal and unsymbolized feelings, which is the core feature of transference. She experiences this process through her dissociated mood (e.g., *upset*), affective and body states (e.g., *crying and shouting*), as opposed to verbal and cognitive processes. The words included in the above quote (*getting upset, crying, shouting, using bad language*) convey the kind of strong emotions she experienced in supervision transference. In addition, getting upset, crying, shouting, using bad language all appear like a regression, a feature of transference, in essence this is how the infant in a state of anxiety responds to the mother. These feelings were seemingly neglected by the supervisor who *was very aware of my feelings*. Rose seemed to have interpreted her supervision as a space where her feelings were not understood.

In addition to supervision transference, Rose struggled with the reality of her clinical work i.e., what she actually did in therapy. She always tried to demonstrate how her interventions conformed to the advice provided by the supervisor. She had a male client who classified himself as homosexual, and often had erotic dreams and homosexual fantasies. In one of their sessions, the client began to describe a dream that involved priests and the priesthood; the theme of corruption in the Irish priesthood and homosexuality in the priesthood ran through the dream. Rose offered an interpretation that included sexual contents; however, she did not want to share this with the supervisor:

"So I didn't want to say my interpretation was I am the horny priest. So I edited it to something different, something about a sexual excitation in the room or something like that". (49, 14)

In the initial years, she was supposed to write verbatim notes and present them in supervision. She appeared to edit out the notes. In her interview, Rose used the term *false* (self) to describe how she edited verbatim notes in order to demonstrate how competent a therapist she was:

"I would be very careful about when I am writing that down, again in the early days with her, will I write that down? Because I was in training will I try to portray myself as being better than, particularly if I knew I had made a mistake" (20, 14).

What Rose said here constitutes a kind of performance. She was *desperately trying very, very hard to show how serious I was*. She had hoped that the supervisor would have perceived her as *disciplined* and *diligent*. This suggests that Rose probably had an overriding need to be seen as a good therapist and she *wanted to present as the good supervisee*.

Likewise, editing case reports was found to be an important part of Patricia's undisclosed information. In her interview, Patricia referenced, on several occasions, her experience of an overriding need to impress the supervisor during her initial years, when she was a beginner and novice therapist. She used the metaphor *the best girl* to illustrate how she had tried to be seen as a good 'girl' and therapist. She recalled incidents where she performed during supervision and tried to withhold her clinical mistakes from the supervisor. She, like Rose, was required to prepare verbatim reports of her clients and present them in supervision. She deliberately edited out certain details:

"I was editing out the verbatim thing, I wasn't letting her know the mistakes I was making because I was trying to impress her {...} I think I was in my first few years with that woman, maybe anxious that she {supervisor} might find out how bad I was and how little I knew. Yes I think I probably was and I had this overriding need to impress her about how good I was." (2, 16).

Patricia seemed to have experienced anxiety and perhaps shame. It made her anxious to think about how the supervisor might have considered her clinical competency. She would have tried to develop a seemingly false self to *impress* her supervisor. As is evident from the quote, Patricia nonetheless emphasized that this experience was related to a certain period of her professional life. She also said:

"if I were 30, if you {the interviewer} had got me when I was 30 I'd be saying yes I have piles of undisclosed material" (6, 30).

Patricia makes a comparison to highlight her *dishonesty* and the efforts she made to perform during her initial years. In addition, Patricia used the expression "*piles of*

undisclosed material” to illustrate how she avoided disclosure. Although this expression may seem like an exaggeration, it suggests that performing and her struggles with opening up was a meaningful experience for her during her initial supervision.

Patricia did not directly describe how the *holding back* experience was for her. However, she revealed it indirectly, when she discussed how other supervisees avoided sharing information with their supervisor. When I discussed a recently published article that found that experienced psychotherapists tended to avoid disclosure to the supervisor, her reaction to the article illustrated how unpleasant the initial holding back was for her. She said:

“So it makes me sad to think that he found a lot of people who are psychotherapists but who didn't see the value to themselves or to their supervisor of being open about their negative experiences” (47, 32).

Some other participants highlighted their feelings of embarrassment. Patrick, Michael and Liam had quite similar experiences of avoiding disclosure, which were characterised by feelings of embarrassment. They all found it difficult to disclose the erotic transference and countertransference that they had experienced in their clinical work.

Patrick admitted that he may have excluded some information from his supervision, because he distinguished between supervision and personal analysis and described them as two distinct areas. As a result, less of him i.e., his own psyche, was present in supervision -*I was always watching out not to be pulled in too much to things*. On occasion, his supervisor was eager to know more about Patrick himself:

“Which I wasn't entirely comfortable revealing those aspects of my own history, psyche... I would bring them into my analysis and talk about them but there was a sense in some way that this needed to be talked about in supervision and I never felt comfortable about that.” (18, 7).

He also said:

“Yes I can tell you about difficult feelings and maybe sexual feelings towards a patient. Very strong feelings of hate towards a patient. And that is always difficult to bring” (6, 8).

Patrick's stories, with their sexual themes and feelings of hatred, were paralleled by Michael. Considering Michael's agenda for supervision that he elaborated on throughout the interview i.e., discussing everything, I did not expect the issue of avoiding disclosure to be important aspect of his supervision. However, that assumption by me proved to be

wrong. He referred to countertransference feelings that may have been stimulated and came up partly from the client. He explicated his undisclosed feelings as follows:

“Sexual transference, very overt would be one. And the other was quite the opposite, it was a very, very negative I hate being here, I don't even like you, I don't know why I come here, it is very difficult to talk about and to think about. So yeah they are the two examples, there was probably other things as well” (25, 15).

Considering the non-disclosure stories told by other participants, it is understandable why he perhaps felt too embarrassed to discuss his sexual feelings. The other part of the quote referred to his feelings of hate toward the supervisor. It appeared he was not comfortable with discussing therapy countertransference (his sexual feelings towards the patient) and supervision transference (his feelings toward the supervisor).

To elaborate on his undisclosed information in supervision, Liam went back to his initial years, when he was new to the field of psychotherapy and supervision. He believed that then, it would have been difficult to express features of his self, his thoughts for example, during early days. He was afraid that he might have learned *something about myself that I didn't like* [laugh]. He was talking explicitly about self-exploration and his reluctance to do that.

Liam also discussed the feelings he may have experienced in his clinical work. He said that *people* may find it difficult to share their own, or their clients', erotic feelings:

“I think what people often did not discuss would be things like an erotic transference or even kind of erotic countertransference feelings. That would often not be... I think they are the kind of things.. people because they would, I think they would feel uncomfortable.” (43, 15)

And:

“There was a lack of comfort... in the early days there was a huge difficulty in talking about anything to do with sexuality either for the transference or the countertransference and so you tend not to talk about those things”. (23, 16)

His tendency to use “people” and “you” rather than “I” was an indication of unease; he was not comfortable with discussing his own erotic feelings. Perhaps, this shift from “I” to neutral pronouns helped him distance himself from his own experiences. It realized that when he used the word ‘people’, he was actually referring to himself.

As with other participants, words like *comfort* and phrases like *early days* feature in Liam's descriptions of his experience of holding back. In Liam's initial years, he was in training

and their supervision relationship would have been a training-based relationship. As a result, he was unlikely to be balanced and comfortable enough in his relationship with his supervisor to discuss sensitive and provocative topics like sexual attraction or feelings of hatred.

Evelyn, when discussing her experiences, referred to withholding some of her interventions from her supervisor. Unlike Patricia and Rita, she considered her interventions to be appropriate, rather than clinical mistakes. However, she did think the supervisor would consider them inappropriate. For example, she rarely brought her personal narratives and beliefs into the therapy room. Occasionally, if the client was from a different place geographically, she may have shared them with the client. However, *I wouldn't have mentioned to the supervisor.*

Evelyn presented examples that clearly demonstrate what kind of information she may have excluded from her supervision. For example, if she did not charge the client the normal fee, she would not share this information with the supervisor *I would have kept all of these things out of my weekly sessions {...} I didn't like to mention it and indeed I didn't mention it.* She also said:

"I think in some of the earlier examples you will probably see some of this anyway that if they hadn't the money I wouldn't mention that to my supervisor. If they came late I wouldn't mention it. If I gave them a lot of reassurance and kindness and compassion I wouldn't mention that" (37, 21)

These examples shed light on Evelyn's experience with avoiding disclosure. They all seemed to have related to issues and details that Evelyn and the supervisor may have had different perspectives on. The examples indicated her desire to be independent and demonstrated how she may have tried to independently decide on how to act in therapy sessions. This issue of how participants struggled to be independent therapists and develop their own professional identity is discussed in great detail in the next theme.

Taking aforementioned together, a meaningful aspect of the participants' supervision experiences was their uncomfortable relationship that caused them *holding back*. A relationship of this kind also made them struggle with power in their relationship with their supervisors.

5.1.4.2. Struggling with power:

The theme *struggling with power* related to how the participants' narratives reflected an inequality in the supervisory relationship. Participants told stories that illustrated their experience of struggling with their authoritarian supervisors. In their interviews, they shared experiences that illuminated how their hierarchical relationship with the supervisor affected their experience of psychoanalytic supervision, and even in one case (Simon) resulted in the termination of supervision. Their experiences highlighted their need for their views to be given weight by the supervisor, and their need to develop their own version of what it meant to be a therapist. Their stories were very similar, even though some subtle differences could be, and have been, identified.

Rita, Patrick and Liam's experiences of power-based relationships were represented by their struggle with the rigidity of formal theory and the inflexibility of the supervisor. They were often prevented from pursuing their own way of working and were expected by their supervisors to exactly follow what formal theory and supervisors advised. They experienced their supervision relationship as authoritarian. Rita alluded to moments in her supervision where she may have found it difficult to follow predetermined theoretical rules and *I was very anxious about having to play by the rules and having to be strictly Lacanian.* (41, 17). She questioned that rigidity and argued that, sometimes, she needed to give voice to and act based on her own perspective, rather than strictly following the supervisor. However, the supervisor's reaction *upset* her:

"Very early in my days I would have seen a client ... I offered them a glass of water and again starting out very Lacanian I brought this to her, I said it to her and she said, 'that is it, you have lost the client, you have lost her.' And I immediately got upset with that." (29, 18)

Offering a glass of water contradicts Lacanian rules. This apparently revealed Rita's desire for being free of the formal theory and the supervisor's expectations. However, the supervisor's reaction was seemingly authoritarian that neglected and dismissed Rita's personal perspective. As it is evident in the quote, Rita's fear of deviating from formal theory and the supervisor's demands and pursuing personal views could be traced back to her initial years of supervision. This experience was perhaps mediated by the degree to which she developed a good relationship with her supervisor, given she said:

"As the relationship has progressed she has learned what I am like and what I can take and how to talk to me". (15, 21)

This suggested that the way the supervisor communicated with Rita changed over time. The supervisor got to know her better and responded more sensitively to her; the relationship probably became more balanced.

Patrick's supervision during his initial years was *more didactic*. In comparison to his current supervision, he described his initial supervision as *kind of dead*. He argued that hierarchical dynamics characterised his relationship with his first supervisor. He repeatedly complained about this supervisor and their supervision relationship, where he seemed not to have had his own voice:

"The first supervisor was a very formative influence on my development as a therapist, a huge influence. So it made it tricky and I found it hard then sometimes to have my own voice in it" (26, 9).

In his interview, Patrick made it clear how his initial supervisor did not give him room and expected him to strictly follow formal theory when working with clients. Sometimes giving up his view and following formal theory turned out to be very difficult for him. This was evident from an example he offered:

"It is like if you are working with a child and the child was engaging in self-harm behaviour, banging their head off a wall. Would you stand there and watch them do it?" (33, 31).

The example suggested the presence of a tension and strong urge. Similar to an urgent action required when a child is banging their head off a wall, he clearly felt an urge to transcend formal theory in order to help his client who self-harmed. Patrick said that if he had preformed a certain action that he thought was correct but may have been an inappropriate intervention within the perimeters of the formal theory, the supervisor would disagree:

"And I found that difficult because for so long I had been told Don't do anything like that, don't act, don't interfere, who are you to do that, to interfere in a person's life". (26, 31)

The supervisor's remarks such as *who are you to do that* sounded like orders from an authoritarian figure. It clearly reveals a hierarchical relationship. This can be inferred from the words he used when referring to his relationship of this kind: *didactic, training-based supervision, teacher-student relation, persecutory, punitive, overly critical, and restrictive*. Considering these strong words, I was curious how this experience was like for him. It turned out to be *very frustrating, very frustrating*. It made him feel *shut down*.

Liam observed that the only thing he had found himself struggling with was his desire to have his own voice. He has worked with different supervisors, some of whom were *limited* supervisors, inflexibly bound by formal theories. They prevented Liam from having his own independence and power. He perceived this as *hostility*. Liam likened those particular supervisors, and that particular style of supervision, to *Procrustes* from Greek mythology,

who had only one bed for his guests; if their legs were too long he would cut off their legs so they would fit into the bed. For Liam, those supervisors were *Procrustian* and do:

“Force the person they are supervising to see their world through the eyes of the supervisor when dealing with complicated clients”. (7, 12)

Liam had a clear complaint regarding supervisor’s resistance against the supervisee’s desire to develop his/her working style. Some of Liam’s supervisors were *too caught up in rigid theory* that *irritated* him. He complained that some supervisors, adhering to a particular orientation, expected obedience from the supervisee. They could not understand where Liam were coming from:

“I have to be honest, I am not easy to pin down, I am not somebody who can be easily classified in any kind of psychoanalytical”. (18, 28)

Here, Liam is stipulating a desire to go beyond formal theory. He argued that people, supervisees included, are very different. Supervisees have different training, different perspectives and different experiences, *It is very hard for me to be you, you to be me*. He explicitly highlighted the importance of having his own space in supervision, through his observation that every supervisee is unique and - *It is very hard to step out of your perspective*. He clearly believed that every therapist, regardless of what formal theory requires, may develop their own unique identity as a professional and therapist.

Similar to Liam, a desire to develop their own version of therapy was found to be a dominant theme in Rose and Simon’s interviews. They highlighted the hierarchical relationships that, from their point of view, was the fault of the supervisor. Dynamics made it difficult for them to develop their own version of therapy. Rose, perhaps more so than the other participants, explained in great detail how her supervisor, through their supervision relationship, withheld a *breather* from her. She seemingly felt ignored by the supervisor and was required to simply follow what the supervisor offered. Rose complained about not being heard and she highlighted her need for her views and perspectives to be given weight by the supervisor. When she brought a case to supervision, the supervisor prioritized the supervisor’s own understanding over Rose’s. From her point of view:

“That wasn't just that one moment in the room, that I know this client and I am only bringing her for this particular session but I know her from here, from here, from here so when I am bringing her into this space with this particular session that... I just knew from my heart and soul that what I was saying was correct” (3,7).

What Rose is addressing above was her different perspective to the supervisor on the client discussed in supervision. Repetition of “know” suggested that Rose believed that her understanding of the client was deeper than that of the supervisor. “Heart” and “soul” suggest that she considered her understanding of the client to be embodied knowledge. Her supervisor leaned toward the Kleinian approach, while her interpretations were informed by a different orientation. When explaining this difference, she used the word *tension period*. From her descriptions of the tension period, it was clear how problematic her relationship with the supervisor was:

“And she was very strict and very strict with me, I mean there were lots of tears and more so... yeah she really got me and got my weak spots in terms of my learning and was very strict around them.” (45, 27).

A supervision relationship of this kind was not what she was looking for. She preferred a relationship which - *is not super, it is not a hierarchical thing*. Her relationship seemed to act as a barrier against her desire to be an independent therapist. She said:

“I don’t ... want to be you, I want to be ... me, the best version of me. And that is where it was that I just wanted to be inimitably me but as best as I could”. (7, 11)

She also said,

“And that was never going to work. Even though I admired her and she was up on a pedestal but I didn’t want to be her. She would be saying, ‘what I say there is...’ And almost expecting me to say the exact same lines but I had to find my own way, whether it was a paraphrase of that or just a totally different way that whatever was working for me. So it is just to be allowed to be yourself and to be the best version of yourself”. (19, 33)

From these quotes, it is evident that she struggled with her authoritarian supervisor who did not allow her develop her own identity as a therapist. This was a restriction imposed on her. She refused to be *moulded into being a mini* of the supervisor. While she admired her supervisor and valued all she had learned from her, Rose did not feel comfortable in the relationship. It was a relationship overshadowed by the supervisor’s power. From her point of view, this approach served no purpose.

Likewise, for Simon it was *silly* for a supervisor to imagine *“I am in some magical powerful unconscious place of provoking your...”*. The supervisor considers himself/herself as the one who knows more than the supervisee and is aware of something that the supervisee is unaware of. This comes from the fact that *“there are a lot of people working with supervisors that haven’t done any training in supervision”*. He believed that some supervisors viewed psychoanalytic theory as *gospel* that could answer all questions. A

smart supervisor on the other hand, like a smart therapist, would not say what to do or not to do. Simon had a client who he felt would be more comfortable on a chair than a coach. This was his own decision and it was the reason *that supervisory relationship ended*.

Like Rose, Simon strongly advocated the idea that every supervisee needed to develop his own version of therapy. I noticed that, on occasion, in order to answer some questions, Simon referred to his own experiences as a supervisor as he was also a supervisor. With regard to the issue of power, he argued that supervisees (including himself) needed help in overcoming power games:

“but because of the power games and the power dynamics at work they feel unable to challenge that or to question that. And it is really important in all therapeutic practices with analysands, with clients, with supervisees that you address the power dynamic and give the other person a voice”. (5, 30)

For Teresa and Evelyn, the psychoanalytic supervisor's power was a prominent feature of their experience with supervision. They often addressed the problem of power. They discussed how their frustrations were ignored by the supervisor and their need to have their own space in supervision. In her interview, Teresa sharply distinguished her early experiences of supervision from later experiences, referencing the hierarchical relationship that characterised her earlier experience. From her point of view, this dynamic was the result of her supervisor's authority. In her training, Teresa was allocated a supervisor who conducted supervision in an apparently authoritarian style:

“I think because there was quite a power difference because I was still in my training... I think because the power difference had been so great at the beginning it was difficult and also because of her manner, that there was that”. (4, 17)

She also said,

“What I found negative was oddly the rigour as well because there wasn't, in my experience, and because there is a big gap between my knowledge and the supervisors knowledge there wasn't a lot of room. There was one right answer and not a lot of space for other possibilities or other thinking”. (19, 9)

Similar to Patrick, Teresa emphasised her experience with a training-based relationship. She considered differences in power an issue, because the relationship was unequal and *there is much more anxiety*. She seemed to have been unable, perhaps because of her anxiety, to make her points in supervision. She referenced this inability and her complaints around it throughout her interview. For example, she said:

“A gap in knowledge does not make, necessarily, the supervisor right, it just means that maybe the supervisee doesn't enough... Sometimes I think the supervisee can be correct in something but they don't have enough knowledge to argue. So having more knowledge doesn't necessarily make the clinical situation correct. And it is the supervisee that is in the room with the client and I think that has to be given weight as well as knowledge, so that bit”. (25, 13)

For me, this quote conveyed a sense of hopelessness and helplessness. It demonstrated that Teresa felt unable to defend her ideas. She was unable because of the power dynamic that existed in psychoanalytic supervision. Her frequent references to the issue of power caused me to speculate as to extent to which her supervision has been affected by it. She said that: *it took me a long time then to be able to be free of that too, to be more, to be my own type of therapist*. It can be said that a power-based relationship is a powerful element of supervision and may have sustainable effects on the supervisee.

Likewise, Evelyn provided several examples that illustrated how her feelings and views were often neglected by the psychoanalytic supervisor in supervision. She recalled how her original supervisor advised her on how to operate in relation to the client's transference. She happened to hold a different view to her supervisor on how it should be done, but for her, the supervisor's opinion *didn't matter*. In another example, she referred to an incident where a client did not make one of their sessions. Evelyn called the client to see if everything was OK. The supervisor later questioned her on why she did it? *your role is to sit there, to show up*. In the supervisor's eyes, her role was to sit in the empty room, wait and learn. Evelyn however, believed that there was nothing at all wrong with making the contact:

“There is a therapeutic piece to it {contacting}, the feeling the therapist was looking out for them mattered more to the client than any act of mind, and telephoning them or texting them”. (6, 10)

From Evelyn's point of view, there was nothing wrong with her decision to contact the client, even though it contradicted the supervisor's advice. She argued that it is ultimately the supervisee who decides how to communicate and relate to the client. She described supervisees as *intentional beings* who guess the intention of the other, namely the client. She referred to Winnicott, who is considered an atheoretical analyst. He places the emphasis on the individuality of the supervisees and prioritizes their attitudes over the supervisors. As Evelyn mentioned, *he was very unapologetic in very orthodox times in giving biscuits and milk to his clients when they came after a long journey*. She provided

some examples of how she would have done things differently to how her supervisor did things and how the supervisor would have advised. She said:

“I would have offered an umbrella on a wet evening an odd time. I would have sometimes walked down from the third floor of a very dark building because I suspected they were afraid to walk up in the dim light. Or I would walk them back down to the door. And sometimes of course not taking the money or taking very little money”. (38, 22)

Doing these activities were her preference and choice, but her supervisor would seemingly not have agreed to them. By describing supervisors as *harsh*, she explained what an authoritarian supervisor was like. Those supervisors:

“Denied aspects of me and my human experience. So it alienated me from the full person I need to be as a therapist”. (27, 33)

Struggling with power captured the participants’ narratives that revealed how they struggled with their uncomfortable relationship with the supervisor. The next theme shows that some participants also found it difficult to manage boundary issues that affected their professional relationship with the supervisor.

5.1.4.3. Concluding remarks:

In sum, the theme *grappling with relational experiences* pertained to how participants experienced discomfort in their relationships with their supervisor. It was conceptualized, by the participants, as difficult to share with the supervisor during their supervision experiences. In addition, they made sense of their supervision as an encounter where they seemingly struggled with power dynamics. These experiences revealed the difficult and uncomfortable relationships that could develop between participants and their supervisors.

5.2. Reflexivity:

This was my first experience of conducting analysis on interview transcripts. I had therefore expected some challenges before I began the study. Although I encountered some difficulties in different stages of the study e.g., conducting interviews, the analysis stage was certainly the most challenging part of my work. I believe that these difficulties stemmed mainly from three sources: English language which was not my first language, my theoretical knowledge around the thread of clinical supervision, and my experiences as a psychotherapist supervisee:

Sometimes I felt that I didn't have the language proficiency to match my level of knowledge. When I tried to find the correct words and labels to explain my meaning-making of the participants' meaning-making, I noticed that, from a native speaker's point of view, they were not the most appropriate words. I brought these issues to my supervision meetings and discussed them with my supervisors. For example, the majority of participants talked about how their supervision had helped them understand and illuminate themselves and their clients. Initially I thought "supervision becomes illuminating" would be an accurate way of describing supervisees' experiences with supervision, but, upon discussion and reflection in my supervision meetings, I decided to revise it, and I ultimately ended up with "supervision provides illumination".

There is compelling evidence that demonstrates that the relationship between the supervisor and the supervisee plays a crucial role in the process of supervision (Watkins, 2015a). When I began to conduct analysis, I noticed that I leaned towards the experiences that highlighted the relational aspects of supervision. I had expected to hear from the participants stories about their relational experiences with their supervisors. Nevertheless, I tried to identify the expectations I had based on my clinical knowledge and balance these expectations with what the participants were actually trying to say.

My supervision experiences kicked in when I heard some stories that were familiar to me as a therapist supervisee. In the process of analysis, it became clear to me that I was unconsciously eager to focus on those experiences that were consistent with my own supervisory experiences. I found myself more interested in the participants' accounts that addressed power-dynamics in supervision. Conversely, I felt that I showed less sensitivity when it came to accounts of collegial supervisory relationships. I became aware that my tendency to focus on power-based relationships at the expense of collegial relationships stemmed from my own experiences with supervision. This is of further importance given that my analysis elicited power-based relationships, which resulted in the theme *struggling with power*. In addition to my bracketing, I found the systematic analysis recommended by Smith et al. (2009) very helpful. It is a step-by-step guideline, and particularly helpful for novice IPA researchers. It helped my confidence when I moved forward to a step-by-step approach to the analysis. It kept me on track!

In addition to the barriers caused by my language deficiency, clinical knowledge and supervision experiences, I had to face challenges that came with IPA-informed analysis. My analysis and its related themes, at least at some stages, appeared to be more explicit and pragmatic than implicit and experiential (Spiers & Riley, 2019). Some of my themes looked like concrete and objective concepts and seemed to be quite far away from

explaining the essence of the participants' lived experiences. After consultation with my supervisor, I conducted a second analysis. The re-analysis took me several months and I believe it contributed to my much deeper understanding of the data.

Conducting analysis was the most challenging and time-consuming part of my study. The challenges continued to present themselves when I began to write up the chapter findings. In the phase of writing-up, I noticed that some themes did not fit well with the relevant super-ordinate themes. I also found out that some themes overlapped to a high-degree with some others. For example, "fear of judgement" was one of my themes, but in the process of writing I discovered that the majority of stories already labelled as fear of being judged could be actually the participants' avoiding disclosure and their struggle with openness, and therefore could not be a distinct theme. Thus, the process of analysis continued through the writing process.

5.3. Conclusion:

This chapter presented the findings of the study. It was revealed that the common supervision experiences running through the study participants can be conceptualized as *providing illumination, harmonizing emotional experiences, encountering frustrating moments, and grappling with relational experiences*. The theme *providing illumination* encompassed the participants' narratives that illustrated how supervision helped them hear the client and understand themselves. *Harmonizing emotional experiences* revealed that how their difficult emotions, often stemming from clinical work, were contained, how they felt supported, and how supervision normalized difficulties of clinical work, putting them at ease. *Encountering frustrating moments* illuminated their unmet need for praise and approval as well as their sense of supervision being disappointing and unsatisfying. *Grappling with relational experiences* reflected the stories that revealed the difficulty of disclosing to the supervisor, and their struggle with power dynamics and their need to have their own voice.

The chapter ended with the researcher's reflexivity. He tried to shed some light on the phase of conducting analysis through addressing some challenges that could have impacted on the process of analysis.

Chapter 6. Discussion of the findings

6.0. Introduction:

This chapter critically discusses the study's findings with reference to the study's aims and objectives. It will put the discussion in context by relating it to current published studies of psychotherapy and psychoanalytic psychotherapy supervision. Following this, the chapter presents the theoretical and practical implications of the findings. Next, disseminations of and presenting of the findings from this study in peer-reviewed journals and national and international conferences will be outlined. Finally, the issue of the author's own position in relation to the study is addressed in a section on reflexivity which is followed by a chapter summary.

6.1. Discussion

The main aim of this study was to explore a group of psychoanalytic psychotherapists' experience of receiving supervision. Although the participants varied in terms of the years of supervision experiences (e.g., Rita attended supervision for 6 years, while Liam had 25 years experience of supervision), the sample is considered to be a developmentally homogeneous group of supervisees. Drawing on the life-span model of supervision (Ronnestad & Skovholt, 2003), the study participants were professionals who had passed training and student phases. Given that the participants were accredited and experienced therapists, they were likely to have similar supervisory needs and supervisory tasks. It is therefore reasonable to suggest that they, as a homogeneous group of supervisees, would have had similar supervision experiences.

In the following section, the study findings are organized and discussed with a reference to the objectives of the study:

6.1.1. Contributions of Psychoanalytic Psychotherapy Supervision to Practice

The first objective of the study was to explore psychoanalytic supervisees' conceptualizations of supervision's contributions to their practice. It was aimed to understand how supervision can positively affect the participants' clinical work. The participants' accounts of contributions of psychoanalytic psychotherapy supervision were conceptualized as "providing illumination". That represented two distinct experiences of

understanding the psychology of themselves (illuminating the self) and the psychology of the client (illuminating the client).

The study findings regarding the illumination of the self demonstrated that participants made sense of their supervision as a way to understand themselves better. The psychology of the participants could adversely affect their work with clients, although they were unaware of this. Supervision helped the participants identify how their psychological states blurred their vision in therapy sessions. This finding is in line with the literature that highlights the improvement of the supervisee's self-awareness in supervision (Morrissey & Tribe, 2001; Wheeler & Richards, 2007; Wilson et al., 2016). However, it is notable that the process through which the supervisee's self-awareness is improved in analytic supervision may differ from that of non-analytic supervisions. Unlike other psychotherapy supervisions, psychoanalytic supervision focuses on the unconscious mind and aims to assist the supervisee in gaining insight into unconscious processes such as their countertransference. Zaslavsky, et al., (2005) found that analytic supervisees considered working on their countertransference to be essential. Their participants perceived learning psychoanalysis as "more directed towards the manifestations of the unconscious of the supervisee" (p. 1113). It is believed that, in addition to being aware of their clinical knowledge, skills and performance, supervisees need to be mindful of any effects their personality may have on their clinical work in order to become effective therapists (Australian Institute of Professional Counsellors, 2009). Vallance (2004) argued that improved self-awareness will positively influence the supervisee's work with the client. However, research indicates that only certain types of self-awareness, those related to insight, are beneficial when it comes to the therapist's efficiency. Using William's (2008) phraseology, *self-focused attention* (that refers to the therapist's momentary awareness of their reactions e.g., physiological reactions) distracts attention in therapy sessions and hinders therapy work, while the self-awareness that leads to *insight* increases the effects of the therapist's work.

With regards to insight, the participants' accounts revealed the insightful moments they experienced in supervision. Their unconscious could be manipulated and activated by their clients, which in turn adversely affected their work. To gain insight into their unconscious reactions known as countertransference was a meaningful experience for the participants. It is a long-standing idea among some psychoanalytic supervisors that the majority of clinical problems faced by the analyst in their work with the client originates in their countertransference i.e., the supervisee's psychology (Frederickson, 2015); countertransference becomes a "learning problem" i.e., issues arise when implementing supervisory recommendations in therapy (Frawley-O'Dea & Sarnat, 2001). It is therefore

a supervisory task, as the majority of participants in the current study revealed, for the supervisor to help supervisees gain insights into their countertransference experiences, which may hinder their work (Margaret, 2009). Watkins (2013a) proposed that effective analytic supervisors recognise the importance of working on the supervisee's transference. The current study illustrated that the participants' supervisors helped them identify and gain insight into, for example, paternal (Patrick) and maternal (Rose) countertransference they have developed onto their clients.

The theme illuminating the self also demonstrated that psychoanalytic supervision disentangled the participants from their defences. For instance, Teresa admitted that it was at her supervision where she came to understand and identify her projective identification toward one of her clients. Identifying defences explicitly had an impact on the actions she, and similarly other participants, took in therapy. Introducing supervisee-centred supervision, Frawley-O'Dea and Sarnat (2001) stated that the analytic supervisor is required to analyse the supervisee's personality issues that are deemed to be interfering with their clinical work. Supervisees are encouraged to self-reflect and self-explore in supervision, which will allow the supervisor to confront the supervisees with their defences and resistances (Watkins, 2015c). This is consistent with the psychoanalytic tradition that rejects the idea that the supervisor should "think" rather than "act" like an analyst (Gorman, 1999). This leads to supervisees' insights that contributes to the improvement of their self-awareness. The participants of the study alluded to situations where they felt caught up by their defences with regards to the client, while the supervisor helped them see it, which led them to be disentangled.

As already mentioned, the self-awareness that is deemed to be beneficial is the one that is associated with insight. The participants' frequent references to the improvement of their self-awareness, due to working on their own countertransference and defences, made it clear that they were actually talking about insight-oriented supervision. There are some approaches to the notion of "insight" in psychotherapy supervision (e.g., Scaife, 2009), one of which is the event-based model of psychotherapy supervision (Ladany et al., 2005) that can shed some light on how the supervisee insight may occur in supervision. The supervisee comes with a statement; for instance, *I do not know why but I feel stuck with this client*. The supervisor may link it to and focus on the possible sources of the supervisee's countertransference. This process can ultimately lead to the resolution and the enhancement of self-awareness e.g., change in their thoughts in relation to the client. The participants of this study alluded to some incidents where supervision helped them track where their emotions, activated by the client, were coming from (e.g., Patrick's

emotions induced by the client originated in his childhood). In this way, the insightful supervision was *illuminating the self*.

In addition to illuminating the self, the study demonstrated that supervision provided the participants with illumination about the client. Supervision helped the participants understand the clients and the way the clients acted in therapy sessions. The participants valued their supervisors who helped them conceptualize and understand the client rather than simply offering them techniques. For example, Michael said that the biggest thing he gained from his supervision was the realisation that he did not have to 'do' anything with the client; he had to move beyond "doing"; rather, for him "*it is a question of understanding the client*". This is in line with Hill et al.'s (2016) study that found that psychodynamic trainee supervisees experienced supervision as a way of helping them identify patterns in the clients' manifestations. One may argue that illuminating and understanding the client is not specific and unique to psychoanalytic supervision and it may occur in other psychotherapy supervisions. However, similar to illumination of the self, psychoanalytic supervision gives weight to the unconscious processes that may influence the client's actions, such as the client's transference. Hence, the difference is the extent to which psychoanalytic supervisors, as opposed to non-analytic ones, may be focused on understanding the client's unconscious mind, as opposed to offering certain interventions.

Illuminating the client resonates with the ultimate aim of psychoanalytic supervision, which is to help the supervisee understand the patient's psychological functioning (Ladany et al., 2005; Schlesinger, 1990, 1995). New knowledge helps the supervisees think more before making interpretations in therapy (Sant & Milton, 2012). Farnsworth and Maclaurin (2015) propose that psychoanalysts need to engage in psychodynamic case formulations rather than relying on any version of diagnosis e.g., the DSM-based classification. While diagnosis is a single snapshot of the client's functioning, psychodynamic formulation gives a comprehensive perspective on an ongoing and living document. This was echoed by Watkins (2013a) who suggested that it is an integral aspect of psychoanalytic supervision to contribute to "the development and enhancement of analytic conceptualization" (p. 301). Sarnat (2010) argued that supervision enables psychoanalytic practitioners conceptualize the client and this capacity leads to a thoughtful intervention, which is described as "sitting there" with the client rather than quickly jumping into action. Likewise, the study participants were not told by their supervisors what they should or should not do; rather, they were helped to understand the way the client, for example, developed the therapeutic relationship i.e., transference.

A meaningful aspect of the participants' experiences of illuminating the client pertained to them making sense of the client's transference. The lived experience of attending supervision and transference analyses was that they recognised that their understanding of transference was superficial. Supervision helped them gain a deeper understanding of transference. This was mentioned by Liz, who initially had a premature perception of transference; "*if they {clients} were smiling and seemed happy it seemed to me that they liked me*". Supervision, as Liz admitted, deepened her, and similarly many of the other participants, recollection of transference. This follows a central belief in psychoanalytic therapy that places the emphasis on making sense of the client's transference (Haan, 2011). The analyst supervisor is supposed to deepen the supervisee's understanding of the unconscious processes, among them transference (Wheeler, 2002; Driver, 2008). Sarnat (2012) argues that it is the responsibility of the supervisor to help supervisees learn how to manage and work with transference, which in turn will facilitate the development of their relational capacities.

In relation to illuminating the client, the study found that supervision was perceived as a place where the participants operationally defined theoretical concepts and translated them into practice. It helped them understand clinical materials in light of theoretical notions. Liam was probably more than any other participant clear in describing how analytic supervision utilized theory to conceptualize practice e.g., "*often the supervisor would reframe what I am saying into some kind of theoretical framework*". It has long been reported that psychoanalytic supervisees often complain about how difficult it is to understand psychoanalytic practice through psychoanalytic theory (Stolorow, 1992) that necessitates translating analytic theory into practice in supervision. De Masi (2019) argues that effective psychoanalytic supervision broadens the supervisee's understanding of the patient's psychopathology and on ways to deal with the patient's experiences. For Watkins (2016), explanations around the client is an active ingredient involved in the mechanism of change in supervision. He developed a model that demonstrates how the supervisee in supervision, like a patient in therapy, changes. The model postulates that supervision works through three pathways, namely real relationship (i.e., conflict and transference free relationship), hope (i.e., the supervisee's optimism about the supervision), and explanations (i.e., psychoanalytic explanations of the client offered by the supervisor). The latter pathway accentuates the role of the supervisor in implementing analytic theory, referred to as specific factors, in order to help the supervisee understand the psychoanalytic situation, the client. Theoretical explanations create expectations on the side of the supervisee, already puzzled by the client's issues; the supervisee, via supervision engagement, has a sense that she/he has control over clinical issues. This

improves the supervisee's confidence, which in turn will contribute to the development of the supervisee (Schlesinger, 1990, 1995).

Illuminating the client also encapsulated the participants' conceptualization of supervision as a way to decipher the words used by their clients in therapy sessions. This is understandable considering the fact that there are more Lacanian psychoanalysts in Ireland, and the fact that they place a great emphasis on analysing the language the client uses. Analysis of the words and the signifiers helped the participants understand their clients. Evelyn described this as "*the major facet*" of psychoanalytic supervision. This is consistent with a basic psychoanalytic assumption, that the client's unconscious is structured like language and the analyst must therefore be sensitive to the symbolic component of the unconscious (Lacan, 1966; Dulsster & Vanheule, 2019). Fink (2007) argues that psychoanalysis, and accordingly psychoanalytic supervision, needs to focus on the inconsistencies present in the client's narratives. As a result of this, supervision should help the supervisee learn to listen differently. This allows us to understand Lacan's (1976) remark that the term "super-vision" should be replaced by "super-audition". Likewise, Dulsster and Vanheule (2019) believe that supervision is a practice where the supervisor tries to hear what has been missed from the supervisee's attention. This helps us understand the study participants' account of how they were fascinated by, and greatly valued, the supervisor's ability to hear the words spoken by the client that had slipped from their mind. Taking the aforementioned together, the participants' supervision appeared to be *illuminating the client*.

The study findings regarding illumination of the self and the client add to the psychoanalytic psychotherapy supervision literature by providing an in-depth description of insightful psychoanalytic supervision and how psychoanalytic supervision may help the supervisee with understanding transference and countertransference. Although there are theoretical conceptualizations around insightful supervision (Watkins, 2013a), the findings from this study provide "a first glimpse into the psychoanalytic empirical rubber smoothly meeting the conceptual road, where there appears to be synchronicity (at least from these supervisees' perspectives) between how psychoanalytic supervision ideally is to be apprehended and then put into practice" (Khoshfetrat et al., 2021, p.15).

6.1.2. Helpful Psychoanalytic Supervision

The second objective of the study was to explore experienced psychoanalytic therapists' conceptualization of helpful supervision. In addition to insightful psychoanalytic supervision that contributed to the supervisee participants' practice, "harmonizing

emotional experiences” captured the participants’ experiences of being helped to deal with difficult emotional experiences. The study found that psychoanalytic supervision was emotionally helpful in that it contained difficult emotions, conveyed a sense of being supportive and sustaining and normalized difficult experiences.

To elaborate on their experience of containment, the participants related containment back to both their personal and professional life. It helped Rob deal with a member of his family suffering from serious illness, and it helped Michael mitigate the adverse effects of clinical work on his relationship with his family. The positive effects of analytic supervision on the supervisees’ well-being have been reported by earlier studies (Trowell et al., 2008; Hill et al., 2016). These studies found that the supervisees experienced supervision as beneficial when it came to managing their personal issues. Their participants reported that psychodynamic supervision was focused on the person of the therapist, which was emotionally helpful. This conceptualization around psychoanalytic supervision as a practice that contributes to the well-being of the supervisee is consistent with those of general psychotherapy supervision. Hawkins and Shohet (2000) consider good supervision to be an activity that can minimise the potential burnout and the adverse effects of clinical work. Likewise, Creaner (2014) states that supervision is supposed to protect the welfare of the supervisee through the containment of the work-related stresses.

As mentioned, supervision containment contributed to the participants’ professional life too. Supervision containment was “vital” (Michael) where they felt “unburdened” (Liam) and could “air out anything bothering” (Liz) and “spill out this horrible stuff out” (Patricia). It is believed that containment is an effective way to supervise and contribute to the development of psychoanalytic therapists. As Evelyn mentioned “*being contained oneself in the outer circle is essential to bring containment to the inner circle*” (Burka et al., 2007). Schön’s (1983) distinction between reflection-on-action and reflection-in-action sheds light on the role played by containment in the development of one as a therapist: the first one refers to reflecting on something after it has happened e.g., discussing the client after a session, while the latter form of reflection encompasses making decisions in a moment-to-moment fashion e.g., making sense of a client’s presentation when it is taking place. Didactic supervision may provide supervisees with skills for reflection-on-action, however the supervisees are less likely to reflect-in-action and respond effectively to challenging situations (Ensink et al., 2013). To create capacity for reflection-in-action, supervision engagement should be considered a place where learning is experiential (Calvert et al., 2016).

“Experiential” learning goes beyond viewing therapy videos, didactic learning, reflective dialogues about the client, and teaching skills (Calvert et al., 2016). It is a form of learning where new knowledge is acquired by transformation of experience (Kolb, 1984). Similarly, experiential analytic supervision focuses on the supervisee’s anxieties for example, or shame etc (Smith, 2009). Classifying therapists’ anxieties, Newirth (1990) states that the psychoanalytic situation can provoke, for example, a sense of abandonment, which will manifest itself in the supervision hour. Ungar and Ahumda (2001) addressed this by saying: “a core function of psychoanalytic supervision is to help contain the emotional turbulence and the unconscious anxieties arising and evolving in the two interacting domains of the analytic and the supervisory sessions” (p. 71). This was evident in the stories told by Patrick particularly when he said, for example, that it is the experiential aspect and the containing function of supervision that makes it analytic.. It is envisaged that in the future psychoanalytic supervisors will choose to combine more traditional didactic models with more experiential supervision (Sarnat, 2016). The current study participants seemed to have actualized this envisaging as their supervision appeared to be experiential and *containing difficult emotions*.

One could postulate that psychoanalytic supervision is itself therapy, given that it is a highly reflective space where the supervisee’s countertransference experiences and possible enactments can be reflected on; the fact that the supervisee is encouraged to organize their emotional experiences; and the fact that a psychoanalytic supervisor, like a therapist, may focus on the supervisee’s regressive experiences that present in supervision (Baudry, 1993; Glover, 2002; Watkins, 2015b). As such, the boundaries between psychoanalytic treatment, including the supervisee’s personal therapy, and supervision may be blurred. Nevertheless, it is notable that psychoanalytic supervision differs from psychoanalytic treatment in that supervisory interventions are limited and controllable interventions, aimed at improving the supervisee’s clinical skills. While in personal therapy, the goal is to invite the analyst to explore as fully as possible transference experiences, supervisory interventions are aimed at pursuing the supervisee’s personal issues as far as is necessary to clarify them and enhance the supervised psychoanalytic work. These interventions are facilitating, as opposed to confrontational (Szecssody, 2008). Therefore, psychoanalytic supervision aims to facilitate the process of learning psychotherapy, rather than to treat the supervisee. Perhaps this is what Watkins (2015c) was referring to when he stated that the supervisory relationship is no longer based on pathologizing the supervisee; it is rather more egalitarian today.

Questioning how psychoanalytic supervision may relate to personal therapy needs to be clarified further, however. Although the former one can shift the focus of supervision

attention to the supervisee, it is personal therapy that provides conditions in which the supervisee's personal issues can be scrutinized in supervision (Frawley-O'Dea & Sarnat, 2001). Concurrent personal therapy, as *a sine qua non* in psychoanalytic training (Freud, 1953), makes it possible for psychoanalytic supervision to focus on the supervisee's dynamics. If the supervisee has never been in personal therapy, s/he is more likely to, for example, easily develop transference to the supervisor and become defensive. Likewise, a supervisee who has completed personal therapy may encounter issues that evoke unanalysed materials, which necessitates returning to treatment. This means that supervision cannot be therapeutic, at least until the supervisee has been in or is in therapy. Hence, therapeutic supervision can be optimally conducted when the supervisee is concurrently in an analytic relationship namely personal therapy (Frawley-O'Dea & Sarnat, 2001).

The study finding that the supervisors supported the participants corroborates the findings of earlier studies. Zaslavsky et al. (2005) found that some analytic supervisors leave it to the supervisee to bring up their countertransference for supervision discussion while others raise it in personal analysis. Nevertheless, supervisees were found to bring unconscious countertransference feelings to supervision spontaneously, if the emotional atmosphere of supervision was receptive. Perhaps this can explain why Liam described his supportive supervision as "camaraderie". Drawing on the psychoanalytic supervision literature and important factors involved in the process of psychoanalytic supervision, Szecsödy (2008) proposed that support is the most important factor in becoming a competent analytic therapist. From his point of view, support provides a situation in which continuous stimulus enables the psychoanalytic supervisee to incorporate their personal and professional experiences, which in turn enables them to handle the analytic situation. This was echoed by Watkins (2016b) who proposed that supervisory learning can be best stimulated when sufficient support is in place.

Considering that psychoanalytic supervision is a learning process encompassing three components namely affective, cognitive, and behavioural learnings (Szecsödy, 1997; Cwik, 2006; Wolf, 1995), it is unsurprising that the supportive psychoanalytic supervision "gives loud voice to the supreme importance of the affective domain and affective learnings, foremost accentuating supervision being a safe, secure, trusting, and liberating place and space" (Watkins, 2019, p. 8). This is supported by evidence that suggests the lack of these components may lead supervisory learning to be compromised (Watkins, 2014c; Rojas, Arbuckle & Cabannis, 2010).

Evidence from attachment theory can help us understand the importance of feeling supported and accompanied in supervision and understand perhaps the reason why it stood out to the study participants. Studies (Zicht, 2019; Nolte, et al., 2010) have demonstrated that people's attachment system is implicated in all interpersonal situations, including psychoanalytic supervision, where they have emotional experiences. Based on attachment theory, people need to have a secure enough "base" in order to be able to explore and tolerate uncertainty (Bowlby, 1998). Nolte, et al., (2010) found an inverse relation between the activation of our attachment system and our capacity for reflective functioning. If the therapists disproportionately have to attend to their own sense of personal security and psychological well-being, this will, in turn, reduce the depth of psychoanalytic scrutiny. Psychoanalytic supervisors have, therefore, been advised to provide a secure base for therapists "from which to approach the affective rigors of engaging in the psychoanalytic treatment of his or her patients." (Zicht, 2019, p. 381).

Feeling supported may contradict another finding of the study, grappling with relational experiences, which is discussed later. As will be discussed, the participants' perceptions of supervision relationships were predominantly negative and they had complaints around the way their supervisors related to them. Thus, the participants' experiences of the supervision relationship seemed to be a mixed experience. One way of understanding the presence of different, and sometimes contradictory, emotions is by conceptualizing them through the concepts of *valence* and *arousal* (APA, 2007). Valence refers to the dimension of emotions from positive to negative, and the dimension of arousal represents the intensity of and the extent to which an emotion e.g., excited or fearful, can be activated and experienced. Research on good events in supervision (Worthen & McNeill, 1996) demonstrates that the supervisee moves along the two dimensions. It is possible to see the supervisee moving from feeling anxiety to feeling relieved. Thus, it is understandable that participants, who experienced negative events in their supervision relationship, make sense of their supervision as *feeling supported*

The study found that the participants made sense of their supervision as a way to adjust difficulties they experienced in clinical work. Their supervisors, at times, shared their own experiences and this put the participants at ease, conveying a sense that difficulties are normal aspects of clinical work. The supervisor self-disclosing their own clinical mistakes was, as Rita said, "*useful to trash out, in other words to get out your anger, release your anger, your frustration and your annoyance*". There is quite a sufficient body of evidence to suggest that the supervisor can normalize the difficulties the supervisee is facing through self-disclosure. Reviewing the effects of the supervisor's self-disclosure on the supervisee and the quality of supervision, Norcross and Halgin (1997) found that

supervisors disclosing in supervision their own experiences provided supervisees with comfortable situations that contributed to the development of a good supervision relationship. As pointed out by Watkins (2013a) it is a feature of an effective psychoanalytic supervisor to be able to provide the supervisee with good enough examples. The supervisor's self-disclosure, as a good example, is helpful, perhaps because it eases the supervisee's feeling of shame and increases her/his willingness to self-disclose (Yourman, 2003). This is supported by studies that demonstrated that when both parties avoid disclosure, communication is restricted, and this negatively impacts on the supervision alliance and the development of the supervisee (Ladany & Melincoff, 1999; Hess, et al. 2008).

The supervisor's self-disclosure nonetheless breaches a central psychoanalytic rule, which requires analytic therapists, and as such analytic supervisors, to avoid any types of self-disclosure and become as neutral as possible (Ain & Gelso, 2008). This is a unique contribution of the current study to the psychoanalytic psychotherapy supervision literature, in the respect that it demonstrates, at least from the current study participants' point of view, how effective psychoanalytic supervisors may become, at times, non-analytic, if needed. One possible explanation for this inconsistency might be that psychoanalytic supervisors, similar to psychoanalytic therapists, become more integrative when formal theory appears to be inadequate in helping the supervisee develop. It goes without saying that psychoanalytic supervision, like other models of supervisions (Glover & Philbin, 2017), has its own shortcomings and limitations. It is therefore understandable if analytic supervisors occasionally borrow and utilize interventions such as self-disclosure from non-analytic supervisions. This shift seems to reflect a movement in a wider context of psychotherapy. Thoma and Cecero (2009) reported that it was a common phenomenon among psychotherapists, including psychoanalytic therapists, to borrow interventions from different modalities when they find their formal theory inadequate to contribute to the client's development. Likewise, analytic supervisors, as the study participants reported, appeared to be integrative and utilized self-disclosure as a non-analytic intervention in order to help their supervisees with clinical difficulties. It is therefore understandable why the study participants experienced supervision as *normalizing difficulties*

The researcher believes that the psychoanalytic supervisor's self-disclosure reflects the evolving nature of psychoanalytic supervision. Psychoanalytic supervision, like psychoanalytic psychotherapy, is dynamic in nature and constantly developing. The supervisors are still psychoanalytic and concurrently richly relationally-oriented (Watkins, 2015c). This finding suggests that it is time to go beyond the strict dichotomy of psychoanalytic and non-analytic supervisions. Rather, it is practically sound if interventions

made by analytic supervisors are evaluated based on their applicability into supervision and their contributions to the psychoanalytic supervisee's development. Rita said, *This {supervisor's self-disclosure} would really put me at ease, it is fine, I am doing okay, I am making mistakes but it is good, it is fine, we will get over it.* Psychoanalytic supervisors employing non-analytic interventions raises a reasonable question: Is it possible to conduct supervision through a purely psychoanalytic lens? If so, could pure psychoanalytic supervision be effective?

The researcher believes the question of whether pure psychoanalytic supervision is possible is similar to the question of whether pure psychoanalytic treatment is possible. Although there are psychoanalysts who claims to be purely psychoanalytic, research shows psychoanalytic-oriented therapists, like other psychotherapists, utilize interventions borrowed from other modalities (Thoma & Cecero, 2009). This critique was possibly also true for Freud as it is not clear how much of a Freudian he was. For instance, some of his famous clients who demonstrated remarkable outcomes were in analysis for only a few hours (e.g., Bruno Walter with six sessions, Gustav Mahler with four sessions). Taking the aforementioned together, if psychoanalytic treatment, in practice of course, not theory, is not often purely psychoanalytic, what then can we say about pure psychoanalytic supervision?

The researcher believes that the answer to the question regarding the possibility of a pure psychoanalytic supervision can be both Yes and No. Any pure approach is only as good as its flexibility, and how far it aligns with the supervisee and client's needs. If by "pure", we mean uncompromising and inflexible or 1960s style of psychoanalytic supervision, then the answer is no and we should possibly avoid seeking this form of "purity". Rather, contemporary psychoanalytic supervision is relationally-oriented, adaptable, and anchored in a constructive, and productive learning alliance and real relationship (Watkins, 2013a). This adaptability and the supervisee's preference for this adaptability and flexibility is reflected in quite a number of stories e.g., the theme struggling with power, told by the study participants.

6.1.3. Unhelpful Psychoanalytic Supervision

The third objective of the study was to explore psychoanalytic therapists' experiences of unhelpful supervision. They gave accounts of unhelpful and inadequate psychoanalytic supervision. Their accounts were captured by "encountering frustrating moments".

Frustrating supervision was characterized by hurting deprivation and disappointment and dissatisfaction.

The study included participants' complaints about how their supervisors withheld from them encouragement and positive feedback. They experienced their supervision as depriving where the only feedback was evaluative and corrective. Using Teresa and Michael's phraseology, a supervision of this kind, solely focused on evaluation, was like a filleted fish and while Teresa's preference was for a supervisor who was a little *softer*. It is understood that supervision is an evaluative task (Bernard & Goodyear, 2009) and a psychoanalytic supervisor is supposed to provide the supervisee with corrective feedback (Watkins, 2015a). Although the reason behind the supervisors being heavily corrective is not clear, it can be proposed that they may have felt overwhelming responsibility towards the supervisees' work, something which is supposed to characterise the practice of supervision (Glover, 2017). The supervisors, due to the heightened responsibility and anxiety, *leap-in* to care for the client, as opposed to *leap-ahead* and care for the supervisee, this causes supervisors to act like investigators, which in turn can delay the supervisee's development (Ibid).

The issue around the imbalance between positive and negative/corrective feedback has a psychoanalytic implication. It can be argued that this finding reflects a shortcoming that exists within the psychoanalytic literature and the application of psychoanalytic supervision. Although some may disagree, psychoanalytic literature is almost silent when it comes to the evaluative function of the supervisor (Dulsster et al., 2021) and some leading psychoanalysts such as Lacan strongly opposed this function (Moncayo, 2006). It is a contribution of this study that demonstrates how a lack in theory can be experienced in practice, which reflects the theory-practice-gap within psychoanalytic supervision. Extrapolating from the stories told by the study participants, the issue around the style of supervisory feedback is perhaps present in the supervision practiced by other psychoanalysts given that this issue is at the heart of the theory of psychoanalysis. This can explain findings from similar studies. For instance, Norberg et al. (2016) found that although psychodynamic supervisors, in their study, tended to encourage the supervisee to find their own way, they often felt a conflict between offering positive and negative feedback. From the supervisor's point of view, this conflict induced negative emotions such as anger in the side of the supervisee.

It can be proposed that the participants' experience of depriving and non-encouraging supervision contributed to their sense of insecurity in their communication with their supervisors. The lack of encouragement and positive feedback, considered to be an

integral part of supervision (Lyle, 2013), and offering only corrective and negative feedback can create an insecure and unsafe space for the supervisee. Perret (2017) argues that the supervisees may not in these instances have an internal sense of security, and he warns against supervisors that offer inappropriate feedback. This proposition was echoed by Holloway (1997) who suggests that confrontational work and corrective feedback cannot enhance the supervision relationship if they are offered unconstructively. These studies help understand why the current study participants likened a lack of encouragement to being filleted like a fish and conceptualized their supervision as a *hurting deprivation*.

The study found that some participants experienced their supervision as disappointing, and supervision turned out to be a place where sometimes their questions were left unanswered. Using Ellis' (2014) phraseology, their supervision appeared to be inadequate and less than positive. Supervision becomes inadequate "when the supervisor is unable, or unwilling, to meet the criteria for minimally adequate supervision, to enhance the professional functioning of the supervisee" (Ellis, et al., 2013, p. 6). The study finding represents an issue in a broader context of psychotherapy supervision, where inadequate supervision has been found to be highly prevalent worldwide. Ellis et al. (2015) found that 79% of Irish psychologist therapists were currently receiving inadequate supervision. This figure increased to 92% when the investigators asked the participants about the entire of their professional life.

Inadequacy in psychoanalytic supervision can stem, at least, from two sources. First it may be down to the supervisors and their own limitations. Norberg, et al., (2016) found that psychodynamic supervisors can be, at times, limited by their own internal conflicts and their blind spots can negatively impact their communications with their supervisees. Hence, this can limit the adequacy of psychoanalytic supervision. Second, psychoanalysis, like other forms of psychotherapy, has its own limitations (Gastaud et al., 2013; Sadock et al., 2007). It is a well-established idea that psychoanalysis has contraindications and "one size does not fit all" (Gold, 2010). These two sources, albeit using different terminology, were addressed by Liz saying that blind spots and unknown matters in psychoanalytic supervision can be down to emotional blind spots where the barrier is the individual's, namely the supervisor's, blind spots and/or theoretical blind spots where there is no theory.

In relation to disappointment and dissatisfaction, it was also found that short-time sessions with, as Mark said, enigmatic endings, were unhelpful in that they left the participants waiting for responses to their questions. Mark explicitly stated that "*To leave a supervision session on an enigmatic ending for me is unsatisfactory.*" Like the timeless nature of the unconscious, it is a widely accepted idea that the length of psychoanalysis

for a client cannot be determined in advance too (Dulsster et al., 2018). However, Lacan extended this idea to single sessions too and stated that the analyst must not fix the length of a session. He proposed the concept of “scansion”, where sessions could be ended when the client obtains a significant insight into her/his speech (Lacan, 1953/1966). Likewise, some analytic supervisors, among them some of the study participants’ supervisors, adapted this idea into supervision and treated a supervisory session as an analytic session where the supervisor could suddenly stop the session when a possible insightful moment occurs for the supervisee. Thus, the participants’ complaints about their short sessions originates in the psychoanalytic concept of scansion. The participants however didn’t value supervisory scansion and questioned the benefits of it. It was described, by Ann, as a *parody* of psychoanalytic sessions and experienced as *ridiculous*. This research, as the first study to address this, adds to the literature through revealing how inappropriately used psychoanalytic concepts are unhelpful and can adversely impact the supervisee’s experiences of supervision. The study illustrates what unhelpful psychoanalytic supervision is like and how it, at least from this study’s participants’ point of view, is experienced as unsatisfying. Taking the aforementioned together, theoretical and individual blind spots and short-time supervision sessions were frustrating, and the participants made sense of their experience of supervision as *disappointment and dissatisfaction*.

6.1.4. Supervision Relationship Experiences

The fourth objective of the study was to gain an understanding of experienced psychoanalytic psychotherapists’ meaning making of the supervisory relationship. “Grappling with relational experiences” captured the participants’ lived experiences of difficulties in developing meaningful relationships with their supervisors. Grappling with relational experiences reflected the participants’ experiences of holding back and struggling with power.

The study demonstrated that the participants found it difficult to share some of their experiences with their supervisors. There is a large body of evidence that proves the non-disclosure issue to be common among psychotherapy supervisees (Ladany, et al., 1996; Mehr et al., 2010). The study participants experienced emotions toward the supervisor, commonly known as supervision transference (Sarnat, 2019). However, they tended to avoid expressing their transference feelings. Teresa, for example, called this transference *maternal or super-ego* and she was reluctant to raise it in her supervision. Likewise, Rose never knowingly disclosed her transference to the supervisor; rather, she experienced it as *getting upset, crying, shouting, and using bad language*. Similar to this finding,

Stromme (2012) found that the majority of psychodynamic therapist supervisees (17 out of 21) in her study experienced negative feelings toward the supervisor. She further reported that only three of the participants experiencing negative feelings expressed their negative supervision transference to the supervisor. The findings of the current study differ in that, unlike Stromme's study, the participants were qualified and experienced practitioners. However, similar to Stromme's study, the issue of non-disclosure mainly happened in the early years of the participants' career. The results can therefore be interpreted in light of the developmental approaches where the non-disclosure issue is often understood as a result of the supervisee's diminished self-esteem and low-confidence. This finding has been corroborated by numerous studies that prove negative feelings towards the supervisor is a common cause of supervisee non-disclosure (Ladany, et al., 1997; Hess et al., 2008). These studies uphold Yourman's (2003) proposition that the most often non-disclosed materials pertain to the supervisory relationship.

Feeling embarrassment and having a sense of shame appeared to be a common experience among the participants' stories of avoiding disclosure. They referred to feelings, particularly sexual desire and hatred, induced by the clients that were difficult for them to discuss openly in their supervision. They felt embarrassed to bring in supervision such feelings. Patrick, Liam, and Michael explicitly referred to their feeling of embarrassment and shame as the reason why they tried to withhold information from their supervisors. This finding represents earlier studies that highlight the importance of shame when studying the supervisee's non-disclosure. Graff (2008) considers shame to be an inevitable part of supervision, and Yourman (2003) stated that shame plays the main role in the occurrence of non-disclosure. This was corroborated by Kolarik, et al. (2016) who found that, while the supervisees did not feel too embarrassed to express in supervision their clients' sexual desires, they were too embarrassed to open up on their own erotic phantasies and sexual arousal toward their clients. From a psychoanalytic point of view, shame carries a sense of exposure. It, as a "painful affect" (Freud, 1896, p. 170) reflects our fear of either our physical or psychological nakedness being exposed (our mental secrets being the equivalent of our physical bodies) (Garfinkle, 2012). It is therefore understandable why shame was a meaningful experience of the study participants given that psychoanalytic supervision may require supervisees to open up and reveal their own internal secrets (Frawley-O'Dea & Sarnat, 2001). This evoked feeling of shame and therefore led study participants to avoid disclosure.

Feeling embarrassed was also found to be a meaningful supervisory experience when the participants contemplated disclosing clinical mistakes they had made in their work with their clients. According to the psychoanalytic approach, the super-ego is at the root of the

formation of shame. Hence, failure to operate up to ideal standards causes shame. Shame is therefore about the evaluation of the self, often by the “other” (Lewis, 1971; Baldwin et al., 2006). The participants were worried about the supervisor’s reaction, and were worried about being found out and judged as an inadequate therapist. For instance, Rose said that she tried not to disclose interventions of hers that could have been considered by her supervisor as clinically inappropriate. As Freud pointed out (1900), people attempt to avoid situations where their vulnerabilities and inadequacies might be detected. Rose was “*desperately trying very, very hard to show how serious I was*”. She had hoped that the supervisor would have perceived her as *discipline* and *diligent*. Evidence shows that supervisees often attempt to maximize a positive impression about their competency in clinical work (Ladany, et ail., 1996; Mehr et al., 2010).

The issue of the supervisee attempting not to disclose, for example, their clinical errors, can be explained through a psychoanalytic lens. Based on the concept Internal Working Model (IWM) people internalize their experience of the outside world and then generalize this perspective of self and others (Bowlby, 1977). Given the interactive nature of supervision in which vulnerability plays out, the IWM will be activated by supervisory interactions (Driver, 2005). Research shows that maladaptive IWM and attachment dynamics can lead to avoidant behaviors such as supervisee non-disclosure (Wrape et al., 2017), which will in turn negatively affect the supervisee’s sense of psychotherapist identity (Marmarosh et al., 2013). The avoidant behaviors are more common among, and are of particular importance for, supervisees who are new to the file or are in training (Driver, 2005). This is consistent with the current study’s findings and a high frequency of non-disclosed materials that took place during the participants’ early years of supervision. Of note is the fact that the participants were experienced supervisees and therefore able to reflect on their earlier supervision experiences. It would seem appropriate that supervisors develop an awareness of this tendency to avoid and develop strategies that enable supervisees to express this vulnerability.

A higher prevalence of non-disclosure among novice practitioners is consistent with the developmental perspective on supervision. From a developmental point of view, supervisees feel more susceptible and vulnerable to the supervisor’s judgement in the early stages of their development. This is in line with the finding of the current study where the participants’ (e.g., Patricia and Rose) stories about concealing clinical mistakes originated mainly in the early years of their profession. As an strategy to deal with their anxiety of being judged as an incompetent therapist, they used *holding back*.

With regards to the study finding *struggling with power*, the study participants made sense of their supervision as a space where they lost their voice. Using Liam's terminology, the supervisors were like *Procrustes*, a figure from Greek mythology, who had only one bed for his guests and if the guests' legs were too long he would cut them off in order to fit them into the bed. Liam and several other participants were unable or were not allowed to make their own points in supervision. They had to comply with what the supervisor said, indicating a hierarchical relationship informed by the authority of the supervisor (Cook et al., 2018). One possible explanation for this finding is that the participants were experienced therapists and would have expected their supervisors to treat them as a colleague rather than a junior member of the field. This finding represents what Watkins (2015c) conceptualized as the "pedagogical version" (p. 233), a form of psychoanalytic supervision where the supervision relationship is informed by the authority of the supervisor. It can be suggested that the recent movement in the realm of psychoanalytic supervision, namely relational supervision, was a reaction to the authoritarian form of supervision. This new version attempts to democratize the supervision relationship, make it "egalitarian, co-constructed, collaborative, and mutual" (Wrape, 2017, p. 39). Likewise, Sarnat (2012) argues that, in order to conduct effective psychoanalytic supervision, the supervisor has to go beyond simply skill development and engage the supervisee in the process of supervision.

To elaborate on their struggle with power dynamics, the participants' stories also revealed the difficulties they experienced in developing their own personal style as a therapist. The study found that the participants tended to be flexible and willing to transcend formal theory in order to be more effective, while their supervisors expected them to strictly follow formal theory and the advice they offered. Rose complained about her *strict* supervisor who expected her to be *moulded into being a mini* of the supervisor, whereas Rose wanted to develop and be her own version of herself. This is in line with the supervision literature that shows the supervisees may struggle with supervisors who conduct supervision in an inflexible way (Mangione et al., 2011; Proctor, 2002). A need for supervisees to be given room to develop their own style was addressed by Fonagy (2007), in his response to a question that asked ten eminent psychoanalytic supervisors worldwide about their perspectives on effective analytic supervision. He said: "When I do supervision, . . . I say 'Look, this is what I would say,' but I would also say this: 'You don't have to put it in exactly the same way.'" (p. 47)". Unlike Fonagy's balanced way of supervising, the current study participants conceptualized their supervision as a way of *struggling with power*.

As I mentioned already, the participants seemed to have experienced mixed feelings in their supervision relationship. On the one hand, they experienced their supervisors as people who were supportive and accompanied them when they needed the supervisor's support; they valued their supervisors when they contributed to their emotional management. On the other hand, some grappled with and experienced uncomfortable and unsatisfactory relationships. The presence of mixed feelings and ambivalent interactions in the supervisory relationship has been confirmed by earlier studies (Worthen & McNeill, 1996; Stromme, 2012). As mentioned earlier in this chapter, the concepts of valence and arousal explain how a supervisee might have both negative and positive experiences in the supervisory interaction. This led Ingram (2015) to propose that, rather than studying either positive or negative supervision relationships, research needs to take into account a conceptualization that views the nature of the supervision relationship as ambivalent.

6.2. The original contributions of the study:

This is the first study the author is aware of aimed at investigating psychoanalytic psychotherapy supervision from experienced psychoanalytic therapists' perspective. Studying supervision experiences from experienced supervisees' point of view has been found to be a gap in the psychoanalytic supervision literature (Watkins, 2015b) and, hence, the current study contributes to the promotion of psychoanalytic supervision literature and what psychoanalytic supervision is like in the long run. Psychoanalytic supervision aims to improve the supervisee's clinical skills and to contribute to their practice. However, this improvement, for experienced psychoanalytic psychotherapists, seems to happen through the process of understanding/conceptualizing the client rather than learning psychoanalytic techniques/interventions. As Michael clearly stated; psychoanalytic supervision is not about doing something, it is about understanding. This provides empirical evidence for the belief that psychoanalytic supervision has to enhance the supervisee's ability to understand the client (Ladany et al., 2005; Farnsworth & Maclaurin, 2015; Watkins, 2013a; Sarnat, 2010, 2012).

The findings from this study add to the existing literature by providing an understanding of what problematic and unhelpful psychoanalytic supervision is like. We know, at least from the study participants' perspectives, that unhelpful psychoanalytic supervision is experienced as frustrating, involving a supervisor withholding encouragement from the supervisee. Unhelpful psychoanalytic supervision also reflects inadequate supervision where the supervisee's needs e.g., to have answers for their questions, are experienced as unmet.

This study indicated that supervisors do not always adhere to a strict application of formal psychoanalytic theory, instead, psychoanalytic supervisors may deviate from formal theory and embrace non-analytic concepts in order to help the supervisee develop. This flexibility among psychoanalytic supervisors and their openness to apparently non-analytic interventions reflect the evolving nature of psychoanalytic supervision and the reality of clinical practice. More specifically, this study indicates that psychoanalytic supervision is becoming more of a relational-based practice.

There are limited research studies conducted on psychotherapy supervision in the Republic of Ireland, however, none of them explore supervision experiences from the analytic therapists' point of view. This study therefore makes a unique contribution to the field of psychotherapy and psychoanalytic supervision in Ireland. It provides rich knowledge about the supervisory experience of psychoanalytic therapists working clinically in the Irish context. The Irish state is in the process of regulating counselling and psychotherapy. It is anticipated that regulation will consider supervision to be a mandatory task for therapists, including psychoanalytic therapists, in order for them to retain their professional licences as therapists. It is, therefore, timely to study and contribute to this aspect of psychotherapy practice, in Ireland.

Moreover, to the author's knowledge, this is the first study that employs IPA to explore psychotherapists and psychanalytic supervisees' meaning-making of supervision. The supervision encounter takes place in a relational context. It is a relationship between, at least, two humans, and the supervisee may have different relational and emotional experiences. IPA is a psychological approach (Smith, et al., 2009) that, consistent with the researcher's experience of undertaking the current study, allows for people to reflect on their emotional experiences. The findings of the study support this belief. Several themes illustrated the participants' relational and emotional experiences. Previous studies have often utilized more practical and pragmatic methods such as thematic analysis. This study demonstrates that IPA can be properly used in an empirical study that explores supervisees' supervisory experiences.

6.3. Implications for practice, future research, education and policy

The narratives shared by the study participants point to some important considerations for practice, research, education and policy. The participants reflected on their supervision experiences and their conceptualizations about supervision have several important implications for supervisors in practice.

6.3.1. Practical implications:

The study findings bring to light a number of pragmatic considerations for clinical practice. All of the participants highlighted the importance of their supervisors helping them understand the manifestations of the clients. For example, a common experience across many of the participants was that they needed and valued the supervisor helping them unpick the clients' transference. It is recommended that supervisors, as Michael mentioned, help supervisees conceptualize and understand the client and the ways clients relate to therapists, rather than simply offer a technique or advice on what they should or should not do. This has been addressed by Jacob (2004) who stated that the main feature component of analytic practice is to shed light on the client's experiences and disentangle current patterns in their life.

The participants spoke highly of the supervisors who self-disclosed in supervision. By sharing personal and professional narratives, supervisors conveyed a sense that supervisees are not the only ones who grapple with difficult experiences, which put the participants at ease. Rita was among those who provided an in-depth description on how the supervisor's self-disclosure helped her with her difficult emotional experiences. The supervisors are advised to use self-disclosure that will normalize supervisees' clinical difficulties (Knox, 2015). This shows the supervisor's empathy, which in turn enhances the supervisory alliance (Clevinger, et al., 2019). However, the supervisor's self-disclosure needs to be in line with the supervisee's needs if it is to be effective (Ladany & Walker, 2003). Accordingly, it is suggested that supervisors seek the supervisee's opinion in order to determine whether the supervisor's self-disclosure was helpful (Hill & Knox, 2009).

The participants valued and felt emotionally helped when their supervision turned out to be, using Frawley-O'Dea and Sarnat's (2001) phraseology, supervisee-centred. This is a crucial aspect of supervision, because it strengthens supervisees, particularly when, as Rob mentioned, they may feel "vulnerable". Milton (2008) considers a good supervision to be a supportive place where there is a freedom to disclose our limitations. It was beneficial for the participants to see their supervision as not limited to the client's material, and they were given an opportunity to reveal their own concerns, if needed. The supervisees are advised to be given room and encouraged to speak freely about their unpleasant emotional experiences. As confirmed by the current study, this will help supervisees in both their professional life and personal life e.g., self-esteem (Teitelbaum, 1990).

The participants highlighted the negative effects their own psychology e.g., defence mechanisms like projection, had on their clinical work. They felt untangled and freed when

the supervisor helped them identify the effects of their unconscious on their communication with the client. This may enable therapists to identify their own defences, such as identification with projection, and “*to more integrate these aspects of him {client} and not to flip-flopping with the projection*” (Teresa). The supervisors are encouraged to pay attention in order to identify whether the supervisees’ psychology is intervening in their clinical work. As pointed out by Morrissey and Tribe (2001), working on the supervisee, in addition to the client, makes psychoanalytic supervision therapeutic, not therapy.

With regard to the wide range of unhelpful and sometimes annoying experiences reported by the participants, the supervisors are encouraged to be alert to their supervisees’ unsatisfactory experiences. This is of further importance because evidence shows that the supervisors often tend to be more optimistic about their supervision than the supervisees (McNamara, 2018).

Although the supervision enterprise is an evaluative activity in nature and it is intended to correct clinical errors, the participants’, particularly Teresa and Michael’s, narratives revealed that it is important for them to be given corrective feedback in an appropriate way, where there is positive feedback too. This had been addressed by Holloway (1997) when he states the benefits of corrective feedback depend upon the way it is communicated. It is suggested that the supervisors need to be, as Teresa said, a little bit softer when offering feedback.

In line with previous studies, the participants admitted that they had stories about their supervision experiences, left untold. It is essential to address the issues of non-disclosure through providing a space where the supervisee is assured that their self-disclosure is not going to result in conflict and negative evaluations. This will reduce their possible concerns and fears (Staples-Bradley et al., 2019). Avoidant behaviours such as the supervisee’s non-disclosure are not easily recognizable, as opposed to the supervisee’s anxiety-driven behaviours. It is therefore important for supervisors to be alert to what is less visible or even hidden and to develop strategies to address avoidant behaviours and enable the supervisors to address them in the supervision sessions. Previous researchers have advocated for videotaping sessions so that the supervisee’s interventions and behaviours in therapy sessions can be consistently monitored (Marmarosh et al., 2013).

Lastly, as has been pointed out by Sarnat (2012), if psychoanalytic supervision is going to be effective, supervisees need to be given room and be engaged in the process of supervision. They need to ensure the supervision relationship is not hierarchical. Hence, the supervision relationship becomes equalized.

6.3.2. Future research

The findings from the study have a number of implications for future research. First, there is no widely accepted definition of what constitutes psychoanalytic supervision. Researchers have often borrowed Bernard and Goodyear's (2009) general conceptualization around clinical supervision to define psychoanalytic supervision. The findings of the study can contribute to our understanding of what characterises good and bad supervision. Researchers are recommended to take on board the supervisee's supervisory experiences for conceptualizations around psychoanalytic supervision. For example, good analytic supervision seems to be a practice that helps the supervisee gain insight into themselves and the client. Secondly, the participants' narratives, revealing insightful moments, call for further research into supervisee insight in supervision, given the fact that there is a limited body of research on supervisee insight. Following the two general types of insight i.e., on the self and on the client, future research can focus more specifically on insight. For example, researchers can study the supervisee's cognitive and emotional understanding about the root of their therapy style (their life experiences), how this style induces emotional reactions on the side of the client, and how they can fit their style better around the client's needs (Ladany, 2007).

Thirdly, supervision is a triadic practice. Its three elements are the supervisee, the supervisor and the client. The current study included only supervisees, but interviewing the other elements will provide us with multiple perspectives on supervision. Fourthly, although the participants explored their recollections about both rich and poor aspects of supervision, it has yet to be identified how and whether these experiences influenced the outcome of the supervision i.e., the supervision-client relationship, often referred to as "the acid test of supervision" (Ellis & Ladany, 1997, p. 485). This is essential because the only ethical and professional justification to attend supervision is to make a change with regards to the client. To date, there is no reliable study that shows the analytic supervision-client relationship (Watkins, 2011b); the study needs to be extended by studies that examine the effects of analytic supervision on the following therapy sessions in order to identify the supervision-outcome relationship. Fourthly, and more importantly, developing measures that can assess supervisory experiences are essential in order to ensure psychoanalytic supervision is researchable. Supervision researchers have long emphasised the need to develop good measures, which is critically important to have a good field (supervision) (Ellis & Ladany, 1997; Watkins, 2015b). The findings of this study can be used to develop such measures.

Lastly, psychoanalysis and attachment theories share fundamental convergences, such as in relation to the long-standing effects of childhood experiences and the role of phantasy in the psychic life (Holmes, 2015); however, these two fields have been kept away from each other because of the ideological bad blood that has existed between the two (Fonagy & Campbell, 2015). Research on psychoanalytic supervision can benefit from studying the role of attachment within psychoanalytic supervision, which will provide “an empirically grounded theory for understanding relational dynamics in the supervisory relationship’ (Bennett et al., 2008, p. 91)

6.3.3. Education:

The findings from this study point to some considerations for education. The main inconsistency and blind spot in the realm of psychoanalysis is the lack of a curriculum that explains the way analytic supervisors can be taught and trained (Pegeron, 2008), given that being a competent analyst does not necessarily mean you are also a competent supervisor. As Zachrisson (2011) pointed out, “Supervision calls for additional capacities and psychoanalytic competence only partially overlaps with supervisory competence” (p. 955). The findings from the study demonstrate what supervisory interventions, from the supervisee’s perspective, may contribute to and help the supervision process. They can be integrated into educational programmes.

Given the wide range of challenges reported by the study participants, psychoanalytic supervisors need to learn how to recognize and deal with negative supervision events when the supervisee finds supervision difficult and challenging, including when it induces unpleasant emotions i.e., supervision transference. This is crucial because there is a convincing body of evidence that demonstrates that supervisees tend to withhold from the supervisor their negative supervisory experiences; and that supervisors and supervisees have been found to have different recollections about the quality of supervision.

In addition, educational programmes need to take into account the ways through which the supervision relationship, the pillar of supervision practice, can be improved. Based on the findings from this study, educational programmes need to teach psychotherapy and psychoanalytic supervisors how to avoid hierarchical relationships and power dynamics, on the one hand, and equalize and democratise the supervision relationship on the other. For example, teaching supervisors how to enhance communication skills may enable them to develop a meaningful relationship with their supervisees.

6.3.4. Policy:

To modify the supervision service, study findings can be used by policy-makers and organizations that manage psychotherapy practice. Different countries have different organizations that manage and monitor psychotherapy practice and accredit psychotherapists. In Ireland, psychotherapy bodies such as ICP accredit psychotherapists and supervisors. First, it is recommended that they mandate supervising supervisors. If the supervision of therapists is necessary to have effective therapy practice, likewise, supervision of the supervisor is necessary to have effective supervisory practice. One of the study participants, Simon, flagged this by saying that supervisors in Ireland may hold “*silly*” ideas about supervision and the supervisee because they have not been in any training. Thus, psychoanalytic supervisors need to be supervised. In addition, the tendency for supervisors to hold multiple roles is problematic, from the supervisees’ point of view. This can, for example, create expectations that are stressful for the supervisee. As admitted by the study participants, it would be more beneficial if they had only one type of (supervision) relationship with their supervisors. Moreover, time stability appears to be an important aspect of supervision for the supervisees. They need to make sure that every session is given the agreed time allocation and not cut off suddenly following an enigmatic comment. It is suggested putting in place the requirement that supervisors agree to spend a predetermined amount of time at every supervision session.

6.4. Dissemination of the study findings

Dissemination of study findings is an integral part of any research. It increases the visibility of the findings and ensures that the research has scientific, political and economic impacts (Marín-González et al., 2016). In addition, undertaking a PhD study requires a huge amount of effort. A PhD student spends several years investing a huge amount of effort and energy into accomplishing her/his PhD thesis. Dissemination of study findings ensures that her/his effort is awarded (McGrath, 2016).

While conducting analysis, initial findings of the current study were presented by poster presentations in two conferences in 2019: The Annual Conference held by the Psychological Society for Ireland in Kilkenny (https://www.psychologicalsociety.ie/source/Conference%20Programme%202019_5.pdf), and the Research Expo conference held by the School of Nursing, Psychotherapy and Community Health. While the first presentation involved the themes that revealed the participants’ supervision experiences during the early years of their career, the second poster presented the participants’ current supervision experiences.

In addition, a part of the findings from the current study titled “*What Do Psychoanalytic Supervisees Say about Good Supervision*” has been published in the Journal of Counselling Psychology Quarterly (<https://www.tandfonline.com/doi/full/10.1080/09515070.2020.1857701>). This article covered a set of themes that represented effective and helpful aspects of psychoanalytic supervision.

A second article entitled “*Problematic Psychoanalytic Supervision: An Interpretative Phenomenological Analysis*” explaining unwanted and challenging aspects of psychoanalytic supervision has been published by the Journal of Counselling and Psychotherapy Research (<https://onlinelibrary.wiley.com/doi/full/10.1002/capr.12415>).

The author aims to work on additional dissemination in the form of oral conference presentations at relevant national and international conferences.

Following examination and pending a positive outcome the full thesis will be made available via the DCU library thesis repository Doras <https://www.dcu.ie/library/theses-dissertations>

6.5. Reflexivity:

The study process has been an exciting and challenging experience for me. I was excited that all parts of this thesis came together to form this chapter. For the first time, I sensed that my thesis, rather than separated parts, was going to appear as a cohesive study that enabled me to clearly say what emerged from my study. Nevertheless, unlike the other chapters, I experienced a struggle when writing this chapter because, using Patrick’s phraseology, I felt more of me present in writing-up. It required me to stand up and interpret the findings in light of the relevant literature. This felt like I going to a deeper level and discovering how my study could link to other studies. This made me anxious and I attempted to review other IPA theses to find out whether there was a common way of writing the chapter. But I found different, and somehow confusing, ways to lay out the chapter, which ultimately left me on my own in this regard.

When writing this chapter, it surprised me to discover how little research on supervision, as opposed to psychotherapy, was available. While research in psychotherapy has moved beyond the basic question of whether psychotherapy works and has begun focusing on more sophisticated questions such as the therapeutic ingredients of psychotherapies (e.g.,

dismantling research design), I could not find reliable evidence that shows psychoanalytic supervision works i.e., positive effects of supervision on the client. It reminded me of the psychotherapy field, in the 1960-70s, which suffered from the issues of effectiveness and reliable measurements. The fact I was unable to find research pertinent to the study findings that were potentially psychoanalytic was particularly surprising. For instance, to discuss the first theme (i.e., illuminating the self) I searched for research on insight in psychoanalytic supervision and soon realized that no study had been conducted despite the fact that insight into the unconscious mind is a fundamental aspect of both psychoanalysis and psychoanalytic supervision. The absence of studies on this important concept is frustrating. However, this study, by noting the absence, is a first step towards addressing this gap in our knowledge!

Despite challenging experiences, writing this chapter deepened my understanding of the study and my profession as a therapist. I needed iteratively to go back and forth and read the words spoken by the participants. The process of re-reading contributed to my understanding of the participants' narratives and helped me grasp something more every time, which in turn resulted in renaming some of the themes. When I was writing the implications of the study, I sensed that they deepened my understanding of the supervision practice. I learned how the supervisory encounter, albeit a helpful practice, could turn out to be a difficult experience where the supervisee may feel neglected, criticised and annoyed, and that may have left them with unpleasant emotions.

6.6. Conclusion:

This chapter discussed the findings from the study in light of theories and research studies on psychotherapy and psychoanalytic supervision. Drawing on the findings, the chapter offered a number of implications for practice to help supervisors improve the quality of psychotherapy and psychoanalytic supervision. The chapter offered some avenues for future studies to extend the study findings. It also offered some recommendations for both education and policy. The chapter ended with the researcher's reflexivity, which aimed to shed some light on the process of writing the chapter.

Chapter 7: Conclusion

7.0. Introduction

This chapter aims to provide an overall recap of the study. It presents the findings from the study. The chapter will include a study evaluation. It ends with the researcher's final reflections and a conclusion.

This thesis has examined the experience of receiving psychoanalytic supervision from the perspective of a group of registered psychoanalytic practitioners, in Ireland. It aimed to explore the participants' meaning-making of and their conceptualizations about psychoanalytic supervision and the supervisory relationship.

The study findings have provided insights into the dynamics and live world of a group of therapists when in psychoanalytic supervision. The findings can be broadly grouped into either positive or negative experiences. The positive aspects of psychoanalytic supervision involved two sets of supervisory experiences: a) that helped the participants with their clinical work e.g., illuminating the client's transference or their own counter-transference, and b) that helped the participants with the process of their supervision sessions such as containment, support and the supervisor's self-disclosure. The negative aspects of it reflected a) the participants' frustrations with supervision such as expressing a lack of encouragement and b) the issues around supervisory relationship such as avoidant behaviours like avoiding self-disclosure. The contributions of the study findings and their implications for practice, research, education and policy were discussed.

One unexpected finding was that occasionally participants had contrasting experiences of the same phenomenon. For instance, while Patrick was happy with containment and turning the focus of supervision on himself, Mark objected to the notion supervision can scrutinize the supervisee, in addition to the client. This stresses the supervisee's different preferred style of supervision. Extrapolating from psychotherapy practice (Norcross, 2002), if psychotherapy supervision in general and psychoanalytic supervision in particular are to be evidence-based, they have to take into account the supervisee's perspective and their preferred style of supervision alongside an agreed structure of how supervision is conducted. The finding of struggling with power and holding back nicely reflect the importance of the supervisee's preferences and the necessity for the supervisor to conduct

supervision in a way that is consistent with the supervisee's preferences and with a structure designed to enable likely issues to be addressed meaningfully for the supervisee.

I was also surprised to discover that the participants' supervisors employed supervisory interventions such as supervisor's self-disclosure, typically considered to be non-analytic. This implies that postulating a linear link between theory and practice is more problematic than it appears. Extrapolating from psychoanalytic treatment, theories are combined with the therapist's assumptions commonly known as personal theories, which are much closer to practice than theories (Spurling, 2015). Perhaps this suggests that it is time to consider liberating practice from theory and to examine the reality of practice. Fonagy (2006) argues that if analytic theory is decoupled from practice, technique will progress purely pragmatically and psychoanalytic theory can then follow practice, integrating newly discovered methods. This proposition seems to have been valued by several study participants e.g., Rita's appreciation of the supervisor's disclosure.

7.1. Study Evaluation:

The study had several strengths. First, supervisory sessions are a more private space than psychotherapy sessions. Unlike psychotherapy, supervision sessions are not recorded or reflected on, and are often left undiscussed. What makes the matter more sophisticated is that supervisees tend not to disclose their experiences to the supervisor (Ladany, 1996, Hess et al., 2008). This study sheds light on this often undiscussed encounter and its untold stories. Secondly, advances in psychotherapy supervision have traditionally lagged behind psychotherapy. This can be partially attributed to the lack of reliable measures in the realm of supervision. Given the fact that having statistically sound and good measures are essential for having a good field (Ellis & Ladany, 1997; Watkins, 2015b), research studies on supervision have to contribute to the development of such measures. Hence, supervisory conceptualizations can be concretized and measurable making supervision researchable. The findings of the current study can be used to assess what, from the supervisee's point of view, characterises good and helpful supervision i.e., feeling contained, versus bad and unhelpful supervision i.e., a hierarchical supervision relationship. Hence, one can assess the quality of psychoanalytic supervisions, which in turn will provide reliable results. Lastly, it is a common criticism of qualitative studies that, because of methodological deficits, findings need to be interpreted cautiously. This criticism applies to IPA too. However, the researcher put several strategies in place to ensure the rigour of the study. He constantly strived to be aware of his feelings, followed

a systematic form of analysis and employed an independent audit. They were employed to ensure the study findings met the criteria for a trustworthy IPA study. The researcher believes using IPA contributed to a rich and in-depth understanding of the supervisees' experience of psychoanalytic supervision.

In spite of its strengths, the study had a number of limitations. First, there are methodological issues. With regards to the idiographic elements of IPA, a homogeneous group of participants were recruited to ensure any possible differences among participants were down to the individuals, rather than, for example, social factors. This precludes the generalizability of study findings (Smith et al., 2009). Psychoanalytic supervisees who live and work in geographically different places and have distinct backgrounds may have different conceptualizations around analytic supervision. Second, a number of issues are related to the sample. Although the study participants were all supervisees, some of them were supervisors too. It is suggested that their experience of providing supervision may have affected their experience of receiving supervision. Thus, the mutual effects of providing and receiving supervision on each other may have had an impact on the study findings. In addition, gender is believed to influence the supervision relationship, which in turn impacts the supervision experiences. For instance, female supervisors have been found to pay more attention to the supervision relationship than their male colleagues (Hindes & Andrews, 2011). As a result of this, the study participants could have had different experiences if they worked with a supervisor of a different gender. Moreover, unlike the study participants willing to share their stories about their supervision experiences, some other supervisees declined the invitation to take part in the study. They may have had different stories that could have affected the study findings. Thirdly, some stories told by the participants went years back and pertained to when they were in the initial stages of their development. A human's memory is not infallible and can be reconstructed as time goes by (Lacy & Stark, 2013). It is hard to estimate the exact frequencies and quality of the interventions made by their supervisors.

7.2. Reflecting on the PhD journey

This chapter is the end of the journey! This journey has been the most challenging part of my life. I never anticipated the struggles I would have to face; however, the journey has contributed dramatically to my personal and professional development.

At this closing stage, I now realize how remarkably my beliefs and attitudes toward both psychotherapy and psychotherapy supervision have changed. For instance, I previously

thought that psychoanalytic supervision had little to do with supporting the supervisee and that psychoanalytic supervision was typically informed by the leader-follower approach. My study revealed that psychoanalytic supervision, at least for some participants, can be supportive, in addition to its corrective and evaluative function. My beliefs and attitudes toward supervision are now more balanced.

It feels great to have arrived at this stage of my PhD. However, I see myself at the beginning of a new journey! I believe that I am now well-familiar with the supervision field and important unresearched areas. Perhaps the most critical outstanding task in the study of supervision is to demonstrate if, and how, psychoanalytic supervision leads to a therapeutic change. The only ethical and practical reason for supervision is to make changes with respect to the client. We know psychoanalytic supervision can positively impact the supervisee's functions; however, we are not sure how positively the client is affected.

Finally, I am truly grateful to the participants who accepted my invitation, took a step into their lived-experiences of supervision, and shared them with me.

Conclusion:

This thesis aimed to give voice to registered and experienced psychoanalytic therapists' experience of supervision. Through Interpretative Phenomenological Analysis of fourteen interviews, several common lived experiences were uncovered. The participants' meaning-making of supervision was conceptualized as *providing illumination*, *harmonizing emotional experiences*, *encountering frustrating moments*, and *grappling with relational experiences*. The findings from this study were discussed in light of the supervision literature and the original contributions of the study were explored. The thesis illuminated how the stories told by the participants may inform practice, research, education, and policy. Finally, a recap of the study was provided.

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Appendix 1

A Template for the data analysis

Transcript	Exploratory notes	Emerging themes	Themes	Super-ordinate themes
<p>Interviewer: If I ask you... some supervisors say we bring some materials to supervision, while we do not bring some other materials. I would like to ask you, is there anything that affects you when bringing materials to supervision? Do you consider anything, for example your supervisor's reaction maybe?</p> <p>Interviewee: That is really interesting. Could I just turn back the years a little? When I was beginning in supervision with my woman supervisor, I was a few years having finished the master's and we had to give verbatim report of our supervision, which once you get older you don't do this any longer. But I remember while I was doing some of the client work I was breaking the rules, I wasn't just sitting quietly and helping the person to have free association dreams so then once I discovered that I was not... I discovered that I was editing out the verbatim thing, I wasn't letting her know the mistakes I was making because I was trying to impress her. And then I realised this has to stop. And it was at that stage I said I am changing my supervisor, I don't want to</p>	<p>-Patricia is giving an example pertinent to her training during early days when she hid some info</p> <p><u>-Referring to early days is she trying to accentuate early days' difficult experiences?</u></p> <p>-Patricia was required to have a verbatim report. She as a flexible therapist was breaching analytic rules, while she was not allowing the supervisor to know this through editing clinical mistakes out of verbatim notes</p>	<p>-Early day's dishonesty</p> <p>-Early days' problematic sup</p> <p>-Hiding flexibility</p>	<p>-Holding back</p> <p>-Holding back</p>	<p>-Grappling with relational experiences</p> <p>-Grappling with relational experiences</p>

<p>do this anymore. I don't know how long it went on but I noticed, and again it was an illustration to me of the depth of my unconscious, that I was able to do this thing and say it was all right to do this until somehow twigged this is totally dishonest. The supervisor is not seeing the mistakes I am making because I was just writing down the things that were successful in my work with client and then she would say, 'that is very good,' like a child. So I think she was maybe [unclear 00:22:39] was like a teacher, which she had been, wanting to be the best girl in the class and be told you are good. But it took me a while to realise that was totally untruthful. So in that case, you are right, I was not bringing my material to her, I wasn't bringing my mistakes to her. And that is something now when I am teaching people on the course I would say to start from the beginning, learn from me, do not do what I did.</p> <p>Interviewer: And my next question might be related to what you just mentioned. Have you ever felt anxious when</p>	<p><u>-Patricia's attempt to hide her way of doing therapy clearly indicates her struggle to have her own independency and authority. Did she lose her authority?</u></p> <p>-Patricia believes she was editing verbatim notes coz she was to impress supervisor</p> <p><u>-Is this indicating her false-self?</u></p> <p>-Patricia gave up editing (deleting mistakes from verbatim report) after she twigged it was totally dishonest</p> <p><u>-Is she saying about losing illusion of being the best therapist (perfectionism)?</u></p> <p>-Patricia needed her supervisor to say "<i>that is very good, like a child.</i>" <u>Is this indicating her need for attention?</u></p> <p><u>-Likening a (beginner) supervisee to be the best girl (child) in a class (impressing)-Is this related to a need to impress supervisor?</u></p> <p>Patricia realized editing verbatim notes out was untruthful,</p> <p><u>-Getting realistic perspective?</u></p>	<p>-Struggling with independence</p> <p>-False self</p> <p>-Losing illusions</p> <p>-Needing attention</p> <p>- Needing attention</p> <p>-Self-awareness</p>	<p>- <i>Struggling with power</i></p> <p>-Holding back</p> <p>-Illuminating the self</p> <p>- <i>Hurting deprivation</i></p> <p>- <i>Hurting deprivation</i></p> <p>-Illuminating the self</p>	<p>-Grappling with relational experiences</p> <p>-Grappling with relational experiences</p> <p>-Providing illumination</p> <p>-Encountering Frustration</p> <p>-Encountering Frustration</p> <p>-Providing illumination</p>
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<p>speaking to your supervisor?</p> <p>Interviewee: I think I was in my first few years with that woman, maybe anxious that she might find out how bad I was and how little I knew. Yes I think I probably was and I had this overriding need to impress her about how good I was. I feel very silly about that now but that was the truth. So I think I probably was anxious about going in but it was useful to me because I think that is how clients were coming into me for psychoanalysis. Because there is this, I am sure you know, when someone comes to you for psychoanalysis they have two instincts, one is they really want to tell her everything and get myself sorted out and the other thing is I am really going to work very hard that she doesn't really find out what is going on. Most of us going into psychoanalysis have this, this longing to be heard and find out who we are and the other determination not to let the psychoanalyst find out about you. It is interesting isn't it? It is almost more exciting than any other psychotherapy I feel myself, I just love it because it gets right down to the core.</p>	<p>-Patricia as a beginner was anxious that supervisor might find out how bad she was; she felt overriding need to impress the supervisor</p> <p>- <i>I feel very silly about that now but that was the truth- <u>Is this a suggestive of her improved self-awareness?</u></i></p> <p><u>-Is understanding the way she treated in supervision helped her understand the way the client treated in therapy?</u></p> <p>-Patricia likens her to a client in psychoanalysis</p> <p>- <u>Here she refers to her love to psychoanalysis as it gets right down to the core</u></p>	<p>-Anxiety of being found out</p> <p>-Self-awareness</p> <p>-Making sense of the therapy relationship</p> <p>-Supervision as Therapeutic practice</p> <p>-Insight oriented supervision</p>	<p>-Holding back</p> <p>-Illuminating the self</p> <p>- Illuminating the client</p> <p>- Illuminating the self</p> <p>- Illuminating the self</p>	<p>-Grappling with relational experiences</p> <p>-Providing illumination</p> <p>-Providing illumination</p> <p>-Providing illumination</p> <p>-Providing illumination</p>
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Appendix 2

A Template of Narrative Summary: Analysis of Participant 1's (P1) interview on how psychoanalyst supervisees experience supervision

Teresa experienced supervision as unsatisfactory practice that contributed to her anxiety. Although it helped her develop as a therapist, she highlighted various supervisory situations in which she found it as an anxiety-stimulating encounter. A strong theme in her interview was her struggling with opening up. Teresa frequently addressed supervisory moments where she held her personal beliefs back. She highlighted her fear of disclosing her beliefs and thoughts in supervision throughout the interview.

what I did was I had to keep that {personal spiritual beliefs} separate then so I didn't bring it in (1, 17)... to protect me, myself, and it, because I wouldn't want my belief attacked or belittled, (9, 17).

It is understood that Teresa, with a concern of being attacked, would have felt negative emotions toward the supervisor. She admitted the presence of unpleasant feeling; however, the way she pursued to deal with the emotions, often called *supervision transference*, was hiding.

I did have a very particular transference to her and it was kind of maybe maternal or super ego but I wouldn't have had that conversation with her, (11, 8).

Teresa went on to highlight other supervisory moments that contributed to her anxiety. She highlighted her issues around “responsibility” to demonstrate how she struggled with expectations coming from the supervisor. The responsibility appeared to be related to Teresa's functions in both supervision and therapy. She, as a supervisee, was supposed to choose and bring materials to supervision, while she found this task hard and found herself unprepared to properly deal with this task,

I felt it was hard work, it was harder work and it was more daunting and it wasn't always easy. (10, 3).

In addition, anxieties resulted from the supervisor's expectations extended themselves to Teresa's clinical work. She, as a therapist, struggled with and apparently felt pressure due to the expectations the supervisor had of her when conducting therapy sessions. She uses the word "gruelling", to describe the situation, that conveys a sense of being extremely tired.

if I made the same mistake again she would have expected that I should know that I wouldn't make the same mistake again. 26, 3 It {expectation} was gruelling at times. (32, 3).

Teresa argued that she needed a softer relation with the supervisor; she needed more humanly-based communication; she needed some reinforcement. To highlight the importance, and simultaneously, the lack of warmth and encouragement in her supervision encounters, she uses various words e.g., like-filleted a fish (5-13), to accentuate how significant experience this lack was. In fact, the supervisor did not react to Teresa in the way she had hoped,

there was never positive feedback so if there was no feedback it was okay, so there was only feedback when it was wrong. (20, 12).

It is clear that Teresa's desire to be acknowledged and encouraged by the supervisor was unmet. However, her failure to fulfil her desires was not confined to the supervisor not encouraging her. She talked about some other situations where she found the supervisor non-responsive. She frequently complained about the authority and the failure she experienced to have her own space and voice,

what I found negative was oddly the rigour as well because there wasn't, in my experience, and because there is a big gap between my knowledge and the supervisors knowledge there wasn't a lot of room. (19, 9).

Although afore-mentioned experiences highlight negative aspects of her supervisory experiences, Teresa revealed the opposite, beneficial, side too. For her, supervision

provides illumination. It sheds light not just on her own psychology but also on the clients and the way they behaved in therapy sessions. To illustrate these dual functions, she said

what I find really beneficial is he can offer me a lot of insight to what is happening at the transference, counter transference. So I find that really helpful.(42, 14).

Teresa talked about supervisory moments where her psychology i.e., her counter-transference to the client, became a matter of supervisory discussions. In addition, supervision helped her understand the client and conceptualize what was going on between her and the client.

It is evident that Teresa experienced supervision as practice where she could obtain deeper understanding about herself and the client. However, she was uncertain to opening up and was unable to demonstrate her true self. In addition, the tasks she was supposed to do felt gruelling and daunting. Moreover, Teresa's needs i.e., needing her own space and needing encouragement, were left unfulfilled.

Appendix 3

Demographic Information psychotherapists:

Welcome to this study. Please read and answer the questions below,

- Age:
- Gender:
- Education level according to the Irish National Framework for Qualification (NFQ):
- Number of years working clinically as a psychotherapist
- Number of years attending clinical supervision
- Average psychotherapy clinical practice hours per week
- Work status e.g., private practice
- Current frequency of attendance at supervision
- Have you ever changed your supervisor? If so, how many supervisors?
- Number of supervisees you support if any
- Can you list the main theoretical orientations that your currently practice?
-1
-2
-3
-4
- Can you list the theoretical orientation(s) of the supervision you attend?
1
2
3
4

Appendix 4

Ethical Approval

Ollscoil Chathair Bhaile Átha Cliath
Dublin City University



Mr Ali Khoshfetrat
Dr Gerry Moore
Dr Gemma Kiernan
School of Nursing and Human Sciences

2nd November 2018

REC Reference: DCUREC/2018/205
Proposal Title An Exploration of psychoanalytic Psychotherapists' Experience of Supervision
Applicant(s): Mr Ali Khoshfetrat, Dr Gerry Moore & Dr Gemma Kiernan

Dear Colleagues,

Further to expedited review, the DCU Research Ethics Committee approves this research proposal.

Materials used to recruit participants should note that ethical approval for this project has been obtained from the Dublin City University Research Ethics Committee.

Should substantial modifications to the research protocol be required at a later stage, a further amendment submission should be made to the REC.

Yours sincerely,

A handwritten signature in blue ink that reads 'Dónal O'Gorman'.

Dr Dónal O'Gorman
Chairperson
DCU Research Ethics Committee



Talghde & Nuálaíocht Tacalocht
Ollscoil Chathair Bhaile Átha Cliath,
Baile Átha Cliath, Éire

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Appendix 5

Informed Consent Form

Title of the study

An Exploration of Psychoanalytic Psychotherapists' Experience of Supervision

Investigators

Dr. Gerry Moore. School of Nursing and Human Sciences. Dublin City University.

Dr. Gemma Kiernan. School of Nursing and Human Sciences. Dublin City University.

Mr. Ali Khoshfetrat. School of Nursing and Human Sciences. Dublin City University.

Purpose of the Study

Psychotherapy supervision is a fundamental part of psychotherapists' work and considered a requirement by the psychotherapy bodies to ensure the quality of service clients receive. It is an essential prerequisite condition to being recognized as a therapist practitioner (Roth, & Fonagy, 1996). Clinical supervision is purported to enhance clinical practice by supporting the supervisee in the development of clinical skills, clinical judgement and decision-making to enhance patient outcomes. Although evidence supports the usefulness of supervision in improving the supervisee's performance in psychotherapy (Falender, & Shafranske, 2004; Orlinsky, Botermans, and Rønnestad, 2001; Hill, et al., 2015), supervisees might encounter a wide range of challenges when receiving supervision, which affect their performance both positively and negatively. Exploring these experiences lead use to clearer understanding about supervision. This understanding enable us to provide psychoanalytic supervisors with rich knowledge to improve the quality of supervision. This study aims to gain an understanding about the lived experience of psychoanalytic therapists of supervision.

Voluntary involvement:

I am aware that my participation in this study is entirely voluntary and that I may withdraw at any stage. There will be no negative consequences if I do not wish to participate in the study or if I decide to withdraw for any reason.

Potential Risk:

I am aware that the exploration of work practices required for this study is similar to a professional conversation such as clinical supervision, is confidential in nature and should not constitute a risk to my psychological well-being or professional integrity.

Confidentiality:

My anonymity will be protected in as far as this is possible in a small-scale study of this nature. The data collected by this interview and the consent form will be treated as strictly

confidential. The researcher recognises a concern that I may be identifiable through my stories should they be included verbatim. The researcher will take care to remove all identify markers in quotes taken from my transcript that may be used in the final report. Only the principal investigator, PhD supervisors, PhD candidate and PhD examiners will have direct access to the data. I am aware that the confidentiality of the information that I provide can only be protected within the limitations of the law. Limitations include possibility of data to be subject to subpoena, freedom of information claim or mandatory reporting of un-professional conduct disclosed by participant, and safety to self and others, and child protection legislation.

The consent form will be stored in a locked cabinet. Audio recording of this interview will also be kept in the locked cabinet, until it is transcribed. Following the transcription, the audio recording will be deleted, and the transcript will be stored in the researcher's DCU Apps Google Drive account which is encrypted. In publishing the research, my personal details will not be displayed.

Participant – please complete the following (Circle Yes or No for each question)

- I have read the Plain Language Statement (or had it read to me).

Yes/No

- I understand the information provided.

Yes/No

- I have had an opportunity to ask questions and discuss this study.

Yes/No

- I have received satisfactory answers to all my questions.

Yes/No

- I am aware that my interview will be audiotaped.

Yes/No

Signature:

I have a copy of this consent form. I consent to take part in this research project

Participants Signature:

Name in Block Capitals:

Date:

This research is funded by the DCU School of Nursing and Human Sciences and is ethically approved by the DCU Research Ethics Committee

Appendix 6

Invitation Letter for psychotherapists

To Whom It May Concern,

My name is Ali Khoshfetrat and I am currently studying for a PhD re individual supervision in psychoanalysis in Dublin City University. I am a member of the Psychology Society of Ireland (PSI) and a student member of the Association for Psychoanalysis and Psychotherapy in Ireland (APPI).

Supervision has long been and continues to be a formal part of education in psychoanalysis, since it was developed and proposed to be mandatory by Eitingon (Szecsödy, 2013) who participated in the “Wednesday night meetings” in Freud’s home. Evidence supports that a good supervision can improve a wide range of the supervisee’s therapeutic skills, however, little is known about the supervisee’s experience of receiving supervision. This is of greater importance when it comes to psychoanalysis as it is believed that supervisory experiences can affect not only professional but also personal life (Stromme, 2012). Additionally, it is proposed that psychoanalytic supervisees replicate their experiences with the client in therapy with the supervisor in supervision and vice versa. These dynamics are often called parallel process (Doehrman, 1976). Thus, studying supervisory experience will provide us with in-depth and valuable knowledge about psychoanalytic supervision and how it is experienced by the recipients.

This study has been designed:

- (1) To explore the lived experience of psychoanalytic psychotherapists of the orientation of supervision
- (2) To gain an understanding of psychoanalytic psychotherapists’ meaning making of the supervisory relationship
- (3). To gain an understanding of psychoanalytic psychotherapists’ beliefs about the contribution of supervision

Psychoanalytic psychotherapists that currently receive individual supervision are being invited to participate in an interview which will last approximately 1 hour.

Ethical permission to conduct this study has been granted by Dublin City University:
Dr Gerry Moore, School of Nursing and Human Sciences, Dublin City University

Dr Gemma Kiernan, School of Nursing and Human Sciences, Dublin City University

Ali Kho0shfetrat, School of Nursing and Human Sciences, Dublin City University

I am writing to you on the basis you are a psychoanalytic psychotherapist to see if you are interested in participation in this study. Please read the Plain Language Statement, and then let me know If you want additional details of the research. You can contact me at ali.khoshfetrat2@mail.dcu.ie. Or may call me on 017006135.

Yours Sincerely, Ali Khoshfetrat
PhD Candidate

School of Nursing and Human Sciences, Dublin City University

Appendix 7

Plain Language Statement

Title: Exploration of Psychoanalytic Psychotherapists' Experience of Individual Supervision

Investigators:

Dr. Gerry Moore. School of Nursing and Human Sciences. Dublin City University.

Telephone: 01 7005340, Email: gerry.moore@dcu.ie

Dr. Gemma Kiernan. School of Nursing and Human Sciences. Dublin City University.

Telephone: 01 7008542. Email: gemma.kiernan@dcu.ie

Mr Ali Khoshfetrat. School of Nursing and Human Sciences. Dublin City University.

Phone: 017006135. Email: Ali.khoshfetrat2@mail.dcu.ie

What is the research about?

Supervision is considered an essential prerequisite condition to being recognized as a therapist practitioner (Roth, & Fonagy, 1996). It is defined as "an intervention provided by a more senior member of a profession to a more junior member" (Bernard, & Goodyear, 2004, p. 8). The psychotherapy regulation process is underway in Ireland (Department of Health, 2018), however, psychotherapy bodies have their own criteria to accredit therapists. According to the guidelines outlined by the Irish Council for Psychotherapy (ICP) supervision is a mandatory requirement of accreditation and each therapist is required to receive on-going supervision for maintaining their membership (Irish Council for Psychotherapy, 2014).

Although evidence supports the usefulness of supervision in improving the supervisee's performance in psychotherapy (Falender, & Shafranske, 2004; Orlinsky, Botermans, and Rønnestad, 2001; Hill, et al., 2015), little is known about the supervisees' experience of receiving supervision. This study aims to gain an understanding about the lived experience of psychoanalytic therapists of individual supervision.

Why is the research being conducted?

Clinical supervision is believed to enrich clinical practice by supporting the supervisee in the development of clinical skills, clinical judgement and decision-making to enhance patient outcomes. However, the supervisee might encounter a wide range of challenges that affect positively or negatively the supervisee's performance in psychotherapy. In psychoanalytic supervision, these challenges seem to go beyond the professional life and affect personal life as supervisory challenges may also provoke anxiety because the supervisee takes into account his unconscious. Additionally, the Department of Health

(DOH) in Ireland is currently regularising the profession of psychotherapy. This will include setting and adhering to standards for training and ongoing practice i.e., supervision; yet no previous study exists in an Irish context that explores psychoanalytic psychotherapists' experience of supervision. Therefore, it is timely to examine and contribute to this aspect of the preparation for and the ongoing management of practice.

This study aims to explore the psychoanalytic psychotherapists' lived experience of participating in individual supervision. This study is expected to generate rich knowledge on psychoanalytic supervision and have implications for supervision and clinical practice.

What will happen if you decide to participate in the research?

You will be provided with information about the study and a consent form to sign. After you read the consent form and agreed to take part, you will be interviewed about your lived experiences of individual supervision. You will also be asked about your understanding of supervisory relationship. Lastly, the interview will focus on your experience regarding the contribution of supervision to practice.

This interview will take around 1 hour, and will be audiotaped. It can be conducted in your office/or in the Healthy Living Center (HLC) in DCU depending on which is most convenient for you.

How will your privacy be protected?

Participant anonymity will be protected in as far as this is possible in a small-scale study of this nature. Every effort will be made to guarantee participants' identity is protected. Each participant will be assigned a number that will be applied to the data collected and interview transcripts and audio recordings. A pseudonym will be used in the thesis and for the dissemination of the results. The researcher recognises a concern that interviewed participants may be identifiable through their stories should they be included verbatim. The researcher will take care to remove all identify markers in quotes taken from interview transcripts that may be used in the final report. Confidentiality will be carefully considered to protect the particularity of the participant's story.

All paper information will be kept in a locked cabinet and the names and consent forms will be separated from the assigned numbers, audio recordings and transcripts. All electronic information will be encrypted and stored on a desktop computer within a room that only the researcher can access.

How will the data be used and subsequently disposed of?

The findings will be disseminated in the researcher's PhD thesis which will be submitted to the School of Nursing and Human Sciences. The full PhD thesis will be available on the DCU DORAS online open access research repository. Finding of study will also be disseminated through international journal articles.

In line with the requirements of Dublin City University all data records must be retained for a period of five years following completion of any study.

What are the legal limitations to data confidentiality?

The limitations include possibility of data to be subject to subpoena, freedom of information request or reporting of un-professional/unethical conduct disclosed by a participant in relation to a psychotherapist, safety to self and others, and child protection legislation.

What are the benefits of taking part in the research study (if any)?

The most likely benefit is learning something about psychotherapists' view of supervision in psychoanalytic psychotherapy and indirectly contributing to service and training improvement.

What are the risks of taking part in the research study?

This is a non-intrusive interview and participation in discussions about treatment is a usual activity for therapists.

However, psychotherapists may feel some discomfort when explaining their experience of being supervised.

Participants can change their mind at any stage and withdraw from the study,

Although written consent will be obtained, participation is entirely voluntary and you can withdraw from the study at any stage of the study prior to its submission to the university without recrimination.

How will participants find out what happens with the project?

After submission of the thesis in 2020 between August and December, a one-page summary of the findings will be made available to you on requested. You can contact the principal investigator Dr Gerry Moore by the email address shown below for a copy of the summary. The summary can be sent to you through email.

Contact details for further information (including REC contact details),

For more information about the study please contact:

Dr Gerry Moore gerry.moore@dcu.ie Telephone: 01 7005340

Dr Gemma Kiernan gemma.kiernan@dcu.ie Telephone: 01 7008542

Ali Khoshfetrat Ali.khoshfetrat2@mail.dcu.ie, Phone: 017006135

If participants have concerns about this study and wish to contact an independent person, please contact: ***The Secretary, Dublin City University Research Ethics Committee, c/o Research and Innovation Support, Dublin City University, Dublin 9. Tel 01-7008000*** This research is funded by the DCU School of Nursing and Human Sciences and is ethically approved by the DCU

Appendix 8

Semi-structured Interview

1. As a therapist you have been receiving supervision for some years; can you tell me briefly, about this experience?

2. How would you conceptualize what the supervisory relationship means to you? Or How do you experience the supervision relationship?

Prompt: What word or images come to mind? Do you have a term to describe it?

3. With regards to the supervisory relationship, what does affect you when bringing issues to supervision?

Prompt: What in supervisory relationship helps you bring issues to supervision? what in supervisory relationship hinders you bring issues to supervision?

4. Have you ever felt nervous or worried about speaking to your supervisor about something? If so, can you talk about that experience, what was it and what was the outcome?

5. What in your view made the supervision 'psychoanalytic'? Or What did your supervisor actually do in session that made the supervision 'psychoanalytic?'; Or "Based on your experience, what is psychoanalytic supervision? Example?

6. Did the concept of transference in the treatment relationship enter into your supervision discussions? If so, how? (and same questions asked about countertransference);

7. Did the concept of transference in the supervision relationship enter into your supervision discussions? If so, how? (and same questions asked about supervisory countertransference);

8. Was the matter of therapy/supervision parallels ever considered in your supervision discussions? If so, how?

9. Can you talk about positive and helpful factors in your supervision? *Example?* How did you feel it?

10. Can you talk about negative and unhelpful factors in your supervision? *Example?* How did you feel it?

Prompt: inadequate or harming/harmful (traumatizing) experience?} Example?

11. Do you disclose negative things to your supervisor?

Prompt: I would like to ask you more about undisclosed materials. Can you describe the most important undisclosed materials to your supervisor in your supervision?

12. Have you ever changed your supervisor? If so, why?

13. Has attending supervision made a difference to how you see yourself as a therapist? (If so, how? Can you give an example of that change?)

14. How about personal life?

15. Is there anything omitted from our interview that you think is important to be addressed or anything already discussed but you would like to go back to talk about further?

Finish with: we all covered all aspects of supervision and I asked all questions that needed to be addressed. How do you feel now *having partook* interview?

Appendix 9

Table of summary of the studies included in the literature review

Research Studies re Psychoanalytic Therapists' Supervision Experience

Author, Year and Country	Aim/objective	Study design	Sample	Data collection techniques	Key findings
Lewin and Ross (1960) The U.S	To study characteristics of psychoanalytic supervisees e.g., age, education etc.	Survey Study	14 institutes and 3 training centers approved by American Psychoanalytic Association (APA)	Questionnaire	The book includes details on participants': age, education, training, school program, curriculum, child psychoanalysis, clinic, extension courses, institute financing, and facilities.
Fleming and Benedek (1966) The U.S	To study learning process in psychoanalytic supervision	Qualitative study	Two supervisees	Analysis of audiotaped transcripts of sessions	Their book offers many insightful examples re complexity of supervision including nature of analytic formulation & diagnosis, analytic situation, regression and interpretation in therapy, transference and resistance aspects, and conflict resolution.
Wallerstein, (1981) The U.S	To provide a systematic categorization of psychoanalysis and its concomitant supervision	Qualitative study	One supervisor	Analysis of notes taken from supervisory sessions	Six categories: I. The analysis—its problems II. How the analyst understood the analyst process III. What the analyst did IV. The analytic process a. His understanding of this process

					<p>b. His actions in response</p> <p>V. Educational process</p> <p>a. supervisor's understanding of this process</p> <p>b. His actions in response</p> <p>VI. The evidence of the impact of the teaching</p>
Worthen, & McNeill, (1996).	Supervisees' experience of good events in supervision	Qualitative phenomenological study	8 advanced trainees	Interview	Distinct supervision phases were outlined e.g., setting the scene, good process and good outcome. Supervision relationship as a vital part of supervision
Ladany, Hill, Corbett & Nutt (1996)	To study non-disclosure in supervision	survey	108 supervisees	Questionnaire	Negative reactions to the supervisor were the most frequent type. The most frequent reasons for nondisclosures were perceived unimportant
Cabaniss, Glick, & Roose (2005), The U.S	To study how supervisors and supervisees operate in and find	Mixed Method	For Quan 35 / for Qual 32	Questionnaire AND Interview	-A considerable disagreement between supervisors and supervisees in relation to the

	supervisory practice				useful aspects of supervision -Over 50% of dyads, supervisory relationship was rarely discussed -30 percent of dyads had problematic relationship in some way
Zaslavsky, Nunes, & Eizirik (2005) Brazil	To study how psychoanalytic supervisors and supervisees understand Transference and Countertransference in psychoanalysis and supervision	Qualitative study	8 participants (4 supervisors and 4 supervisees). Recruited from an institute of psychoanalysis belonging to a society affiliated to the International Psychoanalytical Association (IPA)	Semi-structured interview Data Analysis: Bardin's (1997) model of Content Analysis	Re supervision: -Indicators of countertransference -supervisee's opinion re a necessity of working on countertransference
Cohen, & Hatcher (2008), New Zealand	How psychiatrist trainees perceived psychodynamic training and supervision in the first client they were given	Grounded Theory	12 participants (6 men, 6 women)	Semi-structured interview Data Analysis: Constant comparison	Participants found it as a daunting task outlined by categories as follows: a) trainee: intrapsychic variables such as feeling daunting by the task, etc b) patient e.g., intimate nature of dynamic therapy c) supervisor e.g., poor supervision due to unskilled supervisors d) wider context e.g., cultural differences in training and supervision
Inman & Ladany (2008)	To provide a comprehensive pic of the current state of	Review of psychotherapy research	Not mentioned the exact number	Search online	Re supervision: Helpful aspects of supervision can be related to different variables such as

	psychotherapy research				the supervisee or the supervisor factor
Mehr, Ladany, & Caskie (2010)	To examine the content of and reasons for trainee nondisclosure in supervision	Mixed method	204 trainees	Interview and Questionnaire	84.3% of trainees withheld information from their supervisors The most common withheld info was a negative supervision experience
Stromme (2012), Norway	How new students' anxiety affects their learning, How they handle it	Longitudinal, multiple single-case design	23 students (18 women, 5 men), 9 supervisors (6 psychoanalysts, 3 self-psychologist) 23 patients	A semi-structured interview	Some of findings: -frequent negative emotion in first sessions -emotions were not disclosed - emotions were less as supervision went on -supervisors were unaware of the student's emotions
Sant, & Milton (2015) The UK	How new trainees experience psychodynamic supervision and supervisory relationship	Qualitative study-	11 participants (5men, 6 women)	semi-structured interview, Data Analysis: Thematic Analysis	Five Themes emerged: - Initial session's anxiety in supervision contributed to creativity -supervisory relationship as a "dual/shared" was a good experience -Disjunction in supervisory relationship as the supervisor had the final word i.e., suggestions i.e., <i>call the client</i> -Supervisory alliance contributed to good relationship with clients

Research Studies re Effectiveness of Psychotherapy and Psychoanalytic Supervision

Author, Year and Country	Aim/objective	Study design	Sample	Data collection techniques	Key findings
Holloway & Neufeldt (1995)	The efficacy of supervision in training of psychotherapists	Systematic review	The exact number was not-mentioned	Reviewing the literature, without specific reference to data collection	Improvement in case formulations, in how to intervene, and how to follow-up
Wulf & Nelson (2001)	Effects of intern supervision	Qualitative study	6 psychologists	Interview	Positive effects of supervision relation and invested, affirming supervisor on the trainee growth,
MORRISSE Y, & TRIBE (2001)	Parallel process in supervision	Theoretical study	-	-	parallel process interventions can enhance the supervisory process and the task of teaching and learning for both the supervisee and supervisor.
Gray, et al., (2001)	Psychotherapy Trainees' Experience of Counterproductive Events in Supervision	Qualitative study	13 psychotherapist supervisees	semistructured interview on the basis of McCracken's (1988) open-ended long interview format.	Aspects of the supervisory relationship experienced as positive (e.g., the supervisor was helpful, supportive, challenging, and assisted the trainee in developing skills)
Vallance, (2004)	Exploring counsellor perceptions of the impact of counselling supervision on clients	Qualitative study	6 counsellors	Open-ended questionnaire and semi-structured interview	Positive elements: exploration of client/counsellor dynamics and raising counsellor self awareness, professional development, emotional support and the quality of supervisory relationship.
Knox, et al., (2006)	Supervisees' experience of client suicide	Qualitative	13	Interviews	The supervisors' support and their self-disclosure were helpful

Wheeler & Richard (2007)	To identify positive effects on counselling and psychotherapists' practice	Systematic review	18 studies	Search through databases	Some positive impacts found: More awareness of their own motivations, less concerned about their performance during a session and less dependent on their supervisors for directions and support.
Carlsson * & Schubert (2009)	Identifying the educational factors students under analytic training considered essential to their development.	Survey Study	21	Questionnaire including a list of factors	Clinical experience, getting supervision and self-therapy identified as the top three influential factors
Sarnat, (2010)	<i>Key competencies of the psychodynamic psychotherapist and how to teach them in supervision</i>	Theoretical paper	none	Vignette extracts	Relationship, self-reflection, assessment-case conceptualization, and intervention
Watkins, (2011)	Does psychoanalytic supervision contribute to the therapy outcome	Literature review	18 studies	Search through database	No definite conclusions can be made from the literature as the majority of studies have methodological deficiencies
Watkins, (2013)	CONTEMPORARY PRACTICE OF EFFECTIVE PSYCHOANALYTIC SUPERVISION	Theoretical study	No participants	No data collection	Effective analytic supervision focuses on: Learning alliance and real relationship, analytic and supervisory reflectivity, utilizing analytic concepts e.g., parallel process
Hill, et al. (2015)	To find out a) if	A longitudinal mixed method	23 (15 female, and eight male)/	A number of Likert	Quan: Change in

U.S	psychodynamic training changes doctoral trainees b) trainees idea about attribution of what led to change		A subset of 12 (six female and six male) for the interview	Questionnaires to assess the trainees' changes/ A semi-structured interview re where the changes come from	<ul style="list-style-type: none"> • working alliance • Interpersonal functioning • Helping skill • Higher function Qual: change stem from <ul style="list-style-type: none"> • Doctoral program • Individual/group supervision • Research • Clients
Hill, et al., (2016)	To demonstrate the positive effects of analytic supervision on the patient	Qualitative study	Fifteen supervisees who had satisfactory supervision	consensual qualitative research	For patient change were essential: case conceptualisation, focusing on and supporting supervisees, receiving feedback and being advised to set realistic expectations, and disclosing
Watkins & Callahan (2016)	How does psychoanalytic supervision work?	Brief communication	No participants	No data collection	Similar to Wampold's contextual model, analytic supervision works through certain pathways
Meganck, Inslegers, Krivzov, & Notaerts, (2017)	To identify published psychoanalytic single-case studies	Systematic review	93 studies	Online database	The number of studies using single case in psychoanalysis has increased in both quantity and quality 1955-2017
Paine, et al., (2019)	To study trainee psychotherapy effectiveness	practice-based research approach	52 trainee therapists, 280 clients	Questionnaire (TOP)	Positive effects on client's: quality of life, social conflicts, sleep, panic/anxiety, depression, sexual functioning and substance abuse

Studies on the Prevalence of Supervision

Author, Year and Country	Aim/objective	Study design	Sample	Data collection techniques	Key findings
Norcross, et al (1981) the US	Current trend of practices among American Psychology Association Division 29 "psychotherapy" members	Survey	Sample size not available	Questionnaire asking psychologists' current practices and therapeutic orientations employed	3 top Practices: <ul style="list-style-type: none"> • Psychotherapy:99% • Supervision:73% • Assessment:65% 3 top orientation: <ul style="list-style-type: none"> • Integrative/eclectic30% • Psychodynamic &psychoanalytic 27% • Cognitive & Behavior 14%
Norcross, et al (1991) the US	Current trend of practices among American Psychology Association Division 29 "psychotherapy" members	Survey	Sample size not available	Questionnaire asking psychologists' current practices and therapeutic orientations employed	3 top Practices: <ul style="list-style-type: none"> • Psychotherapy:98% • Supervision:57% • Assessment:56% 3 top orientation: <ul style="list-style-type: none"> • Psychodynamic &psychoanalytic 33% • Integrative/eclectic29% • Cognitive & Behavior 13%
Norcross, J.C, Hedges, M, & Castle, P.H (2001) the US	Current trend of practices among American Psychology Association Division 29 "psychotherapy" members	Survey	538 (201 female/335 male) members practicing in the US	Questionnaire asking psychologists' current practices and therapeutic orientations employed	3 top Practices: <ul style="list-style-type: none"> • Psychotherapy:95% • Assessment:60% • Supervision:48% 3 top orientation: <ul style="list-style-type: none"> • Integrative/eclectic:35% • Psychodynamic &psychoanalytic: 28% • Cognitive/Behavior:18%
Norcross, J.C & Rogan, J.D (2012) the US	Current trend of practices among American Psychology Association Division 29 "psychotherapy" members	Survey	401 (133 female/267 male) members practicing in the US	Questionnaire asking psychologists' current practices and therapeutic orientations employed	3 top Practices: <ul style="list-style-type: none"> • Psychotherapy:92% • Assessment:55% • Supervision:41% 3 top orientation: <ul style="list-style-type: none"> • Psychodynamic &psychoanalytic 32% • Integrative/eclectic25% • Cognitive & Behavior 20%

Studies on Inadequate and Harmful supervision

Author, Year and Country	Aim/objective	Study design	Sample	Data collection techniques	Key findings
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Ellis, et al. (2014) The U.S	How common Inadequate and Harmful supervision is	Quantitative study	363 (81% female, 19% male)	16 items for inadequate, 21 items for harmful supervision	96% of participants received inadequate supervision Approximately half or participants received harmful supervision
McMahon and Errity (2014) Ireland	Satisfaction and dissatisfaction with supervision	Survey	Clinical and Counselling Psychologists	Online Survey	One-third were dissatisfied mainly because of issues around a safe and trustworthy relationship with supervisors
Ellis, Hutman, Creaner, and Timulak (2015) Ireland	Comparing Inadequate, harmful and exceptional supervision in the US and Ireland	Survey	149 Republic of Ireland and 151 U.S. mental health supervisees	Online Survey	No difference in the rate of inadequate, harmful, or exceptional supervision. 79.2% (Ireland) and 69.5% (US) were currently receiving inadequate, and 40.3% (Ireland) and 25.2% (US) as receiving harmful supervision. At some point in their careers, 92.4% (Ireland) and 86.4% (US) of the supervisees received inadequate— 51.7% (Ireland) and 39.7% (US) received harmful supervision. 51.0% (Ireland) and 55.0% (US) of reported currently receiving

					exceptional supervision.
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