ROLE INDUCTION FOR COUNSELOR TRAINEES: EFFECTS ON THE
SUPERVISORY WORKING ALLIANCE

DISSERTATION

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by

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* * * * *

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CHAPTER I

INTRODUCTION

The importance of supervised practicum experiences in the training of counseling psychologists is well established and reiterated in the standards of our profession (Worthington & Roehlke, 1979). Expertise as a counselor is a core of the counseling profession, and clinical supervision is the primary process used to impart this expertise to trainees (Borders & Leddick, 1987). Kelz (1966) contended that expertise as a counselor is acquired only through multiple and varied supervised counseling experiences. In the context of supervised practicum experiences, trainees begin to merge theory with practice, to develop a personal style of counseling, to examine attitudes, feelings and beliefs about counseling, and to develop an emerging identity as a professional (Newman, 1981). For the trainee, the supervisor may be the single most powerful influence in the development of therapeutic competence (Karr & Geist, 1977; Pierce & Schauble, 1970).

The empirical and conceptual literature on supervision has expanded greatly in recent years. Numerous theoretical models of the supervision process have been proposed, but at
present there exists little empirical evidence to support the superiority of any one model over another. In fact, in practice it is doubtful that most supervisors operate from a single theoretical model (Loganbill, Hardy & Delworth, 1982). While it is agreed that the general goal of supervision is to increase the trainee's competence as a counselor, beyond this broadly stated goal, many views exist as to which skills are to be emphasized and what strategies are most facilitative for the acquisition of particular skills (Goodyear & Bradley, 1983). Much current thinking in supervision is directed towards seeking a more integrated perspective by identifying core components of supervision that apply across theoretical orientations.

One component that has received much attention is the supervisory relationship. Numerous writers have emphasized that regardless of theoretical orientation or supervisory model, the supervisory relationship is a crucial variable in terms of setting the stage for the personal and professional growth of the supervisee (e.g. Ekstein & Wallerstein, 1972; Marshall & Confer, 1980; Moses & Hardin, 1978; Moskowitz & Rupert, 1983; Mueller & Kell, 1972; Patterson, 1983). The supervisory relationship has been described as a "partnership" or "working alliance" (Bordin, 1983), and is viewed as both a vehicle for learning and a learning experience itself (Loganbill, Hardy & Delworth, 1982). Moses and Hardin (1978) stated that the immediate goal of
supervision becomes the establishment of a therapeutic relationship with the supervisee, a relationship that will set in motion the supervisee's continuing personal and professional growth. What are the essential qualities of such a relationship, how is it to be established, and what obstacles or threats exist that may interfere with trainee growth?

Bordin's (1983) working alliance model of supervision offers some specifics with regard to the ingredients of a positive supervisory relationship, and is applicable across theoretical orientations. He emphasizes the importance of trainees' having a clear understanding of supervision objectives. He defines the working alliance as a collaboration for change in the trainee forged out of a clear mutual understanding of tasks and goals, and a sense of bonding or liking between the partners. Bordin (1983) asserts that the strength of the working alliance is related to outcome in supervision, and although the bonding aspect may develop more slowly, it is necessary for participants to achieve early explicit agreement on tasks and goals if positive outcome is to be achieved. While Bordin's assertions hold much intuitive appeal, and have some empirical support in the counseling literature, at present his formulation of the working alliance is untested in the supervisory context.

Bordin (1983) stated that there is an intimate
connection between how one construes counseling and how one construes supervision, and that the extension of his working alliance model from counseling to supervision is "a very natural next step" (p.35). However, others (e.g. Holloway & Hosford, 1983) have argued that the supervision process may differ in important ways from the counseling process, and that we must free our models of supervision from a strictly counseling perspective. The question of the appropriateness of extending counseling models to encompass the supervision process will not be resolved by continuing theoretical debate, but rather by gathering empirical evidence. Investigation of the strength of the working alliance and its relationship to outcome in supervision warrant exploration, and this is a goal of the present research.

Empirical support for the relationship of the strength of the working alliance to outcome in counseling was found by Horvath and Greenberg (1985). According to these authors, high ratings by client and counselor after three sessions on the "agreement on tasks" component of the working alliance were predictive of up to 45% of outcome variance. Similarly, Hartley and Strupp (1983) found that in time-limited therapy of up to 25 sessions, indicators of the strength of the working alliance in the first quarter of treatment differentiated between successful vs. unsuccessful outcome. Luborsky, Crits-Christoph, Alexander, Margolis and Cohen (1983) and Morgan, Luborsky, Crits-Christoph, Curtis
and Soloman (1982) found that measures of the working alliance as early as the third session were predictive of up to a third of outcome variance in long term psychoanalytic therapy. Based on findings such as these, Gelso and Carter (1985) state that "a strong working alliance is crucial to success of therapies across diverse theoretical perspectives" (p. 161), and "regardless of the duration of counseling, it is important that the working alliance be established relatively early if treatment is to be successful" (p. 164).

From the perspective of the beginning trainee, the need to clarify and define the supervision relationship and objectives is apparent. Initially, supervision is often a highly charged and anxiety provoking experience (Cohen, 1980). According to Cohen, much of this anxiety stems from trainees' lack of knowledge and uncertainty about the nature of supervision. Many training programs seem to devote no systematic attention to orienting or preparing trainees for what they will experience in supervision. Thus, it is often the case that trainees enter supervision with little idea of what to expect; they may be unclear as to the role of the supervisor, their own role, the focus and goals of supervision, as well as their relationship with their supervisor. Conversely, some trainees may hold more specifically formulated expectations which may then be modified or disconfirmed as they are exposed to supervision.
In short, "the parameters of behavior and the limits to which the interaction may soar or sink are unknown entities..." (Cohen, 1980, p. 79).

Given limited knowledge and only a vaguely or inappropriately formulated conceptualization of what supervision entails, trainees may have difficulty making optimal use of early supervision experiences. Nevertheless, they participate in making decisions about how to use supervision. The trainees' awareness of making these decisions may vary, but decisions clearly are being made. For example, decisions regarding what aspects of work on which to focus, what sorts of self disclosures are made, or whether or not to request help with a particular issue. These decisions are likely to be based on the trainees' expectations of appropriate role behavior in supervision (Greenberg, 1980). Greenberg states that "ideally, what happens in supervision would be mutually decided upon by both participants on the basis of what is most useful for the supervisee" (p. 89). But in reality, beginning supervision may resemble a "one-sided guessing game" in which "the tasks remain unspoken" and what "supervision consists of is unsaid" (Hess, 1980, p. 16).

Many researchers have observed that beginning supervision for the trainee is characterized by apprehension, confusion about relationship parameters, and a high need for structure. A majority of researchers in this
area (e.g., Borders & Leddick, 1987; Bordin, 1983; Delaney & Moore, 1966; Gysbers & Johnson, 1965; Loganbill, Hardy & Delworth, 1982; Mueller & Kell, 1972; Napier, 1979) recommend that the concerns and anxieties of the supervisee be dealt with early in the supervisory relationship: Delaney and Moore recommend instituting experiences early in supervision that would bring trainees' perceptions and expectations more in line with the realities they will encounter; Hess (1980) suggests that "some clear understanding of the tasks and models of supervision would provide a framework for the two to help each other grow" (p. 16); and Loganbill, et. al. state that "the first step in any intervention plan is to clarify and define the relationship... without this clarification virtually nothing else can occur" (p. 32).

The implication of Loganbill et. al.'s admonishment is that supervision can virtually come to a standstill if the relationship is not effectively and expeditiously clarified. At present, this clarification is typically done by individual supervisors in an unsystematic, intuitive manner (Holloway & Hosford, 1983). It seems that a deliberate and systematic strategy for preparing trainees for supervision could be of benefit to both participants.

A systematic method of informing trainees about the supervision relationship and objectives is through the use
of a role induction procedure. Role induction may offer the potential of circumventing trainees' initial confusion and creating more ideal conditions for the formation of a working alliance. Previous research (Bahrick, 1986) suggests that role induction is a potentially valuable means of enhancing the clarity of trainees' understanding of the supervision process (Bahrick, 1986).

Bahrick (1986) found that when trainees were exposed to a role induction procedure, they reported a significantly increased understanding of supervision and an increased willingness to reveal concerns and worries to their supervisors.

The present research sought to examine the effects of a role induction procedure on the supervisory relationship. The intent of the role induction was to systematically prepare trainees for supervision by presenting them with a framework for conceptualizing the supervision relationship, tasks and goals. It was hypothesized that the role induction would result in the formation of a stronger working alliance, that supervisor and supervisee would share a more common perception of what specific tasks and goals are being emphasized in supervision, and that trainees would evaluate the experience of supervision more favorably than those who did not receive the role induction.
Chapter II

REVIEW OF THE SUPERVISION LITERATURE

Recent literature indicates general agreement, in the broad sense, on the definition of counseling supervision. Loganbill, Hardy and Delworth (1932) defined supervision as "an intensive, interpersonally focused, one-to-one relationship in which one person is designated to facilitate the development of therapeutic competence in the other person" (p. 4). This description of the supervisory relationship is remarkably similar to descriptions of the counselor-client relationship in therapy. While generally supporting this definition of counseling supervision, Russell, Crimmings and Lent (1984) stated that some writers may take exception to the view that supervision is necessarily an "intensive, interpersonally focused" process. They maintained that the supervisory relationship may include these dimensions, especially at advanced levels of training, but such intensity may inhibit the growth of the supervisee. Bartlett (1983) stated that supervision is defined as "an experienced counselor helping a beginning student or less experienced therapist learn counseling by various means" and one of the major purposes of supervision

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is "to help the counselor-in-training learn to become therapeutic through using appropriate intervention strategies" (p. 9). Clearly, the ultimate goal of supervision implicit in these definitions is to produce competent and effective counselors. However, the literature indicates little agreement in regard to the specific means by which therapeutic competence is to be accomplished, and the particular intervention strategies to be taught are uncertain (Bartlett, 1983).

Several models of supervision are described in the literature and many of these models are based on underlying theoretical perspectives borrowed from theories of counseling and psychotherapy, i.e., psychoanalysis, learning theory, client-centered theory, developmental theory. It is from this theoretical base that the goals and objectives of supervision are derived, and the goals in turn determine the relationship parameters that will characterize the supervision process (Bartlett, 1983). Thus, if a trainee has knowledge of the theoretical orientation of his or her supervisor or of the department in which training is taking place, then presumably the trainee should be able to deduce the goals and objectives and relationship parameters that will be emphasized in supervision. However, several authors have noted that in actual practice there is little clear relationship between theory and what happens in supervision.
(Lazarus, 1971; Holloway & Hosford, 1983).

Even though there may be little clear correspondence between theory and practice, some relationship between the two does exist (Goodyear, Bradley & Bartlett, 1983). These authors stated that, "For example, it would be highly unusual to find a psychoanalyst employing systematic desensitization or a rational-emotive therapist facilitating primal screams" (p. 19). A thorough knowledge of theories of supervision and the models which are based on them is important in providing structure and direction for supervision with regard to its goals, content and process. Two entire issues of the Counseling Psychologist (Vol. 10, No. 1, 1982 and Vol 11 No. 1, 1983) are devoted to supervision in counseling.

This review contains selected literature related to the specific aspects of supervision investigated in the present research. The first section reviews work concerned with the importance of the supervisory relationship, and specifically the working alliance as a way of conceptualizing the relationship. The second section presents literature on the qualities of the supervisory relationship, both positive and negative. In the third section, the literature on expectations is discussed, specifically agreement between supervisor and supervisee on goals, tasks and roles in supervision. In the last section, role induction is
discussed as a way of producing greater concordance between supervisee and supervisor on the goals, tasks and roles in supervision.

The Working Alliance in Supervision

Most of the empirical research on the working alliance and on role induction was done in the counseling setting rather than in the supervision setting. Some of the counseling literature is therefore included in the present review. Several authors stated that the supervision process parallels the counseling process (e.g. Mueller & Kell, 1972; Bordin, 1983) and some authors (Loganbill, Hardy & Delworth, 1982) described the supervisory relationship and the counselor-client relationship very similarly. Thus, extrapolating from counseling to supervision may be justified.

Various models of supervision place varying degrees of importance on the supervisory relationship. According to Patterson (1983) models based on psychoanalytic and client-centered theories attribute prime importance to the relationship between supervisor and supervisee. Goodyear and Bradley (1983) stated that relationship issues are central to the working alliance, the client-centered, and the cognitive-developmental approaches, whereas rational emotive therapy and social learning approaches place less
emphasis on relationship aspects in supervision, much as in the therapy situation. The latter models of supervision emphasize the acquisition of theoretical knowledge, counseling skills, and specific behavioral intervention tactics.

In describing a client-centered approach to supervision, Patterson (1983) recognized the importance of knowledge of theory and of skills training in counselor supervision; however, he believes the latter are overemphasized in the supervision practicum at the expense of helping the trainee develop therapeutic attitudes of empathic understanding, respect, and genuineness. He stated that these attributes are common to all major approaches to counseling and psychotherapy and are the basis of therapeutic change, and that therapeutic attitudes are learned by the trainee through experiencing them in their relationship with their supervisors.

In the working alliance model of supervision developed by Bordin (1983), the relationship between supervisor and supervisee is seen as the fundamental vehicle for producing change in both counseling and supervision. Brammer and Wassmer (1977), in their review of the literature, concluded that a highly developed interpersonal relationship between supervisor and trainee is the most critical variable in counselor learning. Similar conclusions have been reached
by a number of authors with regard to the central importance of a positive, well-developed supervisory relationship as a necessary condition for learning and growth (Matarazzo, 1971; Mueller & Kell, 1972; Stoltenberg, 1981; Loganbill, Hardy & Delworth, 1982). In addition, some authors concluded that the quality of the supervisory relationship appeared to determine how much growth and learning took place during the supervisory experience regardless of the theoretical approach or model employed (Mueller & Kell, 1972; Napier, 1979).

On the other hand, relationship issues are less emphasized in models of supervision based on social learning theory and rational emotive therapy, as indicated by Goodyear and Bradley (1983) cited above. Social learning theory-based supervision focuses more on teaching trainees theory and techniques of social learning rather than on aspects of the relationship. But, Hosford and Barmann (1983), in an article on a social learning approach to counselor training, stated that one reason for failure to attain supervisee goals may be failure of supervisor and supervisee to establish a relationship which is conducive to learning because of unresolved issues related to gender, personality, social, or ethnic differences. These authors believe that when such differences exist, the supervisor has an ethical responsibility to openly explore and resolve them.
with their supervisees in order to establish optimal conditions for learning.

The model of supervision based on rational emotive therapy also attaches less importance to the relationship than to the acquisition of theory and of RET intervention techniques. Wessler and Ellis (1983) stated that "supervisees who require unusual emotional support from their supervisors because they are too delicate and immature to bear negative comments about their poor performances are quite unlikely to conduct effective RET. Ideally, RET practitioners are emotionally tough" (p. 48). These authors added that when a trainee's personal problems interfere with their progress in RET training, supervisors do not hesitate to offer therapy to help them replace their self-defeating philosophies with more rational ones. The Wessler and Ellis article seems to give the impression that RET supervision is unsympathetic to trainee problems arising from the supervisory relationship. Perhaps the nature of the supervisory relationship in models based on learning theory is more accurately reflected by Gelso and Carter (1985). In a major article on the relationship in counseling and psychotherapy, these authors stated that in the learning therapist's view, under which they included RET, the relationship should be marked by warmth and trust and be strong enough to give the therapist a power base to use
persuasion, reinforcement and techniques.

In spite of differences in degree of emphasis, there is substantial agreement in the literature recognizing the importance of relationship variables in effective supervision. All of these authors recognize that effective supervision must also help counselors acquire effective skills and techniques. Which of these variables in supervision will be elevated to central importance depends upon the author's particular theoretical orientation. Given that the supervisory relationship is viewed to be fundamental, we must turn to a discussion of the essential parameters of this relationship.

Bordin's (1983) formulation of the working alliance is one of the most comprehensive descriptions of the effective supervisory relationship. He described this alliance as a collaboration for change forged out of mutual, clear understanding of the goals and tasks of both participants, and the bonds between the partners necessary to sustain the endeavor. The goals that are agreed upon generally pertain to thoughts, feelings and actions while the tasks are the means used by both participants to achieve these goals. The bonds center about the feelings of liking, caring, and trusting that the participants share. The various goals and corresponding tasks differ in the extent
to which liking, caring and trusting are required to sustain the collaboration for change.

Bordin's working alliance model of supervision is an extension of his working alliance model of counseling and psychotherapy (Bordin, 1979). He stated that there is "an intimate connection between how one construes psychotherapy and how one construes supervision," and that the extension of his model of counseling to the supervision situation is a "very natural next step" (p. 35). Bordin views the working alliance as a description of the change process inherent in effective supervision. He believes it is the phenomenon fundamental to all models of counseling and psychotherapy where change is the desired outcome.

The working alliance in supervision is the subject investigated by the present research. Although no directly relevant empirical research on this topic was found in the literature, a number of studies investigated aspects of the supervisory relationship that are based either on other models of supervision or are atheoretical. These studies are reviewed here because they investigate aspects of the supervisor-supervisee relationship that are relevant to the working alliance even though the authors did not formulate their views explicitly in terms of the working alliance. Some of the research to be presented was undertaken prior to
the publication of Bordin's working alliance model. A summary of the research follows, organized according to those that relate to, first, qualities of the supervisory relationship and, second, expectations about supervision.

Qualities of the Supervisory Relationship

Davidson and Emmer (1966) compared subjects' evaluation of supervision and their focus of concern. Subjects were assigned to either a supportive or non-supportive interview with a supervisor. Results indicated that subjects receiving non-supportive supervision were less positive about the concept of supervision, as measured by the semantic differential than subjects in the supportive condition. Another finding of this study was that subjects in the non-supportive condition focused more on themselves in the supervision interview while subjects in the supportive condition focused more on issues related to the client. In a related study (Blane, 1968), subjects who rated supervision as positive achieved higher levels of empathy pre- to post-test as measured with the Carkhuff Empathic Understanding in Interpersonal Process II Scale while subjects who rated supervision as negative or who received no supervision showed no significant change in level of empathy. The latter study seems to support Patterson's (1983) contention that trainees learn good counseling skills
by experiencing them in their relationship with their supervisors.

In a more recent study by Hutt, Scott and King (1983) the factors accounting for positive and negative evaluation of supervision were identified after analyzing descriptive data obtained from supervisees. Results indicated that the fundamental structure of positive supervision is a facilitative relationship which embodies warmth, acceptance, respect, understanding, and trust. These qualities are clearly similar to Bordin's description of the bond in the working alliance; however, Bordin stressed that these must be mutual qualities existing between supervisor and supervisee. Hutt, Scott and King further found that trainees negative experience of supervision focused on relationship issues, in that the relationship was characterized by mistrust, disrespect, criticism and lack of support. These authors concluded that a "facilitative relationship is a necessary—but not sufficient—condition for positive supervision, and that effective supervision integrates both task- and person-oriented behavior" (p. 1). Similar results were obtained by Allen, Szollos and Williams (1986) in their analysis of responses of 142 trainees to a questionnaire on best and worst psychotherapy supervision. Results indicated that high quality supervision is based on perceived expertise
and trustworthiness of the supervisor, duration of training, and emphasis on personal growth. These variables were found to be more important than teaching of technical skills in determining supervisees rating supervision as of high quality.

In further agreement, a study by Worthington and Roehlke (1979) reported that practicum students rated supervision as good when their relationship with their supervisors was both pleasant and personal. This study will be described in more detail later in the discussion of expectations in supervision.

In the conceptual literature, Blocher (1983), in presenting a cognitive-developmental model of supervision, maintained that a supportive relationship in supervision, characterized by warmth and empathic caring, is necessary to promote learning. He stated that "the anxiety and tensions triggered by the inevitably rather high levels of challenge and involvement in the practicum situation can usually be managed by the counselor when supporting relationships are available" (p. 31).

The research presented thus far emphasizes that the supervisory relationship is of central importance in determining whether the counselor-in-training will
experience supervision as positive or negative and that a positive relationship is important as a facilitator of learning and growth for the trainee. In developing the parameters of this relationship, most authors focus on qualities of the supervisor, such as warmth, respect, trust, understanding, caring. It seems to be assumed that when the supervisor possesses these qualities, then supervision will be effective; at least, empirical research indicates that supervisees will experience supervision as positive. Bordin's working alliance model differs in its focus on the relationship itself and its emphasis on the mutuality of understanding, liking, caring and trusting. The implication is that these qualities must exist in the dynamic interaction between the supervisor and supervisee, and not in the supervisor alone.

Other authors have addressed the variables that pose potential threats to establishing a positive supervisory relationship, as did Hutt, et al. (1983) above. Developmental theorists (Hogan, 1964; Loganbill, Hardy & Delworth, 1982) look upon supervision as a developmental process in which one of the early stages is characterized by trainee anxiety and confusion. From the working alliance viewpoint, this early stage appears to be a time during which trainees develop, test-out and modify their views about specific goals, tasks and roles. Loganbill, Hardy
and Delworth stated that "this stage, in terms of the Lewinian conceptualization of change, is the 'unfreezing' of supervisee attitudes, emotions, or behaviors. It involves a process by which the supervisee becomes liberated from a rigid belief system and from traditional ways of viewing the self and behaving toward others" (p. 18).

In addition to anxiety being associated with an early developmental stage of supervision, characterized as described above, other sources of anxiety were mentioned in the literature, such as: the newness and intensity of the relationship with the client which is then carried into the supervisory relationship (Mueller & Kell, 1972); the need for the beginning therapist to examine and change beliefs, values, and behavior patterns (Kadushin, 1968; Silverman, 1971) which is similar to the second level of trainee competence in the developmental formulation; threat to the supervisees' sense of autonomy (Silverman, 1971; Stoltenberg, 1981); evaluation of the trainee's technical skills and personal growth (Cohen, 1980; Bordin, 1983) and conflicting expectations between supervisee and supervisor (Cohen, 1980).

Several authors speculated that when anxiety is aroused, trainees are likely to resort to defensive behavior, or resistance, designed to reduce the threat of
being judged as incompetent. This results in reduction of risk-taking behavior by the trainee (Loganbill, Hardy & Delworth, 1982) which hinders learning and personal growth. These defensive maneuvers appear similar to the resistance experienced with clients in therapy as they seek to avoid exploration of anxiety-laden issues (Pignano, 1985). The various models of supervision deal with supervisee anxiety in a manner consistent with the theory of counseling on which the model is based.

In the working alliance model, Bordin (1983) deals with the issue of supervisee anxiety under one of his goals of supervision, that is, the goal of "overcoming personal and intellectual obstacles toward learning and mastery." He sees these "obstacles" occurring when the therapist-in-training has recurrent or generalized difficulties that appear to be "of the trainee's own making, rather than functions of a particular client" (p. 37). He stated that this goal can result in the supervisor turning supervision into psychotherapy. Indeed, some authors (Bernard, 1979; Hess, 1980) include "counselor" as one of the appropriate supervisor roles. But, most authors limit therapy in supervision to dealing with issues that hinder the supervisees' progress as a therapist. Bordin believes that a strong working alliance will counteract the inevitable tensions that arise in the trainee as a result of status
differences, being evaluated, and perceived threats in the trainee-client relationship.

Supervision models based on social learning theory recognize that supervisee anxiety can interfere with achieving the goals of supervision and must be dealt with through open discussion and determining the changes to be made in the supervision process to better meet the needs of the trainee (Hosford & Barmann, 1983). The supervisor may also deal with trainee anxiety through the use of systematic desensitization or another learning-based technique.

Although the model of supervision based on rational emotive therapy presented by Wessler and Ellis (1983) does not specifically refer to trainee anxiety, these authors stated that they welcome discussion of personal problems and how these problems impact on the trainee's effectiveness as a therapist. If the supervisees show significant neurotic problems, they are referred to individual or group RET therapy. These authors further stated, in conformity with RET theory, that "if supervisees needlessly upset themselves in supervision," (p. 43) the supervisor will help them determine their irrational beliefs about supervision, such as irrational needs for love or approval, and help them to give them up.
The source of obstacles to effective learning in supervision relevant to the present research are those which arise from lack of understanding or agreement between supervisee and supervisor on the goals and tasks in supervision and on the appropriate roles the participants are to assume. That literature will be reviewed in the next section.

**Expectations: Agreement on goals, tasks and roles in supervision**

The expectations that both supervisor and supervisee bring into supervision are important issues that often have impact upon the supervisory relationship and process. In a study by Worthington and Roehlke (1979), supervisors rated the importance of 42 aspects of supervisor behavior. At the end of supervision, supervisees rated the extent to which their supervisors exhibited these behaviors, as well as their satisfaction with supervision, supervisor competence, and supervisors' contribution to counselor competence. The results indicate a discrepancy between what supervisors and supervisees considered important in good supervision. Supervisees rated most important a pleasant relationship with the supervisor, structured sessions, and the supervisors' use of didactic methods. These qualities correlated positively with supervisees' ratings of
satisfaction with supervision. In contrast, supervisors considered most important their giving of feedback, both positive and negative. Furthermore, trainees wanted their supervisors to behave in the teacher and counselor roles, while supervisors saw themselves primarily in the role of an evaluator. Although beginning trainees often ask for positive and negative feedback, data obtained in this study indicate that trainees want feedback about their strengths and not their weaknesses. Worthington and Roehlke concluded that, in general, what beginning trainees want is to be directly taught new counseling skills within a supportive relationship with their supervisor.

While the above study deals only with beginning trainees, a later study by Hepner and Roehlke (1984) examined differences in supervision across three levels of counselor-trainees. The results contribute important information as to the generalizability of studies using beginning trainees. These authors examined the supervision variables of trainees' perception of supervisor expertness, attractiveness, and trustworthiness; trainees' perception of supervision behaviors that contribute to supervisory effectiveness; and the types of critical events perceived by trainees as significant turning points in the supervisory process. Their results indicated that trainees in a beginning practicum rate supervision better with support
and skills training by their supervisors, while advanced practicum trainees want more autonomy. Thus, different supervisory behaviors are perceived as effective at different trainee levels of experience.

The above conclusions are born out in a recent review of the literature by Leddick and Dye (1987) on trainee expectations and preferences in effective supervision. These authors made a number of important general observations in support of the view that different supervisory behaviors are effective at different levels of supervision. They stated: "trainees expect that the supervisor will be initially responsible for setting goals, selecting activities, and evaluation, and that these responsibilities will be gradually passed to the trainee as warranted by the demonstrated acquisition of knowledge and skills" (p. 149). Supervisees also expected their supervisors to be proficient in managing many forms of trainee anxiety stemming from doubts about both professional and personal adequacy.

In summary, the literature on expectations suggests differences in what supervisors and supervisees consider important in supervision. Beginning trainees generally want to be taught counseling skills in a warm, supportive relationship while supervisors consider feedback more important. Supervisees' needs change over the course of the
practicum in that advanced trainees want more autonomy.

No data-based research was found in the literature dealing with the effects on supervision of discrepancies in expectations between supervisee and supervisor. But the literature reviewed above on manipulating expectations of participants by various procedures is based on the assumption that agreement on goals, roles and tasks of supervision has a positive effect on the supervision process. In a comprehensive and critical review, Duckro, Beal and George (1979) examined the commonly accepted assumption in the literature in psychotherapy that disconfirmed client role expectations has a negative influence on psychotherapy.

These authors concluded that the research is almost evenly divided regarding support for the widespread acceptance in the counseling literature that failure to confirm client expectations of the therapist's role in counseling results in negative consequences. Duckro, et. al stated that this ambiguity is due to flaws such as lack of operational definition of the independent variable, and confusion of expectations with preferences.

The problem of definition of expectations was also discussed by Friedlander (1980) in the context of
counseling. She stated that studies have often claimed to investigate expectancies when in fact they are measuring subjects' perceptions of past events or preferences for particular behaviors. Friedlander defines expectations as "subjective probabilities of the occurrence of events or behaviors" (p. 20), and preferences as affective states which interact with expectancies. This criticism makes explicit the importance of future research on expectancies in supervision, as well as in counseling, to define variables in operational terms in order to avoid ambiguity in the interpretation of results.

**Role Induction**

According to Childress and Gillis (1977), the method and rationale for role induction was first introduced into the literature in 1968 by Orne & Wender who suggested its merits as a way of preparing clients for psychotherapy. The role preparation procedures take the form of structured interviews or written or recorded instructions explaining the purpose of counseling and describing or modeling appropriate interview behavior (Friedlander & Kaul, 1983).

In their comprehensive review of the research on manipulation of expectancies in the therapy setting, Tinsley, Bowman, and Ray (1986) included the literature on role induction because they judge this procedure to involve
the manipulation of expectancies about how to behave in counseling. These authors found 46 articles which met their criteria of experimental manipulation of expectancy variables. They stated that methodological flaws, such as failure to do a manipulation check in 39% of the studies, undermine the usefulness of these investigations because it is not known whether expectancies were actually affected by the experimental procedure. Other methodological flaws reported by the authors are the confusion between expectation and preference, and the use of instruments designed for the specific study which have unknown reliability and validity. Furthermore, few studies attempted to relate expectancy changes to outcome measures in counseling.

Tinsley et al. stated that, in spite of these drawbacks, several conclusions seem supported by the existing data. First, a complicated intervention to manipulate expectancies is not warranted because videotaped and audiotaped instructions proved to be effective in manipulating expectancies in the desired direction in many studies. Printed or verbally presented material for intervention is of questionable value. Second, direct instructions prior to counseling appear to bring about desired changes in expectancies more quickly and efficiently than experience in counseling sessions per se. Therefore, audiotaped
instructions for presenting the role induction to subjects was chosen as most appropriate and efficient for the present research.

In summary, there appears to be general agreement in the literature on counseling that some kind of preparation, including preparation for appropriate role behaviors, generally has a positive effect through shaping client expectations in therapy. Generalizing from the counseling to the supervision setting, it is reasonable to assume that preparation for appropriate role behavior in supervision would facilitate the supervision process. Further research in both counseling and in supervision is needed to determine the specific conditions under which expectancy manipulation will produce desired changes, and future research needs to address the methodological problems cited above.

The various roles of the supervisor in counselor training have been addressed in the literature by several authors. Hess (1980) indicated that the supervisor can be a scholar-teacher, therapist, consultant, and an evaluator. In Bartlett's (1983) synthesis of Hess's parameters of supervision, he indicated that communication in the roles of scholar-teacher and evaluator is one-way from supervisor to supervisee, while in the consultant role communication is two-way. Communication in the therapist role will vary.
Bernard (1979) described a model of supervision, referred to as a discrimination model, which integrates the characteristics of supervision in terms of its goals and roles. This model identifies the goals of supervision as increasing process, personalization, and conceptualization skills in the trainee, with the supervisor roles being teacher, counselor, and consultant. Bernard's roles overlap with Hess's but she did not include evaluation as a supervisor role. However, she stated that an important advantage of both trainee and supervisor being familiar with the same model is that it makes feedback, communication and evaluation easier. Bernard reported in field testing of her model, supervisors consistently reported satisfaction. However, no empirical data were cited to support this contention, and trainee satisfaction was not considered.

The role induction in the present study provides the trainee with a model for conceptualizing supervisory roles and goals as described by Bernard. This model was chosen because it is theoretical, and because it provides a clear and concise overview of supervision objectives. In addition, in a previous study (Bahrick, 1986) a role induction procedure using this model was successful in producing significant positive changes in trainees' self-reported understanding of supervision and more open participation in supervision.
Three studies were found in the empirical literature using a role induction procedure to prepare trainees for supervision. Bahrick (1986) used a taped and written description of roles and goals based on the Bernard model. Supervisees' perceptions and expectations regarding these goals and roles were measured prior to supervision, and again just before role induction and toward the end of the practicum. Satisfaction with supervision was measured by the semantic differential. Results indicated that at the beginning of the practicum, trainees reported some confusion about conceptualization of supervision and about role appropriate behavior. Between the first and second measurement periods, trainees became less likely to reveal their concerns to their supervisors and their attitude toward supervision became more negative. After role induction, trainees reported having a clearer conceptualization of supervision and of role-appropriate behavior, and reported that they had became more open to revealing their concerns to their supervisors. However, they did not rate supervision significantly more positively.

The other two studies on the effects of role induction in supervision failed to find significant effects. Prignano (1985) assigned trainees to two groups. The experimental group viewed a role induction videotape showing the intent, process, role behaviors and goals of supervision through
five vignettes of actual supervision sessions. The control group viewed a videotape of an interview with Carl Rogers discussing his views and approach to counselor supervision. Effects of the role induction procedure were measured with the Supervision Perception Form (Hepner & Roehlke, 1983), and with two measures used in counseling, i.e. Expectations about Supervision (modified by Prignano from the Expectations about Counseling Questionnaire, Tinsley, Workman & Kass, 1980), and the shortened version of the Counselor Rating Form (Corrigan & Schmidt, 1983). Prignano reported that the treatment group did not differ from the control group on expectancies for supervision, on degree of comfort, on perception of supervision or ratings of their supervisors as a consequence of viewing the role induction video tape. Prignano concluded that because of limitations of the design such as small sample size and limited control over assignment of subjects to supervisors and to experimental and control groups, the utility of a videotaped pretraining procedure for supervisees remains unresolved.

A study by Passen (1982) investigated the effects of a role induction videotape on various aspects of supervision. The treatment group viewed a videotape showing a typical session between trainee and supervisor; the control group read material on basic counseling and interview techniques. Passen found that the role
induction tape had no effect on trainee's expectations about supervision, or on measures of satisfaction with supervision. An interesting finding of the study was that for all subjects, the larger the discrepancy between what trainees expected and what they actually experienced, the higher were their ratings of satisfaction with supervision. Passen interpreted this to mean that when trainees actually experience a better supervisory relationship than they expect, they rate supervision more favorably.

Although the studies cited above by Prignano (1985) and Passen (1982) failed to find the expected effect on supervision of their role induction procedure, the study by Bahrick (1986) indicated that a role induction procedure can have an impact in supervision just as it does in the counseling setting. The potentially beneficial practical implications of this area of research for the supervisory process warrant further exploration. Studies employing different measures than those already used, as well as various pre-training techniques are needed.

Bordin conceded that before the role of the working alliance can be assessed in supervision, a means of measuring this construct must be developed. Bordin (1987, personal communication) stated that no such measure was currently available. Therefore, a preliminary step in the
present investigation of the working alliance in supervision requires the development of an instrument to measure this construct. Just as the Working Alliance Inventory (Horvath & Greenberg, 1985) has served as a foundation for research into the role of the working alliance in counseling, an adaptation of this instrument could serve as a foundation for exploration of the working alliance in supervision.

The present research explored the effects of the role induction procedure on the working alliance within supervision using an adaptation of Horvath and Greenberg's (1985) Working Alliance Inventory. Trainees' evaluation of supervision was assessed using a semantic differential technique (Osgood, 1952), and mutual agreement on specific goals and tasks of supervision were assessed using the Supervisory Emphasis Rating Form (Lanning, 1986).
CHAPTER III

METHOD

This chapter includes the following aspects of the research methodology: description of subjects; procedure; design; description of the role induction audiotape; description of the attention control audiotape; instruments; and research hypotheses.

Overview

Seventeen trainees enrolled in their first, second or third quarter of counseling practicum at Ohio State University, and their 10 supervisors participated in an investigation of the supervisory process. Trainees were assigned either to an experimental (n = 10) or attention-control (n = 7) group condition. Both trainees and supervisors were blind to the purpose of the study and experimental condition. Following the third supervisory session, the experimental trainees listened to a 7-minute role-induction audiotape which provided information about the purpose and process of supervision, and the attention control trainees listened to a 7-minute audiotape which contained information irrelevant to the role induction procedure.
Subjects in both conditions completed three instruments designed to assess evaluative feelings about supervision, the strength of the supervisory working alliance, and areas of emphasis or foci of supervision sessions. All instruments were completed by both the supervisor and the supervisee just prior to listening to the audiotape, following the fifth supervisory session and again prior to the final supervisory session. Table 1 graphically illustrates the experimental design.

Subjects

The initial pool of participants consisted of 28 graduate student trainees enrolled in their first, second or third quarter of practicum, and 15 supervisors at Ohio State University. Assignment of trainees to supervisors was done in accordance with usual practicum procedures, i.e. both trainees and supervisors were given an opportunity to state, confidentially to the practicum coordinator, whether there was anyone with whom they preferred not to work, and these preferences were honored. As trainees became available each academic quarter, they were assigned to Experimental or Control conditions. In order to control for trainee level of experience in supervision, trainees within first, second or third quarter of practicum experience were randomly assigned to experimental or control conditions.
### Table 1

**Experimental Design**

**TIME IN WEEKS**

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**NOTE:** Sem. Dif. = semantic differential, WAI/S = Working Alliance Inventory/Supervision, SERF = Supervisory Emphasis Rating Form. Supervisors did not receive the role induction or placebo role induction; only trainees were exposed to the audiotapes.
Of the 28 trainees and 15 supervisors who agreed to participate in the study, 11 trainees and the 5 supervisors paired with these trainees did not complete the study. Of those trainees who dropped out, 7 did so because the client that they were seeing in practicum did not remain in counseling for the duration of the academic quarter, resulting in the trainee having an insufficient number of supervision sessions to complete the study. The remaining 4 subject pairs voluntarily withdrew from the study; either the supervisor or the trainee did not complete all of the instruments and so their data could not be used. A usable N of 17 trainees and their 10 supervisors resulted. Ten trainees were in the experimental group and 7 in the control group. Table 2 illustrates subject attrition.

Of those subjects who did not complete the study, base-line data were available for three Experimental pairs and four Control pairs. Analysis of these data revealed no significant differences for base-line measures between those who completed the study and those who dropped out.

Trainees were in their first or second year of the counseling psychology graduate program and were enrolled in practicum courses during Winter, Spring, Summer and Fall quarters of 1988. All trainees were enrolled in either their first, second or third quarter of in house practicum experiences. Of the 17 trainees who completed the study, 13 were female and 4 were male.
Table 2

**Subject Attrition: Original Number of Subjects and Subjects who Completed the Study**

Original Trainee Assignments to Supervisors and Experimental vs. Control Conditions

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Note: \( n = 13 \) original Experimental trainees and 15 Control trainees, and 15 supervisors.

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Supervisors and Trainees who Completed the Study

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Note: \( n = 10 \) Experimental trainees, 7 Control trainees, and 10 supervisors.

* indicates where one supervisor or one trainee dropped out of the study.
In order to minimize the effects of trainee experience, at the outset of each quarter as trainees became available, those in their first, second or third quarters of practicum were evenly distributed to control and experimental conditions. Due to subject attrition, this balance was not perfectly maintained, however trainee level of experience was not significantly different for control vs. experimental groups. Control trainees had a mean of 2.1 quarters of practicum experience vs. 2.0 for experimental trainees. In order to minimize effects of individual supervisors, in all instances in which a supervisor worked with more than one trainee, these trainees were split between control and experimental conditions. As can be observed in Table 1, subject attrition did not alter this balance.

Supervisors for the study were advanced graduate students and faculty in the Counseling Psychology program. Of the 10 supervisors who completed the study, 9 held master's degrees and one was a faculty member. All of the supervisors had had some formal, systematic preparation in the practice of supervision. Three of the advanced graduate-level supervisors had completed internship experiences and 6 were pre-internship. The 3 post-internship supervisors had completed a practicum in theory and practice of supervision, and held graduate assistantships as practicum supervisors. The 6 pre-internship supervisors had either completed, or were participants in a practicum in supervision at the time
of the study. The one faculty supervisor in the study had had 4 years of post-doctoral experience as a supervisor. There were three male and 7 female supervisors. Four supervisors supervised more than one trainee and 6 supervised only one trainee.

The counseling practicum for trainees at Ohio State is a three-quarter sequence involving up to 10 weeks of counseling per quarter. Trainees carry an average caseload of two clients per week. Typically, supervisors directly observe client sessions via closed circuit-camera and provide one hour of individual supervision per each client session.

Procedure

At the outset of each of the four academic quarters, the experimenter or an associate visited each practicum section and solicited voluntary participation in the study. The procedures were verbally explained and written instructions were provided to trainees and supervisors (see Appendix A). Both trainees and supervisors were blind as to the purpose of the study; they were informed that the investigation pertained to the supervision process and that results would be available upon its completion.

Assignment of trainees to experimental and control conditions was done at the outset of each academic quarter. To the extent possible, experimental and control trainees
were matched on the basis of experience level. The research design used was an attention-control group design with pretest, posttest, and post-posttest measures (Campbell and Stanley, 1963). Trainees and their supervisors were administered the Working Alliance Inventory/Supervision, the Supervisory Emphasis Rating Form and a semantic differential at three points during the academic quarter: after the third supervision session (pretest), after the fifth supervision session (posttest), and just prior to the final supervision session (post-posttest). Individual supervisors dispensed packets of instruments to trainees following the specified supervision sessions. Both trainees and supervisors completed the instruments in privacy.

Role induction for the experimental group, and placebo role induction for the control group occurred after the third supervisory session. Role induction occurred at this particular point in time because research in the domain of counseling (e.g. Gurman, 1977; Orlinsky and Howard, 1978; and Saltzman, Leutgert, Roth, Creaser, and Howard, 1976) suggests that after the third session, the value of the working alliance does not change much over time and is a good predictor of its final value. Thus, the attempt to influence the supervisory working alliance via role induction occurred after the third supervisory session. The final administration of the instruments occurred prior to the final supervision session so as to avoid confounding
perceptions of supervision with relationship-termination issues.

**Role Induction**

After the third supervisory session, but before the fourth session, the experimental subjects listened to a 7 minute audiotape describing Bernard's (1979) model of supervision (see Appendix B). Trainees were given the tape by their supervisors and listened to the tape in privacy. Supervisors had no knowledge of the content of the tape other than the fact that it pertained to supervision and was meant to be instructive. Trainees were told that the tape was meant to be instructive and that their knowledge of its content might enhance communication in their supervision. They were instructed to listen carefully to the tape and to feel free to start and stop the tape if this would aid comprehension. Trainees were encouraged to discuss the content of the tape with their supervisors, but requested not to discuss the tape with other trainees. Trainees also were encouraged to draw upon their knowledge of this model in future supervision sessions in order to clarify supervision goals and tasks with their supervisor, and to facilitate getting their supervision needs met. Trainees were told that their knowledge of this model may thus enhance communication during supervision.
After the third supervisory session, but before the fourth session, control subjects also listened to a 7 minute tape (see Appendix B). They were informed that the tape contains information about ethical issues in supervision that are important for trainees in a practicum situation to know. The content of this tape focused on ethical and legal responsibilities of supervisors as based on Cormier and Bernard (1982).

Instruments

Three instruments were used to assess the effects of the role induction: The Working Alliance Inventory (Horvath and Greenberg, 1985) modified for use in the present study and renamed the Working Alliance Inventory/Supervision, the Supervisor Emphasis Rating Form (Lanning, 1986), and a semantic differential (Osgood, Suci and Tannenbaum, 1957) (see Appendix C).

The Working Alliance Inventory/Supervision used in the present study is an adaptation of Horvath and Greenberg's (1985) Working Alliance Inventory which was designed to measure the strength of the working alliance in the counseling relationship. An important consideration in the choice of dependent measures for this study was that the instrument be conceptually free of issues that would make it specific to any particular theoretical orientation of the
supervisor. According to Horvath and Greenberg (1985), Bordin's (1979, 1983) conceptualization of the working alliance meets this criterion. The original and adapted forms of this instrument are based on Bordin's (1979, 1983) conceptualization of the working alliance. The original instrument consists of two parallel forms, one for the therapist and one for the client. Each form of the original instrument consists of 36 statements related to client and therapist perceptions of the counseling relationship which are responded to on a seven point Likert-type scale. Of the 36 statements, 12 statements are used to measure each of the three components of the working alliance. These components are 1) agreement on tasks of therapy, 2) agreement on goals of therapy and 3) the presence of an emotional bond.

The criteria used by Horvath and Greenberg (1986) for inclusion of an item on the Working Alliance Inventory were as follows: Out of an original item pool of 91 statements, seven expert raters (researchers who had published in the area of the working alliance within the last 10 years) determined on a scale of 1 to 5 whether a statement was relevant to the construct of the working alliance. Items receiving a mean rating of 4 or above were retained. In addition, these raters were asked to decide which of the 3 components of the working alliance (goals, tasks or bonds) a particular statement was referencing. Minimal criteria for inclusion of a statement were "70% agreement among the seven
raters" (p.540) with the authors' original specification of the statement. Further consensual validation of the WAI was done using a random sample of 21 clinical and counseling psychologists as raters. Inclusion criteria were the same as above: a mean rating of 4 in terms of relevance to the construct of the working alliance, and "70% agreement" (p.540) as to which component the item referenced.

With regard to validity, Horvath and Greenberg (1985) found that high ratings on the "agreement on tasks" component of the working alliance, as measured after the third session, were predictive of outcome (as based on the Client Posttherapy Questionnaire, Strupp, Wallach and Wogan, 1964) and accounted for 30-46% of the outcome variance. The global measure of the working alliance was also found to be highly correlated with numerous outcome measures (Mosley, 1983, as cited by Horvath and Greenberg, 1985).

The Working alliance Inventory/Supervision was based directly on Horvath and Greenberg's (1985) instrument, with some minor variations. As in the original instrument, parallel forms were developed; one for the supervisor and one for the supervisee. Where Horvath and Greenberg use the terms "therapist" and "client", the adapted version uses the terms "supervisor" and "supervisee". In addition, where reference was made to "client problems", this was modified to read "supervisee issues" or "supervisee concerns". The result was thirty-six Likert-type statements relating to
supervisor and supervisee perceptions of the goals, tasks and emotional bonds that characterize their relationship.

The instrument was given to seven raters who were advanced doctoral students or held Ph.D's in counseling psychology. Raters were given Bordin's (1983) definitions of goals, tasks and bonds and asked to decide which of these three aspects of the working alliance were relevant to each of the 36 statements. Inter-rater agreement reached a 97.6% level for statements relevant to the bonding aspect of the working alliance: out of 12 items on the scale, all 7 raters agreed on 10, and 6 out of 7 agreed on 2. Raters were unable to make reliable distinctions between statements relevant to supervisory goals vs. tasks; Agreement was only 60% for statements relevant to goals, and 64% for tasks. Thus, the adapted instrument seems to consist of two factors; Bond, and goals/tasks.

The Supervisory Emphasis Rating Form (Lanning, 1986) was designed to measure or describe the specific areas of emphasis established by a supervisor with a trainee. The areas of emphasis are those identified by Bernard (1979), (process, personalization, and conceptualization skills) with Lanning's (1986) addition of the area of professional behavior skills. Process skills apply to the interaction between counselor and client, including such skills as
attending behaviors, use of immediacy, responding behaviors, and self-disclosure; Personalization skills apply to attitudes, feelings and beliefs of the counselor, and include such skills as recognition of personal values and limits, management of personal feelings, ability to tolerate ambiguity, and willingness to take risks; Conceptualization skills apply to cognitive abilities of the counselor, including the identification of client patterns and themes, ability to focus the session, choosing appropriate techniques, and interpreting client behaviors within a theoretical framework; Professional behavior skills are aspects of a counselor's behavior that reflect an ability to adhere to commonly accepted standards of professional practice. Some examples include being on time for appointments, maintaining confidentiality, making appropriate referrals, and maintaining appropriate personal relationships with clients.

The instrument provides a measure of the specific skills or areas of focus that the trainee perceives him or herself to be working on in supervision. Parallel forms for supervisor and supervisee permit the assessment of the congruence of perceptions about areas of emphasis established in supervision. The instrument consists of 60 Likert-type statements, with 15 statements each relating to four areas of possible supervisor emphasis: 1) process skills, 2) personalization skills, 3) conceptualization
skills, and 4) professional behavior skills.

Lanning (1986) conducted a Cronbach alpha reliability analysis based on 239 completed instruments. Subjects were trainees and supervisors from a representative sample of counseling programs around the country. Intercorrelations between subscales and item-to-total correlations for each item were computed. Results of the item analysis revealed that all of the items were making contributions to the total instrument. Item total correlations were all high and positive indicating no need to delete any items. Correlations between the subscales were high and ranged from .64 to .75. Reliabilities for each of the 4 subscales ranged from .89 to .94, and total instrument reliability was .97. Lanning (1986) also reports that separate trainee vs. supervisor reliability analyses yielded reliabilities similar to the total group results.

A semantic differential was used as a measure of trainees' evaluation of supervision. The semantic differential used in the present study consists of 10 bi-polar adjective pairs to which trainees indicate their evaluative feelings about individual practicum supervision. A seven-point Likert-type scale is used with anchor words representing one and seven, and four being neutral. Items were counterbalanced to avoid response bias.

The semantic differential was developed as a measurement
technique by Osgood (1952) and has been extensively used in attitude assessment. The 10 bi-polar word pairs were selected from a factor analysis of 76 bi-polar word pairs (Osgood, Suci and Tannenbaum 1958). These authors found that in measuring the meaning of a concept to an individual, three factors emerged as most salient: evaluation, activity and potency. Of interest in the present study are supervisees' evaluative ratings of supervision. The 10 bi-polar word pairs selected for the present investigation were those that had high loadings on the evaluative factor and negligible loadings on other factors. Osgood (1952) reported test-retest correlations of .85 on group averages for the semantic differential over time intervals as long as three weeks.

Research Hypotheses

The intent of this study was to determine whether the role induction procedure affected the strength of the supervisory working alliance as perceived by supervisee and supervisor, whether role induction would result in a more positive evaluation of supervision, and whether the role induction resulted in trainees' having a clearer perception or shared understanding of the areas of focus and emphasis established in supervision. The research hypotheses can be stated as follows:
1. Role induction will result in more positive evaluations of supervision by both participants (as measured by the Semantic Differential).

2. Role induction will strengthen the working alliance by increasing the clarity of supervision goals and tasks (as measured by the Working Alliance Inventory/Supervision).

3. Role induction will result in greater congruence of perceptions of areas of emphasis in supervision. (as measured by the Supervisory Emphasis Rating Form).
CHAPTER IV

RESULTS

In this chapter, results and statistical analyses of the data from the research project are presented. Each of the three research hypotheses is considered separately.

**Hypothesis One**

Hypothesis one concerned supervisors' and supervisees' evaluative feelings about supervision. It was predicted that the role induction procedure would result in more favorable evaluations of supervision by Experimental supervisors and supervisees, as measured by the Semantic Differential.

Means and standard deviations for the Semantic Differential are presented in Table 3. As can be observed in Table 3, despite within-practicum-level random assignment of supervisees to treatment groups, Experimental supervisees had baseline scores that were higher than Control supervisees ($t(15) = 1.81, p = .09$) as a result of sampling error. Although this difference is not statistically significant, the small sample limited the power of the $t$-test, and increased the probability of a Type II error. As a result, subsequent analyses of the treatment effect were conducted using analysis of covariance. The analysis of
Table 3

Means, Adjusted Means, and Standard Deviations for the Semantic Differential

<table>
<thead>
<tr>
<th></th>
<th>Experimental Supervisors (n=10)</th>
<th></th>
<th>Control Supervisors (n=7)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>Adjusted Mean</td>
<td>SD</td>
<td>Mean</td>
</tr>
<tr>
<td>Pre</td>
<td>53.7</td>
<td></td>
<td>5.0</td>
<td>52.7</td>
</tr>
<tr>
<td>Post</td>
<td>54.6</td>
<td>54.2</td>
<td>7.16</td>
<td>54.8</td>
</tr>
<tr>
<td>Post-Post</td>
<td>56.7</td>
<td>56.3</td>
<td>2.3</td>
<td>54.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Experimental Supervisees (n=10)</th>
<th></th>
<th>Control Supervisees (n=7)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>Adjusted Mean</td>
<td>SD</td>
<td>Mean</td>
</tr>
<tr>
<td>Pre</td>
<td>60.7</td>
<td></td>
<td>5.61</td>
<td>54.1</td>
</tr>
<tr>
<td>Post</td>
<td>58.1</td>
<td>55.3</td>
<td>7.9</td>
<td>59.3</td>
</tr>
<tr>
<td>Post-Post</td>
<td>57.7</td>
<td>54.9</td>
<td>5.9</td>
<td>55.5</td>
</tr>
</tbody>
</table>

Note: Maximum score on the semantic differential is 70.0, a neutral score is 40.0 and a minimum score is 10.0
covariance statistically adjusted baseline differences so as to control for sampling error and so that observed group differences on the post tests could be confidently attributed to the intervention. Adjusted means used in the analysis of covariance are presented in Table 3.

When analyzing treatment group effects (the between groups factor), data were collapsed across the 2 post test sessions, to determine if overall the Experimental group differs from the Control group. In effect, the dependent variable becomes the adjusted sum of post and post-post values. The analysis of covariance allows only a comparison of post to post-post performance, and does not permit a comparison of base-line to post test performance because the base-line performance was used as a covariate rather than a dependent measure. However, the important advantage of the analysis of covariance is that differences on the post test results could be attributed with confidence to the role induction intervention. Determining the effects of the intervention were judged to be of the most interest and relevance to this study.

Two separate 2 (treatment group) x 2 (time) repeated measures analyses of covariance were conducted on Semantic Differential scores from the post and post-post sessions. One analysis used supervisor scores and one used supervisee scores. Base-line scores served as the covariate. Results of these analyses are presented in Tables 4 and 5.
### Table 4

**Repeated Measures Analysis of Covariance for Supervisors on the Semantic Differential**

<table>
<thead>
<tr>
<th>Source</th>
<th>Adjusted DF</th>
<th>Adjusted MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group</td>
<td>1</td>
<td>.71</td>
<td>.04</td>
<td>.844</td>
</tr>
<tr>
<td>Adjusted Between Group Error</td>
<td>14</td>
<td>17.48</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>1</td>
<td>4.81</td>
<td>.29</td>
<td>.600</td>
</tr>
<tr>
<td>Group x Time</td>
<td>1</td>
<td>14.69</td>
<td>.88</td>
<td>.364</td>
</tr>
<tr>
<td>Within Group Error</td>
<td>15</td>
<td>16.75</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Table 5

**Repeated Measures Analysis of Covariance for Supervisees on the Semantic Differential**

<table>
<thead>
<tr>
<th>Source</th>
<th>Adjusted DF</th>
<th>Adjusted MS</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group</td>
<td>1</td>
<td>182.46</td>
<td>6.48</td>
<td>.023*</td>
</tr>
<tr>
<td>Adjusted Between Group Error</td>
<td>14</td>
<td>28.17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>1</td>
<td>34.85</td>
<td>1.74</td>
<td>.207</td>
</tr>
<tr>
<td>Group x Time</td>
<td>1</td>
<td>22.62</td>
<td>1.13</td>
<td>.305</td>
</tr>
<tr>
<td>Within Group Error</td>
<td>15</td>
<td>20.06</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: * p ≤ .05
The hypothesis that the Experimental group would show a more positive evaluation of supervision on the Semantic Differential was not supported. In fact, the Experimental supervisees had scores (post $X = 55.3$, post-post $X = 54.9$) which were significantly lower than Control supervisees (post $X = 62.1$, post-post $X = 58.4$), ($p = .023$).

Despite the fact that Experimental supervisees and supervisors did not evaluate supervision more positively following the role induction procedure as compared to their Control group counterparts, The Experimental pairs did show significantly more congruence in their evaluation of supervision ($r = .824$, $p < .005$) directly following the role induction than did Control pairs ($r = -.152$). The difference between correlations for Experimental vs. Control pairs is also significant ($z = 2.12$, $p < .017$).

The statistically significant correlation between Experimental pairs results because the Experimental supervisees' evaluation of supervision decreased from the base-line session to the post session (though these ratings still reflect a quite positive evaluation of supervision) and these ratings are more reflective of the ratings of their supervisors. The significant correlation diminished ($r = .314$) by the post-post session, and approximated the correlation for Control pairs ($r = .358$). Correlations for supervisor/supervisee pairs are presented in Table 6.
<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
<th>Post-Post</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Experimental</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Semantic Differential</td>
<td>.533*</td>
<td>.824***</td>
<td>.314</td>
</tr>
<tr>
<td>Alliance</td>
<td>-.005</td>
<td>.798***</td>
<td>.275</td>
</tr>
<tr>
<td>Task</td>
<td>.133</td>
<td>.747**</td>
<td>.328</td>
</tr>
<tr>
<td>Bond</td>
<td>.104</td>
<td>.501</td>
<td>.059</td>
</tr>
<tr>
<td>Goal</td>
<td>-.142</td>
<td>.778**</td>
<td>.107</td>
</tr>
<tr>
<td>Behavior</td>
<td>-.631*</td>
<td>-.372</td>
<td>-.207</td>
</tr>
<tr>
<td>Process</td>
<td>-.500</td>
<td>.213</td>
<td>.280</td>
</tr>
<tr>
<td>Personalization</td>
<td>-.113</td>
<td>-.270</td>
<td>-.462</td>
</tr>
<tr>
<td>Conceptualization</td>
<td>-.345</td>
<td>.203</td>
<td>-.113</td>
</tr>
<tr>
<td><strong>Note:</strong> * p ≤ .05</td>
<td>** p ≤ .01</td>
<td>*** p ≤ .005</td>
<td>(n = 10 pairs)</td>
</tr>
</tbody>
</table>

| **Control**                  |      |      |           |
| Semantic Differential        | .206  | -.152 | .358     |
| Alliance                     | .131  | .111  | .500     |
| Task                         | .046  | .102  | .177     |
| Bond                         | .414  | .540  | .745*    |
| Goal                         | -.104 | -.042 | .239     |
| Behavior                     | -.006 | .258  | .432     |
| Process                      | .633  | .594  | .751*    |
| Personalization              | .201  | -.160 | .755*    |
| Conceptualization            | -.103 | -.044 | -.023    |
| **Note:** * p ≤ .05          | ** p ≤ .01 | *** p ≤ .005 | (n = 7 pairs) |
Hypothesis 2

The hypothesis that role induction would strengthen the working alliance and that this would be reflected in higher ratings on the goal and task subscales of the Working Alliance Inventory/Supervision was not supported.

Means and standard deviations for the Working Alliance and the three subscales (Goals, Tasks and Bond) are presented in Table 7. As with the Semantic Differential, baseline scores were not comparable for Experimental and Control groups, this time for the supervisors. The difference between Experimental and Control supervisors on the bond scale approached statistical significance ($F(1,15) = 4.2, p = .053$).

This hypothesis was evaluated with two separate 2 (treatment group) x 2 (time) multivariate repeated measures analyses of covariance. The task, goal, and bond subscale scores from the post and post-post sessions were the dependent measures, and the pre-test scores on the corresponding subscales served as covariates. Adjusted means for these measures are presented in Table 7.

Results of these analyses are presented in Tables 8 and 9. As stated, no significant results were obtained. However, as with the Semantic Differential, Experimental supervisor/supervisee pairs showed significantly more agreement on the Task ($r = .747, p \leq .01$) and Goal ($r = .778, p \leq .01$) subscales, and on the global Working Alliance ($r = .798, p$...
Table 7

Means, Adjusted Means, and Standard Deviations for the Working Alliance Inventory/Supervision

<table>
<thead>
<tr>
<th>Experimental</th>
<th>Pre</th>
<th>Post Adjusted</th>
<th>Post-Post Adjusted</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
</tr>
<tr>
<td>Supervisors (n=10)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alliance</td>
<td>194.5</td>
<td>13.7</td>
<td>197.9</td>
</tr>
<tr>
<td>Task</td>
<td>65.1</td>
<td>5.4</td>
<td>65.4</td>
</tr>
<tr>
<td>Goal</td>
<td>62.2</td>
<td>5.1</td>
<td>63.6</td>
</tr>
<tr>
<td>Bond</td>
<td>67.2</td>
<td>4.6</td>
<td>68.9</td>
</tr>
<tr>
<td>Supervisees (n=10)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alliance</td>
<td>213.4</td>
<td>23.2</td>
<td>206.6</td>
</tr>
<tr>
<td>Task</td>
<td>72.6</td>
<td>8.3</td>
<td>69.3</td>
</tr>
<tr>
<td>Goal</td>
<td>68.9</td>
<td>11.3</td>
<td>67.3</td>
</tr>
<tr>
<td>Bond</td>
<td>71.9</td>
<td>6.8</td>
<td>70.0</td>
</tr>
<tr>
<td>Control</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervisors (n=7)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alliance</td>
<td>201.7</td>
<td>11.9</td>
<td>200.7</td>
</tr>
<tr>
<td>Task</td>
<td>66.1</td>
<td>4.8</td>
<td>66.9</td>
</tr>
<tr>
<td>Goal</td>
<td>64.4</td>
<td>5.1</td>
<td>63.4</td>
</tr>
<tr>
<td>Bond</td>
<td>71.1</td>
<td>4.0</td>
<td>70.4</td>
</tr>
<tr>
<td>Supervisees (n=7)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alliance</td>
<td>204.5</td>
<td>39.9</td>
<td>208.8</td>
</tr>
<tr>
<td>Task</td>
<td>67.8</td>
<td>14.2</td>
<td>69.8</td>
</tr>
<tr>
<td>Goal</td>
<td>67.7</td>
<td>14.9</td>
<td>69.0</td>
</tr>
<tr>
<td>Bond</td>
<td>69.0</td>
<td>11.6</td>
<td>70.0</td>
</tr>
</tbody>
</table>

Note: Maximum score for global Working Alliance is 252, neutral is 144 and minimum is 36
Maximum scores for Task, Goal and Bond subscales are 84, neutral are 48 and minimum are 12
Table 8

Repeated Measures Multivariate Analysis on the 3 Working Alliance Inventory/Supervision Subscales for Supervisees

<table>
<thead>
<tr>
<th>Source</th>
<th>Wilk's Lambda</th>
<th>Hyp df</th>
<th>Error df</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group</td>
<td>.730</td>
<td>3</td>
<td>10</td>
<td>1.22</td>
<td>.350</td>
</tr>
<tr>
<td>Time</td>
<td>.774</td>
<td>3</td>
<td>13</td>
<td>1.26</td>
<td>.328</td>
</tr>
<tr>
<td>Group x Time</td>
<td>.840</td>
<td>3</td>
<td>13</td>
<td>.920</td>
<td>.506</td>
</tr>
</tbody>
</table>

Table 9

Repeated Measures Multivariate Analysis on the 3 Working Alliance Inventory/Supervision Subscales for Supervisors

<table>
<thead>
<tr>
<th>Source</th>
<th>Wilk's Lambda</th>
<th>Hyp df</th>
<th>Error df</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group</td>
<td>.918</td>
<td>3</td>
<td>10</td>
<td>.238</td>
<td>.826</td>
</tr>
<tr>
<td>Time</td>
<td>.892</td>
<td>3</td>
<td>13</td>
<td>.524</td>
<td>.673</td>
</tr>
<tr>
<td>Group x Time</td>
<td>.841</td>
<td>3</td>
<td>13</td>
<td>.817</td>
<td>.507</td>
</tr>
</tbody>
</table>
immediately following the role induction than did Control group counterparts. These statistically significant correlations were not maintained over time to the post-post session. Results of z-tests of differences between correlations for Experimental vs. Control pairs at the post session showed significant differences for Goal (z = 1.69, p ≤05), and for the global Working Alliance (z = 1.59, p ≤05).

Correlations for the Bond scale showed a different pattern. Control supervisor/supervisee pairs began with a higher agreement on Bond than Experimental pairs and this agreement steadily increased over the post session and reached statistical significance at the post-post session (r = .745, p ≤ .05). Correlations for supervisor/supervisee on the three subscales of the Working Alliance Inventory/Supervision are presented in Table 6.

Hypothesis 3

The hypothesis that the role induction would result in greater congruence of perceptions of areas of emphasis as measured by the Supervisory Emphasis Rating Form was not supported.

Means and standard deviations for the four subscales of the Supervisory Emphasis Rating Form are presented in Table 10. As with the other instruments, base-line differences existed between Experimental and Control groups.
<table>
<thead>
<tr>
<th>Experimental</th>
<th>Pre</th>
<th>Post</th>
<th>Post-Post</th>
<th>Pre</th>
<th>Post</th>
<th>Post-Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisors</td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
<td>Mean</td>
<td>SD</td>
<td>Mean</td>
</tr>
<tr>
<td>supervisors</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(n=10)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavior</td>
<td>21.9</td>
<td>0.9</td>
<td>22.0</td>
<td>22.2</td>
<td>6.0</td>
<td>24.6</td>
</tr>
<tr>
<td>Process</td>
<td>47.9</td>
<td>15.2</td>
<td>44.7</td>
<td>44.1</td>
<td>15.8</td>
<td>45.3</td>
</tr>
<tr>
<td>Personalization</td>
<td>51.9</td>
<td>16.2</td>
<td>50.5</td>
<td>55.0</td>
<td>14.4</td>
<td>53.8</td>
</tr>
<tr>
<td>Conceptualization</td>
<td>53.7</td>
<td>13.4</td>
<td>47.0</td>
<td>49.0</td>
<td>14.5</td>
<td>45.5</td>
</tr>
</tbody>
</table>

| Supervisees     | Mean    | SD       | Mean      | Mean    | SD       | Mean      |
| supervisors     |          |          |           |          |          |           |
| (n=10)          |         |          |           |         |          |           |
| Behavior        | 43.9    | 21.1     | 48.8      | 45.0    | 20.7     | 48.4      |
| Process         | 73.7    | 14.8     | 78.8      | 73.9    | 12.4     | 67.1      |
| Personalization | 68.6    | 21.7     | 73.3      | 70.1    | 17.7     | 70.4      |
| Conceptualization| 58.9    | 16.8     | 65.4      | 64.9    | 20.5     | 58.6      |

| Control     | Mean    | SD       | Mean      | Mean    | SD       | Mean      |
| Supervisors |          |          |           |          |          |           |
| (n=7)       |         |          |           |         |          |           |
| Behavior    | 28.1    | 14.1     | 26.5      | 26.4    | 9.8      | 26.9      |
| Process     | 44.4    | 19.8     | 48.8      | 49.5    | 19.5     | 45.0      |
| Personalization | 56.2    | 9.1      | 59.1      | 54.7    | 17.5     | 56.1      |
| Conceptualization| 54.0    | 13.8     | 55.0      | 53.0    | 13.8     | 55.2      |

| Supervisees | Mean    | SD       | Mean      | Mean    | SD       | Mean      |
| (n=7)       |         |          |           |          |          |           |
| Behavior    | 37.0    | 7.8      | 38.1      | 42.0    | 12.8     | 34.9      |
| Process     | 57.2    | 16.1     | 56.7      | 61.5    | 15.0     | 50.0      |
| Personalization | 64.2    | 10.0     | 64.8      | 68.0    | 16.2     | 61.8      |
| Conceptualization| 63.5    | 11.5     | 61.5      | 62.1    | 10.5     | 54.0      |

Note: Maximum scores are 104, minimum scores are 15
Experimental supervisees differed significantly from Control supervisees on the process scale (F (1,15) = 4.69, p = .047).

A single multivariate repeated measures analysis of covariance was conducted to evaluate the above hypothesis. The difference between supervisor and supervisee pair ratings was computed on each of the four scales for both the post and post-post sessions. Difference scores are displayed in Table 11. Smaller differences are reflective of greater congruence or agreement of pairs. The covariates used for the analysis were the difference scores obtained from the pre-tests.

Results of this analysis are presented in Table 12. The hypothesis was not supported. Furthermore, correlations, as shown in Table 6, indicate no greater congruence for the Experimental group than for the Control group. In fact, the Control group showed significant agreement on two of the subscales at the post-post session; Process (r = .751, p ≤ .05) and Personalization (r = .755, p ≤ .05), while the Experimental pairs did not.
<table>
<thead>
<tr>
<th></th>
<th>Experimental</th>
<th>Control</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Observed Mean</td>
<td>Adjusted Mean</td>
</tr>
<tr>
<td>Behavior</td>
<td></td>
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<tr>
<td>Pre</td>
<td>-22.0</td>
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</tr>
<tr>
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<td>-20.0</td>
</tr>
<tr>
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<td>-17.0</td>
</tr>
<tr>
<td>Process</td>
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<td>-12.9</td>
</tr>
<tr>
<td>Post</td>
<td>-34.0</td>
<td>-29.4</td>
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<tr>
<td>Post-Post</td>
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<td>-17.2</td>
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<tr>
<td>Personalization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre</td>
<td>-16.7</td>
<td>-8.0</td>
</tr>
<tr>
<td>Post</td>
<td>-22.8</td>
<td>-19.8</td>
</tr>
<tr>
<td>Post-Post</td>
<td>-16.6</td>
<td>-13.6</td>
</tr>
<tr>
<td>Conceptualization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre</td>
<td>-10.3</td>
<td>9.6</td>
</tr>
<tr>
<td>Post</td>
<td>-18.4</td>
<td>-16.7</td>
</tr>
<tr>
<td>Post-Post</td>
<td>-13.1</td>
<td>-11.4</td>
</tr>
<tr>
<td>Source</td>
<td>Wilk's Lambda</td>
<td>Hyp df</td>
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<td>---------------</td>
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</tr>
<tr>
<td>Group</td>
<td>.538</td>
<td>4</td>
</tr>
<tr>
<td>Time</td>
<td>.780</td>
<td>4</td>
</tr>
<tr>
<td>Group x Time</td>
<td>.816</td>
<td>4</td>
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</tbody>
</table>
CHAPTER V

DISCUSSION

Counselor supervision is a vital aspect of the professional training of counseling psychologists. In recent years, counselor supervisors have been challenged repeatedly to empirically document the effectiveness of the supervision process (Ryan, 1978; Ryan, Baker, Fitzpatrick & Hosford, 1969). Numerous comprehensive models of supervision have been proposed, however there is a paucity of empirical evidence to evaluate the tenability of these models, and supervisors have essentially been left with the task of translating untested supervision models into practice (Holloway & Hosford, 1983). According to Holloway and Hosford, supervisors have based their supervision strategies entirely on theory and intuitive preferences rather than empirically validated interventions. This suggests that the clinical supervision of counselors is "presently an art and not a science" (p. 73).

A primary obstacle to progress in supervision research is the failure of theory to offer clear cut directions for research (Russell, Crimmings & Lent, 1984). Holloway and Hosford (1983) maintain that theoretical statements should clearly outline researchable issues and hypotheses and involve a prescriptive focus. Accordingly, the challenge to
the field at present is to gather empirical evidence to test and refine existing conceptualizations rather than creating more models and theories.

The present investigation contributed to this end; it offers an opportunity to examine empirical evidence related to prominently held theoretical views. No empirical studies of Bordin's Working Alliance model of supervision have been conducted because a means of measuring this construct was not available. Bordin (1983) stated "for my model, indices of the strength of the supervisory alliance, unfortunately, not yet developed, will be an important object for inquiry" (p.41). Regardless of theoretical orientation, the strength of the working alliance, according to Bordin, is dependent upon the degree to which mutual explicit understanding of supervision goals and tasks have been arrived at early in the supervision process. A bonding aspect of the working alliance may develop more slowly over time, and varies in importance depending upon the theoretical orientation of the supervisor. Bordin (1983) asserts that the strength of the supervisory working alliance is related to outcome, however the model does not specify outcome criteria.

For the present investigation, Horvath and Greenberg's (1985) Working Alliance Inventory for counseling was adapted to obtain a measure of the supervisory working alliance and its three components: goals, tasks and bonds. The instrument permitted a direct test of Bordin's model in that
quantitative information about each of the three components could be examined for their relationship to process and outcome variables. Bordin's conceptualization of the working alliance suggested that all effective change processes will have to attain a basic (though unspecified) quantitative level in each of the three areas.

Parallel forms of the instrument were developed for supervisor and supervisee, and these forms permitted comparisons of perceptions about degree of agreement on goals and tasks and degree of bonding. The working alliance conceptualization did not postulate the supervisor as an autonomous provider of the key elements of supervision; neither did it suggest that the trainee's attributions were of sole importance. Rather the construct attempted to capture the interactive components of an effective working relationship. Parallel forms of the instrument permitted interactive components of the working alliance to be examined.

Evidence exists in the supervision literature that beginning trainees are often unprepared for what they will experience in their supervisory relationship, and lack clarity about supervision tasks and goals (Delaney & Moore, 1966; Cohen, 1980; Greenberg, 1980; Loganbill, Hardy & Delworth, 1982; Borders & Leddick, 1987). Bordin's model would predict that lack of clarity on supervision goals and tasks would result in an impaired working alliance. Thus, an
important early intervention for supervisors is to clarify and define the parameters of supervision. When such clarification occurs, it is typically done by individual supervisors in an informal and intuitive fashion. In the present investigation, a group of trainees were systematically "prepared" for supervision via a role induction procedure, and it was hypothesized that this would result in the formation of a stronger working alliance.

For an experimental group of trainees, an attempt was made early in the supervision process to influence the strength of the working alliance through the use of a role induction procedure. The role induction, based on Bernard's (1979) discrimination model of supervision, specified supervision goals, deliniated appropriate role behavior for supervisors and trainees, and emphasized the importance of mutual, explicit collaboration on supervision tasks.

An attention-control group of trainees received a placebo role induction which contained information about ethical issues pertaining to supervision. Regardless of the outcome of the study, the control group provided important information about the development of the working alliance, and its relationship to process and outcome variables under non-intervention conditions. Since no descriptive studies of the supervisory working alliance have been reported in the literature, this information is valuable.
Three dependent measures were used in this study. The first was a Semantic differential which provided a measure of participants' evaluative feelings about supervision. The second was the Working Alliance Inventory/Supervision, which provided a measure of the global strength of the working alliance, and also provided separate measures of the degree to which participants perceived themselves to be collaborating on supervision goals and tasks, and the mutually perceived strength of participants' bond. The third was the Supervisory Emphasis Rating Form (Lanning, 1986). This instrument is based on Bernard's (1979) discrimination model and provides a means of assessing the degree to which participants perceive themselves to be emphasizing specific supervision tasks pertaining to behavior, process, personalization and conceptualization skills. Essentially, the Working Alliance Inventory/Supervision poses the question "to what degree do supervision tasks and goals make sense, and to what extent are you collaborating on these in supervision?", while the Supervisory Emphasis Rating Form asks "what specific tasks have you been focusing on?". Parallel forms of both instruments provide a measure of degree of congruence of perceptions between supervisors and trainees.
Discussion of Findings

It was predicted that for subjects in the Experimental condition, role induction would result in more positive evaluations of supervision, higher scores on the goals and tasks components of the working alliance, and increased congruence of perceptions of areas of emphasis in supervision. None of these hypotheses were supported by the data.

The major findings of this investigation are that Experimental supervisor/trainee pairs showed significantly more congruence than Control pairs on a number of the dependent measures following the role induction procedure. Statistically significant correlations between trainee and supervisor responses were obtained for evaluation of supervision as measured by the semantic differential ($r = .824, p = .005$), the global Working Alliance ($r = .798, p = .005$), and Tasks ($r = .747, p = .01$) and Goals ($r = .778, p = .01$). Z-tests of differences between correlations for Experimental vs. Control pairs on the above measures reached at least a .05 level of statistical significance for all except Tasks ($p = .08$).

The statistically significant correlations between Experimental pairs are short-lived, and are not sustained to the end of the supervision relationship at the post-post session. Thus, the role induction seems to have had a brief
impact in terms of Experimental pairs reporting a mutual, similar view of the degree to which they were collaborating on supervision tasks and goals, and they mirrored each other in terms of their evaluative feelings about their supervision relationship. These strong correlations are not related, however, to a more positive evaluation of supervision, or to higher scores on Task and Goal subscales of the Working alliance, as might be expected. In fact, Control group trainees' final evaluation of supervision was significantly more positive (p < .02) than Experimental trainees.

Experimental pairs never achieved a high degree of congruence in their perceptions of areas of emphasis of supervision, as measured by the Supervisory Emphasis Rating Form. This suggests that the role induction did not bring about greater agreement or clarity in regard to the specific foci of supervision sessions, but instead raised the participants' awareness of the existing degree of collaboration on tasks and goals only in a global sense. This awareness did not lead to more favorable evaluations of supervision, but rather to more similar evaluations.

A possible interpretation of these results is that due to the role induction, Experimental trainees achieved a heightened awareness of the desirability of explicit collaboration on supervision tasks and goals and at the same time were more aware of the degree to which this was not
occurring. Discrepancies between this "ideal" and reality may ultimately have led to a less favorable, though perhaps more realistic evaluation of supervision.

A different pattern emerged for Control group participants. Control pairs never attained strong correlations for Goals or Tasks, however, by the end of the supervision relationship, supervisors and trainees had attained a significant correlation on the Bond scale (r = .745, p < .05). In addition, significant correlations were attained for two of the four Supervisory Emphasis Rating Form scales: Process (r = .751, p < .05) and Personalization (r = .755, p < .05). Thus, Control pairs mirrored each other in amount of bonding and had similar perceptions of the degree to which process and personalization skills had been foci of their sessions. These results must be interpreted with caution however, because out of a total of 54 separate correlation coefficients that were computed, one would expect 2 or 3 correlations to reach a .05 level on the basis of sampling error alone.

As previously stated, Control trainees evaluated supervision as significantly more positive than Experimental trainees (p = .023). It appears then, that a more positive evaluation of supervision is related more to congruence on the bond scale of the Working Alliance (an affective component) than it is to congruence on Tasks and Goals (cognitive components).
Limitations

The role induction procedure used in this investigation seemed to have only limited and temporary effects in terms of facilitating the supervision process for trainees. Factors that may have contributed to the limited impact of the role induction include the content and format of the role induction procedure itself, the small sample size, the heterogeneity of the subject pool in terms of experience level, individual supervisor effects, and ceiling effects on the instruments.

Due to small sample sizes, particularly in the Control group, large treatment effects would have been needed to attain statistically significant between group differences. If only small effect sizes could realistically be expected for the role induction, the small sample size resulted in a very conservative test of the research hypotheses.

The fact that trainees had varying levels of prior experience with supervision may also have contributed to minimizing the impact of the role induction. Role induction should be most beneficial for trainees very early in their supervision experiences, at a time when they are actively developing and testing out their expectations about the process and about appropriate role behavior. Many trainees in the study were already in their second or third quarters of practicum. These trainees may already have been
sufficiently socialized to the supervision process so that the content of the role induction may have been somewhat redundant.

The effect of individual supervisors is difficult to determine. An attempt was made to control for individual supervisor effects by assigning both Experimental and Control trainees to those supervisors who supervised more than one trainee, however, 6 of the 10 supervisors worked with only one trainee. It is not known whether or to what extent these supervisors "prepared" trainees for supervision. Thus it is difficult to determine to what extent prior, informal interactions may have pre-empted the content of the role induction.

The instruments used in this study, particularly the Working Alliance Inventory/Supervision and the Supervisory Emphasis Rating Form may not have been sufficiently sensitive to identify between group differences. Trainees tended to use mostly the high end of the instruments, and as a result, ceiling effects may have limited the amount and direction of possible self-reported change.

Conclusions

Given the limitations of the study, implications for the Working Alliance model of supervision must be stated tentatively and should be viewed with caution. The theory states that a strong working alliance must be established
early in the supervision process for positive outcome to occur, and that the quantitative value of the working alliance as measured after the third session is also the predicted final value. The data are somewhat supportive of the predictive power of early indices of the strength of the working alliance, as these values did not change significantly over time. However the value of the working alliance was not predictive of participants evaluation of supervision. Quantitative measures of the working alliance did not differ statistically for Experimental vs. Control subjects, however Control subjects evaluated supervision significantly more positively (p = .023). Further research is needed to determine the relationship of the working alliance to outcome variables, and the theory needs to be refined so that specific outcome variables are specified.

Although the role induction procedure used in this study seemed to have only limited and temporary effects, the potential clinical utility of pretraining procedures to enhance the supervisory relationship warrants further empirical exploration. Studies employing varied pretraining approaches and formats are needed in order to more fully assess the value and impact of such procedures.
REFERENCES


for predicting outcome in psychotherapy. Journal of Nervous and Mental Disease, 171, 480-491.


APPENDIX A

SOLICITATION OF SUBJECTS
Dear Colleague,

I would like to request your participation in my dissertation research, which is a study of the process of counselor supervision. If you are willing to participate, you would be asked to do the following:

Instructions to Supervisors

1. Supervisors will be asked to fill out questionnaires after the THIRD, after the FIFTH, and before the LAST supervision session with a designated supervisee. Each packet of questionnaires takes about 15 minutes to complete. Supervisors do not listen to the tape.

Please return completed questionnaires and tapes to my mailbox. Only the investigator will have access to the completed questionnaires; your supervisee will not see your responses. Results of the study will be made available to you when the study has been completed.

Your participation will be very appreciated.

Audrey Bahrick, M.A.
Dear Colleague,

I would like to request your participation in my dissertation research, which is a study of the process of counselor supervision. If you are willing to be a participant, you would be asked to do the following:

**Instructions to Practicum Students**

1. After your THIRD supervisory session with one of your supervisors (I will designate which supervisor) please fill out a packet of three questionnaires. Total estimated time to complete all three questionnaires is about 15 minutes.

2. After completing the questionnaires and BEFORE your fourth supervision session with the designated supervisor, you will be asked to listen to a short (7 minute) tape. The content of the tape concerns supervision, and is intended to be helpful to you as a supervisee. It is permissible to discuss the content of the tape with your supervisor, but please do NOT discuss it with other practicum students.

3. After your FIFTH supervision session with the designated supervisor, but before the sixth session, again fill out the same packet of questionnaires.

4. BEFORE your LAST supervision session, again fill out the same packet of questionnaires.

Please return completed questionnaires to my mailbox. Only the investigator will have access to the completed questionnaires; your supervisor will not see your responses. Results of the study will be made available to you when the study has been completed.

Your participation will be very much appreciated.

Audrey Bahrick, M.A.
APPENDIX B

SCRIPTS
ROLE INDUCTION

You are going to hear a short tape about supervision. Please listen to all of it. Feel free to start and stop the tape at any point as it is important that you understand clearly all that is said. You are encouraged to discuss the content of the tape with your supervisor, but please do not discuss it with any other practicum students.

Beginning trainees often come into supervision with little idea of what to expect. They may be unclear as to what the specific role of the supervisor is, what their own role is, and what the focus and goals of supervision will be. As you progress through the counseling psychology program, you gain exposure to many different supervisors, and as you become accustomed to being supervised, you are likely to form some ideas about what you do and don't like in supervision and what the supervision process is about. However, your ideas may not be easily verbalized or clearly formulated. Often we move into becoming supervisors ourselves with only vaguely formulated ideas about what supervision "should be", as there is little formal training in supervision.

Supervision is a complex process, and the purpose of this tape is to describe a simplified model to conceptualize supervision. Your understanding and familiarity with this model may enhance communication in your own supervision.

The model describes three goals of supervision and three roles that the supervisor can take in supervision. I will briefly describe the goals of supervision, and then turn to the roles of the supervisor. The general or global goal of supervision is to produce more competent counselors, therefore supervision focuses on the learning and improvement of counseling skills. Counseling skills can be thought of as falling into three categories: 1) process skills, 2) conceptualization skills, and 3) personalization skills. Process skills are those that enhance the process of counseling such as smoothly opening and closing the interview, reflecting, helping clients express what is on their mind, and making interpretations. Process skills include both basic and more complex counseling skills. Conceptualization skills include the ability to recognize client patterns and themes, and to translate these into counseling goals and strategies. Lastly, personalization skills involve the counselors' ability to recognize their own values and issues that may have an impact on their performance as a counselor.
Thus, I have mentioned three general goals of supervision; these are to increase process, conceptualization, and personalization skills. I will now turn to a discussion of supervisor roles.

The supervisor attempts to enhance counseling skills in the trainee. The supervisor can do this in one of three ways: sometimes the supervisor will act as a teacher, sometimes as a counselor, and sometimes as a consultant. I will describe what is meant by each of these roles. Once you are familiar with this way of viewing supervisor roles, you may find it easier to communicate your preferences and needs regarding supervisor role behavior.

As stated, the supervisors' role can be thought of as falling into three categories. In the teacher role, the supervisor's focus is on the trainee as a counselor. The goal is to instruct or transmit some knowledge or expertise. When a supervisor is in a teacher role, he or she functions as an advisor or expert. Some ways in which a supervisor may act as a teacher include evaluating observed counseling—session—interaction, suggesting specific interventions or strategies, and interpreting significant events in the counseling session.

A second supervisor role is that of counselor. In the counselor role, the supervisor focuses on the trainee as a person. The supervisor functions in much the same way that a counselor functions with a client. The same counseling skills are involved. The difference, however, is that the goal of supervision is related to trainee functioning as a counselor. Some examples of ways in which a supervisor might act as a counselor include exploring and providing opportunities to process trainee feelings in the counseling or supervision session, helping the trainee to define areas of competence and areas for growth, and facilitating trainee self exploration of concerns and worries about counseling.

The third and final supervisor role is that of a consultant. In this role, the focus is on the client of the trainee. The focus is on generating alternatives and ideas, rather than providing answers. When in the consultant role, the supervisor encourages trainee choice and responsibility. Some examples of ways in which a supervisor acts as a consultant include encouraging trainee brainstorming of strategies or interventions, allowing the trainee to determine the focus of supervision sessions, suggesting alternative strategies, interventions, or conceptualizations, and assisting with referrals.
Now that you have heard this tape, you and your supervisor can share a common way of thinking about supervision and a common language for talking about it. This provides you with a structure or framework so that you may be better able to verbalize your supervision needs and have these needs met.
PLACEBO ROLE INDUCTION

The purpose of this tape is to provide you with some important information regarding ethical and legal issues that you may face in supervision. The tape will run for about 7 minutes. Please listen to all of it and feel free to discuss its contents with your supervisor if you feel so inclined. Please do not discuss it with any other practicum students.

While it is likely that you already have had or soon will take a course dealing with ethical and legal responsibilities of psychologists, now that you are seeing clients and are being supervised, it is even more important that you be as well informed as possible concerning ethical issues that are particularly pertinent to you as a trainee, your client, and your relationship with your supervisor. Litigation involving supervision is rapidly on the increase. In fact, For the last three years, supervision rules violations have dominated the agenda of the Board of Psychology hearings in a number of states. This trend can only be curtailed by becoming well informed.

I will now present a brief overview of some of the supervisors' ethical and legal responsibilities to the clients that you are seeing in your practicum. Three general ethical and legal issues involving the supervisor and the clients of the trainee are: 1) informed consent, 2) confidentiality and limits to confidentiality, and 3) vicarious liability. I will now explain what is meant by each of these issues.

With regard to informed consent, the client must be informed that the counselor is being supervised as well as any other factors affecting the relationship, such as taping and observation. Although there may be instances when it is appropriate to honor a client's request not to be taped or observed, it is more often an ethical requirement to proceed with supervisory practices and offer the client a referral if these practices are unacceptable to the client.

With regard to confidentiality, both the supervisor and the trainee are ethically obligated to maintain confidentiality of client communications. Exceptions to this general rule could occur depending on state laws. For example, many states require the reporting of physical or sexual abuse of minors, or to warn others in the event of a dangerous client. Even in states with no legal responsibility to report such conditions, ethical standards recommend "taking reasonable personal action or informing responsible authorities after careful deliberation and
consultation with other professionals. Difficulty in resolving such dilemmas is reflected in the fact that confidentiality is considered to be a major area in which professionals malpractice. A good way to protect the rights of clients and your own rights is to disclose the limits of confidentiality at the outset of counseling.

Vicarious liability refers to the fact that the supervisor is responsible for acts of his or her trainee. This means that the supervisor is ultimately legally responsible for the welfare of clients counseled by the trainee. This has far reaching implications for the practice of supervision. Some of the implications of vicarious liability are: The supervisor needs to ensure that supervision does occur and must be familiar with each case. Regular face to face supervision contacts should be documented. For third party payments, the supervisor should conduct one face to face meeting with each of the supervisee's clients during the initial stages of counseling. The supervisor is legally responsible to know when the trainee is beyond his or her level of competence and needs assistance.

In the well known and precedent-setting Tarasoff case, the supervisor never had contact with the client. As you are likely to recall, in this case, a client told the counselor that he intended to kill his girlfriend. Although the counselor informed campus police, the client was released after questioning by police. Several months later the client did kill his girlfriend. The girlfriend's parents sued for negligence, citing failure to warn daughter of potential danger. The Supreme court of California ruled in the parents' favor. However, if the supervisor had met the client and made an independent decision that the client was not dangerous, no cause for action based on foreseeability would likely have ensued.

Other implications of vicarious liability are that referral and termination should meet the "Standard of Care". Termination should occur over several sessions. In the practicum situation, clients should be informed of the termination date as soon as it is known. Termination should never be sudden; it should be anticipated and worked up to with the client.

The professional climate for psychologists is becoming increasingly legalistic, and supervision as an activity is being subjected to greater professional scrutiny. Training programs are responding by providing more opportunities for supervisors and trainees to become aware of and skilled in recognizing unethical or illegal practices. It is hoped that this tape has increased your awareness of ethical and legal issues which you may face.
APPENDIX C

INSTRUMENTS
SUPERVISION RESEARCH QUESTIONNAIRE: SUPERVISOR FORM

DATE_______________________

LAST 4 DIGITS OF SOCIAL SECURITY #_____________________

SUPERVISION SESSION #_____________________

INSTRUCTIONS: On the following pages there are sentences that describe some of the different ways a person might think or feel about his or her supervisee. As you read the sentences, mentally insert the name of your supervisee in place of ______ in the text.

Beside each statement there is a seven point scale:

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>Rarely</td>
<td>Occasionally</td>
<td>Sometimes</td>
<td>Often</td>
<td>Very Often</td>
<td>Always</td>
</tr>
</tbody>
</table>

If the statement describes the way you always feel (or think), circle the number "7"; if it never applies to you, circle the number "1". Use the numbers in between to describe the variations between these extremes.

This questionnaire is confidential: neither your supervisee nor the agency will see your answers.

Please work fast; your first impressions are what is wanted.
1. I feel uncomfortable with __________.

2. __________ and I agree about the things he/she needs to do in supervision.

3. I have some concerns about the outcome of our supervision sessions.

4. __________ and I both feel confident about the usefulness of our current activity in supervision.

5. __________ and I have a common perception of her/his goals in supervision.

6. I feel I really understand __________.

7. __________ finds what we are doing in supervision confusing.

8. I believe __________ likes me.

9. I sense a need to clarify the purpose of our supervision sessions for __________.

10. I have some disagreements with __________ about the goals of these sessions.

11. I believe the time __________ and I are spending together is not spent efficiently.

12. I have doubts about what we are trying to accomplish in supervision.

13. I am clear and explicit about what __________'s responsibilities are in supervision.
<table>
<thead>
<tr>
<th></th>
<th>NEVER</th>
<th>RARELY</th>
<th>OCCASIONALLY</th>
<th>SOMETIMES</th>
<th>OFTEN</th>
<th>VERY OFTEN</th>
<th>ALWAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. The current goals of these sessions are important for _______</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>15. I find what _______ and I are doing in supervision is unrelated to his/her concerns.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>16. I feel that what _______ and I are doing in supervision will help him/her to accomplish the changes needed for him/her to become a more effective counselor.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>17. I am genuinely concerned for _______'s welfare.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>18. I am clear as to what I expect _______ to do in our supervision sessions.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>19. _______ and I respect each other.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>20. I feel that I am not totally honest about my feelings toward _______.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>21. I am confident in my ability to supervise _______.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>22. _______ and I are working towards mutually agreed upon goals.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>23. I appreciate _______ as a person.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>24. We agree on what is important for _______ to work on.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>25. As a result of our supervision sessions, _______ is clearer as to how to improve his/her counseling skills.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>
26. _____ and I trust one another.

27. _____ and I have different ideas on what I need to work on.

28. My relationship with _____ is very important to me.

29. I have the feeling that it is important that I say or do the "right" things in supervision with _____.

30. _____ and I collaborate on setting goals for my supervision.

31. I am frustrated by the things we are doing in supervision.

32. We have established a good understanding of the kinds of things I need to work on.

33. The things that _____ is asking me to do don't make sense.

34. I don't know what to expect as a result of my supervision.

35. I believe the way we are working with my issues is correct.

36. I believe _____ cares about me even when I do things that he/she doesn't approve of.
SUPervision Research Questionnaire: Supervisee Form

Date ______________________

Last 4 digits of Social Security # ______________________

Supervision Session # ______________________

Instructions: On the following pages there are sentences that describe some of the different ways a person might think or feel about his or her supervisor. As you read the sentences, mentally insert the name of your supervisor in place of ________ in the text.

Beside each statement there is a seven point scale:

1 2 3 4 5 6 7
Never Rarely Occasionally Sometimes Often Very Often Always

If the statement describes the way you always feel (or think), circle the number "7"; if it never applies to you, circle the number "1". Use the numbers in between to describe the variations between these extremes.

This questionnaire is confidential: neither your supervisee nor the agency will see your answers.

Please work fast; your first impressions are what is wanted.
1. I feel uncomfortable with _______.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

2. ______ and I agree about the things I will need to do in supervision.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

3. I am worried about the outcome of our supervision sessions.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

4. What I am doing in supervision gives me a new way of looking at myself as a counselor.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

5. ______ and I understand each other.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

6. ______ perceives accurately what my goals are.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

7. I find what I am doing in supervision confusing.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

8. I believe ______ likes me.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

9. I wish ______ and I could clarify the purpose of our sessions.

   NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
   1       2       3       4       5       6       7

10. I disagree with ______ about what I ought to get out of supervision.

    NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
    1       2       3       4       5       6       7

11. I believe the time ______ and I are spending together is not spent efficiently.

    NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
    1       2       3       4       5       6       7

12. ______ does not understand what I want to accomplish in supervision.

    NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
    1       2       3       4       5       6       7

13. I am clear on what my responsibilities are in supervision.

    NEVER  RARELY  OCCASIONAL  SOMETIMES  OFTEN  VERY OFTEN  ALWAYS
    1       2       3       4       5       6       7
14. The goals of these sessions are important to me.  

15. I find what _______ and I are doing in supervision is unrelated to my concerns.  

16. I feel that what _______ and I are doing in supervision will help me to accomplish the changes that I want in order to be a more effective counselor.  

17. I believe _______ is genuinely concerned for my welfare.  

18. I am clear as to what _______ wants me to do in our supervision sessions.  

19. _______ and I respect each other.  

20. I feel that _______ is not totally honest about his/her feelings toward me.  

21. I am confident in _______’s ability to supervise me.  

22. _______ and I are working towards mutually agreed upon goals.  

23. I feel that _______ appreciates me.  

24. We agree on what is important for me to work on.  

25. As a result of our supervision sessions, I am clearer as to how I might improve my counseling skills.
| 26. | and I have built a mutual trust. |
| 27. | she needs to work on. |
| 28. | our relationship is important to |
| 29. | has some fears that if she/he says or does |
| 30. | the wrong things that I will disapprove. |
| 31. | for our supervision sessions. |
| 32. | We have established a good understanding of the |
| 33. | to do in supervision. |
| 34. | The things that are doing in supervision don't |
| 35. | doesn't know how to expect as a result of |
| 36. | I respect even when he/she does things |
| 37. | that I don't approve of. |
**SUPERVISOR EMPHASIS RATING FORM**

**DIRECTIONS:** Below are listed a number of skills and behaviors that many supervisors consider important for counselors to exhibit in counselor training. Please read each carefully and then decide which of the skills or behaviors you most emphasized in your supervision with. Please respond to what you emphasize, not what you consider to be desirable counselor behaviors. Use the following scale to respond to each item.

<table>
<thead>
<tr>
<th>7 strong emphasis</th>
<th>6 moderate emphasis</th>
<th>5 some emphasis</th>
<th>4 little emphasis</th>
<th>3 no emphasis</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
</table>

1. The counselor is on time for client appointments.
2. The counselor exhibits appropriate eye contact.
3. The counselor is aware of socio-economic and/or cultural factors that may influence the counseling session.
4. The counselor understands how people are the same even though they may be worked with differently.
5. The counselor communicates his/her sincerity and genuineness to the client.
6. The counselor actively participates in professional organizations.
7. The counselor conceptualizes a client accurately within a theoretical frame of reference.
8. The counselor recognizes when a client needs help in continuing to cope.
9. The counselor engages in adequate preparation for counseling sessions.
10. The counselor reinforces appropriate client behavior.
11. The counselor communicates his/her respect and positive regard to the client.
12. The counselor appropriately summarizes client statements.
13. The counselor allows him/herself the freedom to be wrong in the counseling session.
14. The counselor is able to prioritize client problems.
15. The counselor maintains appropriate conduct in personal relationships with clients.
16. The counselor engages in appropriate non-verbal expressions.
17. The counselor recognizes and admits when he/she enters into a "power struggle" with a client.
18. The counselor is able to set attainable goals in line with client readiness.
19. The counselor is aware of his/her personal needs for approval from the client.
20. The counselor accurately reflects the content of a client's speech.
21. The counselor maintains appropriate relationships with professional colleagues.
22. The counselor is able to identify client themes.
23. The counselor maintains confidentiality of client information.
24. The counselor uses open-ended questions and allows the client maximum freedom of expression.
25. The counselor demonstrates the use of open-ended questions.
26. The counselor maintains a non-judgmental attitude despite value differences with a client.
27. The counselor makes appropriate use of additional information obtained from other professional sources.
28. The counselor is able to identify and manage personal feelings that are generated in counseling.

29. The counselor maintains a receptive and appropriate posture during the session.

30. The counselor dresses appropriately.

31. The counselor is able to choose and apply techniques appropriately.

32. The counselor is able to manage a strong expression of client's feelings.

33. The counselor is aware of the effects of his/her own anxiety in the counseling process.

34. The counselor understands which techniques are compatible and consistent with his/her stated theoretical model.

35. The counselor makes appropriate referrals of clients.

36. The counselor formulates specific plans and strategies for client behavior change.

37. The counselor takes advantage of opportunities for additional training.

38. The counselor can effectively manage his/her frustration with lack of progress with clients.

39. The counselor is aware of how his/her attraction to the client is affecting the counseling process.

40. The counselor engages in appropriate confrontation with the client.

41. The counselor is able to risk self in counseling with a client.

42. The counselor maintains her/his office neatly and orderly.

43. The counselor is able to interpret client behaviors within a coherent theoretical framework.

44. The counselor identifies the need for and uses immediacy appropriately.

45. The counselor is able to develop short and long term goals with a client.

46. The counselor recognizes when he/she needs consultative help from another professional.

47. The counselor is able to tolerate ambiguity in the counseling sessions.

48. The counselor responds to client non-verbal behavior.

49. The counselor keeps appointments with clients.

50. The counselor receives feedback in a non-defensive fashion.

51. The counselor is knowledgeable about ethical codes of behavior.

52. The counselor engages in adequate note-keeping on clients.

53. The counselor uses appropriate reflection of feeling with a client.

54. The counselor prepares clients for termination.

55. The counselor shows a commitment to personal growth.

56. The counselor is able to predict the effects on a client of the techniques applied in counseling.

57. The counselor recognizes his/her personal limitations and strengths.

58. The counselor is aware of the client's potential for successful counseling progress.

59. The counselor is aware of his/her own needs and conflicts.

60. The counselor is able to keep personal problems out of the counseling session.


**SUPERVISOR EMPHASIS RATING FORM**

**DIRECTIONS:** Below are listed a number of skills and behaviors that many supervisors consider important for counselors to exhibit in counselor training. Please read each carefully and then decide which of them your supervisor has emphasized with you during your supervision this past semester. Please respond to what your supervisor has emphasized, not what you think should have been emphasized. Use the following scale to respond to each item.

<p>| | | | | |</p>
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<tr>
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<tr>
<td>7</td>
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<td>3</td>
</tr>
<tr>
<td>strong</td>
<td>moderate</td>
<td>some</td>
<td>little</td>
<td>no</td>
</tr>
<tr>
<td>emphasis</td>
<td>emphasis</td>
<td>emphasis</td>
<td>emphasis</td>
<td>emphasis</td>
</tr>
</tbody>
</table>

1. You are on time for client appointments.
2. You exhibit appropriate eye contact.
3. You are aware of socio-economic and/or cultural factors that may influence the counseling session.
4. You understand how people are the same even though they may be worked with differently.
5. You communicate sincerity and genuineness to the client.
6. You actively participate in professional organizations.
7. You conceptualize a client accurately within a theoretical frame of reference.
8. You recognize when a client needs help in continuing to cope.
9. You engage in adequate preparation for counseling sessions.
10. You reinforce appropriate client behavior.
11. You communicate respect and positive regard to the client.
12. You appropriately summarize client statements.
13. You allow yourself the freedom to be wrong in the counseling session.
14. You are able to prioritize client problems.
15. You maintain appropriate conduct in personal relationships with clients.
16. You engage in appropriate non-verbal expressions.
17. You recognize and admit when you enter into a "power struggle" with a client.
18. You are able to set attainable goals in line with client readiness.
19. You are aware of your personal needs for approval from the client.
20. You accurately reflect the content of a client's speech.
21. You maintain appropriate relationships with professional colleagues.
22. You are able to identify client themes.
23. You maintain confidentiality of client information.
24. You use open-ended questions and allow the client maximum freedom of expression.
25. You demonstrate the use of open-ended questions.
26. You maintain a non-judgmental attitude despite value differences with a client.
27. You make appropriate use of additional information obtained from other professional sources.
28. You are able to identify and manage personal feelings that are generated in counseling.
29. You maintain a receptive and appropriate posture during the session.
30. You dress appropriately.
31. You are able to choose and apply techniques appropriately.
32. You are able to manage a strong expression of client’s feelings.
33. You are aware of the effects of your own anxiety in the counseling process.
34. You understand which techniques are compatible and consistent with your stated theoretical model.
35. You make appropriate referrals of clients.
36. You formulate specific plans and strategies for client behavior change.
37. You take advantage of opportunities for additional training.
38. You can effectively manage your frustration with lack of progress with clients.
39. You are aware of how your attraction to the client is effecting the counseling process.
40. You engage in appropriate confrontation with the clients.
41. You are able to risk yourself in counseling with a client.
42. You maintain your office neatly and orderly.
43. You are able to interpret client behaviors within a coherent theoretical framework.
44. You identify the need for and use immediacy appropriately.
45. You are able to develop short and long term goals with a client.
46. You recognize when you need consultative help from another professional.
47. You are able to tolerate ambiguity in the counseling sessions.
48. You respond to client non-verbal behavior.
49. You keep appointments with clients.
50. You receive feedback in a non-defensive fashion.
51. You are knowledgeable about ethical codes of behavior.
52. You engage in adequate note-keeping on clients.
53. You use appropriate reflection of feeling with a client.
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56. You are able to predict the effects on a client of the techniques applied in counseling.
57. You recognize your personal limitations and strengths.
58. You are aware of the client's potential for successful counseling progress.
59. You are aware of your own needs and conflicts.
60. You are able to keep personal problems out of the counseling session.
Supervision Questionnaire # 3

Please indicate your association to the word "SUPERVISION on the each 7 point scale to follow. Make your judgement on the basis of your experience to date in supervision with _________. For example:

If you feel that your experience to date in supervision with _________ is very closely associated with one end of the scale, you would place your mark as follows:

SUPERVISION:
Valuable \( \checkmark \):____:____:____:____:____ Worthless

If you feel that your supervision experience is quite closely associated with one end of the scale, you would place your mark as follows:

SUPERVISION:
Easy:____:____:____:____:____ Difficult

If you consider the scale completely irrelevant to your associations with supervision, or both sides equally relevant, you would check the middle space on the scale.

SUPERVISION:
Yellow:____:____:\( \checkmark \):____:____:____ Blue

Please work at a fairly high rate of speed, without puzzling or worrying over any individual item. Some items may seem irrelevant to you. Don't worry about this, just give the best association you can and move along. It is your first impression that is wanted.
<table>
<thead>
<tr>
<th>Complete</th>
<th><em><strong>:</strong></em>:<em><strong>:</strong></em>:<em><strong>:</strong></em></th>
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<tr>
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<tr>
<td>Grateful</td>
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<td>Foolish</td>
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</table>
APPENDIX D

SCORING KEYS FOR INSTRUMENTS
WORKING ALLIANCE INVENTORY/ SUPERVISION
SCORING KEY

TASK SUB-SCALE

Positively scored items: 2, 4, 13, 16, 18, 24, 35
Negatively scored items: 7, 11, 15, 31, 33

BOND SUB-SCALE

Positively scored items: 5, 8, 17, 19, 21, 23, 26, 28, 36
Negatively scored items: 1, 20, 29

GOAL SUB-SCALE

Positively scored items: 6, 14, 22, 25, 30, 32
Negatively scored items: 3, 9, 10, 12, 27, 34
SUPERVISORY EMPHASIS RATING FORM

SCORING KEY

PROFESSIONAL BEHAVIOR SCALE ITEMS
1, 6, 9, 15, 21, 23, 30, 35, 37, 42, 46, 49, 51, 52, 54

PROCESS SCALE ITEMS
2, 5, 10, 11, 12, 16, 20, 24, 25, 29, 32, 40, 44, 48, 53

PERSONALIZATION SCALE ITEMS
13, 17, 19, 26, 28, 33, 38, 39, 41, 47, 50, 55, 57, 59, 60

CONCEPTUALIZATION SCALE ITEMS
3, 4, 7, 8, 14, 18, 22, 27, 31, 34, 36, 43, 45, 56, 58
### SEMANTIC DIFFERENTIAL SCORING KEY

**SUPERVISION**

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