

**How do multidisciplinary clinicians in a Child and Adolescent Mental Health Service and the trainee Child and Adolescent Psychotherapists who supervise them experience the supervision?**

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A thesis submitted for the degree of DProf

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Date of submission for examination March 2022

## **How do multidisciplinary clinicians in a Child and Adolescent Mental Health Service and the trainee Child and Adolescent Psychotherapists who supervise them experience the supervision?**

### **Abstract**

Supervision is a vast area of written and explored knowledge that has many differing schools of thought. Emphasis has always been placed on the importance of supervision as a teaching and learning tool; that it is delivered by a more experienced professional to another; and that the relationship and power dynamics within the supervisory collaboration have an effect on the successfulness of the supervision. This qualitative study uses Interpretative Phenomenological Analysis (IPA) to examine a psychoanalytically informed style of supervision delivered by a trainee to an experienced clinician working in an NHS Children's and young people's mental health service. The question of the trainee status of the supervisor in the supervisory relationship and the experience of being in this particular situation is the underlying focus of this study as it is perhaps quite unique to the training of psychotherapists within the NHS. However, consideration is also given to the experience of giving and receiving psychoanalytically informed supervision. The findings of this limited research suggest that the meaning of the supervision for each participant effects the experience, and that initially there is a distinction of meaning between trainees and supervisees but that over time these differences can become more inline; That the trainee status of the supervisor can have a direct effect at the beginning of the supervision on the power and responsibility of the experience; That the meaning of the supervision and the power dynamic relates to the collaboration and working relationship in the supervision; That there might be a constant and dynamic fluidity to the position and identity of an individual in the supervision space, effecting the development for both supervisee and supervisor; and that there is an overall effect of the supervision on each participant that is perhaps unique to this model of trainee led psychoanalytically informed supervision.

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## Introduction

My experience of delivering supervision as a trainee child psychotherapist within a multidisciplinary child and adolescent mental health service (CAMHS) has piqued my interest in what the supervision means for those who experience it, both the supervisor and the supervisee.

Are there universal similarities and expectations of supervision or are these wide ranging and diverse? What is the expected or hoped for gain of supervision? Is the supervision containing and helpful? What is the basis of the relationship for supervisee and supervisor?

Similar questions have been explored in psychoanalytical and psychological literature and whilst researching the topic I came across varied papers highlighting the benefits of supervision, the types of relationship that develop during supervision, the frameworks and differing styles of supervision and the role of supervision in training. However, there seemed to be minimal literature exploring the trainee in the supervisory role. This is perhaps unsurprising as the literature would suggest that it is unusual for trainees to be delivering supervision. Bernard and Goodyear (2004) discuss the fundamentals of clinical supervision and state that supervision is an intervention provided by a senior colleague to a more junior colleague. Thomas Rosbrow (1997) supports this notion as he defines supervision as "*an intense mentoring experience*".

I was intrigued by the notion that supervision can be seen as an intervention and wondered what was meant by this statement. In my mind, whilst delivering supervision, the idea of the expert passing on the knowledge was not my first consideration. Was this because of my position as a trainee? To me, it seemed it was a valuable opportunity to think with another professional about their work and cases and find ways to introduce the psychoanalytic thinking that I had been learning on my training. However due to the nature of the setting being a generic CAMHS, I often wondered about the significant aspect of the typical understanding of supervision, that being one of the more experienced clinician teaching and aiding a less experienced colleague. I wondered how my supervisees viewed me and did they see me as someone who believed themselves to be their superior or could the experience of supervision be something that became a mutual place to discuss the supervisee and their professional work.

This experience of delivering the supervision in tandem with my clinical work posed many questions around the sense of myself as a psychotherapist and a desire to understand how another discipline may view particular cases. I wondered if the two could go together and thought often about the significance of the supervision for both me and the supervisees. What to supervise became a strong theme in my mind. Is it purely the cases that the supervisee brings with them to supervision? Or should what be potentially stirred in the transference and my own countertransference also be thought about? These were real questions which led me to consider just how out of my depth I could feel at times but conversely brought me closer to a sense of myself as a psychotherapist.

These initial lines of enquiry led me to wonder about the duality of the relationship. The experience of supervision from the perspective of the clinician receiving supervision from a trainee, as well as the perspective of the child psychotherapy trainee placed in the position of supervisor at a time when they are endeavoring to establish their identity as a therapist. This led me to three more questions. How does a non-psychoanalytical clinician experience supervision from a psychoanalytic perspective? How do non psychoanalytic clinicians experience supervision when the supervisor is a trainee? And how does the trainee experience and understand the supervisory task?

I believe that this exploration into the supervision of multidisciplinary clinicians by psychoanalytical trainee psychotherapists would be helpful to the service as it has the potential to lead to a greater understanding of the thinking that can happen in the supervision. I hope to demonstrate to the trust managers the benefits of this thinking for others outside of the discipline; how it can act as a way to contain the anxiety of the clinicians and help them to explore further their role and their own development. I believe that enhancing the managers understanding of the supervision that is offered could potentially allow for more thinking about which parties might be the best recipients of this particular form of supervision. On a practical level it may allow for the Trust to get a real sense of what their investment is in the training of Child and adolescent psychotherapists.

I believe that this study has significance for all parties associated with the training of child and adolescent psychoanalytical therapists. The Local CAMHS and the trusts will be able to have a more detailed understanding of what effect the supervision has. The training school will also gain an experience of what the supervisor role means to trainees and give

an insight into the internal and external pressures on them during the course of the training. Lastly the trainees themselves will have access to the experience of others in their position.

There is a very personal nature to this research, how it has affected me and how the experiences have helped to shape my thinking. The experience of the individual is tantamount and therefore the literature review reflects this journey as well as establishing the structure of this study trying to answer my initial questions around what supervision is and what are the expectations.

It explores supervision as a generic discipline and then branches out into a brief history of psychoanalytical supervision, the model and theoretical underpinning of the supervision that will be researched, documented studies and existing knowledge of the interaction of those involved in a supervision experience and then a focus on papers and articles about how supervision and this style of supervision can be understood in a wider context.

The research and design section sets out how the questions generated from the literature review shaped the choice of Interpretative Phenomenological Analysis (IPA) and the model for the semi structured interview. How the participants were recruited, and the data collected and explains the process of the data analysis.

The result section is set out to highlight the findings of the research, incorporating the findings and discussion to allow and give an experience of the development and links of the themes and superordinate themes that were obtained using IPA. Clarity is added by markers to suggest a distinction between findings and discussion.

This research is therefore a gathering together of existing knowledge of supervision and supervisory processes informing a qualitative study, using IPA, on the experience of supervision delivered by trainee psychotherapists to multi-disciplinary clinicians, within a CAMHS service.

## Literature review

### Method

My original questions around the experience of the trainee psychotherapist and their effect upon the supervision became the starting area for the literature search on the subject however my initial search on the Tavistock library and databases yielded no results on literature around the idea of a trainee delivering supervision. I recognised, in conjunction with my supervisor, that I would have to start in a reverse pyramid style taking the broad subject of supervision and narrowing it down to the relevant and most appropriate literature.

I acknowledge that My background of education and interest in learning and development and psychoanalytic thinking shaped the focus of the literature that I found. For me the focus on what helps the learning experience plays a solid part in my inclusion choices of literature.

This led to clear segments which I have written as separate headings to show the development of my thinking and narrowing down of my research. This funneling down must be considered as having an effect on my choice of literature and articles. **Appendix A** details questions that each section created. These helped to shape the choices of Interview questions for the research and design of this study.

**What is supervision** - a holistic view of supervision as a discipline and the universal similarities/differences and expectations.

**Psychoanalysis and supervision** an overview of the history of psychoanalytic supervision and consideration of the basis of what my own model of thinking brought into the supervision.

**The model of thinking of the supervision.** Thought will be given to how the model works, what it offers to the individuals involved and the problematic areas that both supervisor and supervisee may face.

**The supervisory relationship** is a narrowing down on the personal aspects and the particular focus of this study and the position of the supervisor as a trainee.

**The role of supervision** is thinking about how supervision is positioned with the expectations of the institution and how these may differ from the broader expectations of supervision as a discipline.



**Footnote**

**Langs (1994)** discusses dynamic forms of psychotherapy. He states that this is illuminated by psychoanalytic understanding and makes no distinction between psychotherapy and psychoanalysis. In relation to my study, I will make a distinction between clinical and managerial supervision. Managerial supervision is a different form of supervision and although it can often be a part of clinical supervision or may even take the place of clinical supervision it is not what I am considering in my study. In my basing and contextualising of the subject, like **Langs (1994)** I too see the supervision as not just clinical however, but distinctive in its psychoanalytical underpinnings and processes so I will therefore discuss further the working models of psychoanalysis that seem to me, to underpin the supervision that I am researching.

## What is Supervision?

It became apparent in the beginning of this study that the meaning of supervision is perhaps taken for granted. Supervision's etymology is taken from two Latin words "super" meaning above and "vision" meaning to see or observe. A straight translation of this is indicative of one overseeing another or 'to observe from above'. Immediately this stands out as a possible consideration when thinking about the relationship between the supervisor and the supervisee in this study.

The first goal of this study is to set out clearly what supervision is, to gather an all-round understanding of supervision from all disciplines as opposed to immediately focusing on a Kleinian model of psychoanalytic supervision. Initially this task seemed somewhat overwhelming and although I kept a constant reference in my mind of ultimately exploring psychoanalytic supervision, I quickly became a little lost in the hundreds of different literatures ascertaining to supervision. I came across an article in my literature search on ebsco host that seemed like a very good place to adjust my thinking and hopefully offer some structure to this task. The article was Some thoughts on supervision (Leader & Darian 2010). The title itself offered me a sense of calmness and when reading it I was struck by how similar the ideas highlighted in the article were to my own thinking on my experience of supervision during the training and in contrast how it is viewed often within organisations.

The article finds that supervision is not just the process of one person imparting their knowledge onto another and it attempts to reduce the impact of the teacher student role. **Leader (2010)** does state that supervision is seen as a pedagogic activity, one where knowledge is passed from one party to another. This wording seems particularly important as due to the focus of his article on divergences in thinking, within psychotherapeutic supervision, around transference and countertransference, it seems that he views supervision as an experience that both supervisor and supervisee participate in and face significant questions about themselves. It is a similar thought that stirred my interest in the supervisory experience for a trainee psychotherapist, in particular the experience of delivering psychoanalytic supervision to another clinician from a different discipline.

Leader (2010) puts forward the idea that supervision is a tool to allow both supervisor and supervisee the opportunity to reflect on their own practice, thinking, position, understanding and identity.

I realised that the pedagogic aspect of the supervisory task was something that for me was personal. Learning and how we learn has been a fundamental interest of my professional life. Here the duality of the learning appears to be the desired result from supervision. The question of whether the learning is reciprocated for both parties is of particular interest to me.

Bernard and Goodyear (2004) in an introduction to clinical supervision define it in relation to Hart (1982) who describes it as *“an ongoing educational process in which one person in the role of supervisor helps another person in the role of the supervisee acquire appropriate professional behaviour through an examination of the trainees professional activities.”* Although acknowledging their support of this definition of supervision they go on to acknowledge that it only takes into consideration one-to-one supervision. This definition fits with my own study as the interviews are based on one-to-one supervision. Bernard and Goodyear (2004) go on to offer 3 points for further understanding supervision. *“1. it is evaluative. 2. it extends over time. 3. it has the simultaneous purpose of enhancing the quality of the professional functioning of the more junior person(s), monitoring the quality of the more junior person(s), monitoring the quality of professional services offered to the clients that, she, he, or they see, and serving as a gatekeeper for those who are to enter a particular profession.”*

In the rest of the chapter Bernard and Goodyear (2004) go some ways to establish what clinical supervision is and how it should look. They highlight how each discipline within mental health may have their own governing body for supervision as well as their own different parameters for what defines supervision and the roles of the supervisor and supervisee. When considering supervision of different disciplines there is a keen sense that to develop as a practitioner the supervisor and supervisee should be of the same discipline. It becomes clear that there is an inherent understanding that supervision is seen as a training tool for the clinician. It seems not to reflect on the idea of supervision specifically within a generic CAMHS and the ideas of supervising a professional and any more than one case. Within the CAMHS service most clinicians will manage large caseloads of young people and the task of the supervisor may differ from that of just an educator changing the focus from just acquisition of skills.

My NHS trust uses the model set out by Richards & Payne, (1990). It discusses the four functions of supervision which are all brought together as one functionary unit. It states that *“These functions should be in balance over time, even though at each session one or other may be more in evidence.”* The functions are **Managerial, Educational, Supportive,** and **Mediation.** It seems clear from these expectations that supervision within a CAMHS has a different function than supervision during psychotherapy training.

As I previously highlighted for the purpose of this study one dynamic, I will be looking at is the trainee perspective, specifically the notion of the trainee as supervisor and with that, the expectations and experience of the supervisee who also may not have experienced this particular form of supervision before. Robert Langs (1994) discusses issues in supervising psychotherapy. He points out common concerns in supervision and what can be a blurring of boundaries to the meaning of supervision. He talks about the potential confusion of the relationship between supervisor and supervisee, especially if they work in the same team. Also, the irregularity or regularity of supervision and the potential for a non-agreed space and time. Lastly, he suggests there may be concerns regarding a possible undeclared idea of what is done with the information discussed in supervision. In particular from the supervisees position and their lack of knowledge of what might be recorded. He finishes the chapter with 9 important questions relating to these issues in supervision.

1. How is supervision to be established?
2. How is supervision to be conducted?
3. What are the basic goals of and fundamental precepts of sound supervision?
4. What should be done with the needs of the supervisor and supervisee?
5. What should a supervisee expect from his supervisor?
6. What are the main issues that arise between supervised and supervisor?
7. What are the potentials of the supervision and what are the limitations?
8. How long should supervision last and when and how should it appropriately be terminated?

## 9. How does supervision interdigitate with the psychotherapy of the supervisee?

Paraphrased Langs (1994) p12-13

In many ways I believe these to be key questions when thinking about supervision. All could be taken up in further research to really understand the value of supervision and its effects on the individuals involved. I think my research may also help to illuminate some of these thoughts. However, for me and what seems most relevant to this research is the question 'what should a supervisee expect from his supervisor?' Although Lang throughout the book and in this chapter discusses the emotional impact of both parties upon each other I feel there is still an expectation of the supervisor as the experienced clinician, the one who is teaching. I acknowledge that in the case of a trainees supervision of their colleagues of other disciplines they are the more experienced member in the psychoanalytical understanding, and it is that which they bring to the supervision and the supervisee.

Wilson, Davies, Weatherhead's (2016) study on experiences of supervision of trainee psychologists list 4 key concepts from their meta synthesis of empirical data. They are as follows; supervision is a learning opportunity; the supervisory relationship; power in supervision and the impact of supervision. They conclude that **"Supervision can support trainee therapists in both personal and professional development however it can also lead to feelings of distress and self-doubt."** They place an emphasis on the supervisor as the person who needs to consider the power and different factors of the relationship. Hooley (2019) also focuses on the power relation within the supervisory collaboration.

Another interesting finding in their study is the idea of supervision supporting the supervisee to become more efficient in distinguishing between their own emotions and their patients. Although theirs is not a psychoanalytic study they acknowledge the potential personal nature of supervision. However, from this they raise the point that it is difficult to establish how much of this personal and emotive experience of supervision can be attributed to the supervision itself or the more general experience of the training. In terms of my study the supervisees are not in formal training however a correlation can be drawn from Wilson, Davies and Weatherhead's (2016) study as we consider whether supervision is experienced as a place that facilitates recognition of the supervisees own emotions and

the emotions of their patients or whether this occurs regardless due to the constant evolving of the supervisees experience in working with patients and exposure to the system. The perspective of both supervisor and supervisee and the analysis of the interview data may be able to help in a recognition of a difference between a before and after psychoanalytically informed supervision.

Callahan and Love (2019) in their introduction to a special issue of the Journal of psychotherapy integration review empirical research on the importance of understanding the supervisee perspective of supervision. They discuss research findings relating specifically to experiences of supervision during psychotherapy training. They recognise from the outset how supervision is perhaps “the most ubiquitous training process by which capacity is developed to competently practice psychotherapy.” This shows the importance placed upon supervision and with that the supervisory relationship. They also recognise the lack of research regarding the supervisee position and experience. Their findings suggest that clinical expertise unfolds developmentally; multiculturalism impacts supervision; the supervisory relationship is highly important; supervision can benefit supervisees; and supervision may impact client psychotherapy outcomes.

Although this research focused on the experience of a trainee psychotherapist as supervisee and my study tackles it from the angle of the trainee as the supervisor, the findings still feel relevant because of the experiences understood within a supervision context.

It seems clear to me from the literature that supervision becomes a part of the development of the trainee as a child psychotherapist. The supervision experience and the history of this model of supervision is quite rigidly fixed in the benefits that the trainee receives from the supervision. As my study will look to explore the experience of the trainee in the role of supervisor to a supervisee from a different discipline it is important to hold in mind that the history of supervision within the psychoanalytic world, a typically hierarchical model of teacher learner, is somewhat separate to the models of supervision traditionally adopted by other disciplines. However, the consideration of Callahan and Love (2019) s review enables us to better understand the viewpoint and ideology that the trainee psychotherapists participating in my study are most likely basing their delivery of supervision on.

## Psychoanalysis and Supervision

Psychoanalytic Supervision has been an area of some note and has many schools and divergences of opinion on the best way to provide adequate supervision for trainee child psychotherapists. Many writers on the subject including Selwyn Lederman (1982), Barbara Wharton (2003) and C. Edward Watkins Jr (2013) discuss different approaches and underpinnings of supervision and its importance. All recognise that supervision itself started with Freud and that his was the birth of psychoanalytic supervision, although it is also noted that Freud did not necessarily like the idea of supervision per se. It was however evidenced as C. Edward Watkins Jr (2013) describes in Freud's consultations with other leading analysts, weekly theoretical and group case discussions, and his work with little Han's father in Analysis of a phobia in a five-year-old boy (1909).

The developments of supervision as an endeavor are discussed by Lederman (1982) Using contributions from H. Searles (1965). She discusses Ferenczi and Rank's ideas which began in the 1920s. She says that their approach is supervision that empathises with the analyst in training and utilises countertransference as a means of teaching the method of psychoanalysis. The feelings of the analyst in the session were therefore all used as a means of understanding the trainee's patient as well as a means of dealing with the 'unresolved complexes' of the trainee. At the time they abdicated that the supervisor should be the trainee's analyst themselves because of their knowledge of the individual. The focus of the supervision was primarily located in the trainee and their own responses to a patient.

In contrast Lederman (1982), using contributions from A. Reich (1973), tells us that Eitingon's approach, starting in the 1920s and 30s, focused more on theory and the clinical material brought to supervision. This allowed the supervisor to explore with the trainee theoretically and clinically what was brought up in the sessions. He stressed the importance of the supervisor being separate from the analyst as this allowed a broadening of horizons for the trainee and offered different ways of looking and thinking about the material garnered from their work with patients. This creates a natural initial boundary between supervisee and supervisor. This is more in line with my own experience of psychoanalytic thinking and training in child psychotherapy. Watkins junior (2013) expands on this, in his article The beginnings of psychoanalytic Supervision: the crucial role of Max Eitingon. He discusses the history of supervision detailing the role of Eitingon and his role

in developing supervision. He goes so far as to state that Eitingon 'invented' supervision and discusses the idea of a triumvirate, the didactics, training analysis and supervision of psychoanalytic education. He quotes Eitingon:

*“We entrust to students who have already made good progress by means of theoretical study and being analysed, one or more cases known to us from consultation and suitable for beginner, and of these we let the young analysts at once try their hand alone. By means of detailed notes which learners have to make, we follow analyses closely and can easily detect their mistakes and gradually eliminate the whole host of errors, which the inexperienced analyst makes in consequence of a mistaken conception of the aim and method and all too rigid attitude towards single theories and results of psycho-analysis. p.268 p259*

Wharton (2003) also discusses the developments of Ferenczi's ideas on the subject and charts work from Balian and Maroon and the arguments that developed between the divergent viewpoints of supervision. There is acknowledgement that the debate about who should deliver the supervision has over time reduced and, according to Wharton (2003), that by 1962 cases were supervised by a separate party not the analyst. Wharton (2003) recognises that in pioneering work the analyst and supervisory work would overlap but also in the supervision where countertransference relations came as much from the patients of the trainees as they did from the trainee themselves. Of course, it must also be said that the different training schools for psychotherapy will also teach a different theoretical model which potentially also may affect the supervision and the relational aspect of the supervision.

Savage Scharff (2014) notes the similarities and differences between supervision and analysis. She defines the difference quite concretely as being **“Analysis is open ended without goals. Supervision is goal orientated and time limited.”** I wonder if this statement is perhaps a little too reductionist however, although when considering the supervision of clinicians from other disciplines it is helpful to keep in mind the idea that the focus is the case and the material, not the potential underlying unconscious dynamics of the trainee.

Considering this study and the supervision that would have been conducted, an emphasis is most certainly placed on recognising the countertransference relations that originate with the patient. However, the goal as I saw it, was not to teach the clinicians how to be child psychotherapists but instead to use psychoanalytic thinking to inform their practice and reflection upon their own emotional state when working with a patient. It is clear to see why this debate about clinical supervision was, and should be, still rife. The fundamental



difference, as I see it, is then the role that the supervisor has in the depth at which they should explore the personal material of the analyst in training. In my own supervision of colleagues, I feel this debate was still there. The clinicians I supervised had not previously been in analysis and the question of exploring some of the personal and emotional characteristics of their work against the more obvious presenting difficulty of the patients became a source of tension throughout the work with them.

## The model of thinking for the supervision

The psychoanalytical model I used when delivering supervision is a complementary offering to thinking rather than just a style of teaching. It is a model that is important in the creation of thought for the supervisor and supervisee and is a method that can allow the focus of sessions to be located on the patient. Ronald Britton (1998) describes it as the idea of triangulation and the third. The third being something in psychoanalytic theory related to the oedipal complex where the infant recognises that it has a relationship with its mother (A-B) and with its father (A-C) and then becomes aware of another existing relationship that of the Mother and father (B-C) that it is independent and separate to itself and if it can be tolerated the infant becomes able to observe another relationship other than its own. This recognition of a separateness can be very painful, Britton (1998) discusses saying that some *“patients did not risk envisaging a relationship between their analyst as their primary object with a third object because this would be catastrophic. This also applied to events in the analyst’s mind as they might be imagined by the patient.”* When considered in a supervision context the forming of a third position is one that must be navigated to ensure the supervisee does not feel to persecuted and attacked but also not so encouraging as to bring about an un-separate unity between the two working together.

Napier (2015) discusses the impact of supervision for the trainee psychotherapist. She notes the importance of Britton’s (1998) triangular space and the subsequent psychic space that can be created. She highlights how at a very rushed and busy time in her training, this third position often collapsed. She describes a situation where in supervision she was unable to be in contact with the third position and was only able to relate specifically to her proximity contact with her patient. She talks of being unable to be in the supervision in the right way and unable to create the internal supervisor in her mind focusing on the actions in the room and unable to think about these in the transference and countertransference.

Thomas Rosbrow (1997) discusses parallel processes, this is where the supervisee becomes identified with a patient and then brings this identification into the supervision. A supervisor without insight of the supervisee may not be aware of this and acts in accordance with the supervisee in that they are acting in accordance with their patient. It becomes clear that what can happen if this is not identified in the supervision is that the patient gets lost and the interactions of the supervisory couple become what is considered

and thought about or worse simply denied. It would therefore seem to be extremely important for the supervisor to try and create the position of the third in the supervision. This indicates that as much thought about the supervisee is required as there is thought about the patient.

Margaret Rustin (1998) discusses a case where she acted as a supervisor for a trainee psychotherapist. She discusses the ways in which the supervision provides space and support for the trainee. Here the supervision was conducted by fax, however the time and day was always constant which helped to maintain a consistency to the supervision allowing the trainee to feel supported.

Napier says that *“supervision mirrors psychotherapy, in that the creation of the space in which uncertainty can be tolerated is what allows the process to unfold.”* This feels very close to the initial arguments about supervision, the question of is it educational or is it a therapy? Rosbrow (1997) points out this fine line or as Langs (1994) describes it, it is the blurring of boundaries to the meaning of supervision. He talks about the same ideas that originated at the birth of supervision that caused Eitingon and Ferenczi and Rank to have differing opinions. Bernard and Goodyear (2004) also recognise how supervision does have a crossover with counselling and therapy although they state that the focus should be on the problematic behaviours of the supervisee to help them improve their work with the patients.

This area of trying to find a balance between supervision, education and analysis is one that is complicated for a trainee therapist. I wonder about the trainees capacity to hold that distinction. It seems to me that complications around supervision are abound. The trainees participating in this study are coming from a position where they may or not feel like the expert, they are in an organisation that has its own expectations of what supervision should be and they have an unknown complication in what the supervisees expects and is experiencing from the supervision.

The importance of this model is twofold for this research. Firstly, the triangular space created allowing thought about cases to be maintained and secondly examining some of the difficulties there can be in the establishment of this triangular space. The supervisees defences against what they consider to be personal and painful feelings and the supervisors own lack of training and knowledge to recognise when this third space has not been created can both affect the experience of the supervision. The supervision being

delivered in a generic CAMHS is likely to involve many cases being brought for discussion so there may not be such direct identification that gets carried into the supervision. That is not to say that it can't happen, however. The supervisor may begin to notice similarities with particular types of patients and the supervisee and try to think with them about the themes that emerge. The position of the trainee is one that here feels very threatened by the potential of the hierarchal relationship.

## The Supervisory Relationship

This study will explore the experience of the supervision for both supervisor and supervisee. The literature regarding the context and history of supervision leans towards what to expect and the roles of each of the performers in the relationship. However, I find my mind wandering to what does it mean for the participants of supervision and what is required to encourage 'good' supervision. Jill Savage Scharf (2014) defines the role of clinical supervision as one that teaches psychotherapy. Again, the author describes the idea of supervision as a hierarchal teaching tool where knowledge is departed from a master to an apprentice however, she discusses among other things *“the complications and various factors that are important to be considered between supervisor and supervisee”* and *“the frame and focus of supervision.”*

It is in these areas that once supervision has been established, as Enlow and McWhorter (2019) point out, what becomes of most significance is the supervisory working alliance (SWA). Bordin (1983) lists 3 competencies that make this up. They are the goals of supervision, what needs to be done to reach those goals, and trust that the tasks will help the trainee reach their goals. Clearly the trainee aspect of this study is a point of consideration as the supervisees in my study are not trainees. Also though, is the initial idea of goals and achieving those goals. The problematic areas described so far around creating a psychical space and trying to understand the complex emotional aspects of a supervisory relationship may make this goal setting more difficult.

Enlow and McWhorter (2019) describe differing supervisory relationships and highlight how different styles of teaching offer different relationships to the SWA. However, they also point out how these differing styles can affect the supervisee, especially when considering the expectations of the supervisee for the supervision. They use examples where the supervisee has experienced problems with supervision and has been left to feel un-empowered, and unsupported. Esther M Hooley (2019) also describes the importance of the relationship and the fit between the supervisor and the supervisee. Her focus though is on the power relation within the supervisory collaboration. She gives a personal account of how she believes she experienced a supervision whilst training, of her supervisor being oblivious to the power imbalance of the relationship, how she was often left feeling undermined and anxious that the boundaries of the relationship had been crossed. She discusses the idea of the hierarchal approach of the teacher learner and how there is an

acknowledgement from the supervisee of the experience and 'power' of the supervisor and brings to light how this can affect the SWA. Especially if this is not thought about by the supervisor.

Flemming 1967 writes about three models of supervision The Jug, Potter, and Gardner. Here the Jug is when the information and knowledge is simply poured into the recipient, in this case the supervisee. The potter, where the supervisor models the thinking of the supervisee to match their own or what the supervisor deems to be the correct method. And the Gardener where the supervisor tends to the elements that help the supervisee to grow in their own way. The style of delivery of supervision seems dependent on many variables associated with the individual and their own understandings of their theoretical models as well as their confidence with those models.

Harris (1977) clearly identifies the importance of the supervisory experience for the supervisee. They say, "***A supervisor can do much to strengthen or melt away the illusion that there is a "way" which those who have inside information know about.***" Although the idea of the triangular space is what the psychoanalytically informed supervisor is attempting to create, the first two models, the jug and potter could also be created.

By now, in my mind the definition of supervision, to 'observe from above' has become rather an abstract one. This lack of a concrete easily definable existence, one of set rules and set approaches is perhaps what makes the area of psychotherapeutic supervision so challenging. The literature on supervision within psychoanalysis and psychoanalytic psychotherapy is mostly around a hierarchal position and therefore a teacher learner dynamic. However, when considering psychoanalytic thinking Rustin (1998) points out that the supervisor is also a willing learner in the process. Although I believe this still very much comes from a position of hierarchy there is an acknowledgement of learning for oneself as well.

## The Role of Supervision

Psychoanalytic literature has openly questioned the tension between therapy and education and the importance of the supervisory relationship which implies nurture and support. De Stefano et al (2007) recognise in their study on experiences of group supervision that supervision can add an emotional support to the supervisee. The importance therefore of supervision to the institution is hugely relevant both in the delivery and in the impetus placed on the supervision. Not only is there a teaching aspect to the supervision but there is also the space that the supervision creates that potentially allows thinking about the anxieties and unprocessed feelings and actions of clinicians. Why this space is important is another question. The personal nature of the supervision has focused so far on what each agency brings to the supervision in relation to the cases they are working with and the transference and countertransference, yet I believe that supervision potentially goes further than this. Just as important is what may be brought to supervision because of the setting and the experience of working in the institution.

In 1960 Isabel Menzies Lyth study on hospital life highlighted areas of concern over the amount of anxiety created in these types of settings. She looked at how the structure of the system was put in place to avoid anxiety but how chores, rules, procedures, and regulations were utilised in a way that left the nurses uncertain and working 'in a constant state of impending crises. Tutton and Langstaff (2008) argue that although there is an awareness of these anxiety inducing problems within institutions today, models of fixing these often become procedural or tick box exercises which add to what Evans (2015) in his response to the Francis Report (2013), which highlighted a lack of concern and empathy in nursing staff, calls a top down management system that pushes anxieties about survival down the hierarchy into front line staff.

A modern generic CAMHS service is an anxiety provoking environment where disturbed children and families come to find help. Workers have high levels of stress and responsibility placed onto them. This goes from the ground floor all the way up to the higher reaches of the trusts and NHS. The institutions have had to manage this anxiety and find ways to cope whilst offering a means of helping patients to make sense of their fragmented and disturbed worlds. It stands to reason that the task of the institution is to find ways to manage these anxieties without affecting the treatment it can offer.

The management of anxiety is essential for people's wellbeing and in producing caring and nurturing clinicians whose focus is on the betterment of the patients in their care. There is a risk in this current climate, however that what is in place already is enough. Kraemer (2015) points out whilst writing about Anxiety at the front Line, that the NHS works in a military fashion and "that once trained, you can do the job, if necessary, by following instructions from a protocol." The argument being that protocol and routine are enough to contain the anxieties of the individual. In psychoanalytic thinking the idea of the created anxiety needs to be defended against to protect the self. If these anxieties are left unchecked, then there are high risks of splitting and projecting off these unwanted and uncomfortable feelings onto others around. The containment offered by protocol and the like does not offer integration of the self and indeed may not be wanted by the individual due to what could be perceived as a lack of an area to wrestle safely with these difficult feelings. In this case what can happen as described by Kraemer (2015) is the hierarchal and managerial system becomes attacked and the negative unfairness becomes located in it.

Andrew Briggs (2018) highlights this area of concern within the NHS. He states that there is currently a state of loss of organisational containment and that psychotherapy itself is under threat within this current climate. He claims that the organisation leads to what he describes as a -K world of CAMHS. He uses Bion's concept of K and -K (knowing and not knowing) to describe a scene where the organisation is bound to its hierarchal system for its thinking leaving the staff in a position of not knowing what to do unless systems are in place. This position of CAMHS would leave clinicians in a very vulnerable position, uncertain and unknowing abandoned and helpless with only their own personal doctrine or training to fall back on. What could then get missed when dealing with children and families is the individual nature of the situation and what is the best mode of help that can be offered. This shows to me the value and importance of psychoanalytically informed supervision in the mental health service. Supervision that offers containment and support but also can challenge and help with tolerating the frustrations of the system and the individuals within this system. I am reminded again of Bernard and Goodyear's (2004) declaration that supervision is an intervention and with that comes the significance of what psychoanalytically informed supervision can potentially offer to the service. The idea of just managing the anxiety is not enough, thought must be given to what must be done with these fragmented and unwanted components. Ungar and Ahmad (2001) argue *that a core function of psychoanalytic supervision is to help contain the emotional turbulence and the*



***unconscious anxieties arising and evolving in the two interacting domains of the analytic and the supervisory sessions.***

The supervisory relationship is one where the not knowingness is essential. In this very complex space, trust and faith is necessary to tolerate personal and institutional anxieties as well as allow the developing thoughts and ideas that come about.

Supervisee and supervisor experiences are so important in trying to understand the implications of these questions. As the supervisory relationship becomes more established and the more unconscious aspects of the dynamic are played out, I wonder what happens to the feelings of envy particularly with reference to the perception of anxiety especially when we consider Britton's (1998) ideas of the triangular space and the oedipal complex. The trainee holds anxieties around their own training, and development as well as of the individual patients that they see and of the institutional elements of their roles. However, the clinical responsibility for those patients lies with the trainees service supervisor. Throughout the training the clinical responsibility is not on the trainee. When this is put in contrast with the supervisee who is often holding a large case load and full clinical responsibility for the patients in their care, the question of what gets stirred up in the supervision becomes realised.

One of the avenues of thought I am interested in is exploring not only the importance of psychoanalytically informed supervision, but also if this style of working is suited to all other disciplines. As has been noted in Rustin, Britton, Napier etc. there is a large amount of anxiety and discomfort associated with the idea of supervision. Addressing one's own complications can be a painful process and if this is the case how is this held and thought about by the trainee who may be feeling quite anxious and uncertain about their own identity. The hope is that the study allows the experience of individuals receiving and giving supervision to be thought about in a way that may help in establishing suitability for this style or as Jonathon Pedder (1986) discusses other methods that may help to alleviate the personal-ness or the potential personal-ness of the supervision.

Pedder (1986) in reflections on the theory discusses different modes of supervision. He brings out the difficult cross over areas that could be problematic for both supervisee and supervisor and for the trainee supervisor that of finding the distinction between supervision as an educational experience against supervision as a therapeutic experience. Pedder (1986) and Stefano et al (2007) discuss the idea of group supervision and although this is

not a direct part of this study there is potential for implications around the suitability of group work for particular people.

## Summary

Fundamentally the findings of this literature review suggest that supervision very much comes from an educational position and that the body of work is mostly around its use as a training tool for the development of psychotherapists or of individual disciplines. The emphasis is on the skills and knowledge needed to be a self-sufficient practitioner and that this is passed on by the learned master. The idea of support and containment is also a constant presence although not necessarily directly implicated outside of psychoanalytic literature. From a learning perspective there is emphasis placed on disciplines supervising their own as opposed to a more general approach to supervision although supervision as its own discipline and training is a well-considered and established area within mental health services. In thinking about how supervision is perceived within an NHS structure, it does seem apparent that the action of the supervision taking place may be a direct method of containment but one that is perhaps more considered a byproduct of the relationship. I would argue that containment of the supervisees anxieties and the development of their toleration of not knowing, and frustration seems an essential component in both developing practitioners and in supporting their own individual health needs. The complexity of managing this relationship, the fine line between training and therapy being evermore blurred due to their not being a direct teaching component required and added institutional expectations; is one that may be very difficult for the trainee supervisor and indeed the qualified supervisee.

I do believe what is clear from the existing literature is the importance of supervision and the space for supervision. Alongside this, in the current climate, there is an awareness of management tasks of supervision as well. This is a clear expectation from the NHS. It is possible that a focus on the managing of cases and the supervisee workload is another form of containment but one which in tandem with the triangular space hopefully achieved may be quite difficult to manage. That is not to say impossible, but it certainly is one that needs further consideration by the supervisor.

When exploring the experiences of both the trainee supervisor and the professional supervisee, I would like to look at the use of supervision not just as a learning experience but also as a containing factor within the NHS child and adolescent mental health services. How the potential confused power dynamic is experienced; how the supervision aids in the forming of the supervisors identity as a psychotherapist against the backdrop of the

institution's own desires and motivations for supervision; How the supervisory relationship affects the outcomes of the supervision; How the supervisor as the trainee thinks about their own and the duality of the learning experience. The differing styles of supervision and what the supervisor and supervisee have experienced previously; How the Supervisee expects supervision to be; Throughout as well I hope that the potential offerings of psychoanalytically informed supervision also become more apparent.

Overall, the question comes down to this, is supervision purely an educational experience or is it also a useful tool in helping individuals cope and think about organisational, as well as personal stress and how does the position of trainee as supervisor affect this experience. The argument of education versus therapy still seems very alive.

## **Methodology**

### **Design**

A Tavistock research and ethics committee (TREC) proposal was initially written with discussion and guidance from my supervisor. We considered the nature of the study and how the information could be gathered and analysed, and which methodology would be most suitable. Ethical approval for my study was awarded. (Appendix B)

The importance of this research is twofold, firstly there is a want to increase an understanding for the training school of child psychotherapists and perhaps offer thinking and insight into the experience and pressures of the trainee performing supervision. With this is also the value that supervision offers and the questioning of the value of providing supervision as a means of forming, or certainly aiding, in the forming of an identity as psychotherapist. It is reasonable to consider at this point the background of each trainee and their own understanding and preconceived ideas of what a psychotherapist is, but nonetheless I feel the research may be of use in helping to explore this.

Secondly are the benefits and knowledge it may be able to offer to the NHS and the trusts who employ child psychotherapists in training. The areas for consideration are based on the positive and negative experiences of the supervisees and how perhaps a more suited and adaptable pairing of supervisor and supervisee can be thought about. I also wonder if the knowledge of the experience may simply show the services the value of the psychoanalytical approach and what it offers in terms of thinking for clinicians. This research may also reveal the importance of clinical supervision as its own discipline and show the necessity of it being provided in its own space and time without constraints of procedural or managerial forms of supervision becoming entangled or worse still replacing clinical supervision.

My initial questions that shaped the literature review;

Are there universal similarities and expectations of supervision or are these wide ranging and diverse? What is the expected or hoped for gain of supervision? Is the supervision

containing and helpful? What is the basis of the relationship for supervisee and supervisor?

When compiled with the questions each section of the literature review generated gave these results.

Is the supervisory experience helpful and strong enough to encourage learning and development for both parties?

Can the trainee provide the containment necessary to create and maintain this space?

Is the trainee able to create the model of thinking required?

How does the pairing of the dyadic supervisory relationship affect the supervisory experience?

Where is the power and how does this affect the experience?

With my initial pre literature review questions. The creation of a model for the semi structured interview was developed. I recognised I wanted to not only explore the experience of the psychoanalytic supervision for supervisees and supervisors but also get a base line understanding of how the participants viewed their previous experiences of supervision.

The study was based upon the interviewing of 3 supervisees and 3 supervisors who were currently in training as child psychotherapist or who had recently qualified. Both sets of candidates (Supervisees and supervisors) were given 5 questions relating to these topics. Wording and stance were different for each set reflecting the position of the participant in the supervisory relationship.

**Method (IPA)**

The methodology for this research is Interpretative Phenomenological Analysis (IPA). This is a methodology that allows experience to be examined. The experiences here are of the supervisee and their experience of psychoanalytic thinking in supervision and of the supervisor being still classed as a trainee whilst delivering the supervision. The second set of experiences to be analysed are of the supervisor, their experiences of delivering psychoanalytically informed thinking supervision and how this affects them and influences their identity as a psychotherapist.

The structure of IPA seemed more appropriate for this study rather than thematic analysis due to my own training and position as a child psychoanalytically trained psychotherapist. The concern was that the using thematic analyses as a method may cause a reliance on my own underpinnings of methodology and thinking, which potentially could have biased the findings. IPA provides a much stricter structure that allows my thought to be incorporated without becoming the defining characteristic.

## Recruitment

The recruitment for participants was based purely on a criteria basis. Starting with those who are still in training and are currently supervising colleagues moving through to those psychotherapists who had recently qualified. The intention was to recruit trainee psychotherapists from the county who worked for the same trust. In informal initial discussion with the county psychotherapy teams the response was supportive and all agreed in principle to take part in the interviews.

The recruitment of the supervisees was also thought about. Consideration for the clinician who has been supervised would be paramount. They too would be approached based on meeting the criteria of having been supervised by a trainee child psychotherapist. For the formal recruitment process, I first emailed the trainees and the supervisees and included a participant information sheet. I then invited them to contact me if they would like to discuss any anxieties or concerns. I set out a recruitment document for participants to respond to. I made it clear that confidentiality is important but that due to the small nature of the study and the small group of trainees to choose from it is possible that their own material may be identifiable, though all reasonable measures will be taken to maintain confidentiality and privacy. It was also made clear that the intention was not to pair up the supervisee with the supervisor and that each interview is a stand-alone set of data. Appendix C -1,2 shows examples of these.

The non pairing of the subjects was an active decision to maintain the focus of the individual on their own experience and to attempt to reduce potential anxiety around concern of having their own experience judged or compared against others.

Once the participants had agreed to take part and had signed the consent form a list of the interview questions was sent to them. There was slight divergence in the sets of questions for supervisors and supervisees.

Appendix D 1-2



## **Participants**

I had wanted to achieve four participants from each group but found that the gathering of applicants was more problematic than perceived expectations. In order to recruit the number of participants required I opened the search category up moving outside of my NHS trust and using members of my own cohort of trainees from my training school.

Potentially the small nature of the study affected the search for participants. Some therapists were reluctant to participate alongside one supervisee who felt that her responses would not be wanted for the study. It was unclear if this reluctance was because of the small proximity of the study or due to other factors, such as the covid pandemic and a pressing of anxiety or a concern for newly qualified therapists revisiting a subject that may have been quite painful or distressing.

## **Data collection**

The interviews were semi structured and conducted over Zoom during the national covid pandemic. Each interview lasted between 30 and 40 minutes and were then transcribed. Once the interviews were complete, the process of coding and data analysis was undertaken using IPA methods set out by Smith, Flowers, and Larkin (2009). One of the interviews was plagued with connection issues with the signal dropping twice and the interview having to be paused. However, it was able to be recorded.

## **Data analysis**

I read and reread the transcripts to familiarize myself with the material and to get an overall flow of the participants' thoughts. I listened to the audio recording also to help to get further indication of how and what the interviewees were communicating whilst conducting the interviews. Once this familiarization had occurred, I began the coding process. I placed the text into a word document table and in the column next to the responses I began to note down my own thoughts in relation to what the interviewee was saying.

Once this had been completed, I went back through my own notes and read those to get a different understanding of the flow of the interview. Occasional extra notes were added or embellished. Once this was complete I then in accordance with Smith, Flowers, and Larkin (2009) began to look at themes and added these into another column of the table I would use my own notes and think of a particular theme that this might be.

Appendix D -1,2, show an example of one supervisee and one supervisor transcript and notes.

Initially this was a long-drawn-out process. The material seemed very varied and filtered this process again creating a list of all the themes and then grouping them into more occurring phrases.

Appendix E -1,2, show an example of one supervisee and one supervisor of list and further coding.

For each individual interview a set of grouped themes were then placed together creating superordinate themes for each of the participants.

Appendix F -1,2, show an example of one supervisee and one supervisor grouped themes.

This study is looking directly at experiences of both supervisees and supervisors so when comparing themes of each participant I divided the interviews into their corresponding participants and compared the themes of each subgroup. This led to more homing in on themes that were related across the sub sectional interviews. What became clear to me was that although there were two subsets of participants the themes indicated that both sets shared many similarities. Although there would often be an opposite reaction or

differing response there was also recognition of how the experience itself was for both the participant and there opposite (not interviewed).

This made me think of the experience being more than just of the individual and I wondered about a grouping of both sets of participants. I decided then to compare both master sets of themes from the two different perspectives and grouped together superordinate themes that were most clear throughout all the interviews.

The pattern of the experiences for both supervisees and supervisors held distinctive similarities allowing this overall grouping. My choices for grouping supervisees and supervisors superordinate's together became a personal choice that followed on from what I had found out in the literature review. My own interest in learning and education may have guided this thinking and made me more aware of similarities around these learning experiences and tensions.

Illustration 1. lists the superordinate themes and the sub themes that were created by this process.

<b>The meaning of the Supervision</b>	<b>Power and Responsibility</b>	<b>The Supervision collaboration</b>	<b>The fluidity of position</b>	<b>The effect of the supervision</b>
Then	Structures	The union	Self as learner	Needs of the self
Now	External reality	Pairing and joining	Self as Child	Destabilising
Goal and Task	Task or reality	Contest and challenge	Self as Teacher	Sanctuary of structure
Supervision/Therapy	Willingness to engage	One, Two, Threeness	Self as Patient	Backwards and Forwards
Break from reality			Self as Adult	Consolidation of identity

Table to show superordinate and sub themes for all participants.

### **Ethical considerations**

The study is only small scale and the results obtained are therefore only an indicator of the individuals involved. For some of the participants this may have been an anxiety provoking situation. The potential for being recognised becomes higher.

The personal nature of a qualitative interview meant that consideration for the participants and what may be stirred up for them in the interviews was considered and a follow up space was offered should they require one.

There is an acknowledgement of my position with both supervisors and supervisees involved with this study. All were known to me, either through my clinical work and daily practice or else on my training course for psychotherapy. This feels particularly important in thinking about the interview and coding process and what potential effect this had on that experience. Certainly, I am aware of the differences of each of the interviews and how the questioning and even speech patterns that I adopted often became closer to the individual I was interviewing at the time. My personal relationship with each participant could have created its own form of the supervisory experience where meaning, power, collaboration, fluidity, and effect all may have affected the results of the interview

## RESULTS

### Superordinate 1

#### The Meaning of the supervision

The first superordinate theme is perhaps the most straightforward and descriptive of all the themes. The meaning of the supervision was individualized for all the participants. The interviewees' own words quite clearly depict a strong idea of supervision and their experiences, past and present. Although there is a level of interpretation to this phenomenological aspect of their accounts, overall, there is clarity in what was said.

#### 1. Then

For all the participants there was a difference between past experiences of supervision and psychoanalytically informed supervision. There was quite an expression of previous supervision perhaps being unsatisfactory, or not meeting the specific needs of the interviewees. Interestingly the three trainees, when asked this first question about their past experiences struggled to initially locate themselves back in the historic supervision. They all launched into the value of psychoanalytically informed supervision and the benefits that this has offered them. All had to be redirected by the interviewer to focus on past experiences. This will be explored further in the superordinate theme of fluidity of position.

Jess (Supervisee 1) perhaps defined the past experiences in the most concrete way.

*Yeah, so for me, I suppose supervision generally, and its function. Well, I suppose I'm drawing from my past experiences as I talk, but for me, it's about being given a space to, often about being given a space, to think about progress, development, a chance to look at kind of some clinical stuff, thinking about caseloads, maybe thinking about some challenges you might face, but it's very much drawing from my past experiences. Often there's a bit of a blurring between whether or not I'm having clinical supervision or am I having management supervision. And quite often in, in services, where I've worked before, and in this service too actually, the two are kind of merged and they become one, or it feels much more management than clinical, so much more about processes, procedures, and sometimes supervision. In my past experience of supervision.*

It seemed that Jess (Supervisee 1) was able to communicate a dissatisfaction in her historic supervision and focused on the blurring of expectation and content. There is an importance placed on the term clinical supervision and I suggest that it is this that signifies the 'self'. There was an idea that the space for her and her own needs (clinical) was hijacked by the case management and structural procedures, as Evans (2015) discussed when describing how the institution becomes a place of pushing down the anxieties about survival into front line staff. Leading Jess (Supervisee 1) to also say *but sometimes it can feel like it is about a bit, a bit of a tick box exercise*. Naming as it were, the tick box exercises described by Tutton and Langstaff (2008). It felt like Jess (Supervisee 1) had experienced previous supervision as a place where she was pushed out; and structure, words, and form, took her own place. Although all participants shared a viewpoint with this stance there is a suggestion that Jess (Supervisee 1) may have felt a need to fill the space with something more solid and concrete. The way that she answered the question felt full and contained lots of words. When reading the interview, I was struck by this fullness and had to concentrate hard on separating things to identify what was being said. Perhaps this is indicative of the experience for Jess (Supervisee 1).

## 2. Now

There was an idea that psychoanalytically informed supervision, particularly for the supervisee, was a space that focused much more on the needs of the individual. This could also be in accordance with Kraemer (2015) that the managerial structures have become a location for negative anxieties described in the first sub theme which then allows the psychoanalytical supervision to become something different and something outside of the establishment.

Louise (Supervisee 2), who had previously had psychoanalytically informed supervision was perhaps the least in recognition of discipline as being what might create that space but equally recognized that this was what she wanted in a supervisory space.

*Okay, um, I guess I, I've always experienced supervision, as really, really, really important to have. And I will actively put other things aside to make sure that I have that supervision in place. I er I don't know what I'm trying to say, I, and I really like the fact that I can build a really trusting relationship up with the supervisor, because I need to feel really safe. If the stuff I want to share with them. I'm not going to feel judged. I guess that's probably something to do with my, my, my psyche. So, I would*

*actively work on when I'm meeting a new supervisor, I know personally, I'm actively working through that relate that therapeutic relationship as much as the supervisor, therapist relationship.*

The supervisors also noted a difference between types of supervision although their answers were not as straightforward or as clear as the supervisees. It seemed that their own training loomed over the supervision that they offered. There was recognition that they were providing a thinking space, something that doesn't necessarily follow a format or exist within a rigid framework. However, especially for Sophie (Trainee 1) *Erm And it's, it's very tricky thinking with her about not trying to make her into a psychotherapist about knowing how to continue to be a psychiatrist, but working with psychoanalytic case, when she detects risk, she can retain her psychiatric self. But also keep on keep with this more therapeutic side.* and Robin (Trainee 2), *So the idea was that they would work with them from a psychotherapy kind of perspective. But they weren't trained in that way. So, I was sort of giving them a bit of an experience of how one with, how someone might think in that perspective. So, they can learn a bit about that.* There was a strong focus on the learning space and a specific task and function of the supervision they provided.

Olga (Trainee 3) had a slightly different viewpoint. She too focused on a learning space and dynamic but there was much more of a nod towards providing a space for the individual to explore themselves within the context of the relationship between them.

*how I if I have my own supervision, psychoanalytic supervision, how I like to shape it, it's, you know, what is very nice about psychoanalytic supervision is that you do have a boundary, you do have framework, framework, but you know, you have lots of movement within the framework. And that it makes sense, but you know, that you can still maintain your stance, but you also allow for other things to come in. It's kind of, it's erm it's just, just being curious, really, and, and observant and a good listener, and sort of combing through the material er and learning together, because I think, I think, I think it's always about relationship. Regardless of what sort of the supervision it is, it's about building a relationship with a person. And the stronger the relationship, the, the, it then, as it grows, as the relationship grows, it allows for, er you know, exploration of challenging ideas, and we know me as a psychoanalytic supervisor may feel challenged. But if the relationship is strong, you know, we can, we can find ways uh of how we can think about things.*

Here Olga's (Trainee 3) description of the framework of psychoanalysis does I believe highlight the understanding of this being a training/learning experience as much as a space provided for the supervisee to explore themselves. The repetition of 'I think' also shows something of a struggle to define just what the space being created is. It shows a



level of complexity and thinking that differs from the more forthright views of the Supervisees who, at the beginning, experience the space as something for them. Louise (Supervisee 2), however, did comment throughout on her recognition of her supervisor being a trainee. There was an acknowledgement that there was a learning need for her supervisor which perhaps fitted with her own understanding of what a supervision space can offer. This will be explored further in the theme of break from reality and expanded in the superordinate theme of power and responsibility.

### 3. Goal and Task

As noted for Sophie (Trainee 1) and Robin (Trainee 2) the initial task was to perform psychoanalytically informed supervision for a particular case. Robin (Trainee 2) clearly shows how much the task was in his mind when initially asked about his experience of supervision. He responds by explaining what his role and task for the training could be perceived as *to define, but I guess it's the opportunity to take clinical work, case work off erm to a colleague or a group of colleagues. Erm And, you know, in other, other, minds to think about and support you with that work. I guess it has kind of a containing function, that, you know, there's erm mm.*

Robin was actually providing small group supervision alongside individual for two colleagues.

Olga (trainee 3) was providing supervision to a colleague that was more in line with a general clinical supervision and was more of an overall supervision of work for her supervisee. However, all on some level kept in mind a clear idea of the task of the supervision with regards to their own learning.

What was interesting in the interviews was that there were moments for all three trainees where there was a real connection with something more than just the task.

A clear moment of this connection came from Sophie (Trainee 1) when talking about decision making coming from the supervision.

*Well, I mean, it's not always that clear cut, is it? where erm. And I was thinking even in the moment, as I was talking about it, often you can talk to your intensive supervisors about erm ideas about what you might want to do, whether you notice is this discharge, or whether this is a suitable case, or whether you know you should write to the parents, you can talk to them about those things and have their advice, but the ultimate decision will go then to the service supervisor.*

**Substantial pause**

*erm, I suppose that sort of responsibility, yeah, I do feel some weight of it, it's hard to think that what I might be thinking with power will inform her decisions. And yet, is it right... yeah.*

The supervisees readily acknowledged the task and function of previous supervision but found it more difficult to think about the task of psychoanalytically informed supervision. The therapeutic nature of the supervision space that they all, on some level recognised, all calling it therapy rather than supervision in the interview lead them to the exploration of the self and the notion that this was just as important as the exploration of the work. Anne (Trainee 2) gives a clear recognition of the blurred nature of this, although here she discusses her clinical practice, she also recognises the exploration of herself.

*I think I see it as an opportunity to explore my clinical practice. And so maybe thinking about how I relate to certain cases, having a space to maybe unpick that a little bit. But also, maybe think about my own stance and how things can trigger me upset me.*

This could of course be viewed as a task, but it feels quite a distance away from the idea of performing specific goal orientated or procedural tasks within the supervision space. The goal orientation and time limit is different to historic experiences of supervision. That even for the supervisor who initially sees the function of the supervision as a training task there becomes a blurring of clarity as the relationship and deeper understanding between the two parties is developed.

**4. Supervision/therapy.**

There was for all the supervisees and one of the supervisors a real blurring and perhaps confusion regarding these two components. The supervision/ therapy debate is one that noted in the literature review harks all the way back to the beginning of psychoanalytic supervision and the training of psychoanalysts and psychotherapists. Jill Savage Scharff (2014) described when she suggested that the difference between analysis and supervision is that of open ended-ness against goal orientation and time limitation. At one time or another historic supervision for all participants focused on goal or task. The psychoanalytically informed supervision delivered by a trainee appeared to lead to a split between the two sets of participants in terms of the function of the supervision.

For Sophie (Trainee 1) and Robin (Trainee 2), the blurring was perhaps less apparent, and it seemed that the supervision they delivered was more task focused, as discussed in the previous theme, they were providing a space for their supervisee to explore a specific individual case.

It was clear that for all the supervisees there was a sense that the supervision was indeed a therapy. As already noted, all at one point in their interviews referred to it as therapy rather than supervision. There was also acknowledgement from Anne (Supervisee 3) and Jess (Supervisee 1) of the changes that the supervision brought for them both professionally and personally,

*And I'm always wanting to learn, and I'm curious to hear from people and kind of, there's things that I can be kind of expanding on. So, I think that's helpful in a psychoanalytical kind of environment, I would imagine. But I think it's, it's helped me understand so much more about myself. Personally, actually, as well as professionally, and I think that it's kind of that's indescribable, really, is, it's kind of it's pretty powerful to be able to kind of get to a point where you think. Okay. Yeah, I actually feel like I know what I want to do. And that's a pretty cool. Feeling.*

As the previous extract from Louise (Supervisee 2), who had perhaps the most ambivalent experience of psychoanalysis as a discipline and at face value placed a large amount of importance on the relationship and the value of a space. Often spoke in a way that demonstrated that it was not only a therapeutic space for her but also an opportunity to think about the therapeutic space in her own sessions with children. There was also a recognition of a duality in her work with her patients and of her own needs within supervision. There was a distinct need to use the space in a particular way which may be related to a power dynamic within her own supervision but also from a need to protect herself from the anxieties and traumas experienced in her work.

*So, I would actively work on when I'm meeting a new supervisor, I know personally, I'm actively working through that relate that therapeutic relationship as much as the supervisor, therapist relationship. And I probably see similarities with that with when I'm working with my clients, because they need to trust me enough to not feel judged. And so, I feel like I'm almost experiencing what they're experiencing. Because I want, I want to go to someone to work through what's going on in my sessions. Like if I'm, if I'm getting that feel that there's something missing or I'm missing something, or we're stuck in this like circle. And we're not going anywhere, that I can honestly as best I can share that with my supervisor, without feeling like I'm not good enough. And really get something from it.*

This importance placed on the relationship by Louise (Supervisee 2) will be explored further through the results section however with regards to the idea of supervision or therapy it clearly places her in line with the other supervisees as the supervision being a space to think and work upon the self. I argue that there is a recognition from Louise (Supervisee 2) that the stuck quality when working with a patient that can be discussed in the supervision space is something that on some level, she recognises is within her. The ideas of Rosbrow (1997) about parallel processes are perhaps identifiable. Through the analysis of the transference between supervisee and supervisor, light can be shed upon the relationship between supervisee and patient.

## 5. Break from Reality

This focus on 'task' from the supervisors and the uncertainty of what the psychoanalytical supervision space provided, particularly for the supervisees, leads to the theme break from reality. On some level all the participants experienced the supervision as something separate to the normality of clinic life. There was quite literally a breaking from reality in the space that was created in the room. The supervisees experienced this as something that distanced them from the continued task and goal of modern CAMHS life where they were allowed what they felt was a space to explore themselves within, not just the system, but their own personal life. Jess (Trainee 2) describes this and demonstrates a coming back to reality after a supervision session *There are times where I found it really is one of the difficulties is that it can feel very, it's so personal, and it can feel very, it's almost like being in therapy, isn't it, it can feel really difficult. And I've had assist, you know, supervision, session, one might have been quite upset about something, and then I have to go back to work directly afterwards, and I'm straight back out there. And, you know, I might be straight off into a session with a young person, it's can be quite difficult to then sort of pull yourself back together, think, well, I have to have to kind of carry on now and be, you know, be work Jess.*

The supervisors too had this break from reality. Their experience of the supervision being task based and the training that they were all undergoing at the time led to there being moments when something more akin to personal learning occurred for them in the supervision experience. This perhaps lessening the recognition of the real-world gravity of the effect of the supervision for the supervisees and their patients. The above extract from Sophie (Trainee 1)'s interview in many ways highlights an element of this. She recognizes the space and the need for thinking about the patient but the responsibility she believes is held by the service supervisor. It seems that a significant defense against reality is being

played out. A holiday if you will, with reference to the idea of cases and discharge that Sophie (Trainee 1) brings into the interview.

## **Discussion**

The ideas of Menzies Lyth (1960) article on nursing and the management of anxiety and its relation to organizational life feels quite live. Jess (Supervisee 1) may have been aware of the importance of the more structured and managerial style of supervision but there is the question of whether it is able to adequately contain the continued anxiety and helpless feelings her.

The meaning of the supervision in a psychoanalytically informed space seems universally to be that of a space where exploration of oneself can be achieved. Complicating factors, including historical experiences, however, appear to also become a part of this expectation which may cause a sense of blurring of the function of the space. It seems that the system itself does not always know how this form of supervision fits. The responses of participants in this study suggest that there is a desperate want for it on some level by clinicians, but that there is perhaps an unrecognized awareness of this from the psychotherapy trainees as well.

What became apparent around the individual meaning of the space, is that safety within it is paramount for all the participants, For the supervisees it is the safety to explore themselves or to be vulnerable and not to face hostility or recriminations. For the supervisors it is the creation of this space and the creation of safety for themselves by the training and tutors around them. Responses of some of the participants highlight the fact that the trainee aspect of the relationship has the potential to disrupt the safety for the supervisees and the next superordinate theme explores this element of the relationship.

## Superordinate 2

### Power and responsibility

One of the main considerations of this study was the impact of the supervisor being a trainee and the supervisee potentially being a more experienced clinician. This interesting dynamic is compounded by participants individual experiences and relationships to hierarchy and the expected norms.

#### 1. Structures

Power and responsibility floats throughout the participants interviewed accounts of supervision. They all noted or were able to discuss the expectation of being in supervision and given advice and support about their role. Jess (Supervisee 1) had shown how the previous supervision she had received used a top-down approach where the supervisee would use the space to think about their role and tasks. The natural expectation of a more senior or experienced supervisor was something that for all was a consideration in alignment with cited literature. Both Jess (Supervisee 1) and Anne (Supervisee 3) made comments about psychotherapy in relation to their own clinical training. It seems that not only is hierarchy directly related to experience but also to roles and qualifications. Sophie's (Trainee 1) considerations of hierarchy between roles were also interesting. When talking of her supervisee she noted that they were a psychiatrist. The implication was that this was a more senior position.

*Yeah, I think it's very complicated, in a way. I'm supervising a ST, five, or six. So, she's a psychiatrist is quite senior in her training. And erm you know, I think this is someone who I would consult to at times for risk, or for, you know, for other sort of more psychiatric points of view. And now she's coming to me for the psychoanalytic sort of supervision.*

It seems that Sophie (Trainee 1) highlights here a position of authority over her supervisee. She goes onto say.

*But the case that we're working on has become more risky. Erm And it's, it's very tricky thinking with her about not trying to make her into a psychotherapist about knowing how to continue to be a psychiatrist, but working with psychoanalytic case, when she detects risk, she can retain her psychiatric self. But also keep on keep with this more therapeutic side. And of course, she has her psychiatric supervisor, the case coordinator, and she has me, so she has both these two parts of herself.*

This I think highlights the complexity of the dynamic that is possible in this trainee supervisor relationship. The individual questions of identity within this systemic power structure and the dynamic between the supervisor and supervisee will be explored in the superordinate theme of the supervision collaboration.

## 2. External reality

The concept of responsibility also weighed heavily within this hierarchical system. Superordinate 1 has evidenced that the participants recognise supervision itself as a space to develop the practice of the clinicians. As mentioned, the space itself became at times a break from reality for the participants and with that comes the consideration of who holds responsibility for what is thought about in the room. When discussing cases under previous supervision there would be accountability on both parties with the experienced supervisor creating tasks that may help with the clinical responsibility for the cases. In this specific trainee-led supervision the responsibility seemed to become a little vaguer.

Another factor relating to the external reality was the thoughts that other members of the team had about the psychoanalytic supervision. In accordance with Langs (1994) and his suggestion that supervisees may be confused about the supervision and that they may have concerns about what is done with the information gathered in the supervision. All three supervisees recognised a confusion around just what the supervision was. We have already considered the question of whether it is supervision or therapy that arose but there was also consideration given to why the supervisees were being offered this particular form of supervision. Anne (Supervisee 3) referred to this in the most explicit way.

*you know, I can remember, very much so that when it was raised as a as, you know, would you like to do this, it was done in a way that was kind of like suggested to kind of team leader, leader level as to whether it would be a good, good idea. But to the extent that someone actually said to me turn around and said to me, oh, gosh, do they not think you're very well? Do you need some extra help? Which was a bit like, oh, I thought it was the opposite. But I thought maybe they thought they saw something in me and wanted to, you know, help me unravel some kind of my professional dilemmas. That's kind of how I saw it in my mind. But in their mind, they saw it as the opposite that actually, they've seen something in me and I needed, I needed some psychotherapy support. Almost like seeing me as a client, which was a little bit unsettling, actually, for me initially, and I think I battled with that.*

She talked about how when she was offered supervision other members of the team were vocal about why she was being offered it, with one member even stating that she (Anne

(supervisee 3) might need help herself. Anne (Supervisee 3) in her doubling of the words Leader, Leader and good, good indicates that there is again doubt. Who is in charge? And is there clarity? Anne (Supervisee 3) in her response displays an internal power battle with this thinking. In whose mind are the ideas?

### **3.Task or reality**

We can make a link to the earlier theme of break from reality when we consider the reasoning behind psychoanalytical supervision further. As has been mentioned, for the supervisors there was perhaps an unconscious shared focus on task. The analysis indicates that because of this, an element of personal responsibility was removed. At times, however, this was not the case for the supervisees. For them there is a much clearer attachment to something more real, namely themselves. The power dynamic here becomes interesting. Louise (Supervisee 2), perhaps as the only supervisee who had already experienced psychoanalytic supervision, was the most vocal in recognising disappointment with being supervised by a trainee. However interestingly this created its own micro power dynamic where Louise (Supervisee 2) appeared to be able to achieve what she felt were her requirements for supervision as well positioning herself in such a way that she took on responsibility for the trainee.

*I guess, if I'm being really, really honest, when I first found out that trainee was going to be my supervisor, I was a bit disappointed. I was like, but I want someone who's really experienced and is going to help me, because I'm feeling really scared, because I'm in this CAMHS. And I've worked in camps before. And it's so different from where I've worked at other places, like this is a large organization, and I'm, I prefer smaller organizations. And is she gonna, have the skills and the experience to bring that in the room with me. But I added a little conversation in my head. Well, that's really unfair. She's been training for a long time, she's got life experience, and she needs this, this experience as well. And one day I was I was there, and I needed someone to trust in me and give me that experience.*

The disappointment so directly expressed by Louise (Supervisee 2) was not only a reflection of her recognition that the supervisor may not be experienced enough to meet her needs, but also that there was potentially another external focus, i.e., the training requirements. Her supervision wasn't just about herself. The question of the space being about 'Me' became threatened and thus the safety of the space itself became threatened.



#### 4. Willingness to engage

These inner power dynamics will be explored further in the supervision collaboration superordinate theme.

As we consider further the power dynamics highlighted in Louise's (Supervisee 2) interview quite explicitly the question of the willingness to engage arises. The supervisors generally recognise the supervision as a learning tool. It seems more complex and confusing for the supervisees. As noted, Louise's (Supervisee 2) willingness to engage enables her to gain an element of power in the relationship. For Jess (Supervisee 1) and Anne (Supervisee 3) there is more of a struggle with an acceptance of engagement. Anne tries to define the supervisory experience near the beginning of her interview *erm I think the psychoanalytical supervision is slightly more erm raising questions, and like sort of wonderments and thinking about things and maybe thinking about things in different perspectives. Whilst my caseload management is more about maybe efficiency, possibly. erm whilst yeah, I think the psychoanalytical supervision is more about how comfortable things feel, and whether things can be kind of tweaked or changed, maybe,*

Her uncertainty of the experience portrays an unknown quality to what the supervision is. Her clear mentioning of a more structured and managerial style of supervision indicates something that is known and perhaps hard to let go of. This dynamic for the participants will be explored in the superordinate Effects of the supervision but it is important to add here how both of these supervisees enter something that did not fit with their knowledge of structural organisational life. This may have created a destabilising effect for both. However, both also reveal how they accepted this position and went with it. In power terms there is a giving up of their own power and placing themselves in someone else's. A hugely vulnerable position that interestingly may not be on face value immediately recognised by the supervisee. There is also recognition that this may be due to an assumed hierarchical instinct to place a Psychotherapist above themselves within the institutional structure. It is not clear if this is universal as we remember Sophie's (Trainee 1) testament to her own supervisees qualification, but it may be said that clinicians may automatically have a similar bias.

*I don't know, for me, there's something and this is possibly my own sort of, I don't know my own thinking and wondering about my role as a nurse and where I fit in the pecking order in terms of disciplines, you know, that you've got your kind of psychotherapists who are up here, and actually, them being your supervisor, being a trainee psychotherapist, for me, that still puts them above me, as a mental health nurse in my mind, don't ask me, why, I have no idea. But in the pecking order,*

*that's okay. Because, you know, you're training to be a psychotherapist, therefore, you know, you might only be a trainee, that you or you might not necessarily be as experienced as I am, but I'm experienced as a mental health nurse as I don't, I'm not, I'm not a psychotherapist.*

Jess (Supervisee 1) here describes this pecking order, but I also wonder about a level of fear and vulnerability that is placed into the supervision. Her thoughts on her own experiences and the recognition of how experienced she is feels at odds with the idea of psychotherapy being placed above her own discipline. It speaks I think to the vulnerability that may be a part of psychoanalytically informed supervision. That the space to think of oneself creates a strange tension between supervisor and supervisee that alongside traditional hierarchical power dynamics could add a sense of 'Are we in this together?'

## **Discussion**

The experience of delivering and receiving this supervision appears to be ultimately linked with an individual's own sense of systemic power dynamics and the considered 'normal' hierarchical system of top-down power. My mind goes back to the idea of Bernard and Goodyear (2004) that of supervision being an intervention. Are there cases when supervision might be offered in a particular model to help an individual with their own problems? It is an interesting question and one that reflects the idea of the hierarchical power system. However, I wonder about how the idea of psychoanalytical supervision may have been communicated and could it be done in a way that may bring less anxiety to an individual about why they are receiving this specific model of supervision. I think what is also of note here is the uncertainty about psychoanalytic supervision outside of those in training and those who are receiving it, not just the supervisees. The experience of Anne (Trainee 3) and the sense of doubt about why this style of supervision has been offered is an example of the confusion that is in the system now about psychoanalytic supervision. It is also suggestive of the way that anger and resentment can enter it.

I wonder of the difficulties of taking this into the supervision and the potential mistrust and resentment that may have been placed upon the supervisor. It is of note that when conducting the interview and the subsequent reading and coding of this interview I was aware of my own outraged response to this and felt a strong sense of anger for what had been said.

The supervisory experience for participants is a hugely personal one. As Hooley (2019) described there is a potential mismatch of power due to reasons for the supervision being quite different for the respective parties. All the supervisees responses show that the current hierarchical system of a generic NHS child and adolescent mental health service influences an individual's understanding of supervision and in turn the relationship with a trainee supervisor. The responsibility for oneself and one's own needs outside of psychoanalytic supervision is determined by this hierarchical system. However, when the notion of responsibility within the supervision is considered there is evidence to suggest that the supervisees could feel somewhat confused and potentially concerned about how safe the space can be. Further complicating this is the trainee supervisors own clouded judgement about their level of responsibility to the system and the patients. Tension it feels becomes significant in this supervisory relationship. This study indicates that at the beginning of these supervisory relationships there was often discord between participants but however as the experience developed and the working relationship became deeper these power dynamics could often be thought about. How the evidence suggests that thinking about power and responsibility is managed and explored in the supervisory experience, is considered next in the superordinate theme the supervision collaboration.

## Superordinate 3

### The supervision Collaboration

Perhaps the most important aspect of supervision is described by Enlow and McWhorter (2019) when they refer to the supervisory working alliance (SWA). The superordinate theme of the supervision collaboration between the two participants considers the already discussed expectations and power dynamics and expands upon the styles and individuality of the participants and explores their relationship to the supervisory experience.

#### 1. The Union

The first sub theme within this superordinate is that of the union. This is an overview of the working partnerships that each participant describes in their interviews. It takes into consideration how the participants viewed their working partner and how their own experiences affect their ability to come together with another person. It is difficult to establish the impact of the supervisor being a trainee specifically on the working partnership but equally, it is important to note this dynamic and its possible effect. The participants all had unique ways of viewing and working with their supervisor/supervisee. For Robin (Trainee 2) and Sophie (Trainee 1), as discovered in superordinate 1, the pair with the strongest identifiable sense of task, the union is perhaps more straightforward.

They both view the experience as working with a clinician on a task to help them to think psychoanalytically about a particular patient. However, both also indicate uncertainty about their own position. Sophie (Trainee 1) defined the hierarchical differences of the system in her supervisee when she discussed them as being a psychiatrist and Robin (Trainee 2) relates on a more personal level with someone, equally a trainee that he has previously worked with. *And I suppose it felt more kind of across kind of peer. I felt a bit like peers with them (Okay) in terms of position in position in the team and in the organisation. Erm But I guess, what I was offering them, you know, both of them, well, actually, there was three, there was two I saw for group supervision, and then one I saw individually.*

The sense of power from the last superordinate theme is both tangible and present and adds to both of their experiences. Robin (Trainee 2) also takes a different position of educator. *So, the idea was that they would work with them from a psychotherapy kind of perspective. But they weren't trained in that way. So, I was sort of giving them a bit of an experience of how one with, how someone might think in that perspective. So, they can learn a bit about that.*

This position allows Robin (Trainee 2) to work with his supervisees in a way that seems to develop Robin's (Trainee 2) own confidence. Further analysis of this will be discussed in the superordinate theme of fluidity of position.

There appears to be a greater complexity for the three supervisees and Olga (Trainee 3). Here their unions and coming together are bound by the same hierarchical biases and power relationships but also through a less identifiable specific task of supervision. It is of note that the supervision for Olga (Trainee 3) differs slightly to that of Sophie (Trainee 1) and Robin (Trainee 2) in that she is supervising a clinician as a person and her caseload whereas both Sophie (Trainee 1) and Robin (Trainee 2) are supervising one clinician for one specific case although Robin (Trainee 2) was also supervising 2 colleagues in a mini group supervision. This distinction of the supervisory agenda draws a direct correlation with the more task specific supervision that is suggested by Robin (Trainee 2) and Sophie (Trainee 1) in the first superordinate theme.

For Anne (Supervisee 3), Jess (Supervisee 1) and Olga (Trainee 3) and the more blurred understanding of the task established in superordinate 1, there is a much broader quality or expectation of what the supervision will be. This appears to result in particularly strong and personal unions between them and their collaborators, that are seemingly laced with multiple interacting dynamics heavily influenced by the more ranging nature of the supervision.

Louise (Supervisee 2), as mentioned in the theme Willingness to Engage, captures a picture of the more complex coming together with her supervisor. For her the union becomes a means to acquire a space that she covets as well as enabling her to take on an element of responsibility and power for herself.

The next sub themes will explore the complexities of the unions taking into consideration the individuals understanding of what supervision is and their previous experiences.

## **2. Pairing and Joining**

The unions can be split into two distinct forms, that of Pairing and Joining. Pairing being the bringing together of two individuals and the maintenance of this position and joining being the merging of the individuals and the creation of something new together. In many ways a professional pairing and a personal joining. In terms of this study, it seems that these two forms of coming together are heavily influenced by the participants' own

experiences. Not only their experiences of supervision historically, but also their own individual experiences which will undoubtedly be brought into any situation where collaboration is expected. The analysis I believe demonstrates preferred styles from all participants however there is also an important fluidity to these positions where an individual can move from one position to another.

Olga (Trainee 3) whose data suggests her union is that of a deep and personal relationship with her supervisee, *Regardless of what sort of the supervision it is, it's about building a relationship with a person. And the stronger the relationship, the, the, it then, as it grows, as the relationship grows, it allows for, er you know, exploration of challenging ideas*, demonstrates an ability to show movement between these positions. She fits into the idea of pairing where she can keep a strong focus on herself and is using parts of the supervisee to maintain a clear boundary., *how I like to shape it, it's, you know, what is very nice about psychoanalytic supervision is that you do have a boundary, you do have framework*. However, Joining also occurs.

*I would, yeah, I, I, think I would say yes. It's a, it's a strange mixture of somebody as a psychoanalytic practitioner or thinker. It's, it's a person who is trained to think in a specific way, but also a person who allows lots of different ideas to come in. And somehow, somehow kind of trying how to see how it can, how different things can work together. So, I, I think I don't exactly remember the question you asked, but my answer is yes. (laugh) Well, I think that is something. Yeah, I think there is something specific about psychoanalytic supervision. Yeah, that's,*

The loss of the question here I believe demonstrates this joining where the thinking about psychoanalytically informed supervision moves into something less concrete. Olga (Trainee 3) demonstrates an ability to recognize the professional stance but that in joining with the other something more blurred and less concrete can also be discovered. There are also varying repetitions of words which brings in a quality of not just one mind, but two. It could perhaps at times be difficult to pull away from the other.

Robin (Trainee 2) and Sophie (Trainee 1) also described this potential joining and reflected on it from the position of the supervisor.

Sophie (Trainee 1) says.

*Yeah, I think it's very complicated, in a way. I'm supervising a St, five, or six. So, she's a psychiatrist is quite senior in her training. And erm you know, I think this is someone who I would consult to at times for risk, or for, you know, for other sort of more psychiatric points of view. And now she's coming to me for the psychoanalytic sort of supervision. But the case that we're working on has*

*become more risky. Erm And it's, it's very tricky thinking with her about not trying to make her into a psychotherapist about knowing how to continue to be a psychiatrist, but working with psychoanalytic case, when she detects risk, she can retain her psychiatric self.*

Here there is the concern about herself and the effect she may have on the supervisee. The 'turning her into a psychotherapist' seems to be more of a reflection of 'turning her into me' where a joining becomes so strong that personal identity is lost completely. It highlights the power dynamic that Sophie (Trainee 1) faces and with this is Sophie's (Trainee 1) own defenses of her inferior feelings.

Robin (Trainee 2) also recognises a joining that can happen in the relationship.

*And then there's a kind of another kind of processing or digesting that goes on between two people between the group but hopefully, develops your own thinking as a as a therapist.*

He speaks of a digesting between two or more people (Robin (Trainee 2), alongside his one-to-one supervision, also supervised two individuals at once). This shows a very personal connectedness, a feeding and sharing to bring something in and break it down into its components for nourishment and waste.

Anne (Supervisee 3) and Jess (Supervisee 1) show the greatest tendency towards a joining style of collaboration. Although Jess (Supervisee 1) has plenty of experience, they both enter the supervision relatively new to the CAMHS model. The pairing with their supervisor and the maintenance of that position feels very located in their own identities and training however something within the supervision potentially disrupts this and the joining with the supervisors feels highly influential.

*We reflected on it a little while ago, actually. And it's, it's a really fascinating experience to, I don't think I've had many relationships, where I can set name things, and have a very open conversation about something, and then, you know, almost be held to account to a certain extent, or kind of challenged, but the relationship continues. So, it's quite a, it's quite a special kind of experience, actually, because you can kind of go through that rupture and repair, actually, within the actual supervision itself, it's kind of the relationship is so much more than just the conversation as well if that makes sense.*

The 'We' at the start of this extract reflects a combined state. Something that shows a togetherness, I think Anne (Supervisee 3) can communicate that this jointness is a part of the process, how the thinking can come together. Anne's (Supervisee 3) description of the relationship and the joining suggests that there becomes something more personal than

just a collaboration or working with a colleague, something more than words. Again, there is a fluidity to Anne's (Supervisee 3) position.

Louise (Supervisee 2) is perhaps the one participant who shows the least movement between the two positions. She shows a clear distinction towards pairing where she maintains a distance from the supervisor and uses the space for her own needs. The power dynamic comes into effect with Louise (Supervisee 2) taking on a position of power and looking after the supervisor as well.

### **3. Contest and challenge**

The experience of the other for all the participants is key to the supervisory relationship. As mentioned, this will be affected not only by current experiences but also past ones. The experience of the pairing and joining for each participant can facilitate the understanding of what's behind their style of relating in the supervision. It feels pertinent to consider the impact of contest or challenge on the style of relating at this point. It seems that the concept of contest or challenging within the supervision reflects not only the individual's views about the other but also perhaps their own current state of mind. This can be fluid, changing and evolving throughout the supervision experience.

Louise (Supervisee 2) shows perhaps the most defiant thoughts about the supervision collaboration, early on in her interview she explained how she had received psychoanalytically informed supervision previously. Throughout she goes back to this experience, and it seems to paint a picture of an experience that was extremely important to her as well as becoming a containing place for her in her current supervision. The contest that potentially gets played out for Louise (Supervisee 2) with her current supervisor, that of who holds the power and of being able to challenge her own thinking seems fraught and fragile. There is a want to hold onto something of herself. This seems to be caught in her self-esteem and perhaps there are concerns that the supervision may reveal something of what she feels she is not doing. By taking control of the position and accepting the trainee as someone who may not be as experienced or knowledgeable Louise (Supervisee 2) is able to utilise the space to allow these inadequacies she feels in herself and from this put herself back in a position of finding a way to get something she wants and needs for herself.

*Yeah. And prior to that we'd had where I'd been at first come over from camhs, we'd maintained our old supervisor initially. So, we were having to go through that transition of leaving the supervision*



*that we had there. And feeling held and contained to, there was more than one thing going on. It wasn't just the supervision; it was lots of different things going on at the time. So, this time when trainee left, although I was like, really gutted, that she was going, I felt like I was in a position now to say, oh, well, actually, I would, I would like this supervisor, because I felt like I needed different people's training and different people skills.*

Interestingly with Anne (Supervisee 3); *Well, interestingly, I actually had this internal battle. A few months before lockdown, actually. And I was a little bit confused as to why there was two, does it need to be two and I wasn't really sure. So myself and my supervisor who delivers more psychoanalytical there were questions about whether she could offer me a space outside of our supervision time, because it felt at times, maybe we were just in a little bubble of the conversation that we have., and Jess (Supervisee 1), I think, I think for me, I wouldn't want the more procedural stuff to be brought into what I have, from a supervision perspective right now. And actually, what we were doing for a while was that there was a sort of separate management type supervision within the pathways that we work. And I think for me, that's, that's more helpful*

They are experiencing psychoanalytically informed supervision for the first time the contest between supervisor and supervisee is far less of an adversary. The contest for them seems to become more about feeling disorientated with their own identity and training. The challenge of looking at their own thinking becomes highly sought almost as though it becomes the stability that they need at that time. The complexity of their relationship with their supervisors becomes fraught with an acceptance of the containment that the supervision offers.

The three supervisors in this sub theme face the contest and challenges of their supervisee but also their own sense of hierarchy and power. Olga (Trainee 3) clearly demonstrates how difficult this position can be.

*Erm It is, because we are being primarily, primarily trained to work with children, it's very difficult to work with an adult. So that is, that is I mean, obviously, in my previous employments, I worked with adults, but it with child psychotherapy, it's different. And I erm, I think it's both challenging, but also very enjoyable to be on this journey with somebody. It's, I think, it, it, adds more to my, it, it adds more towards my, you know, building of my professional identity as a child, psychotherapists then challenge it. erm, you know, I, I have the benefit of you know, I've been working with this person for, for a very long time now. So, we had the chance to build a relationship. And I find myself actually using the basic, you know, the most important tenets of child psychotherapists, I think I sort of I follow that structure in my work, you know, as a supervisor, which I find helps whether I'm doing it because I'm a trainee, just a trainee, in my mind, and whether I need err extra crutches around me, maybe, I don't know, I, I find that it works. To have the setting, you know, to do certain things the way*

***I would do with in my therapeutic practice with children and young people and families. erm, I think I got a bit lost.***

Although in many ways she is describing the challenges for a trainee working with a clinician, the way in which she recognises how she is a bit lost at the end of the statement I think signifies just how much the challenge and its effect can have on the individual. There is a desire to see both sides of the relationship but the idea of the repeated 'primarily' and this representing two lots of one indicates how a joining can also be quite disorientating. There is a want to locate herself in that position allowing her to see the relationship from an external position to understand the dynamic and what it represents. She talks of structure and crutches as an important aspect of trying to maintain this position however alongside the challenge of trying to find herself in relation to the supervisee there is also the challenge to see herself as a psychotherapist and what this might mean in a real life CAMHS setting.

#### **4. One, Two and Threeness**

This leads into the next sub theme of One, Two and Threeness. The supervisory relationship as defined by Ronald Britton (1998) in his description of the tri space highlights how the individual and the coming together of the two can create the third. This is the space that allows thought to happen. In this context the results highlight the painful aspects of the third. The unions themselves demonstrate these positions. Moving from the two to the three for Louise (Supervisee 2), Jess (Supervisee 1) and Anne (Supervisee 3) at times seems to be a painful disturbing process. Jess (Supervisee 1) talks of this quite concretely when discussing the supervision experience.

***Yeah, definitely. Maybe that's why I haven't used the word support either because it's hard to, it feels pretty much like support. But then there are other times where I can really not feel like that at all. Actually, it can feel really frightening and overwhelming. And I think, oh, what yeah, I again, I think it's the idea of being prepared. I wasn't, I didn't feel like I was prepared, prepared. I deal with it differently now, like, you know, 18 months down the line, or whatever. But I don't think I was prepared for the painful side for it to feel the way it does sometimes. And so. So yeah, it's hard, isn't it, but yeah, it is supportive, without a shadow of a doubt, I know that I can go into my supervision sessions, and I can, I can say anything, insofar as I could come and say, I really, you know, I really don't know what I'm doing, or I'm just having this terrible time, I feel really unhappy, or, you know, or I really need help with this. I don't feel like I, I don't feel like I couldn't go and ask for help.***

I would argue that what Jess (Supervisee 1) is inadvertently describing is this addition of a third space. How the recognition of something else other than what is already established can disrupt and make you question your own place.

Louise (Supervisee 2) perhaps aware of this is quite guarded and uses the space in her own way taking on themes or blocked ness of thought in her own way. Anne (Supervisee 3) and Jess (Supervisee 1), new to this style of thinking seem to be in a more precarious position. This thinking disrupts something of their own identity and forces them to look at themselves in a way that removes them at times from the safety of their identity and their training. From their interviews it seems the supervisors can hold onto this and recognise these difficulties.

The three supervisors recognise that the addition of the third may cause distress for the individual. The reaction to this distress is different for each of the participants and the supervisors can work sensitively with this. Robin (Trainee 2) gives a lovely example when describing his supervisees recognition of something she was doing in her sessions.

*the disasters where he kept bringing sorts of disasters or problems or kind of characters kept on getting into trouble and being injured. And she felt sort of found herself every time that happened, she had the kind of rushing in with an ambulance you know. Or say all the different characters say, oh, I can fix it, I can fix it, I can say to you. And she had a bit of insight, she's, you know, saying this is I know, this is, I don't know, something was happening here kind of thing. That I just sort of couldn't stop myself. There was I think a genuine kind of, she's a bit puzzled about what had happened. And I kind of, we thought about it together and I with the other trainees Well, that's an interesting point. And I kind of maybe made a bit of a narrative about during the session, or, you know, you can see actually, this happened in several st,.. like paces. And she felt, I think, initially quite persecuted, you know I've done something wrong.*

The thoughts of Rosbrow (1997) and parallel processes here is evidenced by the position that Robin (Trainee 2) is placed in. There could be the want to rush in and fix this situation but instead he is able to hold the triangular position and work with the supervisee to think about what she is doing in the room.

## Discussion

The complexity of the supervisory relationship feels highly important, and I believe the results indicate that perhaps a clear distinction at the beginning of the supervision for both supervisor and supervisee about function and expectation may automatically ensure a boundary to the piece of work. **Langs (1994)** and **Bordin** discuss goals being an important

part of supervision. However, here it feels that it is not so much a specific goal but a recognition of what the space may offer. It cannot be argued however that there is a correct or incorrect way to enter and deliver supervision.

I think it is important to stress that there is not a suggestion that one type of union – pairing or joining is more effective than the other, as both forms of coming together allow for a personal and complex relationship depending on the individual components of both participants. The results of this study in fact indicate that both forms of collaboration may be experienced by all participants during the supervision process.

The backward and forward nature of the experience of the supervision collaboration appears to be a universal experience for those taking part in psychoanalytical supervision. The supervisors are seemingly able to keep an awareness of this and showed an ability to think about what state the supervisee and their own self were in. The trainee position here is potentially indicative of **Flemming's (1967)** three models of supervision. The personal development and understanding of the trainee of the task and the theory has a direct correlation to the style of supervision delivered. This fluctuates and differs in accordance with the relationship in the supervision collaboration.

As **Napier (2015)** suggested when things were rushed or stressed the internal supervisory position could collapse. When considering the trainee and their ability to maintain the supervisory position the results indicate that this is a constantly evolving situation, highly influenced by the other participant and their wants and expectations of the supervision, as well as on one's own considerations and focus. The coming together, pairing, or joining is fluid and constantly moving dependent upon the individuals, their wants and experiences and the ability of the supervisor to create the space where frustration can be tolerated.

Whether the experience is viewed as a contest or challenge appears to also add dimension to the situation and consideration to the needs of the supervisee are vitally important for the supervisor to recognise. One must consider that the two sets of participants in this study have different concepts of this. The supervisees in their union with the supervisor face the contest of another who may or may not be being perceived as above them and the contest that they have with recognising their own position within their workplace environment. The contest may be displayed outwardly towards the supervisor

who tries to recognise when this might be happening and bring this thinking into the relationship.

There are also the additional factors of distress and anxiety because of the creation of the triangular space, which bear significant impact on this relationship and will be discussed in the superordinate theme of the effects of supervision. Interestingly in thinking about **Savage Scharff's (2014)** ideas about the distinction between therapy and supervision and goal and time against an open ended-ness there is what seems to become the creation of the supervisory voice as the goal for the trainees. For themselves, but also for the supervisees who being able to reflect upon their own stance and practice are introducing the idea of this internal position.

## Superordinate 4

### The fluidity of position

One of the most recognisable phenomena of the supervision experience has been the constant motion and dynamics of the individuals involved. Each superordinate theme has in one way touched on this idea. Thus far the themes have focused on the larger scale of commonalities and experiences, themes that are arguably more instantly observable. This next superordinate theme is putting the lens on the individual and the changeability of the internal position that I postulate is a part of this form of supervision. The notion of supervisor as trainee also appears to have an additional affect for these positions.

#### 1. Self as Learner

This is perhaps the most straightforward of the sub themes. The results indicate that all the participants see and recognise themselves as learners within this framework. As demonstrated in the last superordinate Anne (Supervisee 3) and Jess (Supervisee 1) can accept this position more readily and recognise throughout their own position of being the learner and what they have been able to learn. Louise (Supervisee 2), the most self-protected of the three, shows in a very clear statement that alongside the meeting of her own needs she was able to learn certain beneficial aspects about herself from her supervisor.

*erm, I guess from my limited understanding, as they work with me a lot on the transference and countertransference that's going on in the room between us. Or the dynamics that's going on with the wider family circle, or the school. I do find I end up working quite a lot with parents or carers and the school as well to try and set the scene for the child. So, the child's not doing the work on their own. So, I guess a lot of my work with trainee was wondering how much I'm getting pulled into the wider relationships and the wider network. And what role Am I playing within that? And is that healthy or unhealthy? For me and for the family says that the transference and countertransference that might have I got that the right sort of terminology for that.*

The reluctance that Louise (Supervisee 2) expresses with the 'I guess' I speculate is in relation to painful aspects of the third position. There may be a grudging recognition that perhaps the supervisee, trainee or not, was able to help in a way that allowed personal development alongside meeting Louise's (Supervisee 2) own needs for the supervision.

Also, it demonstrates a want to hide Louise's (Supervisee 2) insecurities which Louise (Supervisee 2) had attested to throughout the interview. I hypothesize that on some level the interview perhaps stirred a feeling of being tested on what she has learnt from her experience and Louise (Supervisee 2), with her reference to terminology at both the beginning and end of this extract shows the uncertainty and with that the fear that she may get something wrong and be shown up. I think this very much typifies what can be a problem with being in a learner position whilst practicing and being professionally experienced. There can become a reduction of the self in some way. The potential threat therefore of the supervisor being a trainee and possibly inexperienced seems to stir something up for Louise (Supervisee 2) and ambivalence towards the experience.

Perhaps the most surprising admission of the learning position comes in the form of the supervisee teaching the supervisor. Olga (Trainee 3) acknowledges the duality of the learning experience, but it is seen more as a hierarchical type learning where the supervisee is learning from her, and she is learning from the training.

*My supervisee, the person I work with is. I only, I only have been offering supervision to one, psychoanalytic supervision to one colleague so far, and they are not from a mental health area. So I was, I'm helping this particular person to make a transition into mental health. So, in a way, we are both learning something. I'm learning to, you know, I'm becoming chart psychotherapist and this person, they are becoming a mental health practitioner.*

The trainees' individual and very personal ways of learning were clear in their interviews and like the supervisees, this allowed them a similar experience of destabilising and locating themselves, that could be felt and acknowledged. The next sub theme considers the destabilisation and what I feel is a vital, vulnerable position for learning.

## **2. Self as Child**

All the participants throughout the supervision experienced vulnerability and uncertainty. I would consider this position to be the child position. The smaller uncertain feelings I think were very difficult for all to experience and the data reveals at moments when this was felt that there would often be a want to hold onto something and locate oneself in something firmer.

Some of the participants, both supervisors and supervisees utilised ways of coping with these sensations. Jess (Supervisee 1) and Anne (Supervisee 3) used the recognition of their nursing training and background evidenced in the superordinate the supervision collaboration. For Louise (supervisee 2) it was the continued mentioning of her previous psychoanalytically informed supervision. The trainees were able to fall back on the training they were in and links with the superordinate power and responsibility are strong. In the interviews themselves there were often moments when uncertainty and not being sure were very live. Often this vulnerability would be demonstrated through the introduction of a structure of sorts. To be explored further in the superordinate The effects of the supervision. Whether it be the learning via the training process, a personal defense or use of an external process, all were subject to this position.

*erm, I suppose the function of Supervision is to, to bring into close focus, erm the experience that you have with a child, erm to bring it to another person's mind. So that the, erm the experience that you and your supervisor have, can perhaps somewhat reflect, you know, as if in the transference, the experience that you have with the child, you know, I certainly had sort of supervisions where you think dynamics that have come up in the room or perhaps between you and the child are then reflected between you and the erm supervisor, something happens that, yeah, demonstrates what is happening there. erm but also to, to really closely track what's happening to make links between erm moments that, you know, so often in the session you don't pick up on and sort of take your mind back in time, remember what erm happened in those moments to trigger other memories? Who all those times when you think, oh, yes, that comes to mind now, but I didn't remember it when I was writing up, it sort of acts as a trigger for other things, or that didn't happen then actually happened at the beginning or whatever it was, that you can really, it really helps you remember in detail. It almost sort of puts you back in the moment I think, what really happens, and I suppose someone to help you think more objectively.*

This was interestingly the way in which Sophie (Trainee 1) answered the first question about her historic experience of supervision. There was perhaps difficulty in leaving the current position she was in and revisiting something from the past when she may have been heavily locating herself in the present and her training. I wonder whether to revisit



something from before may have presented her with smaller feelings that in the moment did not fit the role of being the experienced, teacher like supervisor. <sup>1</sup>

The smallness and uncertainty are reflected in the use of language and erms, there is confusion which feels quite present until she pulls herself into something more familiar, namely her most current and recent experiences of receiving supervision.

It's interesting how the child that is talked about is used in a way that is helpful in retriggering memories. She talks about there being reenactments between the child and clinician and clinician and supervisor. And I wonder if this use of the child is Sophie (Trainee 1) externalizing her inner child and reimagining a safe and containing situation where things can be slowed down and thought about. Or as Sophie (Trainee 1) says "*puts you back in the moment*" in a less uncomfortable way. What seems important however is that Sophie (Trainee 1) is willing to feel disorientated and still find a way to think about what is happening around her. The child position, although potentially something that makes one lose confidence or reduce oneself can also be associated with the learning position, the position of wanting to obtain knowledge.

I speculate that this continued willingness to engage, and experience is also because Sophie (Trainee 1) and all the other participants to varying degrees can, like children, experience a sense of wonder, excitement, and a thirst to learn.

For all it seems there was often a connection between the learner position and the child position.

### 3. Self as Teacher

I believe this to be the hardest position for any of the participants to hold during their supervision experience. Olga's (Trainee 3) earlier extract shows in accordance with the

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<sup>1</sup>This line of thought also made me consider some of the newly qualified psychotherapists who had not wanted to participate in the study. I speculate that the same feelings may have been aroused whilst they were trying to establish themselves, outside of the training and thus the support network that the establishment offers as psychotherapists.

other supervisors data, an experience of imparting knowledge to another. This is a teaching position however I believe that the results indicate that it is not straightforward. The flux of the positioning of the self in response to both the internal and external dynamics discussed thus far constantly creates a position for all where there can be a want to demonstrate one's own knowledge. This can be a defense so as not to feel too uncertain or unknowing which all three supervisors discuss, but it can also be a recognition of something important that needs to be thought about with the other.

This position as a trainee is incredibly difficult and I suggest that the data indicates that all supervisors were able to attain a teacher position but what is unclear is whether this is a pseudo or a real stance.

Robin (Trainee 2) typifies this position very clearly.

*is just on my mind at the moment, but there's something about like knowing and not knowing.*

*I guess already, this is a bit stupid my qualification journey and moving into a qualified position.*

*Also, something around you know, being able, as a supervisor to kind of model*

*not knowing something or uncertainty or you know, I think when I first started supervising the answer when asked a question, God, I'm the supervisor I have to know the answer to this, you know, which, you know,*

*if I don't,*

*or if I don't have a sort of thoughts about kind of how to answer that particular, you know, is it helpful for me to, to pretend I do? you know No, no, no one benefits, in that situation. There's something about*

*knowing and not knowing, being able not to know*

*which I think psychoanalytic supervision is very important. you know Staying in that uncertain position about*

The expectation of knowledge and the reference to 'God' stand with the idea of feeling like he must be seen to be all knowing and have answers. The blasphemous nature as well hints to a knowledge of this really being an unreal power he has. Robin (Trainee 2) was able to recognize this pseudo teaching position in the interview and I would suggest that in his practice he experienced this position and the discomfort it has for him. The pauses throughout demonstrate an uncomfortable awareness of a position that may have not been entirely real and perhaps even the awareness of another (the interviewer bearing witness to this may also be reenacting something of Robin's (Trainee 2) experience at these times in the supervision) However there is a hinting, that lends itself to something

becoming more of the 'teacher realis' in the holding of the unknowns that it seems that he was able to achieve with his supervisee.

Louise (Supervisee 2) also takes on a position like this when she reflects on allowing the trainee to do the supervision as it is important to her training. This is quite an interesting position as she places herself as teacher to the trainee by allowing herself to be supervised. Again, there is the question of pseudo or teacher realis and again I feel the evidence is not conclusive. The evidence does not suggest there being a particular teaching position taken from the supervisees however much does seem to be taken from them in the development of the supervisor as a practitioner and in understanding the responsibility of a CAMHS practitioner.

#### **4. Self as Patient**

All the participants showed evidence of experiencing this position. The theme of patient shares similarities to that of the child but differs due to their being a disconnect from any development in the moment. Although feelings of smallness again may have to be navigated, this position is one that is somehow more helpless, more unable to take in and make use of what is on offer. The supervisors demonstrated this throughout the process and as mentioned in the position of the child would often associate things with something external or a patient they or their supervisee were thinking about. Robin (Trainee 2) uses an example of a moment such as this.

*in my first year of training, I had a very, very difficult undefined training case, and I had a service had a intensive supervisor, so experienced, and I think, I think what she really wanted she really supported me was, was being able to develop a kind of sense of kind of firmness inside, in relation to this boy, who, (pause because of connection) just run me over every session basically, kind of, you know, not sort of fall apart at times, kind of trying to contain this situation and trying to you know stop him from hurting me or destroying me, you know, trying to sort of develop something kind of a kind of firm sense of structure, and something's firm inside me, it was really important. And she, that was even more important to me than sort of, like on a theory that came out to them.*

Here Robin (Trainee 2) discusses the patient and his wildness and the feelings of being run over and falling apart. I suggest that this signifies a personal difficulty. Robin (Trainee 2) recognises himself when he states that his development of something firm helped him

to grab hold of something and make sense of things. Robin's (Trainee 2) ability to acknowledge this fear and be able to think about it with his supervisor show an inkling towards the fluidity of position that the experience of this type of supervision gestates in the individual.

The supervisees also quite clearly demonstrate this position. Louise (Supervisee 2) talks about going in circles, Anne (Supervisee 3) brings her patient that may have issues with boundaries yet perhaps the most telling example for them is the confusion of what the space is. Is it therapy or supervision? Jess (Supervisee 1), who showed throughout a real affinity for being able to be in touch with these difficult feelings later expands on this.

***Absolutely, absolutely. It's not, and it's not been easy. There are times where I found it really is, one of the difficulties is that it can feel very, it's so personal, and it can feel very, it's almost like being in therapy, isn't it, it can feel really difficult.***

She goes on to say.

***But yeah, one of the hardest things I probably would say is kind to of come out of supervision, and then just have to sort of, it's like really having to reset, I suppose and then carry on. And sometimes it can feel really, I can be kind of almost left reeling a little bit. And so, you know, it can feel hard to kind of just, just, continue. But I guess, yeah, overall, for me, the benefits far outweigh the, the kind of the maybe more challenging aspects. It can be quite frightening.***

I think that Jess (Supervisee 1) is in touch with this position and automatically takes it back into the clinic where the patients are. Interestingly she also demonstrates the switch into the final sub theme and final position.

## **5. Self as Adult**

Continuing with Jess's (Supervisee 1) extract she can show however difficult the altering of position and the supervision experience can be, she knows that she still must stand up and be accountable for her work. She does this in a way that shows maturity and adulthood in that she is in touch with her own sense of fear and discombobulation but is still able to deliver as a practitioner. The Self as adult is the position that clarifies what has been obtained and learnt and allows the participants, who all showed evidence of this, to be able to recognise and reflect upon themselves. Sophie (Trainee 1) describes it well and also demonstrated the intricacies involved in the maintenance of the position. ***And I was just emailing him to arrange time. And he's given some very specific times that he wanted the supervision, which I couldn't meet. And I said, Well, I've got these times. And part of me felt well, if he wants the supervision, he can flex my timetable. And then I thought, well, who need who? Actually, is***

*it me that needs the supervisory experience? Or is it? Will he just say, Okay, well, I'll find somebody else to do supervise me. So just sort of sparked a question in my mind about who needs I suppose our supervisors might say, well, it's beneficial to both. Which I guess it probably is.*

It is also the position that accepts its own power and responsibility, it can withstand uncertainty and yet still be able to offer stability for others. The fact that all were able to discuss this subject matter and give such honest reflections shows how they can take on and move into the adult position. As Briggs (2018) points out when discussing how the organisation is bound to its hierarchical structure for its thinking there is an importance in clinicians being able to tolerate and think about themselves and their work without fear of repercussions

## **Discussion**

The three supervisors are clearly in a learning position, they were all studying at the time but what was so interesting from the data and their experience of the supervision was the way in which they were able to learn about themselves as psychotherapists and what it means to be working within a Generic CAMHS institution. The research interviews themselves perhaps also catalyzed the recognition of the experience for the trainees as one other than a task. There was a recognition of responsibility that was felt by all, alongside there being an understanding of their development as psychotherapists, in what they had learnt and what they were able to do. Rather interestingly, as already attested to, was the style of learning that each trainee adapted.

My thoughts lean towards the idea that the fact that the supervisors are trainees complicates the internal position of the supervisor. Should the person supervising be qualified then the relationship with the supervisee would on one level be clearer and therefore the teaching position would feel more natural. There does however seem to be value in this experience for the trainees in the position of supervisor. There has been recognition that responsibility may not lie directly with them and however even if it is a pseudo position of teacher that is obtained then there is potentially more freedom to make mistakes and hold onto the unknown position. Not just psychoanalytically but in the very real sense as perhaps at this juncture in time knowledge is not present.

I would argue that all positions are important for successful supervision and that there is not always a clear distinction between what position is what and why. It seems also to be the case where there can be more than one position at a time. Olga (Trainee 3) gives a lovely example here of all different positions.

*I think it's the question of the timing for me, I would say, but I would never say this is not the right thing to do for a child psychotherapy trainee. I mean, it's just my, my personal, it's I think it's, you know, it's again, it's just because, for me, whatever new experience you can be put through, why not have a go at it? You know, it's, it's something, it's another thing to learn, you're in the training and experience. So why not? I don't think any trainee should be stopped from doing that, or discouraged, or said, you know, this is not for you. But I think it's the, you know, it is possible that the training can be exposed to this prematurely. I think it's, it's the question of the timing. And er um but again, it's, it's, the trainee supervision, it goes back, isn't it? It's all sort of interlinked, is then the, the supervisor, the clinical supervisors, role, perhaps to assess is my trainee ready for this piece of work? So I think, yeah, it is possible that trainee could be exposed prematurely, and then it can interfere, I can, I mean, I can see the point, it can interfere with the process of the training of the person's experience, but I think that's the underlying point of the supervision, you pay close attention to somebody isn't it? when you are in a supervision with a person or you have your own supervision you need to be paid attention to, and when you are paid attention to, the person who is paying attention to you will know, okay, whoops, we need to stop, slow down, or, you know, we can now sort of sort, of start exploring something. So, is the question of timing? I think. So, it's quite important.*

It shows the fluidity of the position and the effect upon the individual. It demonstrates the small position alongside the adult position, it demonstrates the disturbed position, as well as the want to learn and the distribution of this supposed knowledge. It also clearly shows the adult position and the ability to place oneself in a situation that suggests an understanding of where one stands and reflect upon the journey undertaken. The dynamism and movement of these positions is explored further in the next superordinate.

## Superordinate 5

### The Effect of the Supervision

The last superordinate theme is the effect of the supervision. The sub themes lay out the journey of the participants, considering the previous superordinate themes. The results indicate that all participants in one way or another have experienced these sub themes because of the undertaking of supervision. It cannot however definitively be argued that the trainee nature of this study is the only reason for these experiences. Instead, it seems that the experience either delivering or receiving this supervision with a trainee adds complexity.

#### 1. Needs of the self

The first sub theme is that of the needs of the self. This is when the participants recognise on some level what they would want from the supervision.

It is perhaps the largest divergence of the base experience between supervisor and supervisee. The results indicate that there is potential for the needs of the self to change throughout the experience. Only Louise (Supervisee 2) perhaps maintains a solid position of her own needs through her supervision. Jess (Supervisee 1) and Louise (Supervisee 2) are both highly experienced and have had many varying formats of supervision before this experience. They both identify that what they want in a supervision is a space to think about themselves. Jess (Supervisee 1) as shown explicitly talks about how their past supervision could be hijacked by routine and protocol and how she craves a space to think about her own performance and self. However, over the course of the supervision what becomes evident is how Jess's (Supervisee 1) needs change. The craving for thinking about her own self becomes a want to learn alongside a need to fight for stability and a sense of her own identity.

Louise (Supervisee 2) as documented maintains a more even position of what she wants and expects, however there was a particular moment in the interview when something more personal was revealed and I speculate that this would have been the case in her supervision with the trainee.

*Yeah. It because I was feeling quite vulnerable at the time. Because I didn't feel like I was experienced. It might have been that I've had many years' experience, but I didn't feel like I was experienced in CAMHS. It was, it's a very, very, very different environment. Could you hang on just*

***one second. Of course (Me). Sorry. My son's come home early from school. And so I'm just going to shout down to him and tell him that I'm working, so I won't be a minute. Sorry***

Louise (Supervisee 2) reveals a sense of real uncertainty and a want for something to hold onto, the repetition and stressing of just how different she found the CAMHS experience is a recognition in some way of how far away she feels from the comfortable place she has attempted to set up for herself. However, this is quickly chased away, and perhaps a timely acknowledgement of an external distraction allowed Louise (Supervisee 2) to defend against this vulnerability.

***is about the trainee aspects, right? And but it was about me feeling that I'm not confident enough. And if I'm not, if I'm not feeling confident or competent, was probably a better word. If I wasn't feeling competent. I'm wondering if trainee is because she's, she's new, and she's learning as well. So, it wasn't about the psychoanalytic. That that bit made no difference to me whatsoever.***

She again uses the perceived weakness of the supervisor as a trainee to gain a foothold for herself to pull her away from an uncomfortable position.

The supervisors also experience altering of position in their needs for the supervision. Clearly initially there is the sense of task that all feel is associated with the supervision, but then what becomes apparent for all three is the recognition of the responsibility for the other and the need to maintain a position that encourages and maintains thought. In the interviews themselves there was a sense of really being in touch with this idea. The anxiety and fear of how they were being perceived was experienced in a way that almost made it feel like it was a discovery in the moment during the interview. It seemed we had reenacted in a brief way the creation of the third which allowed something other to be realised. I would however speculate that it wasn't a discovery made in the interview and that it was in fact a part of the experience throughout the training and supervision sessions. The findings explored in the preceding themes, especially task or reality are indicative of this. The interview, however, may have been a space where the extent of these stirrings could be allowed.

Robin (Trainee 2) gives an example of this, highlighting in the moment his thinking and recognition of the needs of the other.

***I just thinking about actually, you know, actually, what does it feel does envy and desire, you know, and I suppose every supervising relationship is different. So, there is something important about not being too fixed on our business, how I supervise. Probably the best supervisors I've had are ones that kind of being able to see all this as well, this is where he's, in his learning. This is also this is***



*maybe what he needs more of, you know, think, I think in my luck, for example, in my first year of training, I had a very, very difficult under 5 training case, and I had a service had a intensive supervisor, so experienced, and I think, I think what she really wanted she really supported me was, was being able to develop a kind of sense of kind of firmness inside, in relation to this boy, who*

## 2. Destabilising

There is a particular effect that seemed strong for all participants and that is one that sounds the most disconcerting, it is destabilising. Robin (Trainee 2) in the previous extract in recognition of the other as something separate to him, I think shows a sense of the reality of what the supervision brings for the supervisee, removing it from just a task for development. Immediately he goes to a place of his own need for stability. He talks about receiving supervision himself and I suggest that this is due to a need to feel something comforting and firmer in a moment that may have caused a feeling of dysregulation.

Sophie (Trainee 1) also showed moments of destabilisation especially when reckoning with her own thoughts on the hierarchical system.

The destabilising is most explicitly evident in Jess' (Supervisee 1) and Anne's (Supervisee 3) accounts. Their own identities as clinicians and experiences are being literally shaken up. The need to hold onto something then becomes clear in their relationships with their supervisors and will be explored further in the next theme. Both also suggest that it is not just their identity as clinicians that is disturbed but as individuals as well.

Although Louise (Supervisee 2) appeared controlled and guarded of her vulnerability, outside of what she wanted to share there were also times that destabilisation was apparent in her supervision. The knowledge we have of her first experience with this form of supervision leads me to wonder if this may also indicate that her first supervisor was not a trainee. What this might do to the relationship in supervision is of interest and I speculate that it added a sense of longing for containment, one in which a 'trainee' is unable to replicate, by the very nature of them being a trainee. Also, I wonder about the sense of loss that Louise (Supervisee 2) may be defending against in relation to an experience that may have caused a shift in her development and identity early in her career.

### 3. Sanctuary of structure

Throughout the supervision experience there are these moments of destabilising. What becomes interesting is how the participants become stabilised again. As has been referenced throughout is the sense of disturbance there is for Anne (Supervisee 3) and Jess (Supervisee 1) with regards to their identity as practitioners and then their sense of structure. The training they both received follows very clear guidelines and structural expectations. In times of anxiety these structures are in place to support this. However, when faced with thinking about themselves as practitioners the structure becomes something else outside of them, and both are left reeling and feeling untethered.

The supervision becomes a place of reattachment but by its nature of having a less obvious structure, there can be moments where both are left feeling adrift and without location. In the interviews and evidenced throughout the superordinate's Jess (Supervisee 1) uses her past experiences and training to still locate herself. A sense of frustration and anger towards it is apparent often, but I would argue that it is being used alongside the supervision thinking space to feel attached and located and not completely adrift. Anne (Supervisee 3) also shows this frustration and uses the external world and others as a place to lay this. Again, with what I believe is an intention of keeping herself located in the present and not tumbling outside. Anne (Supervisee 3) uses terms and words like existential to keep this position whilst still allowing herself to experience the ground shaking concepts of a third position.

*Yeah, I think it's erm like the, the ideas about transference. And kind of like this, this, I always relate back to this one young person I worked with, and I really struggled to kind of get a grip on what was going on. And my supervisor sort of said, well, you know, she, she strikes me the sort of person who doesn't really have many boundaries. So, she's, she's almost bouncing around in space. And she's going from one area to the other to the other. And she's starting to use you as that as that boundary. So, you're, you're reinforcing that boundary to her and you're giving her some containment and some grounding. And you know, that as an as an idea, that's quite, I guess, it's quite abstract and quiet kind of existential to a certain extent, rather than just, you know, I'm coming here to talk to you about your feelings. It kind of it offers something so much more that you are offering this young person containment and kind of being heard and validated. It's so much more than just the talking, I suppose.*

The three trainees also share a need for sanctuary and this style of locating oneself is seen in most of the participants. When discussing patients, it feels as though they were using models of their clinical practice to replicate their own experiences. This also seemed

to be the case during the interviews. What was also evident with the three supervisors was the importance they placed upon, what I would deem to be their own style of learning and understanding. Olga (Trainee 3) whose first language is not English used words and theory to bring structure to her thoughts and thinking. I found myself when transcribing this interview often using a dictionary to find the exact definition of the word and wondered about there being something particularly important in the definitiveness of a word. Something grounding and familiar. I would argue that this structure is in defense against a destabilising effect caused not just by the supervision but the training that she and the other three trainees were at the time undertaking.

*You know erm, how much attention can you pay to a person when you are with them. And then if you if your mind is in a good shape, and you can pay attention, then whatever tool you have, erm well, in this case, psychoanalytic tools, you can just use and apply. Err It's about paying attention and being in the right state of mind when you're with the person and I think me when I don't get that when I feel I don't get that. erm, you know, it? I can I know, it can destabilize me a little bit, I can't think very, you know, as well as I would if I had a better experience, when I'm being supervised, so just sort of paying attention to these things.*

Olga (Trainee 3) acknowledges the destabilising effect and is referring it to her feelings when she is not being focused on enough. This equates for me to the sense of being untethered and adrift. The focus becomes a means in which she is being gathered and stabilised. A structure of psychoanalytically informed supervision. Making sense of the experience seems to correlate with using your own knowledge and familiarity of known 'perceived' facts, as a means of making sense of things. The nature of this extract shows a mixture of exactness and precision alongside a more muddled and confused use of language. Something that for Olga (Trainee 3) may be quite significant considering the language translation she is constantly performing whilst training in England. For Sophie (trainee 1) there is the pull towards hierarchy and position as evidenced in the superordinate power and responsibility, and for Robin (Trainee 2) evidenced in the superordinate the supervision collaboration there is the sanctuary of being the educator.

#### **4. Backwards and Forwards**

This sub theme is less a theme and more of an action. It is the fluidity and movement of position that all participants demonstrated throughout the supervision experience. Some to a greater extent than others nonetheless a shared experience for all members of this

study. Rather than this just being, as described earlier, subject to the awareness of the supervisor it seems more akin to the path the participants take as they experience the needs, the destabilisation, and the seeking of structure constantly fluctuate, leading them to positions of destabilisation and back to a sanctuary of structure. The structure each time evolving and the destabilisation being more tolerable. The theme itself lends itself once again to the idea of motion and the potential for 'motion sickness.' Jess (Supervisee 1) in her interview data perhaps gives the best overview of this action. Throughout Jess (Supervisee 1) can be seen to be circling topics, going back to points made at the beginning and throughout conveying a sense of trying to find a foothold and when she does, expanding on this by using these locators to stabilise herself.

*And just really, you know, I almost felt so grateful for that, that I didn't really think about who was offering it to me, you know, and I don't know what it says a bit about probably what I think about myself in terms of my role and stuff, but and probably my past experiences as well sort of supervision being very much a tick box exercise and not really much about me, now, you know, how I'm doing in my job and stuff. Yeah, so I think it was just that just being offered the space very quickly became really important and appreciated and wanted. So, I'm not sure whether my supervisor being a trainee was something that I've probably given a huge amount of thought to, although it's obviously there, but certainly not now.*

This extract late in the interview shows Jess (Supervisee 1) circling her thinking, revisiting her previous comments and the subject matter whilst putting herself in a position where she is trying to develop and understand something. I think it highlights the complexities of the entire experience as she wrestles with her sense of herself, the frustration she seems to show in her thoughts on how she sees herself I think reflects an attempt to locate herself between something old and something new. It shows the destabilization and untethered ness and then her gratitude for the space is real in the sense of anchoring herself and not feeling lost.

## **5. Consolidation of identity**

Throughout this results section the trainees have demonstrated the experience, they learnt ways to tolerate the destabilisation and motion sickness a lot more and recognised that there was an ability later into their supervision to feel more confident and able to claim a space and position of their own that may not directly be inside the hierarchical and social

norms of the CAMHS. For Anne (Supervisee 3) there was an idea that she could question those around her rather than just going along with what they said. A recognition of sorts that allowed her to have her own opinion. The ways she describes the experience highlights the consolidation of herself, *But I think it's, it's helped me understand so much more about myself. Personally, actually, as well as professionally, and I think that it's kind of that's indescribable, really, is, it's kind of it's pretty powerful to be able to kind of get to a point where you think. Okay. Yeah, I actually feel like I know what I want to do. And that's pretty cool. Feeling.*

For Jess (Supervisee 1) there is a similar recognition of her journey *I suppose it, it feels really big for me for as long as we're quite late. Like it's really changed the way I think about myself and the way I want to take the direction I want to take my career in. It's been quite this sounds bit cringy but sort of life changing, I suppose, in a way.*

Louise (supervisee 2) shows the consolidation through her understanding of the importance of sanctuary and relationships and of her being able to navigate the trainee aspect of her supervisor. *So, I was really pleased that I'd got trainee. There was a mix sort of that I'm really pleased I've got now been allocated someone and she's gonna work really hard to make this happen. But then there was this other little, but she's a trainee as well. And I feel like I'm a trainee and how's that gonna work? So, there was like that going on, but it wasn't nothing to do with her. Her method to her theory of training, it was more about we both going to be bumbling through together.*

The three supervisors initially have a clear idea that they are in training and that supervision is a component of this training. What I feel is perhaps not recognised at the beginning of this process is the effect that the supervision will have on the individual and their own identity as a psychotherapist. The goal/ task evidence in the superordinate 'The meaning of the supervision' has expanded. The analysis of each of the trainees indicated a consolidation of identity that was directly related to the supervision experience as well as to their own specific style of learning. Sophie (Trainee 1) sums up the evolution of her recognition of the supervision and initial assumptions of hierarchical power and knowledge *as, so perhaps having a space isn't about making decisions or knowing what's right or wrong, its where the value is rather than feeling that you've got an expert on hand to answer questions.*

Robin (Trainee 2) shows the development and ability to tolerate this space and his position around teaching and knowing.

*you know, being able, as a supervisor to kind of model*

*pause*

*not knowing something or uncertainty or you know, I think when I first started supervising the answer when asked a question, God, I'm the supervisor I have to know the answer to this, you know, which, you know,*

Olga also recognises the space as being something important, she shows also the personalness and importance of the space for herself and her supervisee.

*Um, I, well, I think that supervision is, erm you know, it's also it's like a professional way to be with each other. It's, it's not like, it's not only working next to each other. But just being interested in how we develop and erm how we learn I think it's very important that it's, you know, it's kind of it's one thing to be next to somebody. And another thing is to be in someone else's mind, but not in an intrusive way, but in a way that we are very interested in a person. I think it has such huge value, you know, huge value. And that's what I would like to do in the future. Once I'm qualified, just to be an advocate for that, you know, we do need supervision, people do need supervision.*

Like Callahan and Love (2019) who recognised the importance of receiving supervision as such an important part of the development of psychotherapists I postulate that there is also the same effect when given the opportunity to offer supervision. For the supervisees, although theirs is not training in psychotherapy, there is still a significant enhancement to their development as clinicians and mental health practitioners as well as to their own selves. As Leader (2010) recognised the supervision is a tool to allow both supervisor and supervisee the opportunity to reflect on their own practice, thinking, position, understanding and identity.

## **Discussion**

The destabilisation and the need to find a structure like Robert Langs (1994) suggests when discussing the consistency of approach and its effect on the supervision, highlights the importance of the space and necessity of regularity and structure when setting up sessions. The want to hold onto something for all the participants was very strong. When what is being held onto feels less secure other avenues would be sought. I am reminded again of Louise (Supervisee 2) and the want to hold onto the past experiences. That is not to say that the experiences were always good or better than what she received but that they were firm and secure, less likely to cause what I am describing as motion sickness for the purpose of this study.

Ungar and Ahmad's (2001) recognition of the supervision being a space to contain unconscious anxieties and Wilson, Davies, Weatherhead's (2016) study finding that the supervision "*can also lead to feelings of distress and doubt.*", feels very relevant in thinking of the motion sickness aspects of the experience. It shows that perhaps there is already an expectation that this may occur however I feel there is evidence here that indicate the reality of this and what it can be like for the participants. Although there is a recognition of destabilizing which may well entail distress and doubt I argue that this is also a part of the psychoanalytical process and therefore becomes an important aspect to be able to tolerate and think about, with support, from this position. Harris (1977) thoughts on how supervision and the supervisor can allow an understanding that there is not a 'way' reflect this idea. The removing of the individual from what they have known and relied upon can be destabilizing. In this case also for consideration, is that there is a joint enterprise where both parties are each removed from something more solid and together there is an exploration of this difficult position.

## **Conclusion**

### **Summary of the key findings and Implications**

There are clear distinctions between other supervision types and the psychoanalytic model. There are indicators in the results from participants previous experience of supervision, in agreement with cited literature, of struggles within the normative supervision model that do not address the individual anxieties or even the institutional ones.

Hierarchical norms and expectations are a part of common thinking about supervision and the trainee position within the format in this study. It could be argued from the data that psychotherapy and its high level of training lends itself to being highly placed within this hierarchical system. There are individual biases as well which must be considered. Clinicians who have received this form of supervision previously may view the power dynamic in a more traditional sense i.e., that the supervisor as trainee may not have the necessary experience. However, due to the size of this study this cannot be proven. What can be attained from this study though is that clinicians with substantial, varied trainings who have previous psychoanalytical supervision view the idea of being supervised by a trainee in a different light to those who are just being introduced to the model of thinking and have trained in a very top down and structured system.

The trainees themselves are also caught up in the dynamics of the 'trainee badge' and often rely on an external idea and responsibilities to manage some of the anxieties that may be seen in the supervision. Consideration must also be given to external factors within the institution and the perhaps unclear thoughts and ideas about what this model of supervision is and does. These external factors can produce anxiety in the practitioners and confusion as to why they are being offered it. Education on what the supervision offers could be important in addressing some of this confusion. It would also potentially allow those who receive this supervision from trainees to be in a position recognising what and why they are being offered it. Of course, with psychoanalytical thinking this could also create its own level of anxiety and may make the uptake feel too personal. Thought and consideration in this area feels helpful and important.



Participants who had never experienced this type of supervision before and were more clearly in line with the institutional model were, in an obvious way, affected more at the time by this style of supervision. There is confusion around what the space is, and evidence suggests that on some level all participants see it in one way or another as a therapy as well as supervision.

The space can be utilised in such a way that helps to think about one's own areas of difficulty, which appears beneficial when thinking about patients. For the trainees this is less clear cut although there is an acknowledgement of personal issues being worked on. They see the space initially as task orientated. In the same way that all viewed other past experiences of non-psychoanalytical supervision. The space that is created becomes somehow detached from the constant work life of the clinic. This was perhaps more evident with the trainees initially who, because of the perception of the task of their training, did not always relate a real-world quality to the work, especially at the beginning. This is quite an interesting line of enquiry, especially when considering destabilisation, stability, and safety. The results indicate though that the move towards real-world quality became a part of the work and shows the importance of the task in relation to the training and the final year. It becomes a way to locate the trainees in reality and allows them to come back from the very internal and personal journey of their training. For the supervisees there was also awareness of the space being separate from normal working life. There was also 'stepping into a space', to stand aside from other things and focus on themselves and not just the procedure and tick box culture that one respondent noted. There is a suggestion that development of a clinician's practice is not just something that necessitates supervision from one's own discipline. This style of supervision demonstrated developments for all supervisee participants.

It would seem that being offered the opportunity of supervising is hugely beneficial for trainees, especially in their last year as a means of refocusing their thinking and looking to the external. The individual qualities of this experience and of the practitioners means that there is not just one best way of applying this but consideration as to when this task is given to the trainee is imperative. This should be continued and not become just a 4<sup>th</sup> year training requirement as it may lose something of its own power and become more firmly rooted in a trainee's mind as a task and not the huge learning experience the evidence

shows it to be. Interestingly the interviews conducted allowed a space for the trainees to think about the experience and I wonder if experiences akin to the interview could also be included in the course after specific tasks. A space as such, that allows the thinking about the experience. This also feels relevant for the supervisees, and I wonder whether a space once the supervision has ended to think about the experience and the process may be of value to the clinician and the supervisor. It would also help with the institution and allow them to take note of what the supervision has offered the clinician and through them the service.

The complexity of the supervision and the individual traits of each participant, supervisee and supervisor are also hugely important. The participants all had to work hard to be able to collaborate in a helpful way. The study shows that there are two ways in which combinations between people take place, joining and pairing. The study also suggests that depending on role, experience, and training there may be a tendency towards a specific style of this coupling but that at certain points both styles are utilised. From the clinic perspective this is very useful in thinking about who might benefit from this style of supervision and perhaps also help identify whether the supervision would be something that may be too difficult. The same can also be said for the training school and the service supervisor, the link between the training and the clinic, and the consideration of what is right for the trainee. This could include recognising specific areas that the trainee might find useful to develop as well as looking at what will be best for the service as well. The relationship between the supervisory couple in agreement is perhaps the most important aspect. Having an understanding of the dynamics that are potentially in play can only be of benefit when considering whom should be supervised by who.

Triangulation and the creation of the third space is achievable when the supervisor is a trainee, and it also highlights how different clinicians may respond to this. This process can be destabilising, and consistent and frequent supervision is essential so that the clinicians can feel supported and not left reeling.

The continued work of the participants shows just how dynamic the supervisions are. There is constant motion and changing of position for the pair but also for the individual. The constant flux of positional changes I have called learner, teacher, child, patient, and adult become extremely important for beneficial supervision but again need constant

monitoring and assessing. The idea of motion sickness discussed in the results may be because of all this movement and again the consistency and frequency of supervision seems stabilising. It is important for the clinic to be aware of what can happen in this supervision so that other protective factors can be applied, and put into place, especially in the early stages of the supervision. It is important that the trainees can think about this aspect of their work as well so that they do not overload or overwhelm their supervisee. It is important that the training schools are aware and are able to offer the appropriate support to continue and allow the reflection for the trainee and the continuation of the 'third'.

The three studies by Callahan and Love (2019) Wilson, Davies, Weatherhead's (2016) and De stefano et al (2007) that look at the experience of supervision all-share similar traits with this study. There is strong emphasis on the relationship; there is a significant learning component; there are dynamics and power relationships that must be navigated; and there is a strong focus on the development of the clinician's expertise. What this study adds to this knowledge is the exploration of the learning for both supervisee and supervisor and perhaps a more detailed look at the ebb and flow of the experience. The tracking of the individuals current state of mind, position for collaboration and the recognition of how these may be affecting them, their relationship, and their work.

### **Strengths and limitations of the study**

The qualitative nature of the study is both a strength and perhaps sets a limitation of its own. There can be a deep exploration of the experience for the participants but I must acknowledge my psychoanalytic training and educational background as well as my own personal experience of this supervisory experience and of the participants that may have inclined a natural swaying and bias that drove me to explore aspects of this supervisory experience that felt personal to me.

There is a recognition that age, race, and gender or sexuality was not a defining feature of the study and did not feature in the results although quite clearly this would have an impact on the relationship. It is worth noting that all but one of the participants were White British and there was only one man of the six. The ages too, varied from mid-twenties to mid-forties. This was due to the focus of the study being on the supervisor as the trainee and the power dynamic attached to that, as well as maintenance and the size of this study.

The study here is small and although the result analysis allowed a grouping of supervisee and supervisors responses for the superordinate's, on a larger scale there may be a greater divergence of responses particularly if participants had less positive experiences or displayed more ambivalence to the situation like one of the supervisees.

## **Recommendations for future research**

Larger studies focusing on the relationship and the dynamic would be of great value in furthering knowledge of this area which could help in informing both clinics and training schools on the importance and value of this perhaps underrated but certainly under studied topic.

An extension on diversity and background of participants in follow-up projects would be of benefit to explore in relation to the supervisory relationship.

The union of the supervisory experience would also be a very interesting study and further research on this, both in an individual way like this study, and where identified pairings of supervisee and supervisor are known and compared.

I believe that further research into the supervisory experience of development and learning may also allow for further understanding on the difficulties, tension and anxieties that this can produce. The fears of looking outside of what is comfortable and known. The manner in which stability is sought from what is known is another area that I think studies of this nature could be of benefit to broaden our understanding of the strengths and perhaps limitations of foundations.

## Conclusion

The study shows the importance of the psychoanalytically informed supervision and the value of providing this experience for clinicians. It shows that the supervision experience with a trainee as supervisor has an effect on the experience; That the meaning of the supervision to the individual is an important component of success; That power and responsibility is an area that can be problematic but can also in good circumstances become a part of the work between the couple; That the relationship and collaboration between individuals is key and is effected by the meaning and the power dynamics; That the ways of working together are not set and there is scope for change, and that there is constant movement and a dynamism to the supervision. This is both internal and external and is important for productive supervision. The effects of this movement can be unsettling and great care and attention from supervisors, who are affected themselves, and an awareness from the institution will be of benefit. The awareness of this allows managers thought around the practical awareness of the experience for the clinician that the destabilising aspects although beneficial may also need to be thought about and support or at least recognition of what the supervisee is experiencing is considered.

Supervision as a discipline is a vast area, yet perhaps it is often overlooked and it can slip into an overseeing, or task focussed exercise that keeps people in mind of what they are doing and of the requirements of their role and their profession. What this study indicates, especially when thought about in context with learning and development is that it can offer an experience to an individual that promotes growth and maturing. This study potentially raises questions around learning and a state of mind for learning. Naturally perhaps we see child learning and development as more natural, but do we stop to consider the potential constant flux and movement of their internal worlds.

The supervisory task is one, I believe of huge importance and just like the progression of trainees and clinicians of different disciplines it also needs its own space and its own time to be thought about and reflected upon. The creation of a space to recognise where one sits in relation to one-self of others and the relationships with and apart from others, but also the furthering of an awareness of what is happening in the moment. To aid with this is the potential that whilst supervising, the supervisor is also offered supervision and a space, then a continued focus on what is transpiring in the room with the supervisee can be thought about and the experience can be augmented. This research reveals an important consideration for the training of psychotherapists, and for all mental health

discipline trainees, to the value of recognising and being aware of the important foundation and beneficiary development that the supervising experience can offer. The recognition of the benefit of the individual supervisory experience.

In thinking again of the etymology of supervision. "To observe from above" takes on a slightly different tone and becomes perhaps a recognition for the individual to develop the capacity to be able to observe from above or outside of oneself. The 'super-vision' seems an important product of the experience.

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## Appendix A

### What is supervision

What is learnt is also a key question. If this dual pedagogic activity can be achieved what would be required to facilitate the learning environment? Is the trainee as the supervisor able to create a space where this symbiotic learning relationship can be established and sustained?

In considering the trainee psychotherapist supervising a clinician from a different discipline I wonder about the role of the junior person. Who is the more junior person, and why is this part of the training program for child and adolescent psychotherapy? It seems on initial thought that the function of supervision for both parties may be quite different from what is the expected norm.

### Psychoanalysis and Supervision

However, because there is an acknowledgement that the unconscious is at work can this always be quite so simply segregated in accordance with psychoanalytical theory?

Supervision, education, or therapy

### The model of thinking for the supervision

Creating the triangular space is something that may be extremely painful and I wonder if in supervision delivered by the trainee this is something that is perhaps lessened due to the extent of the supervision provided? i.e.

Can the supervisee allow this to be noticed and worked upon or does this become a contentious area of challenge? This lack of space may become evident when we consider whether or not the supervision is able to contain the anxieties of the supervisee. It raises questions for me as to whether a trainee supervisor can offer the same level of supervision as a supervisor perceived as more senior than the supervisee.

### The supervisory relationship

Is it always this easy to keep the two separate? They also make the point that supervision is an evaluative experience unlike therapy or counselling which perhaps aids in painting a distinction between therapy and education. In consideration of this study I wonder if there is an evaluative aspect from the supervisor perspective or do they view the supervision as part of their learning? The same might also be said for the supervisee and their own want for information. Do they simply want to be told what to do? Shaped into a vessel that fits the system? Or are they willing to allow the more painful natural development of their own thinking to become a part of their work together?

I wonder if this could be even more likely for the trainee in the role of supervisor. They may be anxious to be seen to have knowledge yet due to their position as trainee perhaps feel like this is not solid enough leading to a more factual and stricter adherence to a recanting of theory to the supervisee and their cases.

### **The Role Of Supervision**

I am lead to wonder can the supervision aid in the thinking about this area?

Now the supervisory relationship and the supervisory model that is being thought about in this research has been considered more questions are posed around how this model can translate across disciplines within a generic CAMHS and is the trainee secure enough in their own knowledge of psychoanalytic thinking to be able to produce this type of supervision? The establishment of the supervision, the space and the model for this study then leads to the questions posed at the beginning. What is the expected or hoped for gain of supervision? The question is not just for the supervisee or the supervisor but also for the institution itself. The fundamental key point is what does the supervision offer the institution and how does the institution value supervision? Ultimately what does the institution believe the purpose of supervision is? From the literature already it seems apparent that in each clinical discipline supervision is seen as valued teaching and learning tool.

Can a supervisee who has trained in their own discipline and has its own methods for coping with anxiety allow this space especially with the knowledge that the instigator of this disruption is a trainee, not a master of their profession. If this is the case then the question also must be raised as to how is this possible?

Does the supervisee recognise the difference in level of responsibility and if so can this be navigated or does this not even enter into the dynamic from either party?

### **Summary**

Can and does, the supervisory alliance created in this particular dynamic offer the containment required or could it create something else?

Can and does this fit into the model of supervision in discussion here?

## Appendix B

The Tavistock and Portman 

NHS Foundation Trust

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120 Belsize Lane  
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NW3 5BA

Tel: 020 8938 2699

<https://tavistockandportman.nhs.uk/>

Euan Gilmour

**By Email**

3 June 2020

Dear Euan,

**Re: Trust Research Ethics Application**

**Title:** How do multidisciplinary clinicians in a Child and Adolescent Mental Health Service and the trainee Child and Adolescent Psychotherapists who supervise them experience the supervision?

Thank you for submitting your updated Research Ethics documentation. I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

**Please be advised that any changes to the project design including changes to methodology/data collection etc. must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.**

If you have any further questions or require any clarification do not hesitate to contact me.

I am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,



**Paru Jeram**  
Secretary to the Trust Research Degrees Subcommittee  
T: 020 938 2699  
E: [academicquality@tavi-Port.nhs.uk](mailto:academicquality@tavi-Port.nhs.uk)

cc. Course Lead, Supervisor, Research Lead

## Appendix C – 1

### Participant Information Sheet

**How do multidisciplinary clinicians in a Child and Adolescent Mental Health Service and the trainee Child and Adolescent Psychotherapists who supervise them experience the supervision?**

Name of Researcher

**Euan Gilmour**

**Child and Adolescent psychotherapist in Doctoral training**

**Email – euan.gilmour@nelft.nhs.uk**

#### **Intentions of the study**

My own experience of delivering supervision as a trainee child psychotherapist within a multidisciplinary child and adolescent mental health service (CAMHS) led to me think about what were the experiences and feelings of a child psychotherapy trainee about being placed in the position of supervisor whilst also being in a position of finding an identity as a therapist. As part of my doctoral research my intention is to try to find an understanding of the value of this specific type of supervision both for trainee and clinician and gain insight into some of the more complex thoughts around the purpose of supervision within the service. Areas that will be explored will include; what are the expectations of supervision for both parties? How is supervision experienced of both parties when the supervisor is a trainee? How do both parties experience the supervision? How does a non-psychoanalytical clinician experience supervision from a psychoanalytic perspective and vice versa?

#### **What you would be asked to do**

You will be asked to take part in a recorded semi-structured interview. The interview will be between 45 to 60 minutes long and be conducted over Zoom. A date and time would be offered to you that will not disrupt your schedule. A short list of questions can be sent to

you before the interview commences. This list will also be available in a written document on the day of the interview.

I would also like to ask more specific questions around how the supervision is carried out i.e., the more practical aspects of how often, how long, where it is held etc. This data would be recorded on the day of the interview.

The research participation is voluntary and if you decided that you do not wish to be involved in this study then you can withdraw at any time up until the Interviews with all participants have been completed. Should you wish, you will be kept informed of the progress of the study by regular emails.

### **Information and openness around data.**

If you would like to contact me to discuss the project or have any anxieties or concerns about it, then please use the email provided. The participants will come from the child and adolescent psychotherapists who have qualified within the last five years and the supervisees will have received Psychoanalytic supervision from a child and adolescent psychotherapist in training within the trust. Due to the small nature of the study and the small group of trainees to choose from within the trust it is possible that there is a chance that some material may be identified, though all reasonable measures will be taken to maintain confidentiality and privacy. I would also like to make clear that the intention is not to pair up the supervisee with the supervisor and that each interview is a standalone set of data. The audio tapes of interviews would be transcribed, made anonymous and labelled to ensure confidentiality, stored in a locked cabinet or password protected file for 10+ years and eventually destroyed, in line with the research council guidance.

If participants have any concerns about the conduct of the investigator, researcher(s), or any other aspect of this research project, they should contact Simon Carrington, Head of Academic Governance and Quality Assurance ([academicquality@tavi-port.nhs.uk](mailto:academicquality@tavi-port.nhs.uk))

## Appendix C – 2

### Participant Consent Form

**How do multidisciplinary clinicians in a Child and Adolescent Mental Health Service and the trainee Child and Adolescent Psychotherapists who supervise them experience the supervision?**

Name of Researcher

**Euan Gilmour**

**Child and Adolescent psychotherapist in Doctoral training**

I confirm that I have read and understood the information letter dated ( ) explaining the research project and I have had the opportunity to ask questions about the project.

I understand that my participation is voluntary and that I am free to withdraw at any time up to the completion of the interviews.

I understand that the anonymity of participants will be adhered to by names being deleted from any write-ups and being replaced with the format Participant A. B.. Etc. alongside any identifying information not related to the study being excluded but that due to the small nature of the study and that the participants are all from within the trust there is a small chance of identifying myself in the write up.

I understand that there is no intention of pairing up my personal experiences with that of my supervisee and that the data collected is not directly related.

I agree for the data collected to be held for up to five years.

I agree to take part in the named research above.

I understand that the findings will be written up and potentially submitted to a peer review journal.

Summary and shared with service and trust Nelft.

Signed \_\_\_\_\_

Date

\_\_\_\_\_





**Appendix D – 1**  
**Sophie (Trainee 1) Transcription and notes**

	Mon, 10/25 11:30AM • 32:40	
	Words most used	
	erm, supervision, trainee, thinking, supervisor, psychiatrist, suppose, training, experience, feel, write, supervising, position, case, decisions, bit, happening, moment, learning experience, session	
	00:01	
	So initially, I'd like to get a broad understanding of your ideas about supervision, just in general. And then I'd like to explore your experience of the supervision within the psychoanalytical framework. So, the first question really is how do you see generally the function of supervision?	
	00:25	

Something missing	erm, I suppose the function of Supervision is to, to bring into close focus, erm the experience that you have with a child, erm to bring it to another person's mind. So that the, erm the experience that you and your supervisor have, can perhaps somewhat reflect, you know, as if in the transference, the experience that you have with the child, you know, I certainly had sort of supervisions where you think dynamics that have come up in the room or perhaps between you and the child are then reflected between you and the erm supervisor, something happens that, yeah, demonstrates what is happening there. erm but also to, to really closely track what's happening to make links between erm moments that, you know, so often in the session you don't pick up on and sort of take your mind back in time, remember what erm happened in those moments to trigger other memories? Who all those times when you think, oh, yes, that comes to mind now, but I didn't remember it when I was writing up, it sort of acts as a trigger for other things, or that didn't happen then actually happened at the beginning or whatever it was, that you can really, it really helps you remember in detail. It almost sort of puts you back in the moment I think, what really happens, and I suppose	Description of the psychoanalytic supervision (not general) Where did this go? straight into psychoanalytic, the now not the before.  An Uncertainty of expectation  Child x3 Who is the child - Is there something of the internal child, the internal experience of training and the positioning of the self.  Is there something of the vulnerability, a need to protect against. Defend against. Closely track, is this a wariness, a need for vigilance, watching the other. Is it safe to look back.  Is there a duality in the interview, with the interviewee. (personal)  A sharpness to this as though something fired, - wanted/unwanted, what might come up.  A bit confused words go round but a meaning is found. Repetition and clarifying but becoming personal;  A honing in, close, focus, track detail. Is this to help to think or to keep a control on what is divulged Is there a pressure to have an answer.
Location (time and Space)		
Uncertainty of expectation		
The child (learning and development)		
Safety and danger		
What's behind (known and unknown)		
Now and then		
Finding		
Goal and task		
Specifics/framing		

	<p>someone to help you think more objectively</p>	
--	---	--

	02:17	
Joining and decoupling	to to help you sort of separate out what's in the transference, what belongs to what belongs to the child.	Pulling something out - belonging? Separate a decoupling, Ownership Whose is whom?
	02:30	
	So I'm wondering then of previous supervisions, and before coming into this psychoanalytical cycle, you know that that type of supervision? I mean, it may be a long time ago, but can you remember what supervisions felt like before?	Is this a redirection a command or solidness to help?
	02:52	

Curiosity Orbiting (harness)	Question. I think supervisions before were a lot more general. No, I wouldn't prepare anything necessarily	Why is this a good question. Repetition of original question, Is something difficult in this differentiation of supervision/memory
Clinging to structure to make sense	I might have an idea of a kind of an issue or, you know, a child that I wanted to speak about, but I wouldn't, I certainly wouldn't have had process notes or, or something like that. erm But I would go in thinking this is about my supervisor, kind of listening to me and telling me what to do. This is the problem, and that's the answer. Erm, Or, you know, depending on the supervisor, just having a bit of a chat, you know, more of a sort of how you doing how you coping, erm but it wasn't, it wasn't really particularly linked to a child, it was much more about erm how you how you were doing in general, whereas supervisions at the moment are much more focused. I suppose what I'm thinking about is the supervisions for case, whereas I guess we could be talking about a more general supervision like service supervision, and I'm not sure whether you want one or the other, or both.	Repetition - something going round - being brought to the self? Why would you take process notes? What would/do the process notes signify? Kind of, is this meant or is there something unstable about it/ half hearted Direction Cause and action An unlinking to a child (who is the child) Looking after Repetition Hard to delineate from the new process, what does this offer at the moment? Is it hard to compare, hard to come away form the now and look back, What does this Where to look difficult to focus An Idea of preparation Structure Command and response parallel to honing of question. What is meant by focus Uncertain question got lost somewhere, A want to give what is wanted? A right worrying answer, This is the problem this is the answer. Is to look back to recognize and wrongness or just a difference, a better-ness now or then, perhaps unwanted. Uncertain of what is wanted - from me? Or of the question.
Uncertain		
Cause and action		
The child (internal or external)		
Difficulty in stepping back		
Location		
Structure to guide/hold		
Something missing/unattached		
Rightness/wrongness		
Parallel process (duality)		
	04:04	

	Yeah, but I think it's just your experience of supervision. You know, what, what you can remember from previously what Yeah, and obviously then where we are now with things you know, I think, I think that's that's the interesting part. What we, almost what we thought supervision was, you know, before perhaps coming into, into this experience	
	04:37	
Curiosity - Thoughts of purpose Back and forth Difficulty outside of structure Allowance of something unsettling What can be held Clockwork/orbit/time/structure Uncertain position Differences and similarities	good question. Thinking back to my different roles and different supervisors, erm particularly differs at the moment erm much more training related. erm It's much more about the sort of the learning experience of, you know, assessing risk assessing how a case needs to progress, or practical issues, how that needs to go ahead erm. But also about what, what, what sort of erm mental processes are you accessing? And what are you missing. So it feels now much more like a learning experience. Whereas back then, it was probably just sort of keeping things ticking over.	Why is this a good question again? What does this offer. Back and forwards, now and then A mixing of supervisions- Is this a difficult place or is it hard to pull away from the now and the training - Is this a structure to maintain thought- safe thought? Structure, risk, practical - concrete but maybe unsettling A lean to concreteness A desire to fill something up. The question right/wrong - is this something of the trainee position, A need to get it right- does this take over Is it hard to hold not being sure Ticking - Clock work, mechanical, round and round Learning experience feels very correct/right what it should be? What is the learning position?
	05:37	

## Appendix D – 2

### Louise (Supervisee 2) Transcription and notes

	Unknown Speaker 0:02	
	So, initially, I would like to get a broad understanding of your ideas about supervision, just in general, then I would like to explore your experience of the supervision within a psychoanalytic framework that you've received or been receiving from the trust. So setting the idea of supervision from the psychoanalytic perspective, how do you see the function of supervision generally?	
	Unknown Speaker 0:29	



	<b>Unknown Speaker 0:02</b>	
<p>Location of self in experience            Actively -confusion of something lost            Relationship – safety            What position            What is the function for the individual</p> <p>Actively- keep moving            Supervision/therapy</p> <p>Locate self in same situation            Step outside of self into other</p> <p>Someone to work through - explain            What is missing</p> <p>Stuck in circle</p> <p>A place to stop and reduce activity</p> <p>As is            Actively-action and doing            Safety</p>	<p>Okay, um, I guess I, I've always experienced supervision, as really, really, really important to have. And I will actively put other things aside to make sure that I have that supervision in place. I er I don't know what I'm, trying to say, I, and I really like the fact that I can build a really trusting relationship up with the supervisor, because I need to feel really safe. If the stuff I want to share with them. I'm not going to feel judged. I guess that's probably something to do with my, my, my psyche. So I would actively work on when I'm meeting a new supervisor, I know personally, I'm actively working through that relate that therapeutic relationship as such as the supervisor, therapist relationship. And I've probably see similarities with that with when I'm working with my clients, because they need to trust me enough to not feel judged. And so I feel like I'm almost experiencing what they're experiencing. Because I want I li want to go to someone to work through what's going on in my sessions. Like if I'm, if I'm getting that feel that there's something missing or I'm missing something, or we're stuck in this like circle. And we're not going anywhere, that I can honestly as best I can share that with my supervisor, without feeling like I'm not good enough. And really get something from it. So rather than worrying about the the not good enough emotions that are going on in my head, I'm listening and actively participating and feeling safe. So that supervise relationship needs to be really safe. for me</p>	<p>3 x experience -Function goes missing            Actively - confusion of something lost            Relationship – safety –            What position is taken            What is function for individual</p> <p>Actively – not stop -keep going -working hard            As the supervision/therapy?</p> <p>Locate self in same situation (space)            Step outside of self into other</p> <p>Someone to work (tall)            What is missing (thinking of general supervision)            Stuck in a circle – round and round can see out            can see in or only in front</p> <p>A place to be nurtured/stop</p> <p>As is            Actively is action and doing a means to cope.            Safety</p>
	<p>Unknown Speaker 2:40</p>	

	<b>Unknown Speaker 0:02</b>	
	So it's the relationship that almost takes the priority. So think, back of supervision that you've had previously, then does has all supervision taken that sort of format? or have there been different types of format, you know, in different roles in different places?	
	Unknown Speaker 3:00	

<p>Experience and sharing Actively sharing, Space filled/trauma</p> <p>Confusion of supervision</p> <p>Structure, memories location of self</p> <p>Terminology – not understanding</p> <p>Understandings through own knowledge/way/past Learning/confusion Unsure of supervisor role Identity blurred, amalgamated Ending and moving on (actively) Sense of me -blurred Reiteration person centred (me centred) safety</p> <p>Confusion of types of supervision</p> <p>Contradiction Stuck in the middle (head down and carry on)</p> <p>Speed and haste vs work time</p> <p>Facilitator</p> <p>Hunker down against the other</p> <p>Name of self, centre and reappear</p> <p>Actively keep going don't stop and look</p> <p>Trauma and its effects</p> <p>Identity -what do I do? Role</p>	<p>Yeah, there was a couple of places I've worked. So I've worked with an IAP team. So if I give you a little bit of background, so when I was training, I worked in a doctor surgery, and I worked in a crisis rape crisis center. So in those, these were my first sort of experiences of supervision, the lead therapist in the doctor surgery was my supervisor. And there was family systemic therapist in the rape crisis center who I worked with there. The initial supervisor was psychodynamic and I was person I was training person centered. And then we're the family systemic therapist. So there was erm, they would be coming or using slightly different terminology to me. So I'd be like, trying to understand this person centered perspective of what they were. Psychodynamic ally bringing to me or family systemically bringing to me. But we, we, managed to work through that and it felt safe enough to do that. Then I, I continued at the rape crisis place. So that relationship stayed in place for a long, long time, but then moved to a different Doctors surgery, where I sort of employed or self-employed so I employed my own supervisor that worked well, again, she was psychodynamic I was persons centered. And then I worked for an AI App Service. And that's where I got really confused because it felt like it was more I got confused around my manager and the role of my manager and operations and the role of my supervisor, and I found them contradicting each other. And I got really lost at that stage and I actually left that service quite quickly, because I've just felt, and he stayed there for about a year, I felt my operations service manager wanted me to get through these clients really, really quickly. And it just felt like, Okay, well, you can close that bit down, and you can work on this bit Lou. And then the supervisor was like, actively trying to work with me and I was getting like, I don't understand what's going on here. I'm getting two different messages. And then when I started working for the children's post sexual abuse service, I found that situation again, where my, my operations or my erm allocations type manager would work through me and it would feel like a supervision session. And then I'd go to my supervisor, which was group supervision, which I had experienced before. That would, that would become conflicting as well. But I think that was more of an individual, because then when that individual left, I got a new sort of operations allocations manager. And that all that disappeared. So I think that was very much an individual experience. But that was where I found conflict in my supervision. And where I couldn't, I was, I didn't feel I was getting the best out of it. Talking about group supervision, which is another area. So I've done group supervision at the rape crisis center, the children's post sexual abuse service, and I've done peer supervision. When I was self-employed for a few years, I found that I had to learn to build my confidence up within that group for me to have a voice. So I started to sit and listen to everybody else. I mean, I was still learning from them, and invariably some of their experiences you're experiencing. But I was quite held back. So it took me a long time to find my space in that, then when it did when I was working one to one with a supervisor. Because I guess it was that I'm not good enough, or I'm not voice that was going</p>	<p>Experience and sharing, a lot of it actively sharing Trauma/safety/experience</p> <p>Confusion to who and to what supervision does</p> <p>Structure – memories. Time place – on the circle</p> <p>Terminology Understandings through own knowledge or past safe learning – confusion What did the supervisor do? Identity blurred Ending and moving on – replaced Sense of 'me' strong yet blurred Reiteration person centered- vague, generic -who is the person at the center Confusion around types of supervision – management supervision Contradiction Stuck in the middle</p> <p>Speed and haste vs work and time Work through me (sense of just a facilitator) where is the me Against</p> <p>Name of self – centering, name grounding</p> <p>Actively – a need to do</p> <p>More trauma How did the work effect self and supervision</p> <p>Identity – What do I do? Role</p>
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<p>Lots of voices, work through or against</p>	<p>on in the back of my head. But on the other side of it, the flip side of it, you learn a lot more, because you've got a lot more different. erm, sharing going on and learning going on? Sorry.</p>	<p>Take in all the voices found space in supervision, learn a lot more, what belongs to what and to whom</p>
--	--	--

	Unknown Speaker 0:02	
	Unknown Speaker 7:38	
	It sounds like that there has been lots of complications and complicated relationships. Yeah, experience through supervision in different styles at different times and feels quite comfortable. But then when they, when there's a bit of a clash, that sounds really quite uncomfortable for you.	
	Unknown Speaker 7:59	
<p>Learning process -make sense of voices self or supervision whom learns Sort of -manage, do not manage</p> <p>Learnt from difficulties vs experienced difficulties</p> <p>Keep learning doing (what can be taken in? Names of people/ relationships, locate self and place</p> <p>Space to stop breath-reconnect with self -Is another wanted Stopping and going back fear</p> <p>More than one voice</p>	<p>Yeah. And I I guess it's a learning process as well. And over that time, I've sort of learned what I can manage and what I can't manage, and what I need to do to, for me to get the most out of it. So I think over time, those, those difficulties that I've experienced in the past, I've learnt from those. So I've recognized what I need as an individual, or what barriers I've got in the back of my head that are stopping me from engaging. And so it's a bit like at the moment, when trainee left, there was a possibility that I was going to be put with Becky. But I asked specifically not to be put with Becky, because she's my team lead. And she's got a different agenda in my mind, to what's needed from supervision. Because there might be a drive for her to for me to end quicker because she's got a whole waiting list that she's got to deal with</p>	<p>Learning process -self or supervisor, whom learns Sort of – manage do, not mange not do Doing and coping Learnt from difficulties, learnt what, Learnt about self and barriers, is there a want to learn and learn to keep doing and taking in. can things be paused Names of people /relationships or grounding and locating I know already I just want space. Space stop coveted but can it be.</p> <p>Fear of going back, 'stuck in the middle' not moving and covering</p> <p>More than one voice</p>



## Appendix E – 1

### Sophie (Trainee 1) List

<p>Something missing  Location (time and Space)  Uncertainty of expectation  The child (learning and development)  Safety and danger  What's behind (known and unknown)</p> <p>Now and then  Finding  Goal and task  Specifics/framing  Joining and decoupling  Curiosity  Orbiting (harness)  Clinging to structure to make sense  Uncertain  Cause and action  The child (internal or external)  Difficulty in stepping back  Location  Structure to guide/hold  Something missing/unattached  Rightness/wrongness  Parallel process (duality)  Curiosity - Thoughts of purpose  Back and forth  Difficulty outside of structure  Allowance of something unsettling  What can be held  Clockwork/orbit/time/structure  Uncertain position  Differences and similarities  Mind and fullness  Space and moving positions  Gravity - weight  Distortion  Curiosity of space  Solidness of position/knowledge  A want for the clarity  Child development position to acquire  new skills  Rightness and wrongness  To be held, lightly, strongly and the  tension between  Orbit and circle around</p>	<p>Something missing  Location (time and Space)  Uncertainty of expectation  Child- adult, trainee, professional.  Academia  Safety and change/intrusions,  intrusions, Sanctuary - structure</p> <p>Now and then  Finding  Goal and task  Specifics/framing  Joining and decoupling  Curiosity  Space  Structure  Uncertain  Cause and action  The child  Difficulty in stepping back  The space  Structure  Something missing  Rightness and wrongness  Parallel process  Curiosity  Back and forth  Structure  Tolerance of frustration  What can be held  Structure  Uncertain  Differences and similarities  Mind and fullness  Space  Gravity -weight  Distortion  Curiosity  Structure  Need  Child  Newness  Rightness and wrongness</p> <p>Structure  frustration</p>
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Reality and non-reality	space
Safety and change	reality and non-reality
Fragmenting pieces	sanctuary of structure
Moving together and potential of separateness	pieces
Long space- is there a journey between places	joining
Destination	1
An exactness of an unknown	Journey
How one becomes two	Space
Leap of faith	Journey
Doubt of structure to hold	Structure
A means to self-contain	1 -2
Trapping of self/other/situation	Risk
Containing to tight or to lose	Fear
Searching better-ness or reality	Sanctuary
Movement	Claustrophobia
2D - 3D An adding of depth	Crutch or aid
Fragility in the link	Desire
What/Who is being seen	Action
Position of Child (not knowing) Adult (responsible)	Depth
Sanctuary - structure	Fragility
An otherness and a curiosity about its presence	Blurring
Judgement of own place	Child – adult
Internal/external	Sanctuary
Structure	The other
Destabilise own position	Mirror
Freeing	Internal/external
Fear of orbiting, spinning, out of control	Structure
A need for gravity a pulling and landing force	Destabilise
Space lost and found	Freeing
An other known but unknown	Fear of space
Complexity	Need of structure
Separateness and togetherness	Space
Exploration - showing	Other
Journey	1 – 2
Less definable	Exploration
Strength of showing something, pride in what has been created	Journey
A want to not be caged/pigeonholed	Structure
Who/What am I?	Uncertain
Questions of self	Doubt
A giving up of something painful	Doubt
Competition of greatness/Knowledge/standing	Moving forward
Link to painful association/memory? Of patient/child	Power
Recognition of an internal and external	



<p>Placement of other and self  Structure  Pride/fear of place of self and other  Hierarchy  Power of self- allowed not allowed  Fear of a too muchness  Taking over of the other  Infant to parent and wants for child  Can there be reciprocation, can the same position be shared or must there be only one.  To give or take  To give and take  Structure to equalize  Removals of hierarchal system  What is left? Who is left?  Curiosity of self and others  Naturalness of investigation - akin to play  Curiosity/purpose, a need for time or a welcoming of curiosity  Clarity of hierarchy and giving oneself up to a higher position  Task seen  Effect of power on self and position  Responsibility and where does it sit in own position  Own dealing of authority  Authority and questioning  Creation of doubt and anxiety  Fluidity of position/place/self  Fluidity of position/place/other  Greed and incompetence  Travel between positions  Is right and a wrong a concept  Questioning task and what it is.  Enmeshing of self and other  Discomfort by sharper spotlight  Pull to the old and what is known and a rejection of a newness  Discomfort of non 'norm'  What is it?  Structure of story to gain position  Trip into somewhere else with different laws.  Disappearance of responsibility (adult)  Child to adult - child - adult  A place of no laws, rules, consequences, time, space, otherworldly  Lost in other 'ness/place</p>	<p>Internal/external  Power  Structure  Pride    Power  Fear  Blurring  Child to adult  We not I    Generosity  Need  Structure  Disbanding of structure  Empty  Curiosity  Learning    Curiosity    Power    Safety  Power  External power    Self-journey  Power  Doubt  Fluidity  Fluidity  Me  Journey  Right and wrong  Questions  Blurring  Spotlight  Sanctuary of structure  Rejection of newness  Unsettled    Structure  Journey    Adult  Child -adult  Break from reality  Reality -power</p>
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Academic task, grounding or non-reality	External power
Who can hold their position	Child
Blurring of boundaries	Structure
Frustration of who reality knows or who can know	Blurring
Parallel - joining - unjoining, meshing un-meshing, who is who	Frustration
The other can't really know	Parallel
Can decisions/responsibility be in the room, place of togetherness	The other
Academical quality, play or reality testing	Responsibility
Transportation between destinies	Structure
The tourist, holiday to work	Journey
Vacation/reality	Vacation
(vacate - leave (a place that one previously occupied).	Vacation
Recognition in the space of self and rules and laws	Structure
Morality -more real	
Trainee to professional	Right and wrong
Space in middle -journey?	Learner to adult
Difficulty of transition	Space
Something else offered	Difficulty
Attached and unattached	Newness
The space itself - how is it navigated	New
Help - aid or hinderance	Blurring
Frustration of child and recognition of its inadequacies or recognition of unlearnedness that can be learned	The space
Knowledge slips and toleration of this	Crutch or aid
Really being seen	Child?
Non academic	Stuck-ness
Need for company in spotlight	What can be held
Power to face reality	Being seen
Can I, if I -Consequences	Outside of structure
What is needed to be a real person.	Need
What Happens between	power
Where am I located/ What paradigm	
A non-exactness	journey
Is competition/fight allowed	
Does power reduce	competition/structure
Switch to known answer	power
Expectations(doubt)	sanctuary of past knowledge
Backwards and forwards	
Professional self, training, ;earning self	backwards and forwards
Can challenge be given	adult
Space	challenge
Recognition of growth	space
Function of space and reality testing	growth
Palace of thought	

<p>Sharing the Journey and destination  Sharing of mutual roles and responsibilities  Does one size fits all?  Similarities and differences  Space without hierarchy  Is space to hostile or can it be real  Trying on identities  Smallness to bigness  Child to adult  Dream to reality  Helpful/unhelpful  Self-Located and unabashed  Clarity to voice  Concern for welfare of the other  Looking after  Parent and child in coexistence  Future  Comfort of own offerings and takings  Future</p>	<p>space   joining  joining   difference   break from power  Space  Exploration  Child to adult  Child to adult  Dream   Sureness – adult   Parent and child  Future  At ease with self  future</p>
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## Appendix E – 2

### Louise (Supervisee 2) List

Location of self in experience	Then
Actively -confusion of something lost	Actively
Relationship – safety	Two
What position	Position
What is the function for the individual	self
Actively- keep moving	Active
Supervision/therapy	Supervision therapy
Locate self in same situation	Two
Step outside of self into other	Two
Someone to work through -explain	Two
What is missing	Unexplained
Stuck in circle	Stuck
A place to stop and reduce activity	Retreat
As is	Now
Actively-action and doing	Active
Safety	Retreat
Experience and sharing	Then/two
Actively sharing,	Active
Space filled/trauma	Then
Confusion of supervision	Space
Structure, memories location of self	Position
Terminology – not understanding	Self esteem
Understandings through own	Then
knowledge/way/past	Power
Learning/confusion	Power
Unsure of supervisor role	Two
Identity blurred, amalgamated	Actively
Ending and moving on (actively)	Missing
Sense of me -blurred	Self
Reiteration person centred (me centred)	Sanctuary
safety	Blurring
Confusion of types of supervision	Blurring
Contradiction	Active
Stuck in the middle (head down and	Time
carry on)	Teacher
Speed and haste vs work time	Two/power
Facilitator	Self
Hunker down against the other	Active
Name of self, centre and reappear	History
Actively keep going don't stop and look	Self
Trauma and its effects	Position
Identity -what do I do?	challenge
Role	
Lots of voices, work through or against	learning

Learning process -make sense of voices self or supervision whom learns	uncertain
Sort of -manage, do not manage	active
\learnt from difficulties vs experienced difficulties	active
Keep learning doing (what can be taken in?)	self
Names of people/ relationships, locate self and place	sanctuary
Space to stop breath- reconnect with self -Is another wanted	trauma
Stopping and going back fear	two
More than one voice	Two
I want – an individual not a group or more than one	One
Separate how it has been done	Two
Fear of joining	Therapy supervision
Therapy/supervision	Two
Relationship threatening	One/two
Difference good or separateness good	Active
Diversity as cloak	Power
Take to add and add	Two
Relationship with challenge	Power
Challenge of perspective	Active
Cottoned on, sew on	Two
Present to me – give to me	Power
Challenge, combat reduced	reduction
Training diminished	self
The individual	two
How work with me	trauma
Fear of being seen	power
Whose responsibility	power
The passive dictator	two
Other/s knowledge frightening	power
Competition (not recognized)	Self
Named to position/reduce	Then
Words and now and historic confusion	Therapy supervision
Confusion of therapy and supervision	Self
Psychobabble- Don't highlight what I don't know	Power
Threat/competition are safer	Defense
Known adversary	protection
Inferior and small	Power
Words don't make sense	Protection
Already known -no challenge to self	together
Stops -stopping	now/then
Pairing not joining	power
Confusion of space	then/trauma
	power

<p>Person centered- to not take over  Confusion stuck between 2  Historic team and trauma  Bitsa  Fear of other and superiority will they take over  Confidential  Location  Destabilise, undo, reduce  Uncertain -to direct</p> <p>Concern of other and there wants  Blending and mixing to reduce  Search for safety  Terms and confusion  Muddled and fear inducing  Reenactment and finding place  Can I cope  First team and safety against the barrage of trauma  A safe place  Replicate for safety  Can new ness be let in  Health and ill health  What might be seen</p> <p>The idea, the excitement of something new (the fantasy before reality)  Fight between two persons</p> <p>Naming of self, grounding against worries  Fears of coming off the path  Naming of supervisor to reduce  Equalize  I will not be judged  Therapeutic/supervision  Follow my lead  Be small and big  To pair not join  Not rock the boat  Double really  Expression of disappointment  Known space to not be provided  Can I be small and helpless  To be the grown up  Pairing offers control  Power and responsibility  Actively not stopping  Remembrance experience to deal with  History constant</p>	<p>responsibility  protection of self  space  therapy/supervision</p> <p>uncertain</p> <p>External safety  Blending</p> <p>Protection</p> <p>Trauma</p> <p>Sanctuary  Active  What next  Power  Fear</p> <p>Then/now  Power/two</p> <p>words  defense  words/structure/defense  active  protection/power  therapy/supervision  two/power  active  two  Don't rock the boat status quo  2  Power  Without  Smallness  Bigness  Power  Active  Then  Then  Power of self  Power  1  Newness  Self-awareness</p>
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<p> Still have focus  Own terms  Conversation on own  A new position  Recognition of smallness  Something sad  Got away from  Vulnerable and away  Same name as mine -disorientating    Reframe  Confidant to competent  Regain of composure  To hold support, self- supervisor?  Solidness knowing and sureness    Recall nor remember  Trainee aspect power  External grown up ending  2 ness, needs splitting  Stuck in middle  Sickness effects  Lonely with it all  Difficult to allow something else in for  fear of losing self/adult strong position  Bumble together- reduction of both  Solidness and transition  Strings unwanted  Stuck-ness stops the trauma  Endings happen actively move on  Challenging comfort  To suit the needs of me  Understood or made to understand  To keep well,  Don't rock the boat  Structure and feedback work done  something tangible  The relationships clouded by the past  Power to get rid of </p>	<p> Smallness/trauma  Escape  Small and defence  1-2    Active  Active  Structure  Structure  Certain  Then  Power  Bigness  2  Stuck  Unwell  1  Small  2 small – power  active  trauma  sanctuary  active  power  self  power of self  sanctuary    Solid structure/active    Then trauma  Power to hold </p>
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## Appendix F – 1

### Sophie (Trainee 1) Superordinate themes

<b>The space</b> The supervision	<b>The Patient and the child</b> Self and other	<b>Navigating the Space</b> Development and learning	<b>Power and responsibility</b>	<b>Colonization of The New space</b> consolidation of Identity
Internal/external	Child- adult, trainee, professional. academia	2d to 3d – fluidity of position	Hierarchy	Backwards and forwards,
Now and then	The personal journey and location,	of reality and a leap of Faith	Fear of own place	Internal/external
The space - The supervision	Blurring, joining combining	Navigating the Space - Development and learning	Power and responsibility	Colonization of The New space - consolidation of Identity
Time and location	Barriers, crutches and fears,	Unsteady ground/ destabilising/ fragility/ fear of space	Rightness and wrongness	curiosity
Goal and task	Knowledge, not knowledge, Suspension of reality	Backwards and forwards	Difficulty in stepping back	newness
intrusions,	Recognition and ownership	Sanctuary – structure/ past knowledge	Rightness and wrongness	Risk/fear
structure - Isabella Mendes	The self, The other 1 2	Tolerance of frustration	What can b e held	At ease with self and place
Something missing	Own position, own expectations own journey, do they match,	Not knowing	Frustration	Desire/ dream
Location (time and Space)	what is being offered,	Gravity	Competition of knowledge	freeing
Uncertainty of expectation	More than one,	Push and pull	Placement of other/self	Exploration/trying on identities
Reality and non reality/ break from reality/ vacation	Parallel process	Vacation and vacating	External power	Moving forward/ growth
sanctuary	Differences and similarities	Cause and action	Reality/gravity	pride
Crutch or aid	We not I	Structure/need of structure/ disbanding of structure	challenge	learning

## Appendix E – 2

### Louise (Supervisee 2) Superordinate themes

<b>Power</b>	<b>Don't rock the boat</b> Protection of self	<b>Actively engaging</b>	<b>Joining or pairing</b>	<b>Therapy /supervision</b>
Then	position	Actively	two	Supervision therapy
challenge	self	Active	two	space
power	stuck	Sanctuary	Then two	self
teacher	retreat	Learning	position	time
reduction	missing	External safety	blurring	now
defense	uncertain	Words	One/two	trauma
protection	defense	Bigness	blending	Then/trauma
Protection/power	Protection of self	Escape		without
Two/power	fear	Certain		Self-awareness
Power of self	Status quo	Small		Smallness/trauma
		Small/power		
		Solid structure		

