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## **ORIGINAL ARTICLE**



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# Problematic psychoanalytic supervision: An interpretative phenomenological analysis study

Ali Khoshfetrat 💿 | Gerry Moore | Gemma Kiernan

School of Nursing, Psychotherapy and Community Health, Dublin City University, Dublin, Ireland

#### Correspondence

Ali Khoshfetrat, School of Nursing, Psychotherapy and Community Health, Dublin City University, H219, Glasnevin, Dublin, Ireland. Email: ali.khoshfetrat2@mail.dcu.ie

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## Abstract

Problematic supervision has been found to be a common occurrence among psychotherapists worldwide. Although there are some research studies that explore therapists' experiences of problematic supervision, the literature on such experiences in the context of psychoanalytic supervision is limited. This study, as part of a larger study, explored psychoanalytic psychotherapists' experiences of problematic supervision. Using semi-structured interviews, 14 professional psychoanalytic practitioners were interviewed. Interpretative phenomenological analysis was employed for data analysis. Five themes were identified: feeling frustrated, hurting deprivation, holding back, losing my voice and challenging boundaries. This is the first study capturing professional psychoanalytic therapists' lived experiences of problematic supervision. The findings emphasise a need to take into account the supervisees' conceptualisations about their difficult experiences in order to conduct supervision in a way that is meaningful and accessible for them. The study findings can be extended by future studies that explore the supervisors and the clients' experiences of supervision. Further implications for practice and policy and recommendations for future research are discussed.

#### KEYWORDS

interpretative phenomenological analysis, psychoanalysis, psychoanalytic supervision, supertransference, supervision relationship

# 1 | INTRODUCTION AND BACKGROUND

Despite the important role psychotherapy supervision plays in the professional development of psychotherapists, research has proven supervision to be, at times, problematic and challenging (Ladany et al., 2013). There are different conceptualisations around problematic supervision (Gray et al., 2001; Nelson & Friedlander, 2001; Ramos-Sanchez et al., 2002). A widely researched notion of problematic supervision, proposed by Ellis (2001) and Ellis et al. (2014), considers problematic supervision to be inadequate or harmful.

Inadequate supervision occurs when the supervisor is unable to promote the supervisee's professional functioning and the supervision is therefore ineffective, while harmful supervision may result from inappropriate actions by the supervisor that may cause psychological and emotional harm to the supervisee (Ellis, 2010).

Evidence shows that problematic supervision is internationally common among psychotherapists. A comparative, cross-cultural study (Ellis et al., 2015), focused on supervisees involved in the mental health context (e.g. counselling/psychotherapy), found that 69% and 79% of supervisees in the United States (US) and the Republic of

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Ireland (ROI), respectively, were currently receiving inadequate and ineffective supervision. The figures increased to 86% and 92% when the researchers took into account the participants' experiences during their whole professional lives. In addition, while 25% (US) and 40% (ROI) of the participants were currently under harmful supervision, 39% (US) and 51% (ROI) of the participants had experienced harmful supervision at some points in their career. These findings paralleled other studies conducted in different countries that also indicated a high rate of problematic supervision (e.g. Son & Ellis, 2013).

Given the interactive nature of the supervision enterprise, challenging experiences with supervision can negatively impact on the relationship between the supervisee and the supervisor (Grant et al., 2012). With regard to the triadic nature of supervision, this will impact negatively on the supervisor, the supervisee and the client. Hence, studying each of the elements involved in this triadic practice can shed some light on difficult and challenging supervision experiences.

There are several reasons why it is necessary to study problematic supervision particularly from the supervisee's perspective. The supervisee is under evaluation and in a hierarchical relationship and is therefore in a vulnerable position (Bernard & Goodyear, 2014). In addition, unavoidable multiple relationships can contribute to the supervisee's vulnerability (Gottlieb et al., 2007). Moreover, supervisees tend not to disclose information about the negative experiences they have in supervision (Hess et al., 2008; Ladany et al., 1996). It is therefore important to allow their voices be heard.

The supervisees' perspective is particularly important when it comes to psychoanalytic supervision, which is an educational, evaluative and interventional activity where a junior member of the psychoanalytic profession is helped by a senior member to enhance the conceptualisation skills and the professional functioning (Watkins, 2011). Firstly, unconscious Oedipal anxiety can manifest itself in all parent-youngest dyads, including the supervision interaction (Alonso, 2000). For instance, the psychoanalytic supervision relationship can be affected by the supervisor's unresolved conflicts or inappropriate expectations, commonly known as super-transference (Teitelbaum, 1990). One may argue that Oedipal anxiety happens in all forms of psychotherapy supervision. Non-analytic supervisions do not recognise it; however, while psychoanalytic supervision, in contrast, focuses on this phenomenon and can offer insights into how it impacts the supervisee's supervision experiences; psychoanalytic supervision can become, what is commonly referred to as, supervisee-centred supervision (Watkins, 2015a), which focuses on the supervisee and, like the patient, the psychology of the supervisee (e.g. her/his dysfunction) becomes 'the pre-eminent focus of supervisory concern and the ready target for supervision intervention' (p. 232). Secondly, the evidence suggests that psychoanalytic supervisees replicate unconsciously their experiences of supervision with the supervisor in their therapy with the patient and vice versa, commonly referred to as parallel process (Sarnat, 2019). For example, a supervisee who has a critical and judgmental client may develop critical attitudes towards their supervisors when receiving supervision for this client. Challenging psychoanalytic supervision

experiences may therefore affect the supervisor and the client too. Psychoanalytic supervision transcends didactic learning and helps the supervisee to gain an insight into, and understanding of, their hindering emotional experiences, for example oedipal anxiety and parallel process (Watkins, 2015a). This is the supervisory function that transforms psychoanalytic supervision into a therapeutic, not therapy, practice (Morrissey & Tribe, 2001). It is therefore fruitful to examine psychoanalytic supervisees' challenging supervision experiences.

# **1.1** | Studies on psychoanalytic supervisees' experiences of problematic supervision

There is a limited body of research on problematic psychoanalytic supervision from the supervisee's point of view. Cabaniss et al. (2001), surveying 35 participants, found that a problematic supervision relationship, and leaving it undiscussed, was a negative experience for the supervisees under psychoanalytic training. The supervisees did not voice their concerns and had no desire to 'rock the boat' (p. 262). However, it was a survey study and therefore did not explain the participants' experiences in detail. This was mentioned, in a follow-up interview, by several participants who felt that the questionnaires did not adequately capture their negative supervisory experiences. In a qualitative, longitudinal study that included 23 beginner psychodynamic therapists, Stromme (2012) examined the supervisees' negative emotions induced in supervision. She reported that many of the supervisees were frightened of the supervisor and initial negative perceptions towards the supervisor were frequent. However, similar to the findings of Cabaniss and his colleagues' study, she found that the supervisees' problematic relationship with, and negative feelings towards, the supervisor were not discussed in supervision. These studies provide preliminary data about supervisees' experiences with problematic supervision and challenging supervisory relationships. However, it is not clear how such experiences play out in supervision and how the supervisees experience them. In addition, the studies only included participants who were in the initial stage of their professional development. Hence, their experiences are unlikely to reflect professional therapists.

### 1.2 | Rationale and purpose

Watkins (2015b) argues that the majority of studies on psychoanalytic supervisees' experiences, including studies on difficult supervision experiences, have been conducted on trainees or early career stage therapists. Trainees may have limited self-awareness and be more susceptible to anxiety (Rønnestad & Skovholt, 2003) due to their 'little preparation for experience' (Berger & Buchholz, 1993, p. 86). They need and value concrete feedback and guidance (Haynes et al., 2003; Morgan & Sprenkle, 2007). With regard to their different needs and, as such, different supervisory tasks, the beginner's experiences are less likely to represent more experienced supervisees. Thus, experienced supervisees may have different conceptualisations around problematic supervision. Having accumulated different experiences over time, they are in a better position to identify the adverse and more lasting effects of problematic psychoanalytic supervision.

No study has yet examined in-depth problematic and difficult supervision experiences from experienced psychoanalytic therapists' point of view. The purpose of this study is to explore professional psychoanalytic therapists' experiences of problematic supervision. In approaching research questions, we conceptualised problematic supervision broadly as challenging and difficult supervision experiences that the supervisee may encounter in supervision. More specifically, the study research questions were as following: (a) How do psychoanalytic psychotherapists experience inadequate or unhelpful supervision? (b) How do psychoanalytic psychotherapists experience harmful events in supervision? And (c) how do psychoanalytic psychotherapists experience challenging supervisory relationship? Consistent with the psychotherapy literature, 'psychotherapist' is used in the present study to refer to all clinicians such as counsellors, psychologists and psychotherapists who practice psychological interventions (Killian, 2008; Kottler, 2017).

## 2 | METHOD

#### 2.1 | Design

The authors used an explorative qualitative design, namely interpretative phenomenological analysis (IPA). IPA has three elements: phenomenology, which is a focus on people's lived experience; hermeneutic, which is aimed at making sense of experience; and idiographic, a detailed analysis of the individual's experience (Tuffour, 2017). IPA postulates that grasping meaning is difficult and, as such, interpretation is necessary (Josselson, 2004). Hence, this method of inquiry seeks to investigate 'what the data means, not what it is' (Chamberlain, 2011, p. 52). IPA was chosen for the current study as it is a psychologically informed approach that is used to gain a deep understanding of a group of people's lived experience of a phenomenon (Smith et al., 2009). In addition, IPA is a useful approach 'when one is concerned with complexity, process or novelty' (Smith & Osborn, 2003, p. 53). Given that supervision is a complex exchange influenced by, for example, the supervisor and the supervisee's differing preferences when it comes to learning methods, IPA was deemed an appropriate tool for the current study. Moreover, IPA is congruent with psychoanalysis, the theoretical framework for the study and the author's therapeutic orientation. Similar to a psychoanalytic therapist, an IPA researcher is required to allow the interviewee to unpack their experiences in as much detail as possible and to carefully listen to the interviewee's accounts before attempting to make sense of them. Lastly,

IPA has been increasingly used in qualitative studies (Pietkiewicz & Smith, 2012) and has been used in a number of papers on psychotherapy supervision (Dawson & Akhurst, 2015; Singh-Pillay & Cartwright, 2019).

## 2.2 | Participants and procedure

Fourteen registered psychoanalytic psychotherapists (seven female and seven male) who were working in private practice in Dublin, Ireland, took part in the study. The mean age of the sample was 54 years old. To ensure confidentiality, all participants took part under pseudonyms. Further details of the sample features are presented in Table 1.

Following IPA principles (Smith et al., 2009), a homogeneous group of participants for which the research questions were meaningful were recruited. They were registered practitioners through the Irish Council for Psychotherapy (ICP) 'psychoanalytic section' and were currently in individual supervision. Purposeful and snowball methods were used to recruit participants. The first author sequentially contacted psychoanalytic therapists whose names were listed on the ICP website. The first participants, after attending an interview, invited two other participants. The author then asked the administrator of the ICP's psychoanalytic section to circulate an invitation letter to their members. The next 11 interviews were conducted with those who contacted the first author and agreed to participate in the study.

#### 2.3 | Data collection

This study is part of a larger study, that is, the first author's PhD thesis, an IPA study aimed at exploring psychoanalytic psychotherapists' experiences of supervision. We received ethical approval for the study from Dublin City University (DCU) before we started collecting data. Drawing on the literature review (Kvale & Brinkmann, 2009), and based on the study's objectives, a semi-structured interview schedule was developed. Part of the interview schedule included a set of open-ended questions which queried the participants on their difficult experiences in supervision (Appendix 1). The questions sought the participants' conceptualisations of difficult and challenging moments in supervision. For example, they were asked whether they felt too anxious during their supervision sessions to raise and discuss certain issues. The participants signed a consent form before interviews commenced. All interviews were conducted in person by the first author. All efforts were made to develop rapport, and the participants were told that there was no right or wrong answer to the questions. The length of interviews ranged from 60 to 90 min, apart from the first two interviews which took 45 min. The average length of an interview was 70 min. They were conducted either in the Healthy Living Centre (HLC) in DCU or their private offices. All interviews were recorded and transcribed after the interview concluded.

#### **TABLE 1** Demographic features of the participants (N = 14)

	Age	Gender		Academic qualification		Years attending	Currently frequency of supervision	
Participants		Male	Female	Masters	PhD	supervision	Weekly	Monthly
Gerry	73	1		✓		12	$\checkmark$	
Simon	47	1			1	20	1	
Teresa	41		$\checkmark$	$\checkmark$		15		1
Rita	36		1	$\checkmark$		6	1	
Ann	54		1		1	12		1
Rose	51		1	$\checkmark$		14		1
Patricia	71		1	$\checkmark$		20		1
Brian	60	$\checkmark$		$\checkmark$		12		1
Rob	62	$\checkmark$		$\checkmark$		22	✓	
Patrick	51	$\checkmark$		$\checkmark$		15		1
Liz	51		✓	$\checkmark$		18		✓
Mark	37	1		$\checkmark$		12		1
Liam	71	$\checkmark$			1	25		✓
Evelyn	61		1	$\checkmark$		10		1

## 2.4 | Data analysis

A systemic method proposed by Smith et al. (2009) was employed for data analysis. This systemic method is a six-step protocol that navigates the study from the beginning to writing-up. Following the guidelines: (a) to begin the analysis, the first author read the transcripts iteratively and familiarised himself with the data; (b) in order to develop the initial notes, three types of exploratory notes – namely descriptive, linguistic and conceptual notes – were identified; (c) to develop emerging themes, data were reduced through identifying their interrelationships; (d) to identify connections across emerging themes, data were grouped together; (e) in order to move to the next case, the first author completed every analysis case-by-case sequentially; (f) to identify patterns, the first author identified the themes shared by the participants. To ensure the rigour of the analysis, some strategies (described in the Section 2.5) were employed.

#### 2.5 | Reflexivity statement

The first author is a PhD psychotherapy student. He completed both a masters and a bachelor's degree in clinical psychology. He is a psychoanalytic-oriented psychotherapist and has several years of experience of receiving supervision. The second author has completed a PhD in psychotherapy and is a registered psychoanalyst. The third author has completed a PhD in counselling psychology. Both have supervised numerous qualitative and IPA master's and PhD dissertations. They have been in psychotherapy and counselling supervision for several years.

An IPA researcher is required to identify and bracket the effects of her/his psychology on the process of knowledge production (Smith et al., 2009). To do 'bracketing', the first author recorded his thoughts and emotions triggered by the data during the interviews and data analysis. This enabled the author to be aware of the battle occurring between his thoughts/feelings and the data. For example, he considered psychoanalytic supervision to be an emotionally charged practice. Hence, he had an expectation that the participants' narratives would reveal the emotional nature of psychoanalytic supervision. This expectation and presumption are important given that the study's findings demonstrated the participants' (for example) negative supervision transference. He was also interested to hear, from the participants, stories about the hierarchical element in the supervision relationship. Like the emotionally charged nature of supervision, this expectation turned out to be represented by the study findings; that is, 'losing my voice' was a common theme across study participants.

The author noticed that his expectations were consistent with his personal views and clinical experiences with his supervisor. That is, he made efforts to be a clear-headed researcher. In addition, it is proposed that an 'independent audit' is the optimal way to ensure the validity of an IPA study (Smith et al., 2009). Although the first author took the lead in the process of analysis, the other authors were closely involved in it. The second and third authors monitored the study from its inception to its completion. Before moving on to the next stage, agreements on all preceding stages were obtained. Thus, it can be asserted that the study meets the criteria required for a good IPA study, even though the aim of an independent audit is to ensure that the study's findings are *a*, rather than *the*, credible one (lbid).

## 3 | FINDINGS

A total of five themes emerged from the analysis: feeling frustrated, hurting deprivation, holding back, losing my voice and challenging boundaries. Table 2 presents the themes with relevant quotes.

## 3.1 | Feeling frustrated

The theme *feeling frustrated* referred to the participants' experience of not being able to achieve what they had hoped for in supervision. Ann likened her supervision to an 'exercise', which was her way of saying how ineffective her supervision was, mainly due to the short length of the sessions:

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

Although half-hour psychoanalytic sessions, often referred to as 'scansion', are not uncommon, short sessions for supervision were not acceptable from her point of view. She considers psychoanalysis and supervision to be two practices informed by different principles. Considering the words Ann used, that is, 'parody of the analytic session' and 'ridiculous', she possibly was annoyed or even enraged by the supervisor cutting the sessions. She felt badly treated and disrespected due to the time being so limited. Similarly, Brian viewed his supervision as an encounter that was, at times, frustrating and as a place where some of his questions were left unanswered:

There are times when you go with an issue where there is no easy answer so you come away frustrated. {...} you have shared the frustration you might have at not being able to come to your own answer and then you go to supervision and you realise well the supervisor on this occasion probably doesn't have the answer either.

Brian identifies two causes of frustration, namely the client and the supervision. He seemed to have harboured a hope that the supervisor was going to help him solve clinical issues. Brian expected supervision to shine new light on certain clinical issues. However, sometimes the result was not as good as he had hoped and, as he stated, 'The supervisor might be as puzzled as you are'. He was left on his own again.

Liz blamed the inadequacies of her supervision on 'theoretical blind spots', which refers to certain conditions for which no structure or theoretical framework to understand has been developed. She referenced working with children who had autistic parents as an example and said:

> There is the realisation that my supervisor is not, doesn't know everything either and there isn't the theory for everything either.... sometimes there are gaps that the supervisor can't help with and theory, there doesn't seem to be the theory {...} Things like feeling that we are stuck or going around in circles.

Liz addressed the limitations of psychoanalytic theory and how it failed to provide her with the solutions she needed. A reference to 'stuck or going around circles' suggests that she perceived her supervision as a poor and inadequate practice. She was struggling for solutions and raised these crucial issues in supervision, but supervision appears to be unable to help her.

## 3.2 | Hurting deprivation

The theme *hurting deprivation* reflects the participants' desire to be encouraged, a desire which was left unmet. Teresa was not happy with the way the supervisor commented on her work. She said:

> Yes there was never positive feedback so if there was no feedback it was okay, so there was only feedback when it was wrong. There was only feedback to correct.

When she realised she was not going to be encouraged, she appeared to feel hopeless and she felt all she could do was adapt. Perhaps that is why, when she was asked about her reaction to the lack of positive feedback, she answered: 'Yes, I just got used to it'- and 'Yes, I adapted [laughs]'. Teresa was describing an apparently unpleasant experience; however, her facial expressions and

TABLE 2 Themes and example qu	otes
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Themes	Example quotes	
Feeling frustrated	It {supervision} was for 30 minAnd that is ridiculous. if I know that it is going to be {short}, I can pace the session and they can pace the session to get to what we need to get to. (Simon)	
Hurting deprivation	She {supervisor} was very deprivingnot giving any praise. (Evelyn)	
Holding back	I am not comfortable openly discussing those {counter- transferential} feelings. I would be more comfortable in my own analysis. (Rita)	
Losing my voice	I found that I was being very much moulded into being a mini me of my second supervisor. (Rose)	
Challenging boundaries	Ireland is a small placeour experience of the necessary boundaries is at times challenged. (Ann)	

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her laugh appeared to contradict her inner feelings. Interestingly, Teresa also began to laugh when she later said, 'You would be fileted, like a fish [laughs] just like cut-' to illustrate what her nonencouraging supervision was like. This statement conveys a sense of being harmed. Teresa, most likely unconsciously, laughed to cover her anxiety and unpleasant feelings about working with a supervisor who withheld encouragement. Michael had similar stories:

> A couple of times I would have given interpretations, particularly dream interpretations and felt that it was good and it met all of the pieces and it was some kind of insight on my part, it was just as if it never happened... if it was wrong she would say it but if it was right she wouldn't say it.

There is a sense of simultaneous self-evaluation and expectations in the above quote. Michael, from his point of view, had done a god job and was expecting positive feedback, which the supervisor did not provide. Like Teresa and Michael, Evelyn discussed her experience of not receiving encouragement. She pointed out that the supervisor used to give corrective feedback, but not positive feedback:

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

Evelyn referred to this lack of encouragement as 'depriving', and 'deprivation was a big thing' in her supervision. This strong reaction could be explained by the fact that she reportedly had previously experienced an encouraging supervisor.

## 3.3 | Holding back

The theme *holding back* encapsulated the participants' supervision experiences relating to their struggles in sharing information with their supervisors. Some participants alluded to their reluctance to raise and discuss their feelings towards the supervisor, that is, supervision transference, in supervision. Mark had gone to supervision one week after he had cancelled the preceding session and the supervisor was late in answering the door. It made him 'angry' and his facial expressions and his tone of voice, when telling this story, revealed his emotional experiences. He was nonetheless reluctant to bring those feelings to supervision as he 'didn't see the benefit in mentioning it':

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

The quote illustrates that there is some confusion around where psychoanalysis ends and supervision begins, and where the boundary between both lies. For Mark, supervision is distinct from analysis and he is not like a client. As a result, he was reluctant to self-explore in supervision. Consequently, his emotions were left undiscussed.

Some of the participants discussed how it was difficult for them to disclose the clinical mistakes that they may have made. In her supervision, Patricia was reportedly required to prepare verbatim reports of her sessions. She remembered how she used to edit the notes in order to portray herself as a good therapist because she had an 'overriding need to impress' the supervisor:

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

The quote conveys a sense of anxiety and perhaps shame, which is understandable given that Patricia was in the early stages of her development as a therapist. She was anxious about what the supervisor might have thought of her clinical competence. This seemingly led her to develop a false self, and it was this false self presented in supervision. Similarly, some of the other participants, Liam included, discussed their experience of feeling embarrassed by having to disclose sexual feelings. Liam said:

> There was a lack of comfort... in the early days there was a huge difficulty in talking about anything to do with sexuality either for the transference or the countertransference and so you tend not to talk about those things...I do remember one guy started talking about... sometimes he has very strong emotional feelings for his clients, his female clients, and he wanted to talk about that. And everybody looked at him in horror.

Liam used 'you' and 'people' throughout his interview, which underlined his difficulty with discussing sexuality. Avoiding using the pronouns 'I' or 'my' indicates how he may have felt too embarrassed to discuss his erotic feelings in the interview. The shift seemed to have neutralised his emotional experiences. Using neutral words allowed him to distance himself from his own feelings and perhaps normalise them as a common experience.

## 3.4 | Losing my voice

The theme *losing my voice* refers to participants' narratives that addressed the inequality in the supervisory relationship and how the hierarchical relationship affected their experience of supervision. Patrick argued that the hierarchical relationship characterised his relationship with his first supervisor, and it was hard for him 'to have my own voice in it'. He said:

My first supervisor could be very rigid maybe and I struggled with that a little bit because it conflicted with my own experience of analysis, my own analysis was very different to how my first supervisor practiced...there were times when that supervisor could be, I felt, very cold, very rigid clinically, very dogmatic at times...quite often this almost kind of punitive piece would come in, very austere authoritarian approach.

Patrick highlights how his experiences with supervision and self-analysis mutually affected each other. The words that he used to refer to his supervisor, that is, 'very cold', 'very rigid', 'very dogmatic' and 'punitive', indicates how difficult an experience it was to work under an authoritarian supervisor. In contrast, his analyst seemed to have been more flexible and allowed him room. Thus, his personal analysis experiences affected his supervision experiences.

Some other participants highlighted their struggle to maintain their independence and develop their own version of therapy. Rose experienced her supervisor as a person who withheld 'a breather' from her. When Rose brought a case to supervision, the supervisor would prioritise the supervisor's own understanding over Rose's, but from Rose's point of view:

> That wasn't just that one moment in the room, that I know this client and I am only bringing her for this particular session but I know her from here, from here, from here so when I am bringing her into this space with this particular session that... I just knew from my heart and soul that what I was saying was correct.

Repetition of the word 'know' implies that, in her view, her knowledge of the client was richer and deeper than the supervisor's. The knowledge was in and with her. It was embodied knowledge. This was evident in her use of the expression 'heart and soul'. In addition, when using the phrase 'from here', which she used repeatedly, she was gesturing, and her body began to move forward. It indicated her emotional reactions to her need to be given weight and voice. This was clear when saying: 'there were lots of tears and more so...'.

Likewise, Evelyn discussed how her experiences were neglected by the supervisor. For example, she had a patient who did not make one of their sessions and Evelyn called him to see if everything was OK with the patient. She was later questioned by the supervisor as to why she did this: 'Your role is to sit there, to show up'. However, from Evelyn's point of view, it was correct and therapeutic to contact the client. She argued that it is ultimately the supervisee who decides how to communicate with and relate to the client. She described supervisees as 'intentional beings' who guess the intention of the other, namely the patient. She offered some examples that demonstrated how she may have done things in a way that would have contradicted what she may have been advised to do in supervision:

> I would have offered an umbrella on a wet evening an odd time. I would have sometimes walked down from the third floor of a very dark building because I suspected they were afraid to walk up in the dim light. Or I would walk them back down to the door. And sometimes of course not taking the money or taking very little money.

It is clear that Evelyn listed these activities to show how she tried to be herself to communicate with the patient in a way that differed from that of the supervisor. By calling supervisors 'harsh', she made it clear what an authoritarian and power-oriented supervision was like.

## 3.5 | Challenging boundaries

The theme *challenging boundaries* refers the participants' experiences of issues that blurred their professional boundaries and affected their professional relationship with their supervisors. Ann referred to the psychoanalytic supervisors in the United States to illustrate how the small community in Ireland can affect the supervisees' experiences. She believed that American supervisors 'Would tend to not blur the boundaries, and certainly not hang out with them socially'. For her, this was totally different from what tended to happened in the Irish psychoanalytic community because:

> Obviously Ireland is a small place, Dublin even smaller, so you can quite often end up with your analyst, sometimes even in the same hotel and it is not because of any other reason than we are working in a smaller community, we get to know each other better. And I think by and large our experience of the necessary boundaries is at times challenged by social practical encounters, you know.

One gets the sense that Ann considered the supervisor/supervisee relationship to be a professional one. However, because she was in a small community, accidental encounters with the supervisor outside the supervision room were perhaps unavoidable. Consequently, her relationship boundaries were challenged. Ann's remark was echoed by Teresa:

> The psychoanalytical community in Dublin is very small so you see the same people in other contexts so while in one context someone is my supervisor, in another context... or in other ways. So it is not completely separate from my other professional life. So I think that makes me cautious more so than somebody being horrible to me.

Teresa seemed worried that Dublin's small psychoanalytic community would create circumstances where the professional boundary was breached. She apparently needed to keep a distance in order to maintain her own privacy. In addressing the issue around boundaries, Patrick referred to different roles that the supervisors may have assumed. He pointed out, while explaining the dual teacher-supervisor role, how he often felt 'criticised' because 'my first supervision was my training supervision as well':

> I felt it {dual role} was too restrictive in some way and that I needed something different, I really felt that very strongly. That actually brought me to the point where I stopped and then moved to another supervisor. And something happened that was kind of unethical, I felt, that brought the first supervision to... It turned it into a situation where I felt I couldn't continue ethically.

An idiographic aspect of Patrick's experience of having the teachersupervisor was that although the other participants were not happy with the multiple roles assumed by the supervisor, Patrick went one step further, describing it as 'harmful'. His emotional experiences, similar to Mark and Ann, can be classified, using Ellis et al.'s (2014) notions, under harmful supervision experiences. Patrick's teacher-supervisor had suspended their supervision and for Patrick this was 'unethical'. He believed that the suspension of his supervision was down to the teacher-supervisor role, and how this breached professional boundaries.

## 4 | DISCUSSION

This study, as part of a larger study, explored psychoanalytic therapists' experiences of problematic supervision. The years of experience and the frequency of participating in psychoanalytic supervision varied among the study participants; however, based on the life span model of supervision (Rønnestad & Skovholt, 2003), the sample was deemed developmentally homogeneous because the study participants reached the professional phases and had passed initial stages of their development.

As already mentioned, this is the first study to examine in-depth professional psychoanalytic therapists' perspectives on problematic supervision. The study adds to the psychotherapy and psychoanalytic supervision literature by providing in-depth knowledge on how challenging and difficult events play out in supervision and how they are experienced by the supervisee.

The findings from the study demonstrated that, for many of the participants, psychoanalytic supervision was frustrating and a difficult experience. This speaks to the study's first research question that sought to investigate inadequate and unhelpful aspects of psychoanalytic supervision. Psychoanalytic supervision was frustrating in the respect that the supervisor cut the sessions when the supervisee obtained a meaningful understanding of their clients, which was, using Ann's phraseology, 'a parody of the analytic session' and 'ridiculous'. It is well established that the unconscious is timeless and the length of psychoanalysis cannot be pre-determined (Dulsster et al., 2018). Lacan nonetheless extended this idea into every single session and contended that the length of each session must not be fixed in advance and the psychoanalyst can 'scan' a session provided the client obtains a significant insight (Lacan, 1953/1966). The current study demonstrated that some supervisors have adopted 'scansion' into supervision and treated supervision as an analytic session. Psychoanalytic supervision was also frustrating for some participants on account of the fact they did not obtain the answers to the questions they had. This finding is consistent with Norberg et al.'s (2016) study, which found that psychodynamic supervision can be, at times, limited by the supervisors' own limitations, for example their conflicts and blind spots. In addition, there is a compelling body of evidence to suggest that psychoanalytic treatment, like other forms of psychological interventions, has its own limitations (Sadock et al., 2007). Most of the contemporary versions of psychoanalytically oriented treatments endorse the idea that 'one size does not fit all' (Gold, 2010). It is therefore understandable why psychoanalytic supervision, as the study participants admitted, sometimes failed to provide answers to some of the questions posed by the supervisees.

The study found that psychoanalytic supervision was conceptualised as hurting deprivation where the participants' need to be encouraged was not met. The participants' stories revealed that a supervision of this kind was experienced as harmful and some of the participants likened their supervision to being 'filleted like a fish - just cut'. This addresses the second research question, aimed at exploring the participants' experiences of harmful supervision. This finding reflects the evaluative aspect of supervision. Supervision is by nature an evaluative enterprise (Bernard & Goodyear, 2009), and it is the task of the psychoanalytic supervisor to provide the supervisee with instructive and corrective feedback (Watkins, 2015c). Emphasising the best way to provide supervision, Holloway (1997) argues that offering corrective feedback and confrontational interventions cannot strengthen the supervisory relationship if they are done inappropriately and unconstructively. Norberg et al. (2016) found that for psychodynamic supervisors, there is often a conflict between, on the one hand, offering encouragement and, on the other, providing corrective feedback. For supervisees, this triggered emotions such as anger. The conflict and its related emotions were echoed by the current study's findings.

The study's participants found it difficult to open up in supervision. This finding is consistent with the non-disclosure literature (Hess et al., 2008; Ladany et al., 1996) and pertains to the third question of the study, that is, exploring difficult supervision relationships. Although it is expected in most supervision models that the supervisee will share information with the supervisor (Hess et al., 2008), the evidence suggests non-disclosure to be quite common among supervisees. Ladany et al. (1996) found that almost 97% of supervisees withheld information from their supervisors. Similar to the findings of the current study, they reported that the information supervisees held back was, predominantly, negative reactions to the supervisor and clinical mistakes. They reported that the supervisees

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feared being considered inadequate practitioners. Likewise, other researchers have found that common reasons why supervisees avoid disclosing information include: supervisees' concerns about how they would be seen and evaluated by the supervisor (Hess et al., 2008), the supervisees' predominantly negative recollection of supervision experience (Gibson et al., 2019) and feelings of shame (Yourman & Farber, 1996).

The study found that it was difficult moments when the participants felttheir voice lost and had an overriding need to have their own authority and space in supervision. This reveals the nature of their supervision relationshipand, as such, addresses the third question of the study. The participants'experiences appeared to represent what Watkins (2015a) called the "pedagogicalversion" (p. 233), a form of psychoanalytic supervision where authority and powerresides exclusively with the supervisor. Previous research shows that supervisees find supervision satisfactory when they are engaged in supervisionand the supervisor encourages their autonomy (Carlsson et al., 2011; Ladany, Ellis, & Friedlander, 1999; Henderson et al., 1999). However, supervisions characterised by differences in power can lead to a conflictual relationship (Nelson et al., 2008). To supervisepsychoanalytic therapists effectively, Sarnat (2012) argues that analytic supervisors have to concentrate on more thansimply skills development and teaching, they have to engage the supervisee in the supervisory processes. Thesupervisee needs to be considered as a colleague and an active member, asopposed to a student and a passive member, of the supervision dyad. For Sarnat, this is one of most exciting potentials of psychoanalytic supervision, the fact that it contributes to the development of emotional and relational capacities, which facilitates learning-through-experiences. Watkins and Callahan (2016), drawingon Wampold's contextual model, proposed a model that assumes that psychoanalyticsupervision leads to supervisee change through different pathways, one of which is supervisee engagement, such as actively taking part in supervisory discussions, which is educationally facilitative. Similarly, Fonagy (2007), in response to a question posed to ten eminent international psychoanalysts in relation to effectivesupervision, responded 'When I dosupervision, . . . I say "Look, this is what I would say," but I would also saythis: "You don't have to put it in exactly the same way" (p. 47). UnlikeFonagy's way of supervising, some study participants' supervisors expected thesupervisees to strictly follow their advice.

The participants of the study appeared to find managing their professional relationships with their supervisors difficult for a variety of reasons. For instance, they found it problematic to accidentally encounter their supervisors in, for example, public places such as hotels. This is understandable given that they were psychoanalytic practitioners whose professionalism required limited self-disclosure (Knox & Hill, 2003; Pietkiewicz & Włodarczyk, 2015). They also experienced the supervisor's multiple roles as challenging boundaries. In addition to the relational challenges and, as such, the third question of the study, this finding reveals harmful aspect of psychoanalytic supervision and responds to the second research question. Boundary issues, at times, appeared to be harmful (Ellis et al., 2014). Bernard and Goodyear (2009) considered the issues

around multiple relationships to be 'the broadest category of ethical challenges' (p. 64) in supervision. Heru et al. (2004) suggests that the maintenance of supervisory boundaries is essential for an effective supervision relationship and for learning to occur. This has been echoed by Watkins (2014), who proposes that competent psychoanalytic supervision requires certain conditions, one of which is the supervisor's ability to monitor the factors that can challenge professional boundaries.

### 4.1 | Implications for practice and policy

The findings from the study have several implications for psychoanalytic supervisors working with supervisees. Considering the fact that the participants' numerous stories revealed a range of difficult supervision experiences, it is recommended that analytic supervisors remain alert to supervisees' negative and unsatisfactory experiences. This is particularly important in light of research that shows supervisors tend to be more optimistic than supervisees when it comes to the style and general quality of supervision (McNamara, 2018). It has been reported that supervisors often fail to recognise the supervisee's difficult experiences, even though they are theoretically aware that these difficulties are common and may occur in supervision (Stromme, 2012).

Given the participants' sense of frustration with obtaining responses to their questions (the first theme), supervisors are recommended to discuss supervisee expectations and the goals of supervision. As had been identified, decades ago, by Bordin (1983), goal setting is an integral part of the supervisory working alliance. Supervisors are encouraged to ask direct and specific questions about what the supervisee hopes to gain from supervision. Regardless of the theoretical approaches employed in supervision, goal setting can strengthen the therapeutic alliance and increase satisfaction with supervision (Lehrman-Waterman & Ladany, 2001).

With regard to the supervisees' need for encouragement and positive feedback (the second theme), supervisors are encouraged to strike a balance between positive and corrective/negative feedback. This finding from the study suggests that supervisors should highlight and acknowledge the supervisee's strengths. Putting emphasis on what the supervisee is doing well, as opposed to their deficiencies, will help the supervisee enhance their clinical self-efficacy (Koob, 2002), which will allow them to risk new techniques in therapy and counselling sessions.

In relation to the participants' avoidance of disclosure (the third theme), it is recommended that supervisors address the issue of nondisclosure and how it can have a negative impact on the supervision outcomes (Farber, 2006). The supervisor can provide the supervisee with assurances that their self-disclosure will not result in a negative evaluation, which in turn will cease the supervisee's fears (Staples-Bradley et al., 2019).

Regarding the supervisee's sense of losing their own voice (the fourth theme), it is recommended that, for psychoanalytic supervision to be effective, the supervisee be granted an appropriate space for them to engage in the supervision process (Sarnat, 2012). Supervisors are advised to use tentative language and ask the supervisee about their recollections around the supervision process. Seeking the supervisees' feedback on a regular base will improve the supervision alliance (Stark & Greggerson, 2016), which is the 'very foundation and touchstone for the totality of the supervisory experience' (Watkins, 2015c).

In an ideal world, the supervisor and the supervisee do not meet each other outside the supervision room, and their communication is confined to the supervisory relationship. However, as the study found (the fifth theme), sometimes managing professional relationship boundaries can be difficult and challenging for supervisees. Supervisors are advised to employ a 'solid structure or framework' (Power, 2007, p. 61), without which supervision would be chaotic and confused. Relationship boundaries are vital for such structures, and the supervisor should ensure that both the supervisor and the supervisee's roles are clearly identified within the professional supervisory relationship.

The study findings also have implications for policy and training programmes. Being a competent psychoanalyst is not necessarily associated with being a good psychoanalytic supervisor. The capacities necessary for being a good analyst only partially overlap with the capacities necessary for being a good analytic supervisor (Zachrisson, 2011). Therefore, it is vital that analytic supervisors are trained and supervised. They need training in order to learn how to identify and effectively deal with the supervisee's difficult experiences. The lack of a curriculum to train analytic supervisors has been described as the main inconsistency and blind spot in the realm of psychoanalysis (Pegeron, 2008). In addition, the fact that supervisors often assume multiple roles seems to be particularly challenging for supervisees. This needs to be taken into account by policymakers.

#### 4.2 | Limitations and future research

A number of limitations need to be addressed. Firstly, consistent with IPA, the sample of the study included a small number drawn from a homogeneous group of participants (Smith et al., 2009). This nonetheless limits the generalisability of the findings and its application to practitioners from different backgrounds and in different contexts. Secondly, there are a number of issues concerning the participants. Gender affects the supervision relationship. For instance, female supervisors have been found to be more conservative than male supervisors in boundary negotiations (Hindes & Andrews, 2011). Consequently, the participants could have different experiences with boundaries depending on the gender of the supervisor they worked with. In addition, some supervisees invited to the study declined the invitation. Those that declined may have had different experiences and their stories could have influenced the study's findings had they participated. Thirdly, the researcher's bias is considered a factor in relation to the rigour of a qualitative study (Shaw, 2010). Nevertheless, bracketing thoughts, a guideline for analysis, and an independent audit, were used to reduce the researcher's bias.

The study's findings can be extended by future research. The analytic supervision enterprise involves three parties, that is, the supervisee, the supervisor and the client. The current study was limited to the supervisee element. Further studies that include interviews with the other parties will provide us with multiple perspectives on supervision. It is also suggested that, in the future, research needs to be conducted into difficult supervision experiences and poor supervisory relationships with reference to *real relationships*, as an integral part of psychoanalytic supervision (Watkins, 2017). This will help us understand if and how the absence of a real relationship can contribute to a problematic supervision. In addition, further research on the effects of problematic supervision on the supervisee's clinical work is required; by studying the supervisee's performance in therapy sessions following supervision, we will gain a greater understanding of the supervision-client relationship and the outcome of supervision.

## 4.3 | Conclusion

The study presented a group of professional psychoanalytic psychotherapists' experiences of problematic and challenging supervision. The participants' recollection of their supervision experiences revealed that they, using Ellis' phraseology, not only found their supervision inadequate on occasion, but also at times found it to be a harmful experience, triggering unpleasant emotions like anxiety, anger and annoyance. Based on these findings, the study offers some practical recommendations for supervisors and policymakers to address possible challenges that supervisees may encounter in supervision. In addition, the study offers several suggestions for future studies to expand on the findings of the current study.

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#### ORCID

Ali Khoshfetrat Dhttps://orcid.org/0000-0001-8632-5137

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## AUTHOR BIOGRAPHIES

Ali Khoshfetrat is a PhD Psychotherapy Candidate at Dublin City University (DCU). He has a master's degree in clinical psychology and has experience of conducting and publishing quantitative research and has presented qualitative research in seminars.

**Gerry Moore**, a psychoanalytic psychotherapist, is Associate Professor of Psychotherapy at DCU. With a track record of a number of research projects in the field of psychotherapy, nursing and addiction at DCU, he has supervised numerous MSC, doctorate and PhD dissertations.

**Gemma Kiernan**, a Chartered Counselling psychologist, is Associate Professor of Psychotherapy at DCU. She has expertise in conducting applied research in the health and social care sectors and is involved in projects using a range of quantitative and qualitative approaches in the areas of psychotherapy, therapeutic reaction and palliative care.

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## APPENDIX 1 INTERVIEW SCHEDULE

- You have been in supervision for several years; can you tell me about this experience?
- $2. \hspace{0.1 cm} {\rm How}\, {\rm do}\, {\rm you}\, {\rm experience}\, {\rm your}\, {\rm relationship}\, {\rm with}\, {\rm your}\, {\rm supervisor}?$
- 3. Has your relationship with your supervisor affected your relationship with your client?
- 4. Prompt: If so, how? Can you give an example?
- 5. Has your relationship with your client affected your relationship with your supervisor?
- 6. Prompt: If so, how? Can you give an example?
- 7. With regards to the supervisory relationship, what does affect you when bringing issues to supervision?

- 8. Prompt: What in the supervisory relationship hinders you bringing issues/materials to supervision?
- 9. Have you ever felt nervous or worried about speaking to your supervisor about something?
- 10. Prompt: If so, can you talk about that experience?
- 11. Can you talk about negative and unhelpful aspects of your supervision?
- 12. Prompt: What was not helpful? What did you not like?
- 13. Have you ever felt harmed in supervision?
- 14. Prompt: Have you come across harmful events in supervision? Have you ever felt treated unfairly?
- 15. We covered all questions. Is there anything you would like to talk about further?