Libertory Models of Psychotherapy Supervision

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Goals for This Hour

• Be able to:
  1. Describe the tensions inherent in attempting to generate liberatory/egalitarian supervisory relationship
  2. Identify supervisee presentations that are most challenging for liberatory supervision models
  3. Describe how a liberatory supervision model would deal with remediation issues in a supervisee
Rather Than Lecture

• You’ve all got access to the powerpoints, which have a lot of content.
• My preference is to engage with you all more directly and intimately
• So…I’ll talk a little bit about these things, and then we’ll do Q and A and discussion for the remainder of our hour together
My background and experiences

• Supervision of masters level therapists, post-doctoral psychologists, and doctoral students in psychology since 1977, consultation with licensed psychotherapists since 1986.

• More recently- from 2006-2015, director of a feminist training clinic that I founded where I supervised 70 trainees using a feminist/liberatory supervision model

• Currently leading consult groups for early career professionals focused on treatment of complex trauma and dissociation and doing one-on-one consultation/supervision

• APA Supervision DVD and book
Liberatory Supervision Practice

• Practice of supervision grounded in liberatory (e.g., feminist, critical, queer, multicultural) paradigms of distress, power and intersectional identities as sources of distress,

• Structured so as to generate an egalitarian, liberatory relationship between the supervisor and supervisee involved
A feminist developmental supervision model as one example of liberatory supervision practice

• Natalie Porter has described a developmental model for feminist supervision
  – Didactic introduction of feminist perspectives in general, then applied to the supervised work in specific
  – Exploration of larger social and cultural issues of power, privilege, and oppression
  – Trainee self-awareness; implicit biases, privilege and disadvantage, internalized oppression and domination
  – Development of social action perspective on psychotherapy- cultural sensitivity as first, but not sufficient, step
Teach/Treat in Supervision: Challenges to Liberatory Models

- Absence of shared theories or models of distress, dysfunction, and/or appropriate intervention between supervisee and supervisor, with one party not open to a liberatory model
- Extreme differences in communication and/or learning styles between the two parties
- Impaired or oppositional trainee; impaired or authoritarian supervisor
- Transferential and countertransferential dynamics between the two parties, especially those arising from aspects of intersectional target and agent identities
Overarching challenge of liberatory paradigms of supervision

• Liberatory supervision practices assume the development of an egalitarian relationship over time

• But…supervisors frequently has legal and/or ethical responsibility for the clients on whose work they are offering supervision
  – How to be egalitarian, liberatory, and respectful of the autonomy and developing professional identity of supervisee while protecting clients and being a gatekeeper for the profession at large is a dynamic tension in any liberatory model of supervision
Attending to Dynamics Identified by Liberatory Psychotherapies

- Each party in supervision brings intersectional identities to the relationship, leading to
  - Power differentials due to
    - Ethnicity
    - Social class
    - Immigration status and ability to use language
    - Sexual orientation
    - Other social locations and strands of identities
  - And always- the power differentials inherent in the roles
  - In a liberatory supervision paradigm the supervisor models integration of these identity and power dynamics into a developing egalitarian relationship
Making the dynamics transparent

- Liberatory supervisors make these dynamics transparent and explicit
  - One way to conceptualize- forms of transferential and countertransferential material that are not only non-conscious and symbolic processes, but also here-and-now, genuine manifestations of social realities occurring both outside the supervision, and within the relationship itself
  - Expectation is that supervisor will self-disclose to supervisee to a greater degree than would a therapist to a client; thus, supervisor models the use of liberatory paradigms by bringing aspects of these power-sharing strategies explicitly into the development of supervision relationship
Using the dynamics of supervision as teaching tools about liberatory practices

- Example: Working-class Asian-American therapist (first generation to go to college, parents refugees from Viet Nam), poverty class Euro American client (high school education and grew up in foster care system), African American middle class supervisor (has doctorate, both parents have advanced degreee) - all women, all heterosexual, all cisgender, all mothers, roughly same age range

- Liberatory supervisory interventions would attend to the various power differentials in all components of the triad to raise trainee consciousness about power dynamics in therapy and ways in which systemic oppression and intersectionalities affect experiences and expressions of distress and how clients respond to the therapy process (which it itself an inherently Euro model of relationship)
Modeling appropriate use of power

• Didactic conveyance of information about liberatory models of power and meanings of empowerment/liberation

• Supervisor awareness of power of role and risks for abuses of power
  – What are the boundaries for supervisor-supervisee relationships? To what extent need they be strictly hierarchical
    • My training clinic model; a feminist collective, with clearly delineated locations at which I must have full authority because of legal responsibility
    • Explicit acknowledgement of skills, knowledge, and competency that trainee brings; supervisor does not have the sole power to define useful knowledge
Entry Criteria for Offering Liberatory Supervision

- Supervisor embraces and is familiar with one of the liberatory models
  - Distress and dysfunction, not psychopathology
  - Resistance and survival strategies, not symptoms
- Supervisors may offer more didactic interventions at this point, even with trainees who are otherwise more clinically advanced, in order to familiarize them with liberatory paradigms
  - Interrupting and interrogating discourses of pathology and of therapy as usual in trainee’s discussion of work
  - In the Teach/Treat cycle of supervision moving into Teach to introduce the concepts of the liberatory model in question.
References


• Or see the companion DVD, *Feminist therapy* supervision for a demonstration of feminist principles in action.


