

Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

by

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Abstract

Supervisee nondisclosures are a regular occurrence in supervision, with the vast majority of supervision sessions containing some form of nondisclosure. Nondisclosures may negatively impact supervisory alliances, therapeutic alliances with clients, and supervisees' competency levels. The purpose of this study was to obtain, from the perspectives of supervisees, an in-depth and rich understanding of the experiences and internal processes of supervisee nondisclosures that occur in supervision with videorecording review. No other studies have examined supervisees' nondisclosure experiences as they have emerged *in the moment* within their original social context. A total of eight participants were recruited for the present study. This included three supervisees who were graduate students registered in a master's of counselling practicum, along with their respective supervisors and client. A multiple case study research design was employed to study nondisclosures from a holistic perspective, capturing a breadth and depth of contextual data. Interpersonal Process Recall (IPR) was utilized to understand nondisclosures as a process that emerges out of a social context. This interview required the principal researcher and supervisee to review a videorecording of the supervisee's supervision session in which the nondisclosures occurred. Thematic analysis was employed to create within-case analysis themes for each participant, followed by a cross-case analysis for all three participants. Among the steps taken to ensure rigour were member checking, peer review, and use of audit trails. Five overarching themes were found: (a) validation, (b) safety, (c) growth and accomplishment, (d) performance anxiety, and (e) avoidance. Following these findings, I discuss implications for clinical supervision, limitations of my study, and suggestions for future research.

Preface

This thesis is an original work by Allison J. Foskett. The research project, of which this thesis is a part, received research ethics approval from the University of Alberta Research Ethics Board, Project Name “UNDERSTANDING SUPERVISEE NONDISCLOSURES IN SUPERVISION WITH VIDEORECORDING REVIEW”, No. Pro 00044501, MARCH, 26, 2014.

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Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

Background and Rationale

Nondisclosures are conscious or unconscious occurrences in which supervisees conceal thoughts and feelings or withhold, distort, or even fabricate information during clinical supervision (Farber, 2006). While most supervision models assume that supervisees disclose openly and wilfully, this is not the case. A study that surveyed 108 counselling trainees revealed that 97.2% of them admitted to nondisclosures in their supervision sessions (Ladany, Hill, Corbett & Nutt, 1996). A more recent study of 204 counselling trainees revealed that within a single supervision session, 84.3% of the counselling trainees admitted to nondisclosures (Mehr, Ladany, & Caskie, 2010). The most common nondisclosures are negative reactions (Ladany et al., 1996) and perceptions (Mehr et al., 2010) toward supervisors. Withholding clinical errors, client observations, and personal concerns are other types of nondisclosures. Reasons for nondisclosures include attempts to manage one's impression, fear of negative evaluation, negative feelings, a poor supervisory alliance, and dismissing the importance of the issue (Ladany et al., 1996; Mehr et al., 2010).

Supervisee nondisclosures are common and “unavoidable” in supervision (Farber, 2006, p. 180). However, supervisee nondisclosures can negatively impact the processes and outcomes of alliances within the *supervisory triad*, a term which refers to a client, supervisee (counsellor), and supervisor (Bernard & Goodyear, 2014). Weak supervisory alliances are linked to decreased satisfaction in supervision (Ladany, Ellis, & Friedlander, 1999) and decreased likelihood of supervisees following treatment protocols (Patton & Kivlighan, 1997). In addition, weak supervisory alliances can negatively impact therapeutic alliances with clients (Patton & Kivlighan, 1997). This is problematic because strong therapeutic alliances are known to predict

successful counselling outcomes for clients (Duncan, 2010, Horvath & Symonds, 1991; Orlinsky, Grawe & Parks, 1994) and positively impact supervisees' professional development, growth, and competencies (Lyon & Potkar, 2010). Supervisee nondisclosures also negatively impact supervisees' competency levels. A sample of pre-doctoral interns reported that a negative effect of their nondisclosures was their reduced ability to help clients (Hess et al., 2008). Lastly, supervisee nondisclosures are linked to ethical problems and legal risks. In one study, 33% of supervisees who reported nondisclosures related to supervisory conflicts selectively reported case details, and 25% of supervisees pretended to comply with their supervisors but chose different courses of action without informing their supervisors (Moskowitz & Rupert, 1983). Nondisclosures of this nature clearly present an increased risk for legal, ethical, and malpractice issues to arise (Moskowitz & Rupert, 1983). For example, failing to disclose case information or decisions pertaining to a suicide assessment in need of further attention could put the supervisor, therapist, and client at risk (Bernard & Goodyear, 2014; Ladany et al., 1996). Moreover, supervisees' withholding of information related to their own internal struggles prevents their supervisors from being able to help. This can lead to missed opportunities for professional growth and development (Knox, 2015).

Supervisee nondisclosures are part of a complex and dynamic process that emerges out of specific social interactions and contexts (Rosenfeld, 2000). Prior nondisclosure research recommends that more be learned about how specific contexts, situational factors, social processes, and interactions influence nondisclosures (Knox, 2015; Mehr et al., 2010; Rosenfeld, 2000; Sweeney & Creaner, 2014; Yourman & Farber, 1996). The present study examined nondisclosures in the context of *supervision with videorecording review*, defined as a supervision session in which the supervisor and supervisee watch and review a videorecording of the

supervisee's counselling session. There are several reasons for examining nondisclosures in this context. First, a limitation of prior nondisclosure studies is that little is known about the supervision modality or context in which the nondisclosures occurred (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010). It is not clear whether supervisees' nondisclosures occurred in supervision comprised of case consultation, audio or videorecording review, or a combination. Only one nondisclosure study to date acknowledged a supervision modality that incorporated watching supervisees' counselling videos and audio recordings in group supervision (Stromme, 2014). Focusing on supervision with videorecording review enabled me to examine the nature and influence of nondisclosures that occurred when supervisees' clinical performance and nonverbal behaviours became exposed rather than hidden. Given the natural process of supervision, a supervisee's counselling session may not have been watched in entirety due to limited time and conversations that may have arisen from watching the videorecording. However, the intended and understood context of the supervision session was focused on videorecording review. To my knowledge, no published studies to date have examined nondisclosures in the context of watching supervisees' videorecordings in individual supervision.

The second reason for focusing on videorecordings of supervisees' clinical work is that it is one of the most effective ways for supervisors to offer supervisees feedback given the objective exposure of supervisees' work (Stoltenberg & McNeill, 2010). Despite its usefulness as a supervision tool, a review of the literature suggests ambiguous findings on the frequency with which videorecording review is utilized in supervision. Haggerty and Hilensroth (2011) state that in many counselling training programs supervisees' work may never be observed. A recent study (Ellis, Krenal & Beck, 2002) reported that from a sample of 81 doctoral and master's students of counselling, only 2.32% of their time in supervision was spent watching videos.

Approximately half of the sample never videorecorded their counselling sessions. While little is known about the experiences of watching videorecordings in supervision, what is known is that it can be a negative self-confrontational experience for supervisees (Hill et al., 1994; Madani, 2008; Vanderwege, 2011).

A third rationale for the present study is that it does not rely solely on supervisees' retrospective accounts of nondisclosures in prior supervision sessions, which has been the norm for all supervisee nondisclosure studies thus far (e.g., Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Spence, Fox, Golding & Daiches, 2014; Stromme, 2014; Sweeney & Creaner, 2014; Webb & Wheeler, 1998; Yourman & Farber, 1996). Retrospective recall reduces the accuracy of recalling complex inner experiences (Kagan, 1980) especially in the case of nondisclosures. The current study is novel in its examination of nondisclosures as a socially emergent process in which nondisclosures are understood as part of a dynamic social context. As such, the present study examines nondisclosures using the qualitative interview technique Interpersonal Process Recall (IPR) (Larsen, Flesaker & Stege, 2008). This involves watching a videorecording of a research participant (i.e., a trainee) in an original social context. The aim of IPR is to maximize awareness and recall of the participant's covert processes such as decision-making, feelings, and thoughts. This interview technique is very fitting for examining nondisclosures as it strives to facilitate an accurate recall of "unspoken in-session experiences" (Larsen, Flesaker & Stege, 2008, p. 20). In addition, IPR is a sensitive interview technique that emphasizes the role of social processes and interactions (Kagan, 1980), and enables supervisees to understand how these processes influence the emerging nature of their nondisclosures.

I employed a qualitative case study methodology that captured an extensive breadth and depth of contextual data in a holistic manner (Merriam, 1998). This research methodology is

conducive to examining supervisees' perceptions on how complex social interactions influence supervisees' nondisclosures. To my knowledge, the unique combination of IPR and case study methodology has never been used to study supervisee nondisclosures in their original social context.

Purpose of Study

The purpose of my study was to obtain, from a supervisee's perspective, an in-depth and rich understanding of experiences and internal processes of supervisee nondisclosures that occurred in supervision with videorecording review. The main research question that guided the present study was: What are the experiences and processes of nondisclosure, from the perspective of supervisees? The focus was on supervisees' thoughts, perceptions, emotions, and behaviours related to nondisclosure, and on how supervisees perceived these as influencing the nondisclosure process. A subquestion was: How do supervisees understand, and make sense of, their nondisclosures as part of a reciprocal and interactive process in supervision? This question explored supervisees' perceptions of how they were influenced by interpersonal interactions and the situational context of supervision. For example, supervisees may create meanings around specific interactional processes that occur within supervision, such as: elements of nonverbal communication, supervisee-supervisor interactions, and supervisor responses, to name a few. Supervisees may also make meanings based on their unique situational contexts, which in this study includes watching and reviewing supervisees' videorecordings.

I examined the experiences of novice therapists, defined as master's students in their first year of counselling training. Novice therapists, also referred to as level one trainees (McNeill & Stoltenberg, 2016), are likely to have particular struggles related to their early development including performance anxiety, impression management, and poor recall of counselling session

details (Huhra, Yamokoski-Maynhart & Prieto, 2008). I was particularly interested in exploring nondisclosures within the context of videorecording review, a supervision modality recommended for novice therapists (Huhra, et al., 2008). For instance, these counselling trainees typically have a poor memory for recalling details of their counselling sessions and they are not skilled at knowing which information is the most important to report. Watching the videorecording exposes the trainee's work and provides accurate impressions of what happened during the counselling session. It also helps to counteract the counselling trainees' attempts at impression management. These are a few of the reasons I chose novice counselling trainees for the present study. The findings from this research project contribute to the scholarly literature on clinical supervision practices as well as the training, professional development, and growth of counselling psychology trainees. This study may have implications for enhancing supervisees' clinical competence, which in turn may improve client outcomes. The current research is also relevant to the discipline of counselling psychology. For instance, a key feature of counselling psychology is its emphasis on human development (Gelso, Nutt Williams, & Fretz, 2014, p. 5) and its valuing of personal and professional growth of individuals as they develop across the lifespan (Bedi et al., 2011; Domene, Buchanan, Hiebert, & Buhr, 2015; Gelso, et al., 2014). The present study adopts a developmental lens by examining supervisee nondisclosures at an early stage within their counselling training. Counselling psychologists also value understanding the development of individuals within their lived context (Gelso, et al., 2014). In the current study, a rich understanding of the interaction between participants and their social context of supervision is embraced through the use of IPR and case study methodology.

This dissertation opens with a literature review in which I discuss relevant theory and applications of clinical supervision, nondisclosures in the supervisory triad, and videorecording

review. In the third chapter, I describe my case study methodology and chosen theoretical perspectives. Participant recruitment, data collection, and data analysis are discussed along with research quality and ethical issues. Within the findings chapter I present the within-case analyses and cross case analysis. The final section includes a discussion that provides a rich understanding of the findings, implications for clinical supervision, limitations of the study, and suggestions for future research.

Literature Review

The four major sections within this literature review include (a) an overview of conceptualizations of supervision that are relevant to the study of nondisclosures, (b) conceptualizations and definitions of nondisclosures and disclosures, (c) an examination of the empirical studies on nondisclosures as they occur within the supervisory triad, and, (d) a review of empirical studies on supervisees' experiences of watching videorecordings, along with a discussion of why nondisclosures should be studied within this context.

Conceptualizations of Clinical Supervision

Clinical supervision is a mandatory part of counsellor training (Bernard & Goodyear, 2014) and is defined as an overarching intervention in which a seasoned professional works with a supervisee, typically within the same profession (Bernard & Goodyear, 2014). The intervention is a process that unfolds over time within an evaluative context. An aim of the supervisory process is to oversee and improve the professional performance of supervisees and their client work (Bernard & Goodyear, 2014). Supervisors play the role of gatekeeper to ensure that supervisees meet the competencies required for their particular developmental level of training (Canadian Psychological Association, 2009). The gatekeeper role requires supervisors to identify and address problems when supervisee competencies are not met. As a gatekeeper, supervisors decide which supervisees will be granted permission to enter the profession (Canadian Psychological Association, 2009).

Clinical supervision can also be conceptualized as a dyadic relationship that includes two interactants, a supervisee and supervisor (Hess, 1980). Each interactant brings into the supervision relationship a unique context. Clinical supervision is a *process* that thrives on a healthy, reciprocal communication channel accompanied by trust and respect (Blocher, 1983). In

order to better understand supervision and the supervisory relationship as a process, a discussion of the supervisory working alliance is crucial (Lyon & Potkar, 2010). A *supervisory working alliance* is a relational vehicle comprised of three components: mutual agreement on goals, agreement on the tasks required to achieve those goals, and rapport between the supervisee and supervisor (Lyon & Potkar, 2010). All components are based on mutuality and bi-directional communication as opposed to unidirectional communication (Lyon & Potkar, 2010).

It is through the supervisory working alliance that supervision goals are achieved. An overarching purpose and goal of clinical supervision is to impart to counselling trainees the appropriate “skills, knowledge, and attitudes” (Maki & Delworth, 1995, p. 283) of the counselling profession. Other learning and development goals for supervisees include increasing personal awareness of the self and of interpersonal processes, as well as addressing personal and professional barriers toward learning (Bordin, 1983). In addition, supervisees are expected to gain a comprehensive knowledge of theory, application, and client issues, and to conduct research on client treatment as needed. Finally, supervisees are expected to understand and adhere to professional and ethical standards. It is important for both supervisees and supervisors to “protect clients from harm” (Campbell, 2006, p. 3). Ideally, goals should be defined before delving into task completion. Tasks assist supervisees and supervisors in achieving mutually agreed upon goals. An example of a task might be watching a videorecording of the supervisee’s work. Finally, as both interactants work on tasks and goal achievement, their working alliance becomes stronger. This means an emotional bond develops through mutual feelings of amicability and trust of each person. A strong working alliance can help to counteract the supervisee’s discomfort with any evaluative functions of the relationship (Bernard & Goodyear, 2014).

Feedback in supervision. Evaluation and feedback have been described as central components of clinical supervision (Bernard & Goodyear, 2014). Evaluation consists in large part of an expert offering feedback on supervisees' abilities in relation to their chosen goals (Bradley & Kottler, 2001). Feedback can be conceptualized in different ways. A traditional understanding of feedback is to view it as a linear process in which the supervisor offers feedback *to* the supervisee (Bernard & Goodyear, 2014). For example, one definition of feedback specific to clinical supervision is "information that supervisors communicate to their supervisees about aspects of their skills, attitudes, behavior, and appearance that may influence their performance with clients or affect the supervisory relationship" (Hoffman, Hill, Holmes & Freitas, 2005, p. 3). Claiborn and Lichtenberg (1989) conceptualize feedback as an interactional and continuous process of communication that involves an exchange of information between *both* the supervisor and supervisee (Claiborn & Lichtenberg, 1989). Building on this perspective, the present study adopted the perspective that communication and feedback are constantly being influenced based on what *is* said or *not* said (Watzlawick, Beavin, & Jackson, 1967). For instance, if a supervisee chooses not to disclose information, a supervisor might infer personal meanings around this nondisclosure, which may influence the supervisor's future feedback to the supervisee. In the current study, the act of disclosing or not disclosing was assumed to influence communication between a sender and receiver, in so far as a receiver creates personal meanings based on what the sender said or did not say. In addition to the influence of a presence or lack of content, interactional feedback can also relay information about the relationship itself (Watzlawick et al., 1967). A supervisee who never discloses any errors to the supervisor, might influence the supervisor to believe that the supervisee does not feel comfortable being vulnerable within that supervisory relationship. In summary, the interactional perspective takes into account

a continuous exchange of feedback that is influenced by the meaning-making processes of both the supervisor and supervisee.

Two main types of feedback are formative and summative (Ladany & Bradley, 2010). Formative feedback is constantly present as it is offered in each supervision meeting. The intent of the feedback is to help supervisees understand their progress. Formative feedback may not be experienced as a type of evaluation because it is focused on process rather than outcome (Bernard & Goodyear, 2014). Receiving formative feedback regularly helps to ensure that no surprises occur during the summative evaluations. In other words, the summative evaluations consist of summaries and patterns of prior formative feedback. Summative evaluations are formal, planned, and documented. They occur at set times and the evaluative document is verbally debriefed in the presence of the supervisee (Ladany & Bradley, 2010). The present study was conducted in the context of formative feedback rather than summative.

Research has revealed helpful guidelines for offering supervisees feedback. According to Stoltenberg and Delworth (1987) novice therapists might benefit the most from receiving feedback on their strengths. In other words, if supervisors can recognize strong skill sets that are already in place, and build on them, this may instill confidence and help to alleviate a trainee's anxiety. This places supervisees in a position in which they are more comfortable and ready to receive corrective feedback. Sandwiching the feedback is another strategy. This involves offering positive reinforcement followed by corrective feedback, and then concluded by highlighting another strength or positive (McNeill & Stoltenberg, 2016).

Some recommendations have been highlighted for offering feedback that is specific to videorecording review as well (Gonsalvez et al., 2016). For instance, it is important to keep the feedback focused on key concerns and overall patterns noticed in the supervisee rather than

focusing on solitary events or irrelevant issues. The feedback should recognize both strengths as well as areas for improvement. In offering strengths or praise, it is helpful for supervisors to highlight specific reasons or concrete observations associated with the positive feedback.

Likewise, when highlighting areas for improvement supervisors should ensure their feedback is specific and offers concrete information for how the supervisee can improve. Feedback should be offered in an “interpersonally sensitive manner” (Gonsalvez et al., 2016, p. 12) and should also be congruent with the supervisee’s competency level and attuned to the supervisee’s ability and readiness to receive and process emotional information (Gonsalvez et al., 2016).

Supervision frameworks, methods, and techniques. Broad frameworks for providing clinical supervision include individual supervision, in which a supervisor provides one-on-one supervision to a supervisee; group supervision, in which a supervisor provides supervision to at least two supervisees; and peer supervision, in which peers play a supervisory role to their peers (Campbell, 2006). In addition, there are several methods for how to provide supervision. These include verbal case consultation, live observation (a supervisor observes the supervisee in real time), as well as audio and videorecordings. According to Campbell (2006), case consultation is the most common method of supervision. This involves informal discussions that rely on the supervisee to bring forth descriptions of clinical and case issues. Across and within various methods are a range of supervision techniques including written activities (e.g., review of case notes), rehearsal, role-plays, and using checklists to monitor micro-skill development. A few specific examples of techniques within the method of watching videorecordings includes the “give-me-5” and “I-spy” techniques (Gonsalvez, Brockman, & Hill, 2016). The first involves a focus on the bigger picture of key issues or concerning patterns in the video. It is process-focused and helpful for identifying general strengths and weaknesses. The second “I-spy”

technique involves focusing on one micro-skill that was previously identified for improvement. For instance, if improving the skill of open-ended questions is identified, then the supervisee aims to videorecord a counselling session in which this skill is practiced. This allows the supervisor to provide targeted feedback on the development of the microskill.

Another supervision technique is Interpersonal Process Recall (IPR) originally developed by Kagan (1980). This particular approach to videorecording review involves the supervisor and supervisee watching a videorecording of a counselling session, and spontaneously pausing the video as significant events or reactions occur. The goal of IPR is to help raise the supervisee's awareness of how interpersonal dynamics occur between the supervisee and client, and to reflect upon and process such matters. According to the originator Kagan (1980), IPR helps to counteract the supervisee's tendency to engage in unconscious or habitual forms of impression management. It promotes more transparency in communication and may increase the chances of the supervisee being more genuine and forthcoming with respect to their thoughts, feelings, and experiences. The supervisor aims to expand the counsellor's awareness beyond the level of insight obtained from the counselling session. Examples of IPR questions might be, "How do you think the client is feeling about you in this moment?" or "What were you wishing you could do or say in those moments?"

Supervision models and the integrative developmental model (IDM). There are many different categories of supervision models including psychotherapy-based models, person-centred models, social role models, and developmental models (Bernard & Goodyear, 2014). Within these categories of supervision models, the most widely researched and accepted supervision model is the Integrative Developmental Model (IDM) (Stoltenberg & McNeill, 2010), which helps provide a theoretical foundation for the present study. For instance, prior

research has recommended that further exploration and understanding of disclosures and nondisclosures be done within the context of specific supervision models (Ladany et al., 1996). A key principle of the IDM (McNeill & Stoltenberg, 2016) is that it offers a broad perspective for understanding the developmental level of supervisees. The IDM posits that there are three *categories* in which developmental growth occurs for counselling trainees (McNeill & Stoltenberg, 2016). These categories include self/other awareness, motivation, and autonomy. In addition, there are three developmental *levels* of growth that counselling trainees experience. Level one trainees are typically those with less than one year of practicum experience. They are very self-conscious and anxious, and they have a high degree of *self-focus* rather than *client-focus*. Trainees at this level are very motivated because they have many new skills to acquire. They are also dependent on their supervisor's guidance, support, and encouragement. Level two trainees are more experienced, and tend to have a better balance between awareness of self and other. Their motivation levels oscillate because they are sometimes quite confident but at other times unsure of themselves. Thus, they are less dependent on their supervisor, but still in need of guidance. Finally, level three trainees have a new experience of self-awareness. Their self-focus becomes directed toward therapeutic processes as opposed to self-consciousness. Motivation levels stabilize and they become more autonomous from their supervisor as they have developed further confidence and competency (Stoltenberg & McNeill, 2010).

My sample contains level one supervisees, and thus, based on the work of McNeill and Stoltenberg (2016), I provide a more detailed overview of these supervisees' characteristics and development. Some of these supervisees may have already had counselling related experience that is often limited to one particular orientation (e.g., client-centered versus cognitive-behavioural), or to specific formats of counselling (e.g., psycho-educational groups versus

individual) (McNeill & Stoltenberg, 2016). These supervisees might have extensive experience in assessment yet little experience in counselling. A key marker for level one supervisees is that they lack certain competencies and experiences in some aspect of their particular training program for which they are enrolled. Within the developmental category of self-other awareness, key issues related to development are often based on their personal evaluation of performance, and on their ability and loyalty to particular counselling styles or strategies. Central skills for development include the ability to reflect in the moment on actions taken with clients, and on how to apply their knowledge base. Supervisees also need to develop the skill of reflecting on their work to identify areas of improvement. Level one supervisees experience high levels of anxiety, preoccupation with self, confusion, and intense worry around their performance. This intense self-focus can negatively impact their ability to be fully present with their clients and to perform well as a counsellor. Within the self-other awareness category, McNeill and Stoltenberg (2016) discuss unique cognitive and affective characteristics of level one supervisees. A cognitive feature includes being confused about not knowing what to do with clients and feeling uncertainty, both of which are related to having a beginner's level of knowledge and training. Supervisees continuously need to recall and think about everything they are learning (i.e., theory, procedural knowledge, and skills). It can be challenging and confusing trying to balance hearing the client's story, making sense of the client's story in the moment, and reflecting on what to do in those moments. Feeling confused is also exacerbated by apprehension around being evaluated or receiving corrective feedback (McNeill & Stoltenberg, 2016). Supervisees also experience affective responses to knowing they have a beginner's knowledge level. They experience fear, inadequacy, and a range of "negative emotional experiences" (McNeill & Stoltenberg, 2016, p. 18) around being evaluated and not meeting objective standards. They might experience

criticism of their work as “criticism of them” (McNeill & Stoltenberg, 2016, p. 60). The emotional boundaries of level one supervisees may also be permeable such that they unconsciously take on the emotions of their clients without awareness. Due to high evaluation anxiety, supervisees might experience a “trepidation to reveal too much of themselves as individuals beyond the role of a supervisee’s willingness to learn” (McNeill & Stoltenberg, 2016, p. 34). Finally, due to the early development of awareness of others, supervisees may experience discomfort or confusion around processing interpersonal issues related to the supervisory relationship.

Practice over time enables supervisees to become more relaxed, confident in their skills, and familiar with a range of scenarios they might encounter with their clients. Confidence increases slowly over time; however, for some it may develop rapidly or possibly too prematurely. Supervisees gradually begin to shift their focus away from the self toward the client. They also experience a gradual increase in their positive self-evaluations upon noticing their performance becoming more aligned with expected standards (McNeill & Stoltenberg, 2016).

With respect to the development of motivation, level one supervisees are hopeful and motivated to quickly transition from novice to master therapist. They want to rid themselves of the negative emotions associated with being a novice therapist. While intrinsic motivation may be responsible for inducing supervisees to enroll in counselling programs, extrinsic motivation becomes more central with the need to meet evaluative criteria of the program. Supervisees become sensitive to “rewards or punishment” (McNeill & Stoltenberg, 2016, p. 20) from supervisors and clients. As time passes, supervisees’ original intrinsic motivations become prominent again and as supervisees begin to approach level two they are less concerned with learning new counselling strategies and settle into and appreciate drawing on their current skill

sets. Autonomy is the third category of development for level one supervisees. In this category, supervisees have high dependence on their supervisor due to being novice. They lean on their supervisor to provide them with direction and structure in supervision, and in their counselling work.

Another aspect of the IDM that makes it an appropriate theoretical foundation for the present study is its acknowledgment that supervisees naturally engage in impression management. The majority of other supervision models make assumptions and hold expectations that supervisees naturally and honestly share their inner experiences about their supervision, client work, and personal processes (Bordin, 1983). Research has demonstrated, however, that the assumption of supervisees naturally and openly disclosing information, is not correct (Ladany et al., 1996; Yourman & Farber, 1996). Due to unequal power dynamics in the supervisory relationship, supervisees are in a vulnerable position. Their present and future career success is dependent on evaluation. The IDM acknowledges that supervisees may be motivated to manage their outer appearances in hopes of receiving positive evaluations. Thus, the feedback and evaluations that supervisors offer is only helpful to the extent it is based on both objective performance (e.g., videorecording review) as well as supervisees' subjective cognitive and affective experiences (Stoltenberg & Delworth, 1987). The IDM model (Stoltenberg & McNeill, 2010) stresses the importance of gathering objective data related to the supervisee's counselling skills. The model states that feedback and evaluations from supervisors are weak if supervision does not incorporate regular and direct observation of the supervisee's work, for example, by reviewing videorecordings or conducting live supervision. In other words, when supervision consists mainly of the supervisee's self-reports and progress notes, the supervisee is not receiving the most helpful feedback or evaluation. According to McNeill and Stoltenberg (2016)

“supervisors who rely solely on trainee perceptions and their memories will be supervising in the dark” (p. 62). Another benefit of building structure into supervision (e.g., videorecording review) is that it can help alleviate supervisees’ anxiety.

The IDM assesses supervisees across eight domains (McNeill & Stoltenberg, 2016). Their competence in *intervention skills* involves assessing their confidence and proficiency in carrying out interventions with clients. *Assessment techniques* include their confidence and skill levels in working with various types of assessment (e.g., vocational, psycho-educational, mental health, etc.). *Interpersonal assessment* encompasses the supervisees’ ability to actively become aware of and work with their intellectual and emotional reactions to clients, and to learn more about the interpersonal nature of their clients. *Client conceptualization* examines diagnosis ability, and formulating a holistic picture of clients, their personality, mental health history, major life events, and so forth. *Individual differences* include the ability to understand the unique individual characteristics that comprise the client (e.g., socioeconomic status, ethnicity, gender, age, and disabilities). *Theoretical orientation* encompasses the ability to understand theory, apply theoretical orientations, or appropriately integrate them in a chosen, intentional manner. *Treatment plans and goals* involve how supervisees orient themselves to work toward accomplishing the client’s goals. Finally, *professional ethics* consists of how supervisees incorporate morals, ethical principles, and practice guidelines with their own identities.

Definitions and Conceptualizations of Nondisclosures and Disclosures

In this section, I define nondisclosures and disclosures, and review several nondisclosure theories including communication boundary management theory, benefit versus risk theory, politeness theory, and impression management theory.

Definitions of nondisclosures and disclosures. The process of disclosing can be conceptualized along a continuum from disclosures to nondisclosures. Disclosures are “the process through which one makes oneself known to another” (Barrell & Jourard, 1976, p. 185). Supervisee disclosures involve being open about one’s thoughts, feelings, actions, mistakes, and knowledge or lack thereof, so that supervisees can be in a better position to grow, learn and receive the necessary guidance from their supervisors (Farber, 2006). For the supervisee to disclose such information requires honesty and exposure that may contribute to the supervisee feeling vulnerable (Farber, 2006). Another broad definition of supervisee disclosures has been defined as “supervisees revealing information to their supervisors about their past/present experiences and/or their mental processes. This can be related to their clinical practice or can be entirely personal in nature” (Spence et al., 2014, p. 188). The authors highlight the importance of flexible boundaries and state that, “depending upon the unique circumstances surrounding each supervisory relationship, idiosyncratic boundaries are necessary” (Spence et al., 2014, p. 188). Furthermore they explain that “the foundation of appropriate supervisee self-disclosure boundaries pertains to the disclosure’s relevance to the supervisee’s professional duties” (Spence et al., 2014, p. 188).

Nondisclosures have been defined and conceptualized in several ways. Two types of supervisee nondisclosures, intentional and unintentional, have also been identified (Hess et al., 2008). Intentional nondisclosures refer to conscious or explicit intentions to conceal, distort, or even fabricate information in the presence of one’s supervisor. Unintentional nondisclosures are “unsuccessful attempts to communicate the complexity of what is occurring in counselling or supervisees’ uncertainty about what is appropriate to share in supervision” (p. 400). The majority of studies have focused on intentional nondisclosures. Ladany et al. (1996) described three types

of nondisclosures: passive, active, and diversionary. A passive nondisclosure occurs when a supervisee avoids discussing a topic or concern simply because the supervisor does not breach the topic. An active nondisclosure occurs when a supervisor introduces a topic for discussion and the supervisee informs the supervisor of not wanting to discuss the topic. A diversionary nondisclosure occurs when a supervisor introduces a topic, followed by the supervisee changing the topic or diverting the supervisor's attention to another topic.

Disclosures can also be defined and understood based on individual and social assumptions of the self. Prior research on disclosures has been based on assumptions of a "sovereign self" (Baxter & Sahlstein, 2000, p. 292) that includes individualism and autonomy. In Western society, the self is generally conceptualized as a "self-contained" unit whose thoughts and behaviours stem from a pre-formed inner essence (Baxter & Sahlstein, 2000). Thus, past research studies have largely conceptualized self-disclosure as an a priori event comprised of autonomous decision-making. The present study is based on a conceptualization of nondisclosures and disclosures as an "emergent" process influenced by social context. Thus, I conceptualize the self as being more "dialogic" (p. 292) or social in nature. This recognizes that the self is influenced and constructed through social interaction. It positions the self as an evolving and malleable "social product" (p. 293). Based on the recommendations of Baxter and Sahlstein (2000) I have decided to use the terms "disclosures" and "nondisclosures" to de-emphasize the individualistic focus on self, and to foster social conceptions of self.

The implications of such a definition of self for the present study is that nondisclosures must be studied as a process that unfolds and becomes socially negotiated by interactants within a particular context. Baxter and Sahlstein (2000) have described instances of disclosures as links that are part of a "conversational chain" (p. 294). Likewise, Jourard (1971) conceptualized

disclosure as a reciprocal and interactive process that takes place between two people.

Individuals disclose information about their selves within a social context, and are exposed to learning further personal insights from others. Jourard conceded that disclosure of personal information activates thoughts, feelings, memories and further self-knowledge for the discloser. Once a discloser shares information, the receiver's reactions, nonverbal behaviours, impressions, and responses all impart further information back to the discloser. Understanding nondisclosures in the context of social interaction is important as what is not disclosed in supervision depends on many contextual factors, for example, perceived risks and benefits of disclosing (Yourman & Farber, 1996).

Theory on disclosures and nondisclosures. The following section discusses theories behind the process of nondisclosures and disclosures, and the factors that might influence one to disclose or withhold information.

Boundaries and the dialectical nature of disclosures. Inherent within the topic of disclosures is a person's privacy, personal boundaries, and dialectic tensions (Altman, 1975; Rosenfeld, 2000). By choosing how much of one's self to keep private from others, one is actively maintaining control over one's boundaries and interactions with others (Derlega & Chaikin, 1977). This involves actively monitoring and regulating others' access to the gateway of one's self (Altman, 1975). Maintaining boundaries around disclosures, and making decisions on whether or not to disclose, requires balancing "dialectical tensions" (Rosenfeld, 2000). A common dialectical tension is the need for expression versus privacy. The yearning to be open, revealing, and intimate with others is contrasted by the simultaneous need for boundaries and distance. Another dialectical tension is the need to feel integrated and connected to others yet separate and independent. To survive in society requires dependence on others. At the same time,

Western society fosters individualistic values and promotes individuals to function autonomously. The study of nondisclosures cannot be fully understood without acknowledgment and discussion of its “unified opposite” (Baxter & Sahlstein, 2000), disclosures. Thus, both terms, nondisclosures and disclosures, are integrated and discussed within the current study.

The communication boundary management (CBM) theory (Petronio, 2000) describes how people decide to balance their dialectical tensions of disclosures and nondisclosures in relationships. This theory originated out of Petronio’s work on disclosures within marriage. Within this theory, a boundary refers to the border that keeps one’s personal information private from the public domain of the other. CBM proposes that people manage their disclosures and nondisclosures of private information based on “boundary structures” and a “rule-based management system” (Petronio, 2000, p. 38). Four characteristics of boundary structures include ownership, control, permeability, and levels (Petronio, 2000). People are viewed as owning and having a basic right to their own private information. As a result they expect to control that information. Moreover, disclosing private information exposes people and increases their sense of vulnerability. Boundaries are further defined along a continuum of permeability versus impermeability. In situations in which we have weak or nonexistent bonds with someone, our boundaries may be quite impermeable. However, relationships that are comprised of familial, friendship, or professional bonds call for a different regulation of our boundaries. For instance, some information may be perceived initially as being owned by a person, and therefore perceived to be private and confidential. However, certain relationships and their contexts carry expectations for when that information should become the joint responsibility of the dyad and thus be *co-owned* by both parties involved (Petronio, 2000). In the case of clinical supervision models, it is an expectation that supervisees disclose relevant aspects of their experiences

pertaining to clients, themselves, and their supervisors, *to* their supervisors. It is expected that this information should not remain privy to the supervisee, but rather that it be co-owned by both the supervisee and supervisor. As such, this requires a constant flux for supervisees to manage the permeability of their informational and experiential boundaries.

There are further rules for how people might manage their boundaries related to private information. These include (a) formation of boundary rules, (b) use of boundary rules, (c) coordination of boundary rules, and (d) turbulence of boundary rules (Petronio, 2000). Boundary rules exist as a gateway of information concealed and revealed. The creation of these boundary rules is based on a person's cultural norms, individual characteristics, and self-esteem. When individuals feel threatened for example, they might implement protective strategies, part of which might involve tightening their boundaries. The use of boundary rules is further determined by choices of: whether to disclose, who the recipient is, *how* to disclose (e.g., subtly or directly), depth and breadth of disclosures, and lastly, the timing and situational context of the message. Boundary rules also carry an etiquette of how to coordinate information with others. To some extent the use of boundary rules becomes automated and appears as ritualized or habitual behaviours. For instance, people can routinely make generalized statements throughout their lives such as, "I'm not comfortable sharing that kind of information." Boundary rules however, must be continually coordinated and negotiated with others based on the situational context, for example, clinical supervision. Finally, boundary turbulence is another factor influencing the permeability of our boundaries. Boundary turbulence can occur when the recipient of a disclosure is reluctant, boundaries are disrespected, a person has difficulty transitioning into new relationships that require different boundaries (e.g., mutually negotiated), and situational stressors arise (Petronio, 2000).

Benefits versus risks theory. Another dialectical perspective for understanding disclosures and nondisclosures involves the consideration of the benefits and risks to the discloser. The decision to disclose or withhold is a complicated process (Rosenfeld, 2000) that is highly dependent on situational contexts. The process is further complicated by weighing the pros and cons of disclosure in any given moment (Derlega & Grzelak, 1979). On the one hand there are many benefits to disclosing information to another person. These include catharsis, clarification of ideas, and personal validation. Revealing information to another person fosters the maintenance of that relationship because it allows the discloser to be known to the receiver. Other benefits for disclosing are related to influencing the relationship in particular ways. For instance, a person might choose to disclose in hopes that the receiver will reciprocate with their own disclosures. A person may also disclose for reasons referred to as impression management, a type of self-promotion or self-marketing (Wintrob, 1987). They may also disclose to manipulate or control another person (Derlega & Grzelak, 1979).

Rosenfeld (2000) identifies several risks inherent in the process of disclosure. First and foremost, the supervisee-supervisor relationship automatically places the supervisee in a vulnerable position. Disclosing one's self brings about many specific vulnerabilities. A supervisee may fear being rejected and experiencing accompanying painful emotions. The experience of loss is another type of risk during disclosures. Supervisees can lose control of managing their own impression after they disclose something. Receivers become entitled to create their own meanings, positive or negative, about what was disclosed. Secondly, a supervisee ultimately loses control of what the receiver decides to *do* with that information, for example, sharing it with others. Finally, disclosures may be perceived as risky if they place a

burden on the receiver. For instance, a receiver may feel discomfort, responsibility, emotional pain, embarrassment, disappointment in the discloser, and so forth (Rosenfeld, 2000).

There are many other contextual factors involved in the choice to disclose. In Western culture it is not considered appropriate to be self-revealing too quickly as it is perceived as an unusual behaviour or perhaps a weakness (Rosenfeld, 2000). Another factor is the likelihood of reciprocal disclosures. When both parties share in revelations it fosters further safety of disclosures. In some contexts however, reciprocity of nondisclosures is not as expected. Clients in the psychotherapy room, and patients in physician's office do not often expect their helping professionals to in turn disclose their own issues. The case of the supervisee-supervisor relationship is more complicated because the supervisee's dialectical needs of disclosing for the purposes of learning and growth are cautioned with the need to protect the supervisee's impression. Supervisees' professional reputations and accompanying evaluations are at stake. However, in relationships and communication in general, the perceived risks of disclosure are minimized when the discloser perceives the receiver as safe, amicable, trustworthy, and open (Petronia, Martin, & Littlefield, 1984).

Politeness theory. According to Brown and Levinson's (1987) politeness theory, individuals in social interaction attempt to save face or protect their public face image. During social interactions people are always at risk of experiencing face-threatening acts (FTAs) in which their public face image becomes threatened. Thus, in the context of nondisclosures, supervisees may refrain from sharing information that could potentially humiliate them. Individuals strive to have both positive face and negative face needs fulfilled. Fulfilling a positive face need means being liked and approved by others, whereas satisfying a negative face need refers to being free from the control or impositions of others. Applied to clinical

supervision, supervisees may prefer to communicate and act in ways consistent with a positive face. Likewise, supervisees may try to satisfy the needs of their negative face by not disclosing personal issues that could be interfering with their therapeutic work. For instance, if a supervisor instructed a supervisee to seek therapy, this may be interpreted as a negative face threat in which the supervisee experiences a loss of control of personal action. According to Goffman (1959), an inherent purpose of communication is to exercise one's freedom of impression management. Experiencing a face-threatening act interferes with this process and encourages one to engage in further impression management. Thus, politeness theory offers another way of understanding how supervisees may be influenced to reveal or withhold information in supervision.

Impression management theory. A similar theory known as impression management theory was developed by Goffman (1959). Also referred to as dramaturgy, he described individuals as actors who perform in their lives on both a front stage and back stage. When actors are on the front stage they perform their socialized roles based on what is expected of them. How a supervisee acts in clinical supervision is an example of front stage. The supervisee acts in accordance with the expectations of that professional role. The back stage allows for an actor to be one's authentic self, although it is quite possible that time spent on the back stage might prepare one for how to act on the front stage. For instance, a supervisee watching one's video in privacy would be a back stage act that could be used to prepare for "performance" in supervision focused on videorecording review.

Role of culture and disclosures. Understanding the role that culture plays in disclosures and nondisclosures is important. While the culture of clinical supervision aims to be egalitarian in nature (Gottlieb, Robinson, & Younggren, 2007), supervisees do bring their own culture into supervision. For instance, in some cultures deference to those in positions of power may be

valued. Thus, supervisors need to be extra cautious about their own use of power particularly in influencing supervisees to share something that may not be comfortable or relevant. There are few studies that explore the relationship of culture on disclosures and nondisclosures in the supervision context (Farber, 2006). In a study conducted by Yourman and Farber (1996), the researchers found that demographic factors including supervisees' minority status and gender were not significantly associated with nondisclosure behaviours. Another study found that both white and non-white supervisees reported their supervisors as lacking in awareness on multicultural issues (Burkard et al., 2006). Non-white supervisees experienced more instances of their supervisors being culturally insensitive and as a result this negatively impacted supervisees' desire to disclose issues to their supervisors (Burkard et al., 2006).

The concept of nondisclosures and the aim to disclose, is heavily rooted in Western values (Farber, 2006). For instance, Western communication relies heavily upon verbal expression and the formal rules for how words and sentences are strung together. However, for non-Westerners, such as persons of Latino or Asian descent, there may be more reliance and preference to use non-verbal communication such as silence or expression through eye contact. Also, for those supervisees who speak English as a second language, it may potentially create more challenges for attempting to formulate one's thoughts in order to disclose in supervision. Thus, supervisors may need to pay attention to their supervisee's language abilities and preferences for how supervisees prefer to communicate, both verbally and nonverbally. Furthermore, those from non-Western cultures may hold a different perspective of the "self" that is less individualistic and instead more interdependent or collective in nature. They may view personal disclosures as negatively impacting or inappropriately exposing the private realm of

their family, friends, and possibly their clients. They might value harmony within their environments over risking potential confrontation and conflicts (Farber, 2006).

Nondisclosures in the Supervisory Triad

Although nondisclosures can be conceptualized based on specific definitions and theories, they can also be understood based on how they occur within the supervisory triad. The supervisory triad is a term that refers to a client, supervisee (counsellor) and supervisor. The following section provides an empirical literature review of *nondisclosures* in the context of both the client-supervisee relationship, as well as the supervisee-supervisor relationship. The client, supervisee, and supervisor form a dynamic supervisory triad in which bi-directional parallel processes occur (Bernard & Goodyear, 2014). For instance, processes or interactions in the client-supervisee relationship may be mirrored or played out in the supervisee-supervisor relationship. Likewise, what happens in the supervisee-supervisor relationship can be enacted into the supervisee-client relationship during counselling sessions. The supervisee plays a dual role as counsellor and supervisee, and acts as a “pivot point” (Bernard & Goodyear, 2014, p. 65) between each relationship. Given the nature of how these relationships influence each other, I discuss nondisclosures in the context of both the client-supervisee relationship and the supervisee-supervisor relationship.

Client nondisclosures to supervisees (counsellors). There are several types of information that clients have difficulty disclosing to their counsellors. In Hall and Farber’s (2001) study, 147 clients completed the Disclosure-to-Therapist Inventory which measures sensitive topics discussed in therapy. Clients had the most difficulty discussing topics that were related to sexuality, such as sexual feelings toward their counsellor, interest in pornographic material, and masturbation. They rarely discussed their bodily functions, such as bathroom

routines, body parts most appreciated, nervous habits, menstrual issues, and the meaning of losing their virginity. Clients revealed on average between 79% to 82% of their “true self” to the counsellor. This study suggests that clients share a considerable amount of information with their counsellors but not everything.

Several factors may influence clients’ decisions to withhold information from their counsellors. First, the quality of the working alliance between clients and counsellors is predictive of whether or not clients choose to disclose information (Horvath & Bedi, 2002). Clients often wait for certainty that they can trust their counsellor before they disclose sensitive information. They often wait for the counsellor to prompt for disclosures, or for counsellors to role model their own disclosures. The nature of counsellors’ responses to clients’ previous disclosures also plays a role. For instance, if clients perceive their counsellors as affirming and encouraging, then clients are likely to feel safe in sharing further information. On the contrary when clients feel humiliated, shamed, or judged, they are unlikely to share further information. Thus, the extent of clients’ disclosures depends on interactions between counsellors and clients (Farber, 2006).

Shame may also be another contributing factor to clients’ nondisclosures. Farber (2006) found that shame-prone clients were unlikely to discuss negative feelings about their self, shameful events, personal failure, and unfavourable personality characteristics. Other influencing factors include clients’ willingness and ease with disclosing information. In some cultures, attending counselling and disclosing certain types of information is considered taboo (Farber, 2006). Other factors such as having secure attachments and strong social support may influence clients to disclose more information (Farber, 2006). Individuals with prior experience in

counselling may be sensitized and have an easier time with disclosure. Finally, having a strong personal identity may be another contributing factor (Farber, 2006).

Supervisee nondisclosures to clients. Although clients disclose a fair amount of information to their counsellors, the same does not hold true for what counsellors disclose to clients. Counsellors must maintain professional boundaries, and they are trained to disclose only what is relevant and helpful to clients (Forrest, 2010). In a study of 184 doctoral level psychologists who completed an adaptation of the *Counselor Disclosure Survey*, the issues psychologists least frequently disclosed were their sexual and personal issues (Edwards & Murdock, 1994). On average, the frequency of the psychologists' disclosures was reported as "sometimes." When they did disclose to their clients it was to enhance clients' perceptions of similarity to their psychologist and to model disclosures for clients (Edwards & Murdock, 1994). A second study of 91 counsellors completed a survey that measured disclosures. The most frequent disclosures were related to counsellors' training and counselling styles, while the most infrequent disclosures were beliefs (i.e., religion) and personal fantasies. The counsellors' own sexual experiences were infrequently disclosed as well (Robitschek & McCarthy, 1991). Overall, counsellors disclose to a moderate degree (Farber, 2006). A recent study examined various attributes of novice counsellors' disclosures across 52 dyads, and the impact of those disclosures on the working alliance and outcomes of therapy (Levitt et al., 2016). Results indicated that disclosures of positive content regarding the therapist were linked to decreases in clients' relational issues. In contrast, disclosures with negative therapist content were associated with an increase in clients' relational issues. Disclosures of neutral content (therapists' in-the-moment experiences) and similarities to the client were linked to both a decrease in clients' clinical symptoms and relational issues. Disclosures of "asides" (commenting on the therapist's general

beliefs such as thoughts about a television show) were also linked to less clinical symptoms, perhaps because it allowed clients to get to know the person behind the therapist. Overall, it was deemed beneficial for therapists to disclose stories that reflect similarity and that depict a positive picture (Levitt et al., 2016).

Supervisor nondisclosures to supervisees. Just as supervisees must decide what to disclose to their clients, so too must supervisors choose what to share with their supervisees. In a study of 90 supervisors' nondisclosures, 98% of those supervisors chose not to disclose information to their supervisees. The most common type of nondisclosure reported by 74% of supervisors was negative or corrective feedback on supervisees' clinical skills (Ladany & Melincoff, 1999). For example, supervisors struggled to confront supervisees on their personal agendas during counselling. According the IDM model, supervisors may avoid giving "negative feedback" (McNeill & Stoltenberg, 2016, p. 38) and provide more general feedback, due to their own anxiety around evaluating their supervisees. Supervisors' reasons behind their nondisclosures included wanting supervisees to naturally discover their errors when they were developmentally ready (Ladany & Melincoff, 1999). Some supervisors discussed clinical concerns in a roundabout way or believed their concerns were not that important. The second most common type of nondisclosure reported by 67% of supervisors related to issues in their own personal life. The third most common nondisclosure shared by 56% of supervisors was concerns about how supervisees acted within supervision, i.e., appeasing the supervisor or being too deferential. The analysis did not reveal any patterns as to why this information was not disclosed. Many other types of nondisclosures were present but less endorsed by supervisors such as concern about supervisees' personal issues, supervisor performance, politics in practicum environments, supervisors' own clinical issues, appearance of the trainee, positive reactions to

supervisee, and sexual attraction (Ladany & Melincoff, 1999). In another study that examined 15 supervisors' experiences of giving feedback versus no feedback to their supervisees (Hoffman et al., 2005), supervisors avoided giving feedback on personal issues related to their supervisee's personality or professional issues such as their communication skills with other staff. Supervisors worried that the feedback might not be perceived well or would harm the supervisee more than it would help them.

Supervisee nondisclosures to supervisors. A high percentage of supervisees also decide to keep certain matters private from their supervisors. Supervisee nondisclosures are “normative and unavoidable in supervision” (Farber, 2006, p. 181). In fact, results from a study of 108 counselling supervisees who were master's and doctoral students indicated that approximately 97% of those supervisees reported nondisclosures in their supervision sessions (Ladany et al., 1996). A study of 204 counselling and clinical supervisees registered primarily in counselling and clinical graduate programs revealed that 84.3% of supervisees admitted to nondisclosures within their last supervision session (Mehr et al., 2010). Thus, the frequency of supervisee nondisclosures is not just high across several supervision sessions, but it is also high within a single supervision session.

The most frequent types of supervisee nondisclosures are: negative reactions to supervisors and supervision, poor quality of supervision, personal issues, clinical mistakes, countertransference, evaluation concerns, worries about supervisors' perceptions of the supervisee, and differences in theoretical orientation (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Pisani, 2005; Stromme, 2014; Yourman & Farber, 1996). Nondisclosures reported less frequently include positive reactions, thoughts, or feelings toward supervisors (Ladany et al., 1996; Mehr et al., 2010; Stromme, 2014). Although the content or types of

supervisee nondisclosures have been well researched, a weakness of prior studies is that little is known about the supervision modality in which those nondisclosures occurred. For instance, few studies (with the exception of Stromme, 2014) mention whether the aforementioned nondisclosures occurred in a supervision session that focused on case consultation, audiorecording, or videorecording review, or both. The present study explored nondisclosures in the context of a single, individual supervision session with videorecording review. This enabled an understanding of supervisee experiences of nondisclosures in the context of supervisees having their clinical work exposed rather than hidden.

In addition to focusing on the content of nondisclosures, past studies have also investigated *why* supervisees conceal information. Common reasons exist around why supervisees fail to disclose information to their supervisors. First, supervisees perceive their nondisclosures as being unimportant or too private (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Spence et al., 2014; Sweeney & Creaner, 2014). For example, in a sample of 10 clinical psychologists receiving supervision, nondisclosures occurred when they believed their experiences were irrelevant to their client work or general performance (Spence et al., 2014). These particular nondisclosures also reflected the importance of setting a personal boundary in supervision (Spence et al., 2014). Other cited reasons for nondisclosures include not being clear on how to make the best use of supervision time, and learning that previous nondisclosures received undesirable reactions from their supervisors in the past (Sweeney & Creaner, 2014). Feeling deferent, needing to manage one's impression, focusing on the negative consequences of sharing, wanting to avoid conflict and tension, and thinking about evaluation concerns are other common reasons reported (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Spence et al., 2014; Stromme, 2014; Sweeney & Creaner, 2014). It is understandable that impression

management and evaluation concerns would influence supervisees' nondisclosures. An example related to impression management is demonstrated in a sample of clinical psychologist supervisees, ranging from novice to seasoned (Spence et al., 2014). They reported that the culture of the scientist-practitioner model dissuaded them from disclosing weaknesses and struggles. The culture of this scientist-practitioner model encouraged them to portray an impression that they were experts rather than vulnerable persons (Spence et al., 2014). Another reason behind nondisclosures is when supervisees believe they can handle certain issues or concerns independently. In particular, more experienced psychologists demonstrate that they can introject past supervisors so they can actively supervise or monitor their own issues without consulting their current supervisors (Spence et al., 2014).

Some of the aforementioned reasons behind nondisclosures underscore supervisees' awareness of the gatekeeping aspect of supervision. For instance, with respect to evaluation concerns, supervisees may be negatively impacted by supervisor evaluations if supervisees choose to disclose highly sensitive information, especially information that may reveal their weaknesses or vulnerabilities (Farber, 2006). Supervisees may be aware of the long-term consequences of their disclosures and corresponding supervisor evaluations. Good references are needed by supervisees to be admitted to doctoral programs, practica, and internships. Also, after supervision is terminated, the supervisor may remain a professional or colleague in the supervisee's field, and the supervisor may be called upon for future references. Supervisees are also likely to see their supervisor again and possibly be colleagues in the future. Alternatively, they may work within a small network of counsellors that includes their supervisor. Thus, in this context, supervisees may feel vulnerable, cautious, or worried about what they disclose and how it might impact them in the future (Farber, 2006).

Other reasons influencing supervisee nondisclosures include experiencing uncomfortable feelings such as embarrassment, shame, vulnerability, self-doubt, and tension (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Stromme, 2014). It is perhaps not surprising that supervisees would report shame and vulnerability as a reason behind their nondisclosures. Yourman (2003) noted that supervisees may naturally experience shame in the context of the supervisory relationship, and this in turn may shape supervisees' willingness to disclose. Shame involves feelings of inadequacy (Hahn, 2001), self-consciousness that one is being judged by others (Gilbert & Proctor, 2006) and fear of social rejection (Van Vliet, 2008). It is worth noting a few reasons why supervisees might experience shame in supervision. First, supervisees are expected to show their counselling work to their supervisors and thus supervisees remain vulnerable to critical feedback, awareness of errors, and so forth. When supervisees' work does not meet either the supervisors' or supervisees' expectations, then shame can result. In addition, given the gap between supervisees as novices and supervisors as experts, supervisees are constantly aware of their lagging competency levels (Hahn, 2001). Supervisees need to bring their "whole self," including their empathy and interpersonal skills into the counselling and supervision room. According to Farber (2006) "acknowledgment that one is struggling with the work all too often feels tantamount to admitting that one is struggling to be the human being one wants to be and should be" (p. 182).

A missing link in understanding the reasons for supervisee nondisclosures is that studies have relied exclusively on supervisees' retrospective recall of these reasons. This may dramatically decrease the accuracy of supervisees remembering *exactly why* they failed to share information with their supervisor. The likelihood of supervisees remembering exactly what they were thinking or feeling in a particular moment that occurred many weeks or months prior is

poor (Hess et al., 2008; Larsen, et al., 2008; Kagan, 1980; Sweeney & Creaner, 2014). For example, several studies have examined supervisees' retrospective reports of nondisclosures from within their current period of supervision, which might have involved recalling information over the past 12 months (e.g., Ladany et al., 1996; Pisani, 2005; Stromme, 2014; Webb & Wheeler, 1998; Yourman & Farber, 1996). Two other studies asked supervisees to recall only one significant nondisclosure that stood out from their current supervision stint (e.g., Hess et al., 2008; Sweeney & Creaner, 2014). Another study had supervisees report their nondisclosures based on their most recent, single supervision session (Mehr et al., 2010). More recently, a study was conducted that explored supervisees' experiences of disclosure as they were experienced across the entirety of one's career (Spence et al., 2014). Finally, another trend involves examining the likelihood of potential nondisclosures as they *might* occur in the future (Mehr et al., 2015; Pakdaman, Shafranske, & Falender, 2015). There is currently a need for more studies that minimize the impact of retrospective recall. The present study addresses this weakness by utilizing an assisted recall technique, IPR, to help supervisees more easily access and accurately recall their experiences of nondisclosures as they occur in the moment.

Experiences of a weak supervisory alliance are yet another commonly reported reason behind supervisee nondisclosures (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010). In other words, supervisees refrain from disclosing due to their negative cognitions and emotions regarding their supervisory relationship (Ladany et al., 1996). Webb & Wheeler's (1998) study examined counsellors' ability to disclose "sensitive issues in supervision" (p. 1). The sample consisted of 96 counsellors, half in psychodynamic training at the master's level, and half of whom were already practicing psychodynamic therapy. Based on completion of a *Supervisory Working Alliance Inventory*, the results revealed a positive correlation between supervisees'

perceived level of rapport with their supervisors and the ability to disclose sensitive issues in supervision (Webb & Wheeler, 1998). Other studies have found that both positive supervisory relationships (Mehr et al., 2015) and supervisory relationships that were “good enough” (Spence et al., 2014, p. 189) were associated with more self-disclosure. Similarly, a psychodynamic based study examined the impact of the supervisory relationship on doctoral level supervisees’ imagined disclosures of counter-transference. Supervisees who experienced strong supervisory alliances reported being more likely to disclose their counter-transference experiences to their supervisors (Pakdaman et al., 2015). Furthermore, all components of the supervisory alliance (bond, tasks, and goal) predicted comfort in self-disclosing, with a strong bond or rapport being the most predictive of feeling comfortable in self-disclosing (Pakdaman et al., 2015).

Supervisees reportedly experience more nondisclosures when they are less satisfied with supervision as measured by a 66-item *Supervisory Questionnaire* (Yourman & Farber, 1996) and *Supervisory Satisfaction Questionnaire* (Ladany et al., 1996). Given the role that the supervisory relationship plays in a supervisee’s reported reasons for nondisclosures, it makes sense to study supervisee nondisclosures in their original interactive context of supervision. Indeed, it has been suggested that future research seek to understand the specific contexts of nondisclosures, such as the social processes and interactions influencing those nondisclosures (Knox, 2015; Madani, 2008; Rosenfeld, 2000; Yourman & Farber, 1996). Examining a range of factors and their influence on nondisclosures has also been recommended (Mehr et al., 2010; Sweeney & Creaner, 2014).

The negative effects of supervisee nondisclosures have also been reported. In a study of 14 pre-doctoral interns, several negative effects were reported such as decreased confidence, competence, and quality of supervisee relationships with their clients and supervisors (Hess et al.,

2008). The interns also reported increased anxiety, embarrassment, disappointment, guilt over withholding information, and insecurity about counselling as a career choice (Hess et al., 2008).

Moskowitz and Rupert's (1983) examination of 158 doctoral students registered in clinical psychology programs revealed that when students failed to disclose a supervisory conflict, 33% of those supervisees admitted to being selective in what they reported to their supervisor.

Twenty-five percent of supervisees pretended to comply with their supervisor but acted on their own accord. Thus, the negative effect of supervisees concealing and distorting such information presents legal and ethical risks for supervisors who may be unaware of their supervisees'

possible malpractice or poor client treatment. Clearly, there are many negative drawbacks regarding supervisee nondisclosures. One might assume that on the other side of the spectrum, supervisee nondisclosures would always be beneficial. This is not necessarily the case however.

A recent longitudinal study indicated that disclosures of negative internal reactions to supervisors do not always lead to relationship improvements or more positive incomes (Stromme, 2014).

This study also revealed an experience in which a supervisee chose not to disclose negative reactions to her supervisor, and yet more positive outcomes in their relationship were experienced over time (Stromme, 2014).

Finally, another possible negative effect of supervisee nondisclosures is that they have the potential to negatively impact supervisory alliances; and when supervisory alliances are weakened, there may be further negative consequences. For instance, a seminal study by Patton and Kivlighan (1997) revealed strong evidence to support the notion that when the supervisory alliance is weakened, so too is the therapeutic alliance. In their study of 75 counselling trainees they found that weekly fluctuations (across 4 weeks) in the quality of the supervisory alliance predicted similar weekly fluctuations in the therapeutic alliance with clients. These fluctuations

were measured by clients' weekly completion of the *Working Alliance Inventory*, and supervisees' weekly completion of the *Supervisor Working Alliance Inventory* (Patton & Kivlighan, 1997). The researchers concluded that strong supervisory alliances predict strong therapeutic alliances between counsellors and clients, and that weak supervisory alliances negatively impact the therapeutic alliance (Patton & Kivlighan, 1997).

In summary, the literature on supervisee nondisclosures has revealed the frequency, content, rationales, and negative effects of supervisee nondisclosures. A key limitation of prior studies is that supervisee nondisclosures have not been studied within their original context of supervision sessions. Instead, supervisee nondisclosures have been studied as a priori events which arise from the conception of an autonomous self. The current research project helped to address this gap by using IPR to capture the original social context of supervisee nondisclosures, enabling supervisees to access their nondisclosure experiences as they occur in a single supervision session. Thus, I conceptualized and understood supervisees' experiences of nondisclosures as part of an emergent process that arises out of the reciprocal and interactive context of a supervision session. I addressed the gap of unknown supervision modalities by studying supervisee nondisclosures as they occurred within a single, one-on-one supervision session with videorecording review.

Videorecording Review in Supervision

Although supervisee nondisclosures have been reviewed broadly within the context of the supervisory triad, nondisclosures have not been studied within the specific supervisory context of videorecording review. Very little is known about supervisee experiences of *watching* and *reviewing* their videorecordings in general. In Haggerty and Hilensroth's (2011) review of using videorecordings in supervision, the researchers reported being unable to find statistics on the

frequency with which videorecording review was utilized in supervision. They stated that many counselling trainees might not ever have their work directly observed. In one of the few studies that indirectly addressed this topic, Ellis et al. (2002) reported surprising statistics on the frequency with which videorecording was utilized. They reported statistics from their sample of 71 counselling trainees registered in counselling and clinical psychology programs at the doctoral and master's level. At the time of the study, the supervisees were 12.7 months into their supervised practica. Approximately 60% of supervisees had never watched their videorecordings during a supervision session. On average the counselling trainees admitted to only videorecording four counselling sessions. Less than 1% of counselling supervisees, on average, had experienced videorecording review regularly within supervision. For 74.1% of the trainees their supervision consisted primarily of case management. Finally, 29.4% of this sample had never had their counselling sessions videorecorded. There are a few reasons why the frequency of videorecording review might be quite low. According to the IDM model of supervision (Stoltenberg & McNeill, 2010), counselling trainees in their first year of their practica are typically anxious. Video review and the nature of how it exposes the supervisee, or forces disclosure, could exacerbate harmful effects on supervisees, especially if the feedback is delivered in a harsh manner (McNeill & Stoltenberg, 2016). It has also been suggested that supervisors may consciously and unconsciously want to protect their supervisees from the anxiety that accompanies videorecording review (Aveline, 1992).

A small number of research studies have examined counselling trainees' experiences of *watching* their videorecordings (Hill et al., 1994; Madani, 2008; Sobell, Manor, Sobell & Dum, 2008; Vanderwege, 2011). These studies indicate that counselling trainees in *both* master's and doctoral programs struggle with negative emotions about one's self, self-criticism, and negative

appraisals of their work as they watch their videorecordings and listen to audiorecordings of their counselling sessions. In one study, 62 clinical psychology doctoral students in a practicum were instructed to audiorecord, transcribe, and then critique their own counselling sessions (Sobell et al., 2008). Trainees felt this process helped them improve their skills, increase awareness, and take more responsibility for their professional development. The results, however, also indicated that 24.2% of counselling trainees who critiqued their audiorecorded sessions experienced an increase in negative feelings they already had about themselves. Approximately 13% of the counselling trainees experienced negativity due to self-criticism, and 4.8% stated they were too harsh on themselves. While these counselling trainees were doctoral students with 12 months of practicum experience, it is possible that a higher frequency of negative reactions could have been observed if the sample was comprised of master's students or if the counselling trainees reviewed their actual videorecordings. Likewise, reviewing videorecordings of counselling sessions has also been known to affect counsellors' moods and evaluation of their counselling session (Hill et al., 1994). Six counsellors (five of whom were counselling psychology trainees in a doctoral program) had their moods measured immediately before and after their counselling sessions, and again following their immediate review of their videorecording. Results indicated that after watching videorecordings, there was on average, a significant decrease in counsellors' positive mood compared to their mood as measured immediately after their counselling session. Also, counsellors' evaluations of their counselling sessions were more negative after watching their videorecording compared to their evaluation immediately after their counselling session. This suggests that more needs to be learned about the influencing factors behind counselling trainees' moods and appraisals in relation to watching their counselling videorecordings.

Self-consciousness, embarrassment, and anxiety are other experiences associated with watching one's videorecordings. Madani's (2008) study of 20 counselling trainees from graduate level master's and doctoral programs highlighted interesting findings on their experiences of watching videorecordings during their practica and internships. Self-consciousness or embarrassment was found to be an issue while reviewing one's videorecordings in supervision. For example, one trainee experienced "watching videotapes ...and kind of cringing at myself, you know, because you don't always show the best things that you do. You show kind of the things that you struggled with and then having supervisors see that is difficult" (Madani, 2008, p. 84). Similar results were found in another qualitative phenomenological dissertation in which eight trainees were instructed to watch and analyze their videorecordings to identify skills using a software program (Vanderwege, 2011). In this study, the original videorecording along with the supervisee's attached critiques were submitted to their supervisors to receive feedback. Participants admitted feeling self-conscious while watching their videorecordings in supervision. This was found mainly at the start of the semester and then it tapered off. In addition, some participants who expressed uncertainty about their competence also tended to worry about the evaluation aspects of the training program. Anxiety was expressed about their videorecordings and their supervisors' evaluations of those videorecordings.

Examining nondisclosures in the context of supervision focused on videorecording review provides an understanding of what happens during the process of videorecording review that influences supervisees to experience the aforementioned inner struggles. Secondly, it would be valuable to know what influences the supervisees' decisions to reveal or conceal their internal processes with their supervisor.

Summary

Supervisee nondisclosures are an important topic of study, as their presence in supervision can negatively affect both the supervisory working alliance as well as the therapeutic alliance. Existing research has examined the content, rationales, and impact of supervisee nondisclosures; the frequency of nondisclosures; and how those nondisclosures were influenced by other factors. Previous research has also examined the relationship between nondisclosures and an array of other variables including supervisory styles and supervisees' satisfaction with supervision.

A range of research methods have been utilized in the study of supervisee nondisclosures including quantitative methods (Mehr et al., 2015; Pakdaman et al., 2015; Webb & Wheeler, 1998; Yourman & Farber, 1996), mixed methods (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Pisani, 2005), and qualitative methods (Spence et al., 2014; Stromme, 2014; Sweeny & Creaner, 2014). Quantitative studies have measured the relationship between nondisclosures and other variables, using such instruments as the *Supervisory Styles Inventory* (SSI), the *Supervisory Satisfaction Questionnaire* (SSQ) (Ladany et al., 1996; Hess et al., 2008), the *Trainee Anxiety Scale*, and the *Working Alliance Inventory* (Mehr et al., 2010, Mehr et al., 2015). Common quantitative analysis techniques have included multivariate analyses (Ladany et al., 1996; Mehr et al., 2010; Pakdaman et al., 2015), regression analyses (Mehr et al., 2010; Pakdaman et al., 2015; Yourman & Farber, 1996), structural equation modeling (Mehr et al., 2015), factor analysis (Webb & Wheeler, 1998), and basic frequency distributions (Hess et al., 2008; Pisani, 2005; Webb & Wheeler, 1998). Qualitative approaches to understanding nondisclosures have consisted of surveys with "thought-listing techniques" (Ladany et al., 1996, p. 12; Mehr et al., 2010; Pisani, 2005) and retrospective interviews (Hess et al., 2008; Spence et al., 2014; Stromme,

2014; Sweeney & Creaner, 2014). Typical qualitative analyses have involved discovery-oriented approaches (Ladany et al., 1996; Mehr et al., 2010), grounded theory (Pisani, 2005), Consensual Qualitative Research (CQR) (Hess et al., 2008; Sweeney & Creaner, 2014), constructivist grounded theory (Spence et al, 2014) and case analysis (Stromme, 2014).

The majority of supervisee nondisclosure research included samples of doctoral students (Mehr et al., 2015; Pakdaman et al., 2015; Yourman & Farber, 1996) and predoctoral interns (Hess et al., 2008). Other samples combined master's and doctoral students (Ladany et al., 1996; Mehr et al., 2010) as well as master's and diploma students (Webb & Wheeler, 1998). Some authors did not specify the level of graduate training (Sweeney & Creaner, 2014; Spence, et al., 2014; Stromme, 2014). About half the samples consisted of both clinical and counselling students (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010, Mehr et al., 2015; Pakdaman et al., 2015). Only one sample focused exclusively on counselling psychology practitioners who had graduated two years prior to the study (Sweeney & Creaner, 2014). The current study is the first to represent a homogeneous sample of counselling psychology students in their first year of a master's level practicum.

A limitation of prior studies is that the developmental level of supervisees within each sample was either vague or ranged from a first practicum to a doctoral-level internship. Thus from a developmental level, most samples are not homogeneous. Furthermore, the majority of samples are comprised of European-American supervisees, and a few studies do not mention ethnicity of their sample. Another drawback of prior studies was the retrospective nature of the research interviews, which likely reduced memory recall.

A strength of the current study is that it expands the knowledge of nondisclosures within the specific context of supervisee development. The present study contributes to the research and

practice of clinical supervision and counsellor education by providing a more expansive and comprehensive perspective of supervisee nondisclosures in supervision. Both supervisors and supervisees may benefit from an improved awareness of how nondisclosures are experienced by supervisees within the real-life interpersonal context of supervision. Raising such awareness within clinical supervision may be conducive to building stronger supervisory alliances, and thus therapeutic alliances. The insights gained from this study may also be conducive to helping supervisees make the most out of their supervision experiences and professional development. Finally, building such awareness of nondisclosures within supervision may contribute to improved competency levels for supervisees, and improved outcomes for clients.

Method

There are different ways to conceptualize the research process (Crotty, 1998). Similar to Crotty (1998), my process of conceptualization involved identifying a theoretical perspective, which in turn, informed my choice of methodology. My methods were carefully chosen to support the goals of my methodology. Within the following section, I outline my case study methodology, theoretical perspective of symbolic interactionism, and the influential thinkers behind symbolic interactionism. Methods of participant recruitment, data collection, and data analysis are discussed, along with trustworthiness and ethical issues. I conclude by describing my position as a researcher, and how I became interested in this research.

Methodology

Methodology, as I use the term, refers to a chosen research design or strategy that informs selected research methods (Creswell, 2008; Crotty, 1998). This qualitative study employed the research design of a case study, which adopts a holistic and comprehensive perspective of a phenomenon by seeking rich, detailed, and complex understandings of that phenomenon (Merriam, 1998). This type of research design examines situational contexts, meanings, and processes, all of which generate insights that can inform future practice and research. A pioneer in case study research, Stake (1978), explains that case studies are expansive and proliferative rather than reductionist in their nature. Case studies are humanistic in nature, and they are intended to capture idiosyncrasies of people in lived contexts (Stake, 1978).

There are several reasons for utilizing a case study research design (Rowley, 2002) for the current study. A case study is a useful approach when the aim of research is to explore or seek “fresh perspectives” (Eisenhardt, 1989, p. 549) on a phenomenon. The fresh perspective in this study is to examine nondisclosures in their real-life, social context. Case studies are useful

tools for researchers seeking knowledge on the “how” or “why” behind phenomena (Rowley, 2002). In the current study I was interested in how contextual factors inform a supervisee’s nondisclosures. I wanted to understand nondisclosures as a process, and how nondisclosures unfold in their natural setting of supervision. Yin (1994) stated that the case study approach is valuable when there are blurred boundaries between a phenomenon and its context. A case study design is appropriate when the factors being studied cannot be manipulated (Baxter & Jack, 2008) or when the researcher would not be interested in manipulating those factors. In this case, it would have been antithetical to exercise control over factors given that I was interested in the real-life experiences and internal processes of how nondisclosures unfold in their social context.

A “case” is a single unit that is contextually bound (Merriam, 1998), and its existence can be conceptualized as having set parameters or definitive boundaries. The study of nondisclosures in a single supervision session is an example of a contextually bound case. A rich, in-depth understanding of nondisclosures could not be achieved if it were studied outside of its naturally occurring context. Case studies can provide researchers with “knowledge we would not otherwise have access to” (Merriam, 1998, p. 33). Given the complexity of a case study research design, it is often informed by interdisciplinary theoretical perspectives from psychology, sociology, education, anthropology, and history (Merriam, 1998). A theoretical perspective of primary interest to my research, symbolic interactionism, originates out of sociology and anthropology.

Theoretical Perspectives and Assumptions: Symbolic Interactionism

Symbolic interactionism is a “theoretical perspective” (Crotty, 1998; Patton, 2002; Sandstrom, Marin, & Fine, 2010, p. 17) that addresses human beings and how they understand, process, and assign meaning to everything happening within their world (Sandstrom et al., 2010).

This perspective also delineates that people's thoughts and actions are interdependent and influenced by social interactions and their ever-changing social context. Social interactions infuse people with opportunities to construct new meanings about their social world and the objects contained within that social world (Charon, 1995). The actions people choose are based on their perceptions of their situation (Hewitt & Shulman, 2011). Thus, actions arise out of belief systems and perceptions of our social world. Each time human beings take action they receive social feedback which is integrated into their perceptions. This in turn, affects their future behaviour. People behave based on personal meanings that are formed in tandem *as they interact* with others and their environment. Conducting research informed by symbolic interactionism involves capturing "the process of interpretation" (Blumer, 1972, p. 145) or how individuals choose to act in dynamic situations.

Epistemology. Epistemology is concerned with what knowledge is and how it is constructed. From a symbolic interactionist perspective the researcher must come into close contact with the individuals or culture of study. Knowledge cannot be gained at a distance (Hewitt & Shulman, 2011) because knowledge is influenced and created through social interaction. Meaning or knowledge is co-constructed between people in social interaction. This co-construction involves an interplay of language and its words, phrases, gestures, communications, and symbols that are present in social interaction. Given that social interaction is a process, so too is one's knowledge an evolving and ever-changing process. Knowledge is not static but rather dynamic, in flux, and "partial and tentative" (Hewitt & Schulman, 2011, p 185). The role of knowledge and personal truths are based on practical life applications. When knowledge helps people solve problems and function well, then that knowledge becomes

sacrosanct. When knowledge fails to solve people's problems or improve their ways of being in the world, that knowledge is discarded and let go (Hewitt & Schulman, 2011).

Ontology. Ontology is the study of the nature of reality and what constitutes that reality. For symbolic interactionism reality is not understood as fixed but changing (Sandstrom et al, 2010). Reality cannot be discovered because it unfolds as human beings interact with others and their environment. In addition, multiple realities exist as we are continually interacting with people and objects, and socially constructing new meanings. Reality can be understood from multiple perspectives because it has no objective reality (Sandstrom et al, 2010). A person's understanding of reality is continuously "shaped" through interactions with other people and the environment (Sandstrom et al., 2010).

History and influential figures behind symbolic interactionism. The roots of symbolic interactionism date back to the ancient Greeks. Aristotle discussed the effects of communication and interpersonal interactions on people (Prus, 2003). The ancient Greeks also spoke of concepts such as "logos" and "pragma," referring to speech and objects respectively (Prus, 2003). The philosophical movement of German idealism was another influential force behind symbolic interactionism. Friedrich Heinrich Jacobi's 1787 book, *On Faith, or Idealism and Realism*, discussed that knowledge of objects is only subjectively experienced and known in our minds. Material objects outside of the human mind require belief and faith that those objects exist, and this is done through mental representation of those objects. In other words, the existence of the external world was supported through faith. Other influences of symbolic interactionism were the Scottish moral philosophers such as David Hume. The mind and self were theorized to be products of social interaction and society. The idea of a human's ability to be sympathetic toward another, and to perceive things from another's viewpoint (Reynolds, 1990), was also introduced.

Pragmatism was another key influence in developing symbolic interactionism. The founders of pragmatism included William James, Charles Pierce and John Dewey (Prus, 2003; Sandstrom et al., 2010). William James' theorized that a person's knowledge and beliefs about the world were true to the extent that they were useful, satisfying, and helped a person to adapt and function well in their environment. Given the focus on adaptation one can understand the Darwinian influence at work here as well.

Charles Horton Cooley bridged pragmatism into sociology (Reynolds, 1990). He theorized that our sense of self and consciousness was influenced through continuous social interaction. Knowledge of the self begins with becoming aware of how others perceive the self. Cooley's theory of the Looking-Glass Self, referred to the self as developed in response to others and the social world (Sandstrom et al., 2010). The three stages of self-development included (a) perceiving our physical image based on others' perceptions of our image, (b) becoming aware of others' judgment of our physical image, and (c) internalizing and owning others' thoughts, images, and feelings of us, as our very own. In summary, our sense of self develops out of social interactions which act as mirrors for how we learn to see ourselves.

George Herbert Mead was a major contributor to the field of symbolic interactionism. His goal was primarily to weave pragmatism into a research methodology. His work was mainly inspired by John Dewey, but also very much influenced by William James, Charles Pierce, Charles Horten Cooley, and Charles Darwin. Mead set a foundation within symbolic interactionism by defining the terms "self," "I," and "me." He described the self as both a *process* and an *object* (Mead, 1934). The self as a process refers to the reflexive activity of the self, consisting of the self's inner subjective thoughts, feelings, actions, and decisions. Some symbolic interactionists have elaborated upon Mead's description of the self as a process. A

feature of this process-oriented self is that it can monitor and self-regulate its own actions (Sandstrom et al, 2010). This reflexive self also refers to the process of self-interaction (Blumer, 2004) which entails an interactive exchange between two aspects of the self, the “me,” and the “I” (Blumer, 2004).

For Mead (1934), “me” is an object, an objectified sense of self, and is the part of self that others and the world at large, know and see. The “me” has also been referred to as a “social self” (Charon, 1995) because the “me” is an object that partakes in communication and social interaction, and consists of the views of “the generalized other” (Mead, 1934, p. 154). The “me” enables the self to experience self-consciousness, and to be conscious of the self, by adopting the lens and attitudes of the social world (Mead, 1934).

The “I” is constantly aware of the “me” (Mead, 1934). The “I” has been referred to as “the individual as subject” (Charon, 1995, p. 88), and is the source from which one’s actions, impulses, and spontaneity originates from (Mead, 1934). The “I” acts upon the world and may thus be conceptualized as agentic in nature. The “I” and “me” are constantly in dialogue, and one cannot exist without the other (Mead, 1934). Blumer (2004) referred to this as a type of self-interaction in which the “I” acts upon the “me,” and the “I” is able to make judgments of the “me.” In turn, the “me” can act as a censor (Mead, 1934) and make demands of the “I” to engage in impression management (Mead, 1934).

Mead became intrigued with humans’ unique ability to acquire and utilize language, an ability that animals do not possess. This language system allowed humans to infer meaning. Meanings are the outcomes represented by symbols (Mead, 1934), and those meanings carry “purpose” and “significance” (Mead, 1934; Sandstrom et al., 2010). From a symbolic interactionist perspective, meaning is created and arises based on how we respond to our

interactions with others and the environment. Meaning is grasped through our ability to use a symbol system of language (Mead, 1934). Language along with its words, phrases, and expressions, act as a medium to create, shape, and represent shared meanings. Mead (1934) noted that humans could think strategically, plan and organize their behaviours, and communicate in ways that are not possible for animals. While animals interact with each other through instinctual behaviours (e.g., a male bird spanning its feather to find a mate), humans use symbols (Mead, 1934) such as words, idiomatic expressions, and unique body language tactics all of which have shared meanings for senders and receivers. Symbols are a category of social objects and they signify a shared meaning that members of society agree upon (Mead, 1934). The meaning of a symbol does not exist on its own apart from a social context. Words, gestures, actions, and objects can all be symbolic. For instance, a supervisee's gestures, nondisclosures, or disclosures are all symbolic if there are intentions behind those actions (Mead, 1934). What delineates a symbol is the presence of intentionality behind the symbol. What complicates symbolic representation however, is that in social interactions an observer might perceive an actor's gestures, actions or words as symbolic of a meaning, even if that was not the actor's intention. When this occurs, the observer is actually interpreting "social objects" as opposed to symbols. The acts are not considered symbols to the observer because the actor is not intending to use those acts to communicate something.

This symbol system and our internal "self-interactions" (Sandstrom et al., 2010) comprise our minds. Mead (1934) understood the mind as continually changing as it interacted with one's environment. He believed that mind was influenced by taking the role of the generalized other, a process that involves seeing one's self as a social object, and from the minds and eyes of another person. By adopting the role of another person we view ourselves as a social object from another

person's perspective. This process allows us to formulate ideas about what others think of us, how they see us, and what they might expect of us. Mead (1934) believed that people developed the content of their minds through social interaction. The mind was further comprised of a language toolkit consisting of symbols that enabled processes of internal dialogue, the ability to plan, and to anticipate others' behaviours and their social expectations of us.

Mead's student, Herbert Blumer, created the term "symbolic interactionism" in 1934, and credited Mead as founding the actual concept. There were three principles behind Blumer's conception of symbolic interactionism (Blumer, 1969). First, humans act on their environment based on the meanings they hold of their environment. Second, these meanings are constructed through one's social interactions. Third, these meanings are dynamically in flux and changing based on peoples' interpretations of their situation.

Blumer also noted several key assumptions of symbolic interactionism. The first assumption of symbolic interactionism is that things, as they stand on their own, lack intrinsic meaning (Sandstrom et al., 2010). The meaning of objects and actions arises through what is learned through social interaction. A second important assumption is that through one's mind and self, individuals are conscious, autonomous, and free agents who can make their own decisions. Peoples' actions are not viewed as determined but rather influenced by contextual factors such as gender, social class, culture, etcetera. The symbolic interactionist perspective also acknowledges that emotions play a central role in actions, interactions, and meaning-making processes. In particular, emotions expressed to the outside world depend on the social norms and guidelines that individuals perceive as important to their social world. When outside influences question or threaten an important self-image, it can evoke strong emotions along with attempts to re-gain one's ideal self-image. For instance, a supervisee who perceives herself as highly

competent might receive feedback that does not fit with her self-image. This may produce a strong emotional reaction which in turn causes the supervisee to engage in impression management or other corrective actions to reinstate her ideal self-image.

In addition to Blumer's theoretical contributions to symbolic interactionism, he also contributed a considerable amount of thought to understanding symbolic interactionism as a research methodology. At that time, there were two schools of thought emerging in the research literature, the Chicago School of Symbolic Interactionism and the Iowa School of Symbolic Interactionism at the University of Iowa (Sandstrom et al., 2010). Manford Kuhn, the founder of the Iowa School of Symbolic Interactionism, believed that the self and its meaning-making activity were relatively stable. As a result he believed that research methods should focus on the goal of predicting behaviours across different contexts. Conversely, Blumer from the University of Chicago believed that sociologists should be concerned with the *understanding* of human behaviour rather than trying to predict, manipulate and control human behaviour (Blumer, 1969). My research perspective and approach is most fitting with Blumer's.

Participant Recruitment

I recruited from three universities in Western Canada over the span of two academic years¹. Purposeful sampling was used to capture information that was intended to be meaningful and multifaceted in nature (Patton, 1990). This type of sampling involves choosing one's sample in a manner that is purposeful to one's research question. While many types of purposeful sampling exist, I decided to use criterion sampling (Patton, 1990) which involves selecting cases based on specific criteria. My sample of research participants met the following inclusion criteria: (a) registration in a master's program in counselling psychology or counselling, (b)

¹ I chose to omit the names of the Universities where I recruited participants to protect their anonymity.

concurrent enrolment in a counselling practicum, (c) supervision by a registered psychologist, (d) registration in a program that required regular videorecordings of counselling sessions, and (e) ability to access equipment to videorecord the supervision session or to be willing to use the videorecording equipment provided by the principal researcher.

Participant Demographics

Three triads consisting of a supervisee, client, and supervisor were recruited for this study. There were eight participants in total (three supervisees, three clients, and two supervisors). Three supervisees (one female and two males) participated, and their ages ranged from 25 to 36 years (average age of 30.67). Participants identified their ethnicities as Asian, Caucasian/European, and Latino. Each supervisee was enrolled in a master's level practicum in a counselling psychology or counselling program. All practica were completed in community clinic settings. Supervisees' highest level of education completed prior to their master's program included two Bachelor degrees and one Master's degree, all completed in Psychology.

All supervisees indicated they did not review their videorecording of their counselling session before watching it in the supervision session. Supervisees completed an average of five months in their master's practicum at the time they participated in this study. The average number of client hours completed in the master's practicum at the time of participation was 67.7 hours. Each supervisee indicated that both the total number of hours and weeks spent in supervision with their supervisor was the same. The total hours and weeks spent in supervision at the time of the study ranged from 14 to 21 hours (average of 17.3). Prior to participating in this study, the average number of client sessions participants had videorecorded during their master's practicum was 48.3. The average number of client videorecordings supervisees indicated they had watched during supervision with their current supervisor was 6.3. Theoretical orientations

endorsed by supervisees included: (a) acceptance and commitment therapy, (b) humanistic / person-centred, (c) emotion-focused therapy, (d) cognitive behavioural therapy, and, (e) feminist.

Two supervisors (one female and one male; average age of 37.5 years) participated in this study, and both identified as Caucasian/European. Their highest levels of education included a doctoral degree in counselling psychology and a master's of counselling degree. The supervisors had an average of 4.5 years of experience working as clinical supervisors. Both supervisors reported having an integrative theoretical orientation. Some of their approaches endorsed included cognitive-behavioural therapy, interpersonal therapy, systems, humanistic/person-centred, existential therapy, and experiential/gestalt.

Three clients (two female and one male) participated in this study. Ages ranged from 19 to 35 years (average age of 25). All clients identified their ethnicity as Caucasian/European.

Data Collection

Two graduate research assistants were hired to assist with recruitment activities including meeting with participants to obtain consent, have demographic forms completed, book rooms in a clinic, set up video and audio equipment for recording participant sessions, and to securely store audio and video recordings. Each research assistant signed a confidentiality form and was paid an hourly rate for their time.

Before introducing my study to supervisees, potential supervisors were first informed. The researcher (or appropriate administrative person for external universities) emailed a general announcement to supervisors informing them about my study (see Appendix A). The purpose of this email was to protect supervisors and to ensure they were not caught off guard if their supervisee invited them to participate. The email reminded supervisors that they were not required or expected to participate in the study. They were informed that their choice to

participate or not participate would in no way impact their status as a supervisor in their counselling programs. Supervisors were also informed in this email that their participation and their supervisee's participation (or lack of participation) would be unrelated and separate from coursework requirements and evaluation purposes. The email announcement to supervisors however, was not a direct invitation for supervisors to state whether or not they wanted to participate. If a supervisee was interested in participating, the supervisee would approach the supervisor to discuss if the supervisor was interested in participating. If the supervisor was interested in learning more about the study, or wanted to ask further questions, the principal researcher or research assistant would meet or speak directly with the supervisor to answer questions and, or, to obtain consent.

I advertised my research to supervisee participants using listservs, posters (see Appendix B), and brief on-campus presentations in which I described my study to first-year graduate students and provided my contact information for those interested in participating. Once a potential research participant expressed an interest in learning more about my study, I, or my research assistant, scheduled an in-person meeting or telephone appointment with the participant. This was to ensure that the participant met the aforementioned inclusion criteria of my present study. Participants were then emailed or handed a copy of the supervisee information letter (Appendix C) so they could understand in detail what their participation would entail. I then gave participants a few days to carefully consider whether or not they would like to participate in the study. At this time I followed up with participants to discuss whether or not they had any concerns. For supervisees who agreed to participate, they were instructed to first contact their supervisor and discuss the study with them. Supervisees were given a copy of the supervisor information letter (Appendix D) to pass along to their supervisor. If a supervisor expressed

interest in participating, I (or my research assistant) scheduled an in-person meeting or telephone appointment to answer questions and address any concerns. Once a supervisee and supervisor both agreed to participate, they were each required to sign the supervisee letter of consent (Appendix E) and the supervisor letter of consent (Appendix F), respectively. Supervisees and supervisors were informed of their right to withdraw from the study at any time, as outlined in the supervisee (Appendix C) and supervisor (Appendix D) information letters. All supervisee participants were given a \$40 dollar gift card to Chapters Indigo for their participation.

All participants were required to complete forms collecting various demographic and other information. The client demographic form (Appendix G) requested information on age, gender, and ethnic/cultural background. The supervisee information and demographic form (Appendix H) requested additional information including the highest level of education, preferred theoretical approaches, the number of client hours and months in the practicum, as well as the number of hours and weeks spent in supervision. Supervisees also reported how many client videorecordings they had watched in supervision and whether or not they had watched their counselling video before bringing it into the supervision session as part of this study. Similarly, the supervisor information and demographic form (Appendix I) collected similar information, however asked for the years and months employed as a registered psychologist, as well as working as a clinical supervisor. It also asked for the number of hours and weeks spent supervising their student.

Interviews. For data collection I used Interpersonal Process Recall (IPR), which is a qualitative approach to interviewing in which an *inquirer* (or interviewer) aims to capture live, videorecorded, “in-the-moment” (Larsen, et al., 2008) experiences of interviewees in their original context. The focus of an IPR interview is to unveil a person’s undisclosed experiences

which may include cognitions such as perceptions of self and other, wishes, goals, aspirations, and intentions (Larsen et al., 2008). A further goal is to raise awareness around the interviewees' emotions which may include fears of rejection, vulnerability, being too aggressive, or hurting or offending another person (Kagan, 1984). Finally, IPR seeks to uncover bodily sensations that a person experienced in a prior moment. The interview focuses on internal *processes* and experiences rather than just *content*, which is the substance of *what* participants said (Larsen et al., 2008). The conversation does not focus on judgments of what was right or wrong during the videorecorded session, but rather it focuses on the internal experiences of the interviewee. The role of the interviewer is to “facilitate learning-by-discovery rather than to provide information, to give lectures, or even to share observations” (Kagan, 1984, p. 236).

Trying to capture the lived context of experiences of interpersonal interactions has been an on-going struggle for researchers (Larsen et al., 2008). IPR is one of the best ways to capture those interactions as it examines them via an actual videorecording. It also minimizes the likelihood of interviewees' recalling incorrect details. This is especially important for the study of nondisclosures in which one attempts to remember a complex, internal experience. For this reason IPR may be the most effective interview method, yet it has never been applied to the study of supervisee nondisclosures. Prior studies captured disclosures and nondisclosures retrospectively where supervisees were forced to rely on their memory of what they chose not to disclose. My study is the first to capture ‘in the moment’ recall of nondisclosures within single supervision sessions focused on videotape review and feedback. In addition, using IPR may change the nature of what is not disclosed given that videorecordings reveal considerable nonverbal information such as body language. The supervisee has less control over what to conceal as so much of their work and nonverbal reactions are already exposed.

I adhered to Larsen et al.'s (2008) guidelines on how to conduct an IPR interview. First, I conducted mock interviews with my peers who were graduate students in counselling psychology. The intention was to practice my IPR interviewing skills and ensure all technical equipment and processes worked. During the IPR interviews, both the supervisee and researcher had access to a remote control in which they paused the recording to discuss processes around nondisclosures and perspectives on what might have influenced the supervisee's nondisclosures. The IPR interview was videorecorded and audiorecorded. My interviews occurred within 48 hours after each participant's supervision session. The recommended length of IPR interviews is up to three hours (Larsen et al., 2008). This allows time to review the supervision session of the supervisee and supervisor watching the videorecording of the counselling session. In the current study, the interview time ranged from approximately 2.5 to 3 hours.

The interviewer (myself) provided instructions to the supervisee at the beginning of the IPR interview. The interviewer encouraged the supervisee to act as a co-investigator (Larsen et al., 2008), collaborating together at becoming curious about what the supervisees' unspoken thoughts, feelings, and experiences were at various moments during the supervision session. The supervisee was instructed to be an outside observer, and to focus on recalling the supervisee's experience as it occurred in the supervision session, rather than as it occurred in the IPR interview. The interviewer informed the supervisee ahead of time and encouraged the supervisee to take a few short breaks as needed. This was to ensure the supervisee could stay focused on maintaining the role of observer while recalling undisclosed thoughts, feelings, and perceptions as experienced in the supervision session.

The interview questions adhered to specific guidelines. For instance, the questions were asked in the past tense to ensure that supervisees stayed focused on recalling prior perceptions

from supervisees' actual supervision sessions. During informed consent and at the beginning of the IPR interview, the interviewer communicated to the supervisee, in a transparent manner, the process or guidelines around when to pause the videorecording. The interviewer stated:

The goal is to pause the videorecording when you notice or recall something significant or meaningful, or something that was curious or interesting to you, in relation to your unspoken experiences as they occurred in supervision. In addition, either one of us may decide to pause the videorecording when we become curious about exploring a moment further.

The IPR interview questions were focused on *internal experiences* and *processes* (Appendix J). Sample questions included (a) "Can you think back, and try to remember what your thoughts were in that exact moment?" (b) "Let's take a step back from that moment. What emotions do you remember experiencing in that exact instance of supervision?" and, (c) "As we pause the video here, what was going on for you at that time?" Periodically, the researcher probed further as necessary and asked, (a) "What influenced you in those moments to keep those thoughts to yourself?" and (b) "Do you remember in those moments what contributed to you wanting to keep that experience to yourself?" These probes were helpful as they promoted deeper reflections when participant responses were sparse, or when there seemed to be a lot of complexity around a nondisclosure. They also helped to expose more of the social context of supervisees' nondisclosures.

Data Analysis

Data analysis is a recursive process in which a researcher attempts to interpret and construct meaning out of data (Merriam, 1998). The researcher alternates her focus between basic units of information and more abstract or complex interpretations. Case studies are not tied

to specific data analysis rules but are flexible depending upon the unique research study (Merriam, 1998). I conducted a “multiple case study” (Merriam, 1998) meaning that I examined three cases rather than one. For this type of case study approach, there are two overarching steps to data analysis. The first step was the “within-case analysis” (Merriam, 1998) which involves an intensive and holistic analysis of the entire case within its bounded context. Within-case analyses are written in such a way as to provide vicarious entries (Stake, 1995) into participants’ worlds. Descriptions included rich information on unique characteristics such as the physical environment, situational context, and other idiosyncrasies specific to each case. The second step was the “cross-case analysis” which entailed looking for themes, patterns, and conceptualizations across *all* cases. Despite unique differences within each case, the cross-case analysis aims to highlight broader level descriptions or “abstractions” (Merriam, 1998) common to all cases.

Thematic analysis. For both the within-case analysis and cross-case analysis I employed basic thematic analysis principles as outlined by Braun and Clarke (2006). These guidelines are commonly followed, and form the basis of many types of qualitative research. I chose this type of analysis because it is flexible and yields information-rich data (Braun & Clarke, 2006), which is a requirement of case study research (Merriam, 1998). I utilized an inductive or bottom-up approach to my analysis by assigning meaning in conjunction with the data itself, rather than assigning meaning based on prior theory. The following steps guided my analyses.

The first step of data analysis occurred in tandem with my data collection (Merriam, 1998). After the interviews were completed they were transcribed. This transcription included all conversational elements including pauses, sighs, laughter, body language, and so forth. The transcription included my interview with the supervisee, along with small segments from the supervision and counselling session. After transcribing the interviews, I read the transcripts in

entirety, to immerse myself further into the data, and to become more familiar with the content. During the initial transcription and subsequent reading of transcripts, I created memos regarding my initial thoughts, ideas, hunches, and questions as they came to mind.

Coding was step two, and it involved assigning descriptive and concise labels to the most basic units of meaning in the data. Codes were assigned when something interesting or relevant to the research question stood out as significant (Braun & Clarke, 2006). Whenever possible the codes were “inclusive” so that their context was easily recognized and not forgotten. Basic units of meaning also received multiple codes when necessary.

Once the coding was completed, the third step involved conceptualizing themes. Themes are broad levels of abstractions that describe meaningful patterns within cases as well as across the cases. For the cross-case analysis, sub-themes were created to reflect further homogeneous clusters within the themes.

The fourth step involved a critique of “candidate themes” (Braun & Clarke, 2006, p. 91) which are tentative in nature, and were examined for what Patton (1990) described as “internal homogeneity” and “external homogeneity.” Internal homogeneity reflects the extent to which the theme’s codes cluster together and have similar meanings, all of which reflect the candidate theme. External homogeneity means that the codes comprising a particular theme should be clearly different than codes comprising other themes. This process involved closely examining codes for their original context. After a satisfactory framework was in place for the themes, I wrote meaningful descriptions of each theme and assigned them meaningful names. To assist with my data analysis, I used the qualitative software program Atlas ti (Atlas ti 2015; Version 7). This program provided an efficient method for organizing data by allowing me to highlight and assign codes to specific quotations in the transcripts and to easily retrieve and view codes.

Establishing Quality

Part of conducting ethical research is ensuring its quality or rigour (Creswell, 2016). The findings from this research are intended to inform applied clinical supervision practice and thus, it is imperative the research be of sound quality. This section discusses three criteria to establish quality: credibility, transferability, and dependability (Lincoln & Guba, 1985; Merriam, 2009).

To understand whether a study's findings are credible, one must examine the extent to which the study captures answers to the questions it poses. In other words, is the nature of the inquiry capturing what it promised? As a way of ensuring credibility, my study employed an IPR interview which increased credibility by examining nondisclosures in the moment. I used member checking in which I asked my participants to read a copy of their interview transcript to ensure their comfort with the contents and to confirm its accuracy. As part of a peer review process, my research supervisor acted as another investigator to examine my mental processes around the formulation and quality of my codes, themes, and theme names to ensure they were grounded in the data and made sense. Finally, I continuously wrote memos about my role as a researcher, and how my personal biases might have impacted my data collection and analysis (Merriam, 2009), e.g., how my biases might have influenced the moments in which I decided to pause the supervision video recordings during the research interview.

The transferability of research findings is another way to ensure research quality (Lincoln & Guba, 1985; Merriam, 2009). Transferability refers to how easily another person can make sense of, or use the research findings. Transferability is determined by a new user (Merriam, 2009). To increase the chance of my findings being applicable, I aimed to provide thick, rich descriptions that also captured contextual details.

Dependability is a measure of consistency between the data collection and findings. The findings must be coherent and make sense based on how the data was collected (Lincoln & Guba, 1985; Merriam, 2009). A good way to increase dependability is to leave an audit trail of one's work (Merriam, 2009). My use of Atlas ti software (Atlas ti 2015; Version 7) enabled me to leave an audit trail by allowing me to keep all memos (e.g., on rationales behind themes) in one place. In addition, each new work session was saved as an updated file name reflecting its current date. During the construction of themes for the within-analysis and cross-case analysis, the same steps were taken. This allowed for the construction and development of themes to be tracked.

Ethical Considerations

Ethical oversight for this project was provided by the University of Alberta's Research Ethics Board (REB). I followed the ethical standards and guidelines outlined in both the *Tri-Council Policy Statement for Ethical Conduct for Research Involving Humans* and the *Canadian Code of Ethics for Psychologists* (Canadian Psychological Association, 2017).

Research participants were required to read the supervisee information letter (Appendix C) and sign a supervisee consent form (Appendix E). Both forms were discussed with my supervisees to ensure clarity. The supervisee information form covered the following pieces of information: (a) the purpose of my study, (b) an overview of what the research participant was asked to do, (c) the type of personal information requested (e.g., demographic information), (d) risks and benefits of participating, (e) limits to confidentiality, (f) privacy, and (g) voluntary participation. The supervisee information form (Appendix C) also explained how participants' anonymity is protected during the course of the research and once completed. Participants also completed a basic demographics form (Appendix H) for descriptive statistics. The same process

was followed with supervisors. They completed the supervisor information and demographic form (Appendix I) and signed a supervisor consent form (Appendix F). Likewise clients read an information letter (Appendix K) which introduced the study, highlighted criteria to be in the study, reviewed procedures, risks and benefits of participating, and limits to confidentiality. The researcher reiterated to clients that the study was not about the client's experiences but that getting their consent was important as their counselling session provided an important context to the research study. Clients also signed a consent form (Appendix L). As another safeguard to protect anonymity of participants, the principal researcher stored the demographics form in a separate place from the raw data.

Specific ethical protocols were established to maximize anonymity and confidentiality of research participants and their supervisors. First, I took the precaution of anonymizing all data by using pseudonyms and removing any identifying or potentially identifying information of participants. To prevent conflicts of interest, participants' instructors had no knowledge that their students participated in the study, and thus students' grades could not be impacted by their research participation. Participants were informed that only the principal researcher and research supervisor (who was not the participants' instructor) would have direct access to any raw data, primarily for the purposes of peer review or possible transcription interpretation. Other committee members would only be able to access anonymized transcripts (as opposed to raw data).

Anonymized transcripts were saved on a computer and kept confidential through password protection. All videorecordings were stored in an encrypted format. The videorecordings, audiorecordings, hard copies of anonymized transcripts, as well as consent forms, were stored in the principal researcher's locked filing cabinet. Despite the steps I took to

anonymize all data and protect confidentiality, I also recognized that there is always a slight risk of exposure for all research participants involved in the study. For instance, people reading the research study might believe that they could identify a feature (e.g., idiosyncrasies in word choice) that resembled a supervisee or supervisor. In this sense, complete anonymity could not be guaranteed. This minimal degree of risk was fully explained to participants and supervisors in the information letters (Appendix C; Appendix D) and discussed with participants and supervisors before they signed their respective consent forms (Appendix E; Appendix F).

To further protect supervisors' anonymity and confidentiality, an additional ethical protocol was to collect data from more than one university and to have more than one supervisor participating in the research study. It was also stipulated in the information forms for both supervisors and supervisees that they would agree to not publicly disclose each other's participation in the study. In addition, every effort was made to remove any identifying or potentially identifying information in the write-up of the study. To protect the anonymity of supervisors and supervisees a pseudonym was used and any identifying information was omitted from the transcripts.

I communicated to my research participants that a potential risk could be discomfort or distress as a result of discussing sensitive issues. A list of counselling resources was made available to any participant that needed emotional support; and it was tailored to the participant's community. I informed participants that if they became distressed they could take breaks, stop the interview at any time, or reschedule the interview. Participants were also informed that they could refuse to answer any questions and could withdraw from the interview at any time without explanation.

My Position as Researcher

As a young teenager I remember stumbling across my mother's audio program titled *The Psychology of Achievement* by Brian Tracy. I was fascinated with this program because it addressed topics in research on the psychology of relationships, self-esteem, life purpose, and belief systems. From this point on, I became a voracious reader of psychology based self-help books. A central principle from these readings was that while people cannot always control their life circumstances, they can control how they respond to those circumstances. This overarching insight motivated me to pursue a career path in psychology. I wanted to help individuals find positive meanings and solutions to navigate their challenging life circumstances. As a result, I began volunteering at various social service agencies, a distress telephone line, elementary schools and at my local university. These experiences prepared me for my master's degree in counselling psychology. During my master's degree I conducted an autoethnographic study on the experiences of reading self-help books as a social resource. Through a social constructionist lens, I sought to understand the meaning making of self-help readers based on their personal, sociological, cultural, historical and political contexts. Conducting this research opened my eyes to understanding the importance of how our social context affects our actions and choices. As a result, the approach of my dissertation research is also motivated by my need to study individual experiences as they occur within their social context. In addition, the first year of my doctoral studies included an interesting seminar course on clinical supervision. Studying clinical supervision was a brand new realm for me. At the same time, I was also presented with the challenging but rewarding role of being a peer supervisor and mentor to first year master's students in counselling psychology. In addition, I supervised two first-year doctoral students on a weekly basis during my predoctoral internship in counselling psychology. These new

experiences at the doctoral level sparked my pre-existing interest in the professional development of counselling trainees.

There are a few other interests, expectations, and biases that I hold as a researcher in the context of this research topic. I have always wondered about supervisees' initial experiences of watching themselves on video. For myself, I have felt self-conscious and self-critical while viewing my counselling videos. In addition to having my counselling work videorecorded, I have also had my presented workshops videorecorded and audiorecorded in my prior employment as a way to evaluate and improve my skills. I was always more self-critical than my peers and supervisors. As a result of these experiences, I can appreciate the discomfort that videorecording can instigate, as well as appreciate how effective such processes are for professional growth. Within the scope of this study, I was curious how supervisees would experience the objective exposure of their counselling work, and how this might impact supervisees' process of sharing or withholding information, feelings, or thoughts from their supervisors. As a professional, my hopes and expectations are for there to be more discussions around experiences of reviewing videorecordings of counselling sessions, both in class, and in supervision. Also, I hope for videorecording review to be practiced much more regularly within supervision. Lastly, I was intrigued to learn more about how supervisees perceive the interpersonal context of supervision to shape their nondisclosures. For instance, I wonder about how a supervisor's body language, statements, questions, responses, and ways of offering feedback might be perceived by supervisees as influencing their process of withholding or sharing information.

I also wrote memos about my own biases and expectations to help ensure that my views did not interfere with data analysis. My research supervisor also probed into my views and in some cases provided alternative viewpoints to consider throughout each step of my thematic

analysis. While coding the data, I engaged in reflective memo writing around whether I identified more with the supervisees or the supervisors in the study. I realized that I could identify with all participants in this study; clients, supervisees, and supervisors, because I have experienced all of these roles. In addition to these roles, I am also a therapist and was able to put myself in each participant's shoes, while seeing eye to eye with their thoughts, and simultaneously feeling their emotional responses. I also pondered my experiences as a supervisee in supervision. I can think of many moments where I have been open and transparent with my supervisors and instances where I have purposely withheld information or my own experiences from my supervisor. During my analysis, I paid close attention to ensuring that some of my experiences of being self-conscious or self-critical as a supervisee did not bias my data analysis. I also wrote memos about my own experiences to maintain self-awareness. During this research study, there were instances when I would imagine myself in the same supervision dialogue as my participant. In particular, I could imagine how my own experiences or perspectives might be very different. For instance, I might react to my supervisors' questions or processes in a very different way. Overall, I tried to remain as objective as possible while coding, which meant attending to the data through the lens of my research question, which involved paying attention to the perceived experiences of supervisees.

Findings

In this chapter, I present the findings from my study. This includes the within-case analysis for each participant followed by the cross-case analysis for all three participants.

The terms *counselling session*, *counselling video*, *supervision session*, and *supervision video* are frequently used and refer to the recorded sessions that formed the basis of the present research study unless otherwise specified. Dialogue segments from supervision sessions as well as IPR research interviews are included. In relation to the quotes that appear in the findings, the terms *in-the-moment* experiences and *in this moment* refer to participants' nondisclosure experiences that occurred during the supervision session but were made explicit during the research interviews. In all quotes from participants, I inserted ellipses to indicate where I omitted their words. This enabled me to effectively highlight aspects of the quote that represented the particular theme of interest.

In order to protect the anonymity of all supervisors, supervisees, and clients, I used gender-neutral pseudonyms and omitted the pronouns *she*, *her*, *he*, and *his*. Similarly, to avoid name repetition, I relied on the term *the* to refer to *the client* and *the supervisor* instead of stating *her client* or *his supervisor*. Another step taken to protect anonymity was to change or omit potentially identifying information of participants. In some cases, I used a more general term and placed it within square brackets. For example, Skylor did not disclose to the supervisor personal struggles with [mental health issues] and how they impacted the counselling session.

The following section describes the within-case analyses for Pat, Morgan, and Alex.

Pat

Pat did not review the counselling video before showing it to the supervisor but had previously watched other counselling videos during supervision. The supervisee reported having

a subsequent counselling session with the client since the one that was incorporated into this study. As a result, Pat mentioned that it was sometimes difficult to remember details from the counselling session that was reviewed in supervision. During supervision, Pat shared not having a specific focus or particular questions for the supervision session. The supervisee described the counselling session to me as having been “okay” and without “big breakthrough[s]” or “big problem[s].” In general, Pat and the client Frankie spent their time in the counselling session discussing the client’s work concerns. They also addressed the client’s experiences of receiving feedback from superiors, and the client’s tendency to want to please superiors. One of Pat’s intentions for the counselling session that was shared with the supervisor was “to see if I could get Frankie to connect...experientially a little bit ‘cause this client has the tendency to intellectualize everything.” As a result, Pat began the counselling session with a breathing exercise to “focus on the here and now experience” for the client, and to also help Pat who was “feeling a bit nervous” due to the counselling session being recorded for this research study. The supervisee admitted to doing “a lot of focusing-ish related things” within the counselling session. During supervision, a considerable amount of time was spent processing the supervisee’s efforts and struggles to create a more experiential versus intellectual session for the client.

The supervisee indicated having always felt comfortable disclosing information to the supervisor. Pat reported, “I do feel safe in working with Jamie.” The supervisee described their relationship:

Me and Jamie, we have a fairly open relationship so I kind of trust that Jamie’s just curious and motivated to push and probe a little bit, but it’s not so that Jamie can judge and evaluate.

Experiences of nondisclosures occurred across six themes for Pat: (a) relational support, (b) insight, (c) awkwardness, (d) pressure to meet expectations, (e) deference, and (f) moments of being stuck.

Relational support. Pat experienced relational support particularly as a result of receiving validation and positive feedback from the supervisor. In the following instance, Jamie offered Pat positive feedback regarding a shift in the approach taken with the client:

Jamie: Strategically was it a good move do you think?

Pat: I think so 'cause...otherwise it would have been the same old story.

Jamie: Yeah, that's my hunch. I think so too....I like what you're doing here and I like that you went that way....That's a really, a smart move to do that, in my opinion, to be able to recognize that if we go down this path again we're not going to get very far, and that same system kicks in which isn't really helping Frankie along. But if I can change it so that Frankie's *experiencing* it, then I'm not just leading the client there, I'm helping Frankie kind of find the way there.

Pat: Yeah.

While this feedback was briefly acknowledged, what was left undisclosed was the depth of how much the supervisor's words had a positive impact. Pat's in-the-moment feelings were shared with me:

[I felt] maybe even a little bit proud, especially when Jamie was explaining why....It was really good, that was very validating for me.”

The supervisee felt supported and validated when Jamie was sensitive enough to recognize Pat's unspoken needs in general and was able to respond to those needs which resulted in the supervisee feeling “on the same page” with the supervisor. While having a conversation with the

supervisor about similarities that both Pat and Frankie struggled with, an in-the-moment experience was identified as, “It was nice ‘cause we [supervisee and supervisor] were both on the same page, and Jamie brought it up first so it was validating,...just ‘cause [that’s] something that I was [already] noticing.” The supervisee also experienced comfort, safety, and an “open relationship” with the supervisor. For example, Pat demonstrated vulnerability in a conversation with the supervisor:

Jamie: So you say you were feeling nervous. What in particular do you recall?

Pat: Oh just because I was being recorded as part of this research thing (chuckles).

Jamie: Oh okay, yeah.

During that conversation, the supervisee was open in answering the supervisor’s question. What was left undisclosed, however, was the supervisee’s internal reaction of feeling open and comfortable with the supervisor. Pat revealed both a general experience of this in supervision, and acknowledged feeling the same in the moment:

I just feel that openness and disclosure is really important. I think it’s critical to the approach that I use to have that openness. So, with Jamie, I’ve always tried to be willing to go there if possible....I never felt like my supervisor’s been judgmental or punishing about that, so I’ve always felt comfortable sharing those things.

Insight. Pat experienced insight while allowing time and space to reflect and contribute to supervision dialogues in a meaningful and intentional manner. The following example illustrates an openness and willingness to reflect on the supervisor’s questions in a thoughtful manner, just long enough to arrive at a new perspective on how to improve a client intervention:

Jamie: Let’s just pause it there,...with respect to the part where you do the activity, is there anything you would do? How could you make it better do you think?

Pat: Mmm.

Jamie: Have you thought about that or, have you?

Pat: Mmm.

Jamie: As you watch it, or, afterwards or things that you think – “it went well and I could have done it better by...?”

Pat: I think ‘cause -

Pat’s private, in-the-moment reflections were explained:

What would I do better? I was wondering, did Jamie see something? (pause) I think when my supervisor asked that I took a moment to just think about, okay is there actually something that I thought I could do better? So maybe I was trying to find the response for Jamie ‘cause there wasn’t something that came to mind for me immediately about what I could do better, so I did spend a little bit [of time] to just search - “Okay, was there something?” And there ended up being a little bit of something.

The supervisee experienced insights, aha moments, new ideas, and an ability to glean the “bigger picture” related to the counselling work. The following supervision dialogue captures the wrapping up of an ongoing conversation that occurred near the end of the supervision session, in which they both explored Pat’s intention behind asking a particular experiential question to the client:

Jamie: I think you’re going in the right direction, and I think you’re just struggling with that –

Pat: I can’t describe it.

Jamie: Again, how do I -

Pat: Yeah.

Jamie: What is it? It's something,

Pat: Yeah.

Jamie: And you're trying to, "No I don't want this, it's not it (pushes hands away from self with palms facing outward), I don't want the details, I want something else, I want (pause)" - *what?*

Pat: I want, um -

Jamie: Something that makes Frankie more real, that makes it more genuine, that, what is it that makes someone more real or genuine?

Pat: That vulnerability.

Jamie: Yeah?

Pat: I think, and when we go through what Frankie normally does, where

Frankie...analyzes it and comes up with a solution...we don't get at those vulnerabilities.

Pat's covert experience during this supervision conversation was that it "was kind of like an aha moment, and it was relieving 'cause...here's the solution (laughter)!" Often a precursor to experiencing insight was a sense of appreciation and willingness to be open to learning from Jamie's questions, perspectives, and guidance. The supervisee had a genuine interest and appreciation of certain conversations, particularly a dialogue regarding a "parallel process" on how the supervisee and client had similar experiences. Pat did not give voice to this appreciation and interest encountered in these moments:

Jamie's talking about this whole process and I was just sitting there thinking, and we both kind of arrived at the same conclusion, that this person that I'm working with, a lot of the things that Frankie struggle[s] with, are a lot of [the] things that I kind of have as well. The client really has struggles with getting access to that experiential touchy feely part,

and then I also struggle with that. So while Jamie was talking about it, I was thinking about, parallel process, that term, of you know in the beginning [of the supervision session] I was really rationalizing and thinking about things rationally or logically...and so we talk[ed] a little bit about that....It was nice....It was kind of interesting.

Awkwardness. The supervisee experienced uncomfortable awkwardness and self-judgment in particular moments within supervision. For instance, Pat had a sense of discomfort and self-judgment that occurred while observing Pat's physical gestures in the counselling video. During the supervision session, the supervisor asked, "So what, how was that, let's just stop there...It seems weird to watch that but how did you feel that went?" While Pat began to share thoughts about how the intervention went with the client, the internal dialogue around self-judgment and feeling awkward about noticing the physical gestures in those moments was not vocalized:

So (smiling), when my supervisor was asking me about how did I feel that went....Like when I was looking [at the counselling session video]...all I could notice was...my head move back and forth, 'cause I tend to do that sometimes, and I was like, "I look kind of weird....This doesn't look quite right,"....It's like...I look kind of funny to myself, I feel awkward watching myself.

The supervisee had another awkward and amusing experience that was not revealed to the supervisor. While reviewing the counselling video during supervision, Pat's covert, in-the-moment reaction was explained:

It's funny....I noticed that when I touch my face there in the [counselling] video, I also touch[ed] my face [in the supervision session]. It's like oh that's a funny coincidence (laughing)...but I didn't say anything because it's not relevant.

A sense of self-doubt or a mild insecurity was present in relation to *how* matters were approached in therapy and supervision. Self-doubt occurred during a moment in which the supervisor asked Pat how the approach went with the client:

(Supervisor looks at Pat for a few moments with a confused facial expression). We're dissecting it apart a little bit further I guess, but do you have any thoughts on it as we try to...? What was your goal or purpose, and what, - how did it execute?

While Pat began to answer this question, the more private experiences of self-doubt were not communicated in the moment:

So there Jamie was asking me about, "What's the goal?" and "How do you execute it?" sort of thing. So again, in that moment I wasn't really sure how to answer. It felt awkward. It felt a bit of, it was confusion...and also that's when there was a little bit of doubt there. I was doubting, you know, this was my intention, and this was how I thought...you could do that.

The supervisee also encountered a sense of awkwardness and amusement around knowing what Jamie's intentions were in asking particular questions:

Jamie: (pauses) So it'd be like me asking you now, right, "What's it like for you to tell me about that?" How would you answer that question?

Pat: I'm not sure (chuckles).

Jamie: So, I wonder...I hear what you're saying, but you can see when I ask you how, Frankie might have been a little confused as to what's the purpose of this question. Is that possible?

While Pat assented in those moments, internal reactions of experiencing a combination of awkwardness and amusement were left unspoken. The supervisee shared with me the in-the-moment experience of this conversation:

It was kind of awkward. I thought it was funny just 'cause I kind of knew what Jamie was trying to do....Basically Jamie was trying to show me experientially what it was like to ask that, you know, and so I thought it was amusing actually.

Pressure to meet expectations. Pat experienced a pressure to fulfill or live up to the expectations and responsibilities of being a supervisee. There was a felt pressure to be prepared and able to clearly articulate rationales and goals, and to provide meaningful answers to the supervisor's questions. The supervisee felt compelled to have a goal and then subsequent relief upon noticing that Jamie seemed to accept that Pat had no goal:

So, I think there I was basically rationalizing a bit. I didn't say that "I don't have a goal," but I was explaining the reason I didn't have one. So, I didn't say, "Sorry I don't have a goal,"....I guess it was a bit relieving after the fact when Jamie continued on. Like, my rationalization is acceptable, and then we could just move on.

For the supervisee, some of the pressure was related to how the supervisor might respond to Pat's particular answer. The supervisee worried that, "You know, if I say, 'I don't have a goal,'...maybe my fear is that Jamie will...keep pressing to see, maybe there was a goal or something?" In this case, the supervisee's nondisclosure was shaped by the anticipation that the supervisor might respond with further pressure. In another instance, Pat felt pressure to conceptualize and immediately follow through with a respective intervention:

So, when Jamie was talking about, "You're monitoring this but you're not going there," that kind of, I don't know if "freaked me out" is the right word, [I] was like, "Oh! Okay!

(laughter)” It implied that you think about something and conceptualize something and then you just go with it, but for me I’m still learning the ropes, especially with this approach....It felt like more pressure, and because, for me, I don’t see myself as at the point where I can just conceptualize something and then go with it. For me, I do the session, I conceptualize, and then maybe figure out a way to ...approach that in-between sessions.

At times, the supervisor’s expectations were experienced as being too high; yet Pat hoped and strived to meet those expectations. Simultaneously, the supervisee felt nervousness around whether those expectations could be met:

Jamie: Frankie kind of verifies (uses two fingers from both hands to signify quotes for the word ‘verifies’) to an extent and gives more evidence supporting that hypothesis that you have, and you note it, it sounds like, and then what, like what did you do with it? (pause)....Do you remember, or?

Pat: So, knowing that hypothesis about you know...I think in the [counselling] moment I wasn’t quite sure what to do with it yet.

While an overt response during the supervision dialogue was one of not knowing what to do in the moments of the counselling session, Pat’s covert and deeper reactions in the moment were described:

Well I think when Jamie...came back to, “Where are you going with this?” I kind of felt the pressure again of, “Am I supposed to be going somewhere with this (light chuckle)?”

The supervisee also felt worried and nervous about meeting the supervisor’s expectations. For instance, the supervisor said to Pat, “I imagine it goes well and I mean we haven’t seen it yet [segment of counselling video], but I just wanted to find out what you were thinking?” In these

moments Pat had an escalating sense of pressure that was not shared with the supervisor. The supervisee's internal experience was explained:

So that's kind of raising the expectation again....I was hoping, "Okay, I hope it actually went really well (laughter)!"....I think I was feeling a bit worried there,...a bit nervous about there's these expectations now. I hope I meet them (laughter)!

Deference. For Pat, some moments of nondisclosure were related to the desire to be respectful and polite, and to avoid the risk of the supervisor perceiving the supervisee as rude. In one instance, there was a desire to be polite and to allow Jamie to continue talking rather than Pat interjecting to clarify a matter:

Pat: If I don't have a script I get a bit lost (chuckles).

Jamie: Mhmm, yeah, and...it's a relatively new thing to do, to guide somebody through, a mindfulness meditation, a breathing meditation, or something like that.

Pat: Yeah.

Despite acknowledging the supervisor's comments in these moments, Pat's covert, in-the-moment experience was one of confusion. The supervisee's in-the-moment thoughts were described:

I have no idea what my supervisor's talking about (laughter)...In the moment I think I just glossed over it....I'm more of a listener than a talker, and so I just want to wait, let Jamie finish talking, and then Jamie went off into a different direction and so I was fine just going with that....I don't tend to interject.

Choosing to not interject was Pat's way of respecting Jamie. This nondisclosure was influenced by the nature of its interactive context. For instance, as the supervisee wondered what the supervisor was talking about, Jamie continued talking, and this in turn led the supervisee to not

clarify matters, along with wanting to demonstrate respect. Pat described another occurrence of having received too many suggestions at one point during supervision. The supervisee refrained from sharing this out of the desire to respect Jamie's style of supervision. Pat's in-the-moment experience was explained:

So, when Jamie was talking...that was interesting to me. I felt like my supervisor was teaching me something, and so I was really paying attention to that....I think at this point, Jamie's kind of barraging me a bit with those suggestions. "Maybe we can try this,...maybe we can try this,"....I think in this specific session it was a bit frustrating but tolerable.

Pat's in-the-moment experience of remaining deferent in these supervision junctures was related to knowing that it was "important...that Jamie provide these resources. And it's very important to Jamie's style of supervising." The supervisee further acknowledged that it was a way of being respectful.

The supervisee's preferences and needs sometimes differed from the supervisor's with respect to the overall flow and processes in supervision. Sometimes, assertion of preferences was avoided because Pat was willing to trust and follow the supervisor's lead and direction. In one moment, although there was a lack of agreement with Jamie's momentary focus, Pat was willing to trust the supervisor's direction. For example, the supervisee's in-the-moment thoughts and emotions were described as, "When Jamie talks about, 'let's *stick* with that,'" you know I feel a bit impatient, but I'm willing to indulge (laughter)." In other words, Pat wanted to move forward in their conversation rather than stay focused on the same topic. Likewise, near the beginning of supervision, Pat hoped to quickly move past watching a segment of a breathing meditation from the counselling video; however, Jamie wanted to continue watching this segment. The

supervisee's opposing preference was not voiced, but instead the supervisee chose to follow the supervisor's lead. Pat's in-the-moment experience was recalled:

I didn't really see the point in it (smiling), but I was willing to look and go along and see where it would go, because for me I was just breathing, -I don't know (laughter).

In addition to being willing to follow the supervisor's direction, in other instances, Pat chose to not state preferences because it would interrupt the flow or productivity of supervision. This was evident in the following excerpt from the supervision session:

Jamie: Can you go back just a bit?

Pat: Sure.

Jamie: Where you ask Frankie that question? (supervisor clicks back)

During this moment, Pat's private experiences became laden with frustration:

And so when Jamie was asking me to go back, that always makes me feel a bit impatient, 'cause for me I want to move forward and try to get through it as much as possible....It's like going in circles (chuckles)....My dream world preference is that we just run through the video and Jamie just analyzes it at each point and we don't have to spend so much time on one thing and so...that would be maximum value.

When I asked about what influenced the supervisee to not share those preferences, Pat discussed noticing that Jamie had already taken control of the laptop mouse, and secondly, that there was a desire to avoid conflict:

Well one thing is Jamie's already reaching in and sliding it back (referring to moving the mouse to rewind the counselling video) so (laughter), and another thing isI don't want to push it 'cause that will just drag it on more you know, now we'll have to talk about the

[supervisory] relationship or something....If I just go with it, we'll get back to it
[watching the counselling video] eventually.

This nondisclosure was impacted by being sensitive to the supervisor's nonverbal "feedback" of taking control of the mouse. In addition, the supervisee perceived that it was more advantageous to avoid asserting preferences rather than risk confrontation or an uncomfortable conversation that may somehow address an element of the supervisory relationship. Pat's concerns about interrupting the flow and productivity of supervision were also accompanied by feelings of impatience. This occurred when too much time was devoted to watching and discussing the same counselling video clip during supervision:

Pat: Do you mind if we continue (points to the counselling video, and then leans in to press play on the counselling video)?

Jamie: Yeah I'm just, I'm a little caught on that I guess, so, I, um -

During these moments, Pat's private, in-the-moment experience was one of restlessness:

For me, there's that sense of impatience. I do want to get going basically (light chuckle), and....Even just talking to you [the researcher] sometimes, I'm like, let's just move it [the supervision video] a little more [forward] and maybe something will come up.

In addition to Pat having felt impatience when the counselling video was rewound during supervision, the comment above highlights that a similar or parallel process was present during moments of the research interview in which Pat wanted to move forward more quickly with watching the supervision video.

Moments of being stuck. Moments of being stuck included brief struggles to longer impasses in remembering, accessing, and making sense of internal reactions while in supervision.

Some of these struggles were related to difficulty remembering details from the counselling session. Pat's in-the-moment experience was described:

So, I stopped the [counselling session] video to try to raise a point with Jamie, and so basically...what I like to do is draw on some quotes or sentences, and then say, "This is what they said and this is what I think that means." But when I was doing that I kind of froze up, and I couldn't remember what we talked about specifically in detail. So I was talking about proving something and I couldn't remember...in that moment....I had a general gist of what I wanted to say but I couldn't remember the evidence so to speak.

Similarly, when the supervisor asked questions regarding the supervisee's emotions, this posed a challenge for Pat:

Jamie: Okay, just hang on a second (pointing to the client video)...What do you mean when you say that? It's more specifically what, what feeling is associated with that?

Pat: The feeling I, is a little -

Pat acknowledged the struggle to access and get in touch with these emotions. The supervisee's undisclosed, in-the-moment experience was articulated to me as "not tense, but it does make things more awkward, 'cause for myself it's harder to access that [emotion], so it takes me a little while to be able to describe it." Another struggle Pat encountered was trying to clarify thoughts, particularly in terms of how to answer seemingly confusing questions that the supervisor asked:

Jamie: So...your goal is exploration of Frankie's, what -?

Pat: Whatever is going on at that time.

Jamie: Okay, and of Frankie's thoughts specifically? Or just generally?

Pat: Just generally because -

Pat's in-the-moment experience of nondisclosure was one of feeling stuck and confused:

So I explain, you know, I was just trying to get some more information, and then Jamie started asking these other questions about, “Were there any other cognitions you were looking for?”, “Was there a goal?”, and I didn’t have a goal (laughter)...I don’t know how to respond to that.

The supervisee also felt stuck while trying to pay attention to different processes at the same time. Pat had an internal struggle to continue processing information while the supervisor continued to speak. The supervisee’s in-the-moment experience was recalled:

Jamie’s showing, modeling frustration or something like that. To be honest, it was kind of distracting (laughter)...It was just a lot of movement, and a lot of, “You’re feeling this,” and, “You’re feeling that,” and I was just trying to keep processing and thinking, but at the same time Jamie was saying things,...[and] I was still trying to sort through...this experiential thing. So I was still kind of churning in my head...I think I was trying to divide my attention there. And so, I wasn’t really sure what was going on with me.

Morgan

The focus of the counselling session was largely Morgan attending to and processing Taylor’s emotions, and working on the client’s inner critic and self-judgments. The supervisee was proud of this particular counselling video which was not reviewed prior to watching it in supervision. Previously, the supervisory dyad had reviewed counselling videos together during supervision. The supervisee viewed the opportunity to watch this particular counselling video as a chance to receive more in-depth feedback than usual from the supervisor, Dale. In a few instances, Morgan reported having “felt comfortable” and open with the supervisor. One of the supervisee’s in-the-moment experiences was revealed:

Any chance that I have to get more open and...“let’s talk about us, what is really important for us,” I just take it...(laughter)!

The six themes of nondisclosures for Morgan were (a) need for reassurance, (b) personal triumph, (c) self-doubt, (d) proving oneself, (e) relational impasses, and (f) avoidance of confrontation.

Need for reassurance. Overall, the supervisee felt reassured when the supervisor gave positive feedback, paraphrased the supervisee’s words, and normalized the supervisee’s own experiences and thoughts. A sense of relief that absolved performance pressures and self-doubt was also present for the supervisee. For example, Morgan began to feel reassured and relieved when Dale agreed with one of the supervisee’s answers:

Dale: Now be the client for a minute, how does Taylor answer that?

Morgan: Oh Taylor goes, “well (leans back in chair),” and the client has these movements (pushes left shoulder forward and looks up at ceiling), right,...comes back to the hands (side of right hand makes a chopping motion onto open palm of left hand), and kinda, right? Like this (holds hands together with palms touching), when Taylor’s confused...will go down like this (left elbow rests on chair arm, and then the supervisee lowers the head and the finger tips touch the supervisee’s nose).

Dale: Okay.

Morgan: Yeah, Taylor expresses a lot through the hands.

Dale: Taylor does.

Morgan: Yeah.

In these moments, Morgan felt reassured by the supervisor and felt a lifting of pressure around being able to answer the supervisor’s question. The supervisee’s unexpressed sense of relief in the moment was described:

When Dale said, “Taylor does [express much through the hands],” I was like, “Okay (flops head backwards)! At least to some degree, I got the answer!”...“Okay good (raises both hands up in the air, above head) – at least to some degree (laughter)!”

The supervisee also experienced a sense of validation and ease when the supervisor paraphrased the supervisee’s own words:

Dale: So...the client’s letting you know that they did feel a little bit uncomfortable last week, and so you’re just attending to Taylor at this point, right, listening –

This struck a chord with Morgan, whose untold, in-the-moment experience is captured in the following quote:

When Dale said that, “Taylor’s letting you know, that...Taylor felt a little [uncomfortable],”...then I remember feeling like, “Yeah, that’s it,” and for some reason, it’s funny because when *Dale* said it, I felt relieved. But when *I* was saying it, I was like, “Ugh – I don’t know,” you know? But when Dale said it, I guess that I felt validated in what I was saying.

Morgan also needed reassurance and hoped to receive more feedback than usual from the supervisor. The supervisee perceived the reviewing of the counselling video within this study as a beneficial opportunity to receive feedback from the supervisor. The in-the-moment awareness of positive anticipation was not verbalized to the supervisor:

I just sense again this feeling of, I want to see if I’m doing a good job. I want to get feedback about my purpose, about what is it that I’m doing. I want to hear that I’m doing a good job....So I feel that this opportunity [to watch the counselling video] was a big chance for me to say, “Okay, let’s get...as much feedback (puts hands into fists/balls to

emphasize) as I can get,” while at the same time there was this part of me thinking, “I really hope to get a lot of positive feedback (smiles).”

Personal triumph. Morgan felt a deep sense of pride, confidence, and meaningful accomplishment through counselling practice, in relation to being able to execute a particular theoretical approach with the client in session. In one particular moment, the supervisee was happy that both the supervisee and supervisor were able to observe the theoretical approach in action. Morgan’s unexpressed, in-the-moment feelings of pride were explained:

I was so proud, yeah, I was just like, “Ah, (smiling) this is the kind of work I want to be doing,” and even at that time with my client I was just so, I don’t know if proud also applies but a sense of, “This is my moment, this is where I have to really go for it, and go like, yes, this is my opportunity,” you know?

A gratifying sense of pride began to emerge as Dale offered positive feedback on the counselling session:

Dale: I have to tell you that I’m watching, and I’m thinking [famous psychologist] would be so proud of you (smiling)!

Morgan: (laughter)

Dale: I don’t know if you’d want to hear that.

Morgan: Yeah! I’m happy!

Personal triumph was present during these moments when the supervisor recognized the specific theoretical approach(es) that Morgan was using. The following quote captures this aspect of Morgan’s undisclosed experience: “Oh my god (chuckles), it feels awesome to be told that what you’re doing is perfect within a model...I felt like, ‘Yes!’” Morgan experienced moments of self-assurance or confidence in the counselling work. This emerged out of the following supervision

context:

Dale: The client's tearing, right?

Morgan: Yeah...crying,...Taylor's having trouble with -

Dale: There's so much, hey? Don't you want to know?

Morgan: (chuckles) I do, we discussed it.

Deeper layers of Morgan's certitude were left undisclosed in the moment:

I know....My reaction is "I know (laughter)...I do know, I am seeing it, I'm with Taylor at the time right?"....So, I don't doubt it,...I don't doubt my reaction...I can feel it, I felt it in my life...a part of me resonates with what Taylor's going through, so when Dale asks, "Don't you want to know?" what I want to reply is, "*I do know!*"

Stemming from Morgan's feelings of pride and confidence was also an excitement to show the counselling video to Dale. The supervisee, however, kept these innermost reactions private:

I was very happy about this session, so I was excited about getting into it. I really liked the work that I did with that client in that particular session, so I was just so happy that it was something that I was proud of showing (smiles).

Self-doubt. Several moments of self-doubt occurred and were often accompanied by insecurity and worry. In particular, Morgan questioned personal thoughts, counselling work, and aspects of self-identity. The self-doubt largely stemmed from awareness of being evaluated, and this sometimes led to feeling self-conscious. Doubt was experienced around *how* the supervisee's theoretical approach was executed, particularly because the supervisee was still learning. In the following example, Dale provided positive feedback; however, Morgan's self-doubt began to set in:

Dale: You're doing a great job of attending to...and staying with Taylor, and giving space, and helping the client find those answers.

Morgan: Mmm. Yeah I feel that that's very true for me...I feel that with some other clients I will fall a lot into the cognitive part of it? I think that with this client it might be true that I'm, fall more into the non-directive approach (inaudible) -

Dale: Right, yeah, isn't that neat (smiles)?...how you can work with a different client and then your model shifts a little bit? I think that's very true in therapy, that we shift our models like that, and it's good to know, to even start to try and be aware of when you're shifting models a little bit, I think.

Morgan: Yeah definitely...I think a lot of it in terms of, "Am I shifting too much,- that I'm being unethical (smiles)?" That this part of me...that I'm being too careless?

In those supervision moments, Morgan did not reveal the inner depth of self-doubt. The supervisee's in-the-moment thoughts were expressed as follows:

I remember that at the time I was thinking...I'm learning how to apply an approach, so does it mean that until I feel confident in that, I'm going to be unethical, until I get to that point? Am I going to be careless with all my clients until I get to that point?

At the end of supervision, when Dale asked if Morgan would execute the approach differently, the supervisee began to question the confident answer initially given:

Dale: We only have a few minutes left....Would you do this any differently?

Morgan: No, I don't think so.

Dale: Good!

Morgan: (laughter)

Dale: That's good to hear.

Morgan: Honestly.

Underneath this confident expression, Morgan's unspoken, in-the-moment feelings were explained:

A little hesitant...and I said, "No I don't think so." But being assertive like that in that situation...I felt a little hesitant, like, "Should I be more modest?" Should I be a little more, um, "I'm not sure, why don't you tell me?" instead of being so certain...so assertive about saying, "Yep I really liked it, I wouldn't have done it differently."

The supervisee also encountered uncertainty and concern around sounding and feeling incompetent in front of the supervisor. In particular, this occurred when Morgan couldn't remember the plan or purpose within a particular moment in the counselling session. The supervisee's private, in-the-moment experience was recalled:

I was afraid of not remembering what I said was my purpose,...and so I was...feeling like, "Oh my god (smiling/begins to chuckle),"... I don't want to have to say, "I don't remember." I didn't want to be in that position because that would have made me feel very incompetent.

In another instance, the validity of Morgan's thoughts and feelings were met with a sense of self-doubt. For example, the supervisee questioned whether to vocalize in-the-moment frustrations when Dale re-visited a previous topic in their discussion. The supervisee's in-the-moment experience was described:

I'm asking of myself, "Am I just reading too much into this or am I exaggerating this reaction?" So, I don't want to put it out there and...look like, I'm a little bit of a drama queen...you know...(laughter)!

Proving oneself. Morgan felt the need to demonstrate and prove a range of competencies as though a “test” were occurring in supervision. The supervisee felt a pressure to fulfill personal performance expectations as well as meet the supervisor’s expectations by being prepared, ready, and able to answer questions. One example of this occurred in a moment in which the supervisee was answering the supervisor’s question:

Dale: What are you thinking (pauses counselling video)?

Morgan: I’m giving the client time....I do know that...I give...a lot of time because

Taylor’s so reflective and takes time in choosing the right words to describe...feeling.

In these moments, when the supervisor asked what the supervisee was thinking, Morgan’s internal reactions were left undisclosed. The supervisee’s in-the-moment experience was expressed:

I have to answer that question, assuming that I was expected to answer, and wanting to fulfill that requirement, I guess I saw it almost as a, I don’t know if “test” is the word, but kind of you know, I was being requested and tested on something and so I needed to, you know, perform.

Morgan felt compelled to recall important counselling session details in order to communicate accurate client conceptualizations to the supervisor. The supervisee also felt pressure when the supervisor’s questions prompted Morgan to pay attention to recalling or recognizing specific details related to the counselling session:

Dale: What do you notice...when Taylor talks? Is there anything that stands out for you?Watch what the client does....You know, from some perspectives there would be that interest in what Taylor’s doing, with the hands.

Morgan discussed being caught off guard and forced to pay attention to the client details in a new way:

Here...I was like, “Oh, what?” I’ve never paid attention that way. So, when Dale was asking me that, I was like, “Oh what? I’ve never looked at it that way (says in higher pitch voice).” I want to answer the question...but I had to try and replay it in my head to find those things and being able to repeat it, or replicate it within the supervision session.

In another segment of the supervision session, Dale prodded a bit further:

Dale: What’s Taylor doing with the body?...What does the client tend to do? Be the client for a second...Let’s imagine right, Taylor’s talking and how does Taylor do that?

Morgan: (sighs, closes eyes and puts left hand/fingers on temple).

In these moments, Morgan realized that the supervisor was hoping to see a re-enactment of such client movements. The supervisee was surprised in the moment, and did not believe a re-enactment would actually be expected:

When Dale said, “I would encourage you to look back at the video,” I was like, “Okay, I can just do it after,” and then Dale says, “no but be Taylor,” and I was like “Okay, what?! (looking up at ceiling, laughing)”...I was like, “Okay,- (shuts eyes) use all of your brain power to dissect what your memories are of being in session with Taylor.”

Relational impasses. Morgan had moments of relational impasse in supervision, which included disconnection, disappointment, and a sense of feeling crossed by the supervisor. A part of Morgan experienced ruptured trust after perceiving that Dale’s guidance might not be reliable. For instance, the supervisee employed the use of a particular intervention recommended by the supervisor. When the supervisor expressed caution about the helpfulness of the intervention after

the supervisee employed it, Morgan felt upset. For the supervisee, this was perceived as a form of rescinded advice:

And now Dale was telling me that the intervention wasn't necessarily good for what you wanted...So I remember being like, "Are you serious (laughter)? You told me that this was what I needed, and now you're telling me it's not enough?" You know, there's a part of me saying, "Okay, I have to remember this because in the future I know that if Dale tells me such a thing I need to...not simply take Dale's word for it."

Protectiveness around guarding Morgan's professional identity was also present. In particular, the supervisee felt defensive about how the supervisor perceived the supervisee's theoretical orientation. The in-the-moment experience was recalled:

I don't know if it's my supervisor's intention, but I keep feeling as if Dale's trying to get me out of this theoretical orientation, that's how I, keep feeling it, you know... "You're trying to show me again that I'm not of this theoretical orientation."...I don't know how to express that feeling of ...wanting to prove that you know what you're talking about, and that you know what ...is important for you, or that you're willing to work towards [it] etc....If I don't look as a perfect...therapist right now it's because I'm learning, and that's what...I've been trying to tell you.

The context of this nondisclosure was shaped by the supervisee's previous albeit unsuccessful attempts to share such thoughts with the supervisor. Momentary frustrations with the supervisor were also present, particularly when the supervisor probed for a different answer to the question asked:

Dale: What set off the emotion there? What -

Morgan: Well if you...remember what set off the emotion was me saying that, “There’s a part of you who is afraid,”...and that was the trigger.

Dale: But what, so that’s what...you said, but what in Taylor triggered - ?

Morgan’s frustration began to emerge after realizing that the ways in which the supervisor and supervisee were thinking about this issue were not aligned. The supervisee’s internal reaction in these moments were explained:

I was frustrated that my supervisor was questioning it. That Dale was kind of saying, “Yeah that’s what you’re saying, but is it what Taylor’s saying?” And I was thinking, “The client’s been saying it the whole time, can’t you see it (smiling)?” ...At that time I was like, “Hunh, aren’t you just watching this on video, seriously it’s all there.”...It felt more like if we’re seeing this on video, how is it that you’re...not seeing what I’m seeing?

Finally, moments of disappointment occurred when Morgan perceived that not enough support, validation, or feedback was received in particular instances. For example, near the end of supervision, Morgan hoped for more positive feedback or even corrective feedback:

Dale: We have to end for today, but yeah it’s good. It was a good session.

Morgan: Mhmm, I felt that we finally put words to something.

Disappointment set in when the supervision session ended on what was described as an “anti-climatic” note, as Morgan did not feel Dale was able to validate and join in with the supervisee’s experience of pride:

It felt like, - “That’s all you’re saying?”, this is my proudest moment...so far I’ve had in therapy and my supervisor said, “Yeah it was good (says in a quiet voice),”....I wanted more feedback than that. I wanted more (big breath out), more validation maybe, or more, some kind of a reflection about the pride that I was...feeling,...any kind of feedback that

my supervisor could give me....If it's going to be constructive it's also very good, and I also want it, but when Dale says, "Yeah that's good," it feels a little anticlimactic, you know, because I want the climax to be like, "What (raises both hands into the air)? 'Yes!' (keeps hands in air and shakes them around into different spots)."... I felt that just saying, "Yep that was good," makes me feel like, - "And that's all?"

Avoidance of confrontation. Regarding the overall flow and processes of supervision, there were moments when Morgan's needs and preferences differed from the supervisor's. These preferences were not voiced, primarily to show Dale respect. The supervisee sometimes felt frustrated and impatient, especially while not asserting preferences in relation to pacing, direction, or focus of the supervision session. While watching the counselling video, Morgan was frustrated when perceiving that too much focus was dedicated to reviewing a particular video segment, or, when the direction of supervision turned back to a previously discussed topic. For example, confusion and frustration ensued when the supervisor revisited a topic that Morgan felt was already addressed. In these moments, the supervisee was taken aback and did not reveal in-the-moment feelings:

What words can I use? I guess I was thinking, "Why do you want to get into that again?"....So a part of me was thrown off.... I was like this is already discussed ...so what's the point of...bringing it up again?...I guess...a part of me...this other voice was saying, "Are you asking me whether I was unethical?"...and I guess that a part of me...was even offended a little bit.

At times, Morgan would not correct or clarify a matter with the supervisor due to not wanting to interrupt the flow of supervision from moving forward:

Dale: What's going on for Taylor, eh (whispered)? What are you thinking, - are you thinking what I'm thinking? That's what I'm thinking, like what-?

Morgan: (chuckles)

Dale: What are all the emotions going on in there right now?

Morgan: Yeah, that I ask...what is it like to be -

Dale: What thoughts and images is Taylor having right now?

Morgan: Mhmm.

During this supervision conversation, the supervisee's in-the-moment thoughts were not outwardly expressed:

Dale was...thinking, "What are...all the emotions that Taylor's going through right now?"

And I'm like, "No, that's not what I'm thinking," but I didn't want to correct my supervisor because I felt it would interrupt the process of watching the video. What I was thinking was more like, "Oh (squints eyes and begins to slightly whisper) look at the intensity, can Taylor feel it fully or is Taylor trying to escape it?"...so I'm...like, "Yeah, yeah, yeah, go back to the [video] (laughter)!" (referring to playing and watching the counselling session video).

In this context, the supervisee's nondisclosure was influenced by the perception that disclosing would have detracted from the overall flow and importance of being able to watch the video. In addition, there was a need to avoid confrontation and conflict. For instance, the potential thought of confronting the supervisor was set aside with the more practical need to show respect for the supervisor's role and knowledge as well as the customs and boundaries of the supervisory relationship in general. In one supervision moment, the focus was on watching the client become tearful and quiet. The supervisor commented on the plethora of emotion present in the client, and

then asked, “Don’t you want to know [all of the emotions the client is experiencing]?” While Morgan offered a brief response of, “I *do* know,” Morgan did not reveal the inner confidence experienced in those moments. I probed further and asked what had influenced this nondisclosure. Morgan’s in-the-moment thoughts were “too conflictive...it would be very much like...I’m seeing myself as your equal [equal to the supervisor], and I’m seeing myself as...I know just as much as you do.” The supervisee then went on to discuss the values of maintaining respect within the overall context of supervision:

Not necessarily the power but at least a respectful, contextual relationship of being in supervision...Thinking about just keeping the power because of authority makes me uncomfortable, but understanding it as a supervision context in which Dale does have more knowledge, and there’s a reason why my supervisor’s the one checking that what I’m doing is right or wrong, I have to respect that.

Overall, Morgan valued a harmonic flow or steady pacing of the session as opposed to risking confrontation or conflict.

Alex

Alex had not shown the supervisor, Kelly, a previous counselling video of the client, Sandy, until participating in this study. However, the supervisee had previously discussed the client in supervision. According to Alex, prior counselling videos of Sandy were not shown because the supervisee felt confident about the counselling sessions, and perceived that they flowed well. The supervisee shared that there was never an immediate need to receive feedback regarding this particular client. This counselling session focused primarily on the exploration of the client’s anxiety and exacerbating factors. In addition, problem solving occurred around ways to ameliorate those symptoms.

Alex described the supervisory relationship and interactions as being open, relaxed, and respectful. For instance, the supervisee shared some unexpressed thoughts with me:

If I'm like, "Oh I don't think that's going to work and this is why," ...Kelly respects my input even though Kelly's the one in charge and I'm the student....It's a really respectful nice relationship.

Alex also expressed that many of the supervision sessions felt "positive overall, like happiness or contentment...and a comfort." During the debriefing of the research interview, the supervisee revealed that the intention of participating was to "represent a good experience," of supervision in my research study. In Alex's case, experiences of nondisclosures occurred across five themes: These included (a) encouraging and affirming relationship, (b) sense of ease, (c) new perspectives, (d) pride and accomplishment, (e) self-judgment and self-consciousness, and (f) conscientiousness.

Encouraging and affirming relationship. The first theme of nondisclosures involved experiencing a sense of encouragement and affirmation that emerged out of the various types of support received from the supervisor. First, affirmation occurred in the context of receiving positive feedback. The supervisee felt relieved when Kelly shared that it's "nice when you don't have a student that you have major concerns with, I guess (laughter)." Alex's in-the-moment internal reaction to Kelly's feedback was positive:

Kelly was [saying], "No concerns about you going into this field,"....That's great feedback right there. [It] was "another example of Kelly's support in me,...so I felt not just relief, but encouragement,...and...empowered, I guess.

The education that Alex received from the supervisor was also experienced as affirming. For example, in one supervision segment, the feedback contained basic education and guidance on

how to implement particular interventions with the client. What was left unsaid during these moments was how Alex perceived the supervisor's feedback as affirming and caring:

Stuff like that from Kelly, is, that's kind of my supervisor's area...so a lot of that stuff... I think I've been trying a lot more, because I know Kelly's there backing me up....I can give it a try and get feedback...on how to do it better or properly...and so having Kelly's support to help...me develop my skills in that regard...I appreciate all of Kelly's feedback, but especially...stuff like this, where my supervisor describes how...[my supervisor] talks to...clients.

Alex also described feeling validated by the supervisor. For example, Kelly commented on an intervention that Alex had used with Sandy during the counselling session.

Kelly: Yeah I could see why introducing you know ...even if it's just some breath work or some mindfulness... just to give Sandy some space to breathe, and not talk, right, for a bit -

Alex: I think so.

While there was overt agreement with Kelly, the unspoken experience in these moments was revealed:

Well that...validated what I was doing with Sandy,...and so I think it was just good to hear Kelly say well, "That's probably why Sandy responds really well to that, you know?"...It gives the client some room to breathe and to focus...[It was]...reaffirming, and validating,...that I was on the right track with Sandy...and...justifying...the track that I'd been taking.

Lastly, there was an appreciation for receiving feedback that was delivered in a casual manner. Kelly said to Alex, "It's a good observation for sure." Underneath the surface, the supervisee's

in-the-moment experience of this positive feedback was revealed:

It did feel good yeah....My supervisor has a way of complimenting you without putting you on the spot....Kelly doesn't look at you and say, "That's a really good job," ...but just by saying, "That's a good observation," and then just letting it go, I think that makes me accept them [positive feedback] a little bit easier maybe.

Sense of ease. A sense of safety, ease, and openness was experienced with the supervisor which enabled Alex to be receptive to having particular discussions. An example of this was when the supervisor took time to focus on how the supervisee was doing, rather than the client. During supervision, Kelly commented on a challenging pattern in which Kelly noticed that the client was quite repetitive. The supervisor asked Alex, "Where does that leave you?" In these moments, Alex felt safe enough to be in a vulnerable position with the supervisor:

It was...positive because the focus was back on [me]...I think we spent a good amount of time talking about the client and talking about me too. So it was actually nice to focus back on, "Okay, how am I doing here?", and comfortable probably because...I feel like...we [the client and supervisee] do have a good working alliance.

Feeling safe and open with the supervisor was evident when Alex disclosed not following up on an intervention with the client. The following excerpt describes the supervisee's private encounter of nondisclosure in these moments:

I paused the video so that I could talk...I wanted to let Kelly know that there's other parts of the homework that I just skipped over there...more just to let my supervisor know how the client's progressing... and that this client is progressing really well....I felt...comfortable in sharing it with Kelly too.

Feeling a sense of ease in the supervisory relationship seemed to enable a frequent engagement with laughter and humour throughout the supervision session. In reflecting on the supervision discussion of Alex's performance as a counsellor, the private internal dialogue was as follows:

My supervisor was so easy about saying...even just joking about it [discussion on supervisee's performance]...and it's something that I was never concerned about...because we have a very open kind of supervision relationship....So it's not like I was worried about this conversation.

In another instance, I inquired about Alex's experience when I observed laughter. While the experience of laughter and humour was transparent, what was left unsaid was how it acted as a vehicle to feel even more comfortable and connected to Kelly. The supervisee's in-the-moment reaction was recalled:

Yeah, just a comfort I think. I like humour, and I like it when you can introduce a bit of humour or share a laugh with somebody, so I'm laughing at something that the client said... and then that made Kelly laugh and it's just a nice way to connect with people, right? Add a bit of humour.

The supervisee's sense of ease and experience of humour with the supervisor is further demonstrated in an instance when I commented on the increased energy that I observed during the supervision session. In those moments, Alex appreciated feeling relaxed and open with Kelly:

[I'm feeling] ...kind of loose...kind of fun, you know, (smiling) it's fun to talk to Kelly about...these things 'cause we can bring that energy in that we see in the [counselling] session....Like that client, basically what we're doing is mimicking Sandy's (bends arms at 90 degree angle, and alternates moving them forward and backward a few times)

movements,...not in a bad way,...but in a funny way....It's fun and...it keeps the lightness to it).

During the debriefing of the research interview, Alex shared that the overall experience of the supervision sessions were “a lot of fun, Kelly's just fun hanging out with [for] an hour.”

New perspectives. Alex gained new perspectives within various situational contexts including: receiving corrective feedback, reframing perceived shortcomings of self, gaining insights on client work, and integrating information and guidance from the supervisor in a helpful manner. First, the supervisee strived to positively reframe, and to make more useful, the corrective feedback that the supervisor provided. For instance, there was a covert reframing of thoughts in which Alex intentionally stayed focused on the concept of personal improvement, and on how to better help the client. The supervisee's in-the-moment experience was elaborated upon:

That...was really good...I was like, “*Great*, that's really *good* helpful feedback.” Well again really helpful just for the client's sake....A lot of Kelly's feedback, even if it's something directed at me, like, “What you want to do is this,” ...I never think...well I did it wrong, just as, well I could do it better. I tend not to take that, like in this instance (points to supervision video) I don't...take it personally...I take it, in terms of how useful it is for the client...and [how]...I can apply it for them.

Alex reframed in a positive manner the perceived shortcomings related to the client session. For instance, during supervision in which a particular therapeutic intervention was discussed, Alex shared with Kelly, “I'm glad that [intervention] worked because the first time I tried that with Sandy it didn't work at all. That was the one that blew up in my face.” The supervisor responded with, “Oh (laughter)!” What was left undisclosed however, was the positive interpretation that

Alex experienced regarding that intervention. The supervisee's reframed thoughts in the moment were explained:

[But] just because the technique didn't work, I didn't feel like I had failed or anything....I just saw it as an experiment.

Insights and helpful realizations occurred for the supervisee while watching the counselling video during supervision. These insights occurred as a private, internal dialogue rather than being shared directly with the supervisor. For example, Alex gained insight into how the client as opposed to the supervisee, was ultimately responsible for the initiation of the client's intervention:

I'm realizing how much more the client had to do with coming up with that intervention. I think...the way...I [initially] saw it in my head...was that, "Oh I came up with this great intervention," and then as I'm watching it unfold, I'm like, the client did a lot of the work there,... the client put a lot of it together. And I would throw in a few little things here and there, but then Sandy would really put it together.

The supervisee appreciated and was eager to integrate new perspectives from the supervisor, including information, guidance, and reflective questions. While Alex enjoyed learning new information, this was not revealed to the supervisor. In one instance, the supervisee was surprised and fascinated by the informative conversation that had dispelled a myth regarding a commonly-used cognitive-behavioural technique. These internal reactions however, were not outwardly shared with Kelly. The supervisee's in-the-moment experience was expressed to me:

I was like, - "What? You're not supposed to do that?" ... so I found that fascinating ...I had no idea, I thought that was still a good technique...But then as Kelly's describing it...I was like... it makes sense, why would that work? Why did anyone think that (laughter)

would work?...Yeah... and [I was] amused just at my supervisor's reaction 'cause Kelly just gets so, like, "No!" like talking to the screen, "Don't do that!" So...yeah, I'm just amused and entertained... and fascinated.

Finally, Alex looked up to the supervisor and respected the supervisor's ability to form what seemed like accurate conceptualizations of the client. Alex shared that Kelly is "always so quick at figuring things out," and that Kelly arrives at such conceptualizations before the supervisee.

Pride and accomplishment. Alex experienced a sense of confidence while observing the personal finesse and talent displayed in the counselling session. The supervisee was proud, particularly when the supervisee and supervisor noticed Alex's counselling skills. While noticing the client's progress, Alex felt happy and enjoyed watching the client arrive at a valuable insight. The supervisee described this undisclosed in-the-moment experience:

Watching myself piece it together, watching us piecing it together...[feeling] happiness,Look how happy I look (laughs and points to the screen where video is playing)!....I've been doing a lot more case conceptualization, so I'm trying to look at the whole picture...and putting all the little elements together, so yeah, [I'm]... really just happy that I was able to do it in session with Sandy, and come up with this, we came up with this idea together ...to try out this exercise, and it sounds so simple, and even so intuitive but I was really happy that I was able to...get there with Sandy you know?

The supervisee's proud feelings around being able to help the client arrive at a particular insight were not revealed to the supervisor:

It was...I can't think of the word...I was proud of how I got there...I was proud of how I was able to put the pieces together and help the client come to that place.

Alex left unexpressed the excitement and positive anticipation over showing the counselling

video to the supervisor and receiving feedback. The supervisee's in-the-moment experience was vocalized to me:

We've [my client and I] been able to tackle two or three different things, all with this one simple intervention...and so... that's why I was so excited to show it to Kelly. After we did the session I was like, what a great one to record (chuckles)...I really feel like I did something here.

Toward the end of the research interview, the supervisee commented on the positive experiences that were present across many of the supervision sessions. Alex felt "a sense of accomplishment, [and] a sense of forward growth."

Self judgment and self-consciousness. Overall, Alex experienced a heightened awareness of self-judgment and associated self-conscious emotions. Self-critical thoughts and related feelings of anxiety, discomfort, and fear of being judged were present. The supervisee anticipated and worried about a "what-if" scenario around whether the supervisor might perceive one of the supervisee's actions as a mistake. As a result, Alex developed anxiety and fear. For example, during supervision, Kelly brought up a concern and asked how an ethical dilemma with the client was handled:

Kelly: How did you navigate that?

Alex: So when I first started seeing Sandy, that was a (lets go of notebook, and places off to side), not really a concern of mine, but a very prominent thought.

In this moment Alex described anticipatory thoughts around possibly getting into trouble:

When Kelly brought that up...it was a concern that I had right away (raises eye brows), ...but it's not something I [originally] went to Kelly about....So I think my initial thought was, "Ooh, am I going to get into trouble?"

In these moments were unexpressed worries about whether Alex “had transgressed the ethical boundaries.” As the supervisee observed the counselling video, and paid attention to the actions and words spoken within the supervision session, Alex felt moments of discomfort and self-doubt. Self-consciousness was sometimes present but not explicitly shared with the supervisor. For example, Alex discussed in supervision an intervention used with the client, and how Alex ended up stumbling and making corrections in the moment. While the supervisee disclosed to the supervisor the experience of “winging it” with respect to the client intervention, the supervisee did not share the associated feelings of self-consciousness and anxiety about the possibility of receiving corrective feedback:

So I just explained to my supervisor [that I winged it] and Kelly just laughed...I think I handled it well and I think I was happy to show Kelly that, but also wondering if I would get any feedback on that, like, “Oh maybe next time don’t do that (smiling).” Or something like that (laughter).

Self-criticism and judgment were also present regarding the supervisee’s actions and words spoken. While reviewing a segment of the counselling video with the supervisor, Alex struggled to find the right words to explain what was occurring in the counselling session. The supervisee’s in-the-moment experience was shared with me:

When I was talking about that sensitive topic,...I think I’m a little bit uncomfortable talking about that stuff,...so I almost said [something], but then I was like, that sounds too wish-washy....So I stopped myself there, and then after I said that, I was like, “Well that was a dumb thing to say (chuckles).”

Alex noticed self-criticism with respect to setting goals with the client. In the following excerpt, the supervisor offered feedback regarding options of how to facilitate goal setting with the client:

Kelly: So with the number,...one option is to pick a realistic number....Okay, let's try it three times, another might be to ask Sandy, right, "So how many times do you feel like you can commit to practicing this over the next week?" Right?

Alex: Right.

While this feedback was acknowledged during supervision, the details of Alex's internal dialogue was left unknown to the supervisor. Alex recalled the in-the-moment experience:

Ugh, (begins to smile) I knew that you don't impose that number, I just kept thinking in my head (right pointer finger is raised to side of head) "imposing onto the client, this is where I think you're at, you should be practicing this three times a week."

The supervisee struggled with critical self-talk and guilt that emerged out of a supervision conversation in which Kelly made a suggestion on how to enhance the client's physical comfort in the counselling room. Alex responded to the supervisor, "I should...yeah." The supervisee's in-the-moment, undisclosed experience was described:

So I think when I said, "Yeah I should do that," I think that was me avoiding committing to it?And then I was scratching my head.... I think I was feeling kind of guilty....I think maybe just feeling bad that I hadn't done anything about it yet.

Self-consciousness was present during a supervision conversation when Alex awkwardly noticed and began practicing a deep breathing exercise for which the supervisor provided instruction. For Alex, the discomfort stemmed from the fact that the exercise was intended for the client to practice, not for the supervisee. The in-the-moment experience was recalled:

I moved my hands down here (places palms of hands on stomach) because that triggered in me a memory of, "I remember doing those breathing exercises, you're supposed to put your hands on your stomach and feel your stomach move"....And then I realized after, I

was like, “What am I doing?” I don’t know, I was just kind of surprised that I did that (places hands back on stomach), and then ...I just went with it, I was trying the breathing. Although Alex did not share these self-conscious thoughts and emotions during the supervision session, the supervisee admitted to me the tendency to repeat the same pattern in the research interview. For instance, Alex explained, “When you say ‘How did that feel?’ and I say, ‘Oh it was good,’ (smiles) I’m kind of avoiding the emotional part of it too.”

Conscientiousness. Overall, Alex strived to be conscientious in attending to the supervision session. The supervisee put forth an earnest effort to recall and communicate detailed information to the supervisor regarding the counselling session. Remembering the details of what happened during the counselling session was not always easy. For example, Alex described the undisclosed in-the-moment experience of forgetting what happened in part of the counselling session:

I even forgot what we talked about for that first hour [from the counselling session], so I think in this first little bit [of the supervision session] I’m remembering like, “Oh yeah we talked a lot about career concerns for that first part,”...yeah and so I think I was just remembering, “Oh yeah... all this talk about career issues.”

At this point, Alex realized the video segment shown wasn’t a personal priority for the supervision session. In addition to striving to recall particular details from the counselling session, there was a desire to articulate a correct client conceptualization to the supervisor:

Kelly: You [can] just fill me in on...the background of the client.

Alex: Um, I don’t think I’ve shown you anything from Sandy before.

Kelly: Yeah the client doesn’t look familiar (shakes head to symbolize ‘no’).

Alex’s inward experience of these moments was expressed to me:

[I was] trying to focus...because I know this client so well...I want to make sure I give Kelly a proper conceptualization of what the difficulties are, and so I'm trying to focus on (chuckles)...that... (smiles).

Being conscientious was also apparent in how Alex experienced pressure and self-imposed expectations to manage time effectively during supervision. For example, in one supervision moment, Alex was trying to balance recalling and making sense of the client's information, and doing it quickly enough to ensure there was enough time to watch the counselling video. Alex's in-the-moment thoughts were shared with me:

This client...gives a lot of information every session, there's a lot, so I'm trying to distill that down in my notes, and...Kelly's read the notes too but ah, [I've] been trying to make sure I didn't forget anything...and that I don't take too long, so that we can actually watch the video too.

Toward the end of supervision, it was important for Alex to ensure there was enough time to share more client information. It was the experience of feeling tight for time that was left undisclosed to the supervisor:

I think we're just coming up to the end there, just the last couple minutes of the session, and...I thought it was useful what Kelly was saying, but there was just a few other things I wanted to say about the client, that I think I just wanted to squeeze in before the end of the session.

The supervisee also put forth an effort to be conscientious by monitoring and navigating ambiguous processes in supervision, such as the 'turn-taking' of talking, the pacing of playing or pausing the counselling video, and taking notes while the supervisor spoke. Alex shared one of these in-the-moment supervision experiences:

I'm just waiting to see what the topic of discussion is next in the video, if it's a good time to talk, 'cause I don't want to talk over something important....If it's something that I want to talk about...for a long time, or if it's something in the video that I want to address, then I'll pause it, but quite often we'll just let the video run ...I think a lot of times I'm almost going to say something and then I'll just wait for a bit, see what's going on the tape, and then talk about it....Sometimes, what's on the video is probably more important than what I'm going to talk about.

Cross-Case Analysis

The following section contains the cross-case analysis of all three participants. As outlined in Table 1, the five nondisclosure themes experienced by all participants included (a) validation, (b) safety, (c) growth and accomplishment, (d) performance anxiety, and (e) avoidance.

Table 1

Themes and Subthemes in Cross-Case Analysis

Main Themes	Subthemes
Validation	
Safety	
Growth and accomplishment	Pride and confidence Reflection Aha moments
Performance anxiety	Self-consciousness Pressure to demonstrate competency
Avoidance	

Validation

All supervisees experienced validation from their supervisors that felt intrinsically good. Supervisees had nondisclosures related to validation when their supervisors offered encouraging statements and supportive guidance. Receiving helpful feedback, particularly positive feedback, was also appreciated. They felt affirmed when they were heard by their supervisors. For example, when supervisors paraphrased and reflected back supervisees' meanings or spoke of matters that resonated with the supervisees, this was experienced as a form of validation. In one instance, the supervisor and supervisee discussed what, if anything Morgan might do differently in the counselling session. The supervisor expressed approval and was glad to hear that Morgan would not make changes. At the same time, the supervisor gave the supervisee permission to share, "It's okay if you said, 'I would do it differently.'" For Morgan, simply hearing the supervisor's word "good" was enough to feel validation. The supervisee's undisclosed experience was recalled:

It felt more like Dale was validating that...not all your sessions are going to be like this and, you're not going to feel like this all the time, so it's okay if you don't.

Supervisees felt affirmed when their client impressions aligned with their supervisors, or when supervisees and supervisors were both focused on the same task or process. For instance, Alex described feeling affirmed in supervision after realizing that the supervisee's and the supervisor's perspectives eventually became aligned. The supervisee explained a nondisclosure experience at "the end of the session with the client," in which Alex's thought process was described:

Quite often they [our perspectives]... matched, [or]...line up in some way,...so I mean that's another kind of support...that Kelly does provide.

Kelly's perceptiveness was also admired because it validated similar perspectives that Alex later arrived at during the supervision session, and also because it validated the supervisee's own

client work. Alex's nondisclosure experience was recalled:

I was impressed...because Kelly's always so quick at figuring things out ...So, when Kelly said what the client was going to do right away...I was like, - that's exactly what Sandy did, Sandy talked about that this morning (smiling)...[It's] always validating for me too, because sometimes they are things that I got to later on my own....So that kind of validated where I went with it eventually...and that's quite often what happens, we'll start a video and within 5 or 10 minutes, Kelly will say something and it will take me to the end of the video to get there.

Pat's needs were affirmed and respected upon noticing that the supervisor's momentary focus shifted such that it became aligned with the supervisee's own priorities. The private, in-the-moment experience was expressed to me:

I think here, Jamie's kind of recognized that the goals and outcomes is a bit too much right now, so Jamie's maybe backing off?...It feels good 'cause it shows my supervisor's paying attention in that sense.

In the case of Pat and Jamie, the supervisee appreciated how they both formed a task-focused alliance in which they moved away from watching a video segment that wasn't priority for the supervisee. Pat's covert, in-the-moment experience was one of feeling energized and satisfied with the synchronous focus in dialogue:

Because we moved off of that initial part [of the counselling video] which I didn't think was that important, and now we're talking about the case, and my thoughts on it, and Jamie's thoughts on it, and that was ...what I was looking for, so I think that contributed to the energy in the room.

Supervisees experienced receiving helpful feedback as validating, particularly when it was positive or was accompanied with a meaningful rationale; however, they did not share this with their supervisors. Morgan enjoyed receiving positive feedback when the supervisor shared, “I like how you –you’re giving Taylor lots of time here, right? That’s really nice.” Morgan disclosed in-the-moment feelings regarding the positive impact of this feedback:

It feels good and validating, that the choices I’m making...are working... and the fact that

Dale notices it, it’s more validating in that you know I’m making a good choice there.

Pat’s in-the-moment experience of receiving positive feedback was explained as feeling “really good...especially when Jamie was explaining why... it was really good. That was very validating for me.” Receiving positive feedback was valued for its contribution to the supervisees’ sense of self-worth. Feedback was received from Kelly that struck a chord with Alex. The supervisee’s private, in-the-moment experience was explained:

One of the things that Kelly said...was that, “Sandy has no problems closing Sandy’s eyes in front of you.” [It was] ...an affirmation of my, of my gentleness maybe...and I guess that just, made me feel like, yes okay...I’m trustworthy,...and I was like, well that...means something, you know. So yeah I felt good about that.

Morgan also commented on how satisfying it felt to receive positive feedback when the supervisor recognized that Morgan was using a self-preferred theoretical approach. The supervisee described an inward sensation of feeling “good...(laughter). Yeah I remember at the time thinking,...if Dale’s picking it up then I’m loving it (chuckles and smiles), you know?”

Supervisees were excited about receiving their supervisor’s feedback in general. Even when this feedback was not specifically positive feedback, it was still appreciated as a way of having one’s needs met within the supervisory relationship. Morgan positively anticipated that

watching the counselling video would provide an opportunity to receive more in-depth feedback compared to usual. The supervisee did not express this in-the-moment reaction to the supervisor, “I think I was just expectant, and very much excited about hearing whatever Dale had to say about it.” Alex was also appreciative of receiving corrective feedback. For example, the supervisee received corrective feedback on how to help the client set realistic goals. The supervisee’s in-the-moment experience of this corrective feedback was one of feeling encouraged, “It was...really good to know for the future because I want to do a bit more goal setting like that, so...I was like, okay, this is good...this is what I need.”

Safety

All supervisees felt a sense of safety and the ability to be vulnerable within supervision. They trusted that they could be open, genuine, and able to share a range of thoughts and feelings related to their counselling session. In one instance, Morgan revealed personal information to the supervisor; however, what was not verbalized was the whole-hearted embracing of being authentic and unguarded with the supervisor. Morgan revealed the depth and intensity of the in-the-moment experience:

[I was] just enjoying the situation so much...I get energized in that kind of situation, so yeah I just love it (laughter)... I just want to abandon everything and start talking about those things....Any chance that I have to get more open and excited, and let’s talk about us, what is really, you know important for us, I just take it, with both hands, and let’s get into this now (laughter)!

Pat felt safe accessing and sharing a sense of vulnerability. For example, the supervisee revealed during supervision that both Pat and the client have difficulty accessing their emotions at times. This occurred in the context of discussing the supervisee’s ability to access emotion:

Dale: It's a system you have to activate or it takes more energy...to go there [to access/process emotion]....Is that fair?

Pat: I'm fine with admitting that - I do see a lot of...what I do in this client as well.

Reflecting back on the supervision session, Pat's undisclosed, in-the-moment experience was one that reflected openness, non-defensiveness, and vulnerability:

It felt good to express that. That, you know this is something I recognize [in me], and also I see in this other person....It felt a bit gratifying to express that.

Throughout the research interview, two supervisees spontaneously informed me that they felt a sense of safety and openness in their supervisory relationship. For example, while commenting on the in-the-moment experience of watching the counselling video with the supervisor, Pat shared, "It was quite comfortable" and "I've always felt comfortable...sharing ...with Jamie." Alex mentioned that the supervisee and supervisor "have a very open supervision relationship," and that Alex is "able to be relaxed in session."

Growth and Accomplishment

Supervisees had nondisclosures related to their own learning and triumphs. They felt proud about their successes and accomplishments, and experienced a sense of growth through aha moments and reflection. The three subthemes include (a) pride and confidence, (b) aha moments, and (c) reflectivity. Each of these subthemes emerged from similar situations and moments; thus, there is some overlap in their context.

Pride and confidence. While watching and discussing their counselling videos with their supervisors, all supervisees acknowledged feeling proud or confident, but they did not express those feelings to their supervisors. For example, Pat felt confident after achieving clarity on a client conceptualization issue that the supervisee and supervisor grappled with throughout the

supervision session. One of Morgan's in-the-moment experiences was, "I'm very proud of myself for being patient with this client." The supervisee was also proud of the counselling video that was brought into supervision:

I was so happy about what I had done in that session,...much like how I wish all my sessions went...Seeing the video was like, oh you know maybe I could have done that differently here or there, or I could have gone to this point earlier, but I was still so happy about the result of the session that I just wouldn't have changed it.

Supervisees were proud and confident when they noticed their clients' positive progress and when the supervisees were satisfied with how they facilitated their counselling sessions. For example, Alex felt confident while giving an update on the client's progress to the supervisor.

The supervisee's in-the-moment feelings were articulated:

Pretty confident...that this session went really well, and that session we watched, and that this client is progressing really well. There is a clear plan, Sandy is following through on everything...showing progress. So...I felt confident in the plan and in the client and in myself.

In addition, supervisees had a deep sense of gratification as they watched themselves execute their preferred theoretical approaches during their counselling session. For example, Alex felt contented while noticing that Sandy was leading their counselling session, and noticing how this aligned with Alex's preferred way of working with clients. The supervisee's in-the-moment experience was articulated:

[It was] a good realization 'cause I want to be non-directive...Sandy's taking the lead...so it was,... good, like a validating realization that I'm...performing [therapy], the way...I want to, the way it should be you know?"

Similarly, supervisees felt pleased to know their supervisors were observing their accomplishments and sometimes offering positive feedback, which further boosted supervisees' confidence. Morgan was delighted that the supervisor observed Morgan using a preferred theoretical approach. The supervisee was proud that Dale recognized its appropriate application when Dale said, "Taylor's really welling up emotionally, and you stay with it." In addition to feeling proud, Morgan's undisclosed, in-the-moment experience of the supervisor's positive feedback was a confidence boost:

It's more like yes, yes, Dale sees, not the value but see's the appropriateness of what I'm doing, and because I thought so too ...[and] Dale said so too, so it makes me feel even more certain about what is it that I'm doing (smiles).

Stemming from this pride was also a positive anticipation or an excitement to showcase the counselling videos that were a source of pride.

Aha moments. Aha moments occurred for two supervisees when they had insights that were significant or impactful, or that arose spontaneously. Such aha moments carried with them a felt sense of accomplishment. Pat recalled an in-the-moment "epiphany" during supervision when both the supervisee and the supervisor were able to problem solve an issue they had been discussing. Likewise, Alex had an insight while watching the counselling video with Kelly. The supervisor commented on the client's fast pace of talking, "Sandy's just going right?" Alex's in-the-moment experience of this comment was, "I think when I was watching it here with Kelly, I realized how much energy it takes to keep up with Sandy mentally, and keep everything straight (smiles)." Pat also had an insight regarding the intentions behind a question that Jamie asked. In particular, the supervisor asked Pat the same question that Pat asked the client. The supervisee struggled to answer Jamie's question but then experienced a private, in-the-moment realization

which was reported to me as “then I figured out this experiential thing that Jamie was trying to do.” While the supervisee obtained insight on this, it was not shared with the supervisor.

Although some aha moments occurred spontaneously, they were actually preceded by a culmination of recent observations or reflections which in turn led to those insightful moments. The insights were realizations about supervisees’ work with clients or about themselves as supervisees. This was the case for Pat whose “aha” moment occurred after realizing a “parallel process” in which Pat and the client had similar struggles. For Alex, an insight was gained during a supervision discussion related to a mindfulness intervention for the client:

Kelly: And then the brain runs, so it’s like, with Sandy and the amount of energy Sandy’s got, it’s like, - full speed ahead right?

Alex: It’s nonstop.

Kelly: Like a train, yeah, so that, - let’s just stop for a second.

Alex: I think a mindfulness exercise would be good?

The supervisee’s in-the-moment experience was one of being intrigued with the insight:

So, I think what started this conversation, I said something like, “Sandy’s worried about something that is going to happen four years from now.” And so that’s a rumination about something and so the client’s worried about stories that haven’t even happened yet. And then I was like, - “Well that’s a really good way to put it.” And so I was thinking of that mindfulness exercise, and I think...I just wrote down some of those terms because I was like, well this is useful.

Reflectivity. Reflectivity was present for all three supervisees; and was marked by an active and deliberate exercising of discernment, problem solving, or an effort to deepen understanding on issues. It sometimes involved grappling with information from conversations

or feedback in order to arrive at more satisfying meanings. Reflection sometimes consisted of observing the supervisee's counselling session or noticing processes the supervisor engaged in. Supervisees attempted to understand their supervisor's questions and reflected carefully on their own responses. An example is Alex's experience of reflecting on Kelly's question:

Kelly: Is it hard for you to get a word in with the client? Or does Sandy allow for pauses?

Alex: No, the client doesn't allow for a lot of pauses.

Alex's undisclosed, in-the-moment reflections were shared with me:

And so, I was thinking at that moment when Kelly...asked, I was like, "Does the client allow breaks in the conversation?" 'cause the client hasn't up until this point, and it's been...5 minutes of video....So I thought, Sandy doesn't really allow for breaks, but...allow[s] me to speak and listens very clearly...and then when I was thinking about it...I was like, Sandy doesn't allow for pauses really...But...when the client does allow me to speak I could picture the client's face and,...really good eye contact, and the client's just calm, and it's a stark contrast to the rest of the session,...and I was like, "Oh but Sandy does listen when I talk so I have a very clear image of that."

Another example of reflecting on the supervisor's questions was when the supervisor asked what Pat's focus was for the supervision session:

Jamie: In going through this are there any particular things that you're wanting to look at or...or any particular questions that you have?

Pat: For this specific session...not really.

Despite replying with "not really," Pat continued to have inner reflections. The supervisee's in-the-moment experiences were explained:

When Jamie was asking me that...I was trying to think,...was there something I was wondering about? And I think I recall...my general feeling around that session was that it was...it was okay, there wasn't a big break through or a big problem that popped up. Morgan's supervisor asked a rhetorical question about what Morgan's client might be feeling. The supervisee reflected on this internally, and described the in-the-moment experience as, "What I was thinking was more like, 'Oh (squints eyes and begins to slightly whisper) look at the intensity, can Taylor feel it fully or is Taylor trying to escape it?'"

Finally, there was an appreciation of opportunities for reflecting on the supervisor's questions, comments, and processes that occurred during supervision. For example, Pat appreciated when Jamie asked an experiential question. The supervisee's undisclosed in-the-moment reflections were "that experiential part,...I appreciate that 'cause it's something that I want more practice in." Alex's in-the-moment experience was described as "never really know[ing] where Kelly's going." However, Alex stated, "[I] always appreciate what Kelly's...thought processes are, and on offering these educational moments." Overall, the supervisees enjoyed the opportunities for reflection, insight, and learning from their supervisors, which in turn contributed to their overall sense of growth and accomplishment.

Performance Anxiety

Supervisees' nondisclosures were present in the context of being acutely aware of the evaluative nature of their supervision. This heightened awareness was accompanied by self-conscious thoughts and emotions, as well as striving to meet the expectations of themselves and their supervisors. The two subthemes include (a) self-consciousness and (b) pressure to demonstrate competency.

Self-consciousness. All supervisees had both self-conscious thoughts and emotions. Some of their self-conscious experiences included self-criticism, self-doubt, and more neutral evaluations about themselves and their counselling work. Self-criticism occurred around how supervisees implemented their interventions. For example, Alex was critical of having imposed an idea onto the client with respect to the frequency of a practice. The supervisee's obscured in-the-moment experience was expressed:

Disbelief that I did that (smiles), not that I failed or, I did something terrible, but that... I know better, I should have figured that ...and I didn't even catch myself when I was doing it too. As soon as Kelly said it, I was like, oh yeah, of course...it should be from the client's perspective, not mine. So, to impose that, my belief of where I think they're at is unfair.

Supervisees also encountered self-doubt in relation to how well they implemented their interventions or theoretical approach with clients. They questioned if their actions were correct or could have been improved. For example, when Pat's supervisor asked a question about the approach taken with the client, the supervisee's undisclosed in-the-moment experience was recalled:

So there Jamie was asking me about, what's the goal and how do you execute it sort of thing....And so that question had planted some doubts there,...about the approach I used with the client.

Morgan discussed self-doubt around learning how to be consistent while implementing a theoretical approach with the client. The supervisee's in-the-moment experience was recalled:

So for me, it's a source of insecurity...when I find myself being so flexible, I'm often wondering, is this fair for my client because what if I'm being careless and what if I'm being unethical? You know? So it's very concerning for me.

Uncertainty around deciding whether to disclose information or self-doubt to supervisors was present for supervisees, yet also went unacknowledged during many supervision moments. For example, Alex's supervisor commented, "The client seems very comfortable with...you....Sandy's just very, very candid, and even joking." Alex began to feel uncertain about what to do in those moments. The supervisee's in-the-moment experience was explained:

At that moment, that's when I was thinking, "Oh should I have told Kelly, should I tell Kelly now?... I knew Sandy before our therapeutic relationship started.

Supervisees' nondisclosures related to self-judgment were also evident in how they minimized or dismissed positive feedback from their supervisors. For example, while Pat struggled to accept Jamie's feedback, this was not overtly expressed to the supervisor:

When Jamie said "smart move" ...It was like – mmm...I don't know if I would say [that], (laughs)It felt too much, you know...so when Jamie said "smart move" it was like – what? (laughter)?

Alex received positive feedback from the supervisor regarding guidance that was given to the client. Kelly said, "Yes...it's a good catch for sure..." The supervisee recalled the following in-the-moment experience:

I remember thinking...Kelly says, "Yeah that's a great catch" and in my head I was like, "It took six sessions though," (laughter) ...I could have caught that earlier.

Judgments also consisted of noticing and evaluating how the supervisee sounded within the counselling video. Morgan's internal reaction to the vocal pacing was kept private during

supervision:

I know that I get very excited, very quickly (smiles and laughs) and that's what I'm noticing there, that I'm like – “dah, dah, di, da, di, ah, da!” [speaking and creating up and down motions with hands]...and...when that happens for me I immediately get, I speak very fast.

Alex also paid attention to the sound of Alex's voice from the counselling video. Despite the fact that the supervisee knew, “a lot of people don't like the sound of their voice on...video or recorded,” the supervisee had a different in-the-moment experience:

I was like, okay...I'm listening to my voice and just seeing how it came across....I was listening to my tone and inflection and stuff on how to read [the script], like when I was reading...that script...and I liked it, I was...happy with it.

Self-judgement also occurred in reaction to how supervisees appeared to themselves in the counselling video. These reactions however, were not revealed to the supervisor. For example, Pat's attention was captured upon noticing personal body movements that looked unusual. The supervisee revealed the in-the-moment experience:

When I was looking at it [the counselling video]... all I could notice was ...my head move back and forth (supervisee moves head/neck erectly, forward and backward to demonstrate)...and I was like, I look kind of weird...and one of the things, I judge myself of is...when I nod my head, I kind of nod my head...or it seems that way...but...yeah, this doesn't look quite right.

Oftentimes co-existing with supervisees' self-judgmental thoughts were their more affective experiences of self-consciousness and awkwardness. Feeling embarrassed, or trying to avoid this emotion, was present. For example, a nondisclosure was recalled in which Alex felt “a

little bit embarrassed, that...I came up with this number, ‘this is what you’re going to do,’ so kind of embarrassed that I...blundered like that.” Pat’s covert reaction of embarrassment in response to the supervisor’s positive feedback was described as, “When Jamie said...that...[it]...felt a bit awkward to me. [I]...felt a little bit embarrassed to be honest.” Morgan explained a situation of not wanting to feel incompetent in the supervisor’s presence:

I know that I had...an idea of what it was that I was doing...but I can’t remember...I didn’t want [that to happen]...because that would have made me feel very....disappointed in myself...and I would have been worrying that somehow my ability might have been put in question.

Supervisees experienced moments of fear and anxiety about potential consequences that might occur in supervision as a result of their actions. They worried about getting “in trouble” for their mistakes and whether their supervisor was questioning their own ethics. For example, Alex worried about having done something wrong when Kelly broached a topic that was already on the supervisee’s mind. In these moments, Alex did not give voice to the following self-talk:

Ooh, I did something wrong (smiles)? And I think, I’ve talked to Kelly before about this ethical issue...and so that’s something I didn’t tell Kelly, I don’t know why.

Likewise, Morgan had a few moments of feeling anxious about the possibility of getting into trouble after implementing the supervisor’s suggestion. The supervisee’s internal reaction was not expressed to the supervisor, but was described to me:

I’m like, mm (smiles and tilts head to right)...I guess hoping that it’s not going to get me in trouble, because...I don’t feel like it was my fault to choose that intervention...or maybe that they didn’t work, you know as appropriately as they should have or whatever.

Supervisees refrained from expressing their anxious thoughts around receiving corrective

feedback from their supervisors. For example, Alex explained an in-the-moment fear:

We were gonna have to have a discussion about how to avoid that in the future (smiles)....It was also a trepidation of what was going to come.

Pat expressed anxiety over not knowing the contents of the upcoming counselling video that was about to be watched in supervision. The supervisee's in-the-moment experience of anxiety was described as, "Yeah, I'd rather Jamie kind of grill me like...before (laughter)." Lastly, supervisees also became self-conscious of their ability to articulate themselves to their supervisors. For example, Pat became self-conscious upon trying to articulate a point to Jamie:

So there....in that discussion ...there was this sense I had there, but I couldn't describe it at all...I was...struggling a lot there...I felt quite self-conscious there, I think I might have even been sweating a bit...I noticed myself wiping my brow [and] some sweat there.

Morgan on the other hand, imagined the awkwardness associated with replaying a video segment in order to recall and communicate information about the client to Dale. The supervisee's in-the-moment thoughts were explained:

"Am I just making this up?" And you know I don't want to do that but at the same time, the only other option that I would have had would [be to] ... go back to the video, think of okay (places right pointer finger on chin), yeah, and remember, and I didn't want that, it...kind of [felt] interrupting or even awkward.

Pressure to demonstrate competency. All supervisees felt a pressure to perform, to showcase their overall competencies as therapists. There was an implicit motivation to meet the personal expectations of themselves as well as those of their supervisors. Supervisees experienced moments in which they believed their supervisor's expectations were too high. Sometimes they were surprised by such expectations, and other times worried about whether or

not they would meet those expectations. At times, supervisees felt overwhelmed while processing their thoughts and feelings. Pat described feeling pressure in the moment when suspecting that Jamie might have expected a conceptualized plan for the client's treatment:

And, you know, I was talking about intentionality before, but that's almost too much intentionality...right, every single moment has a purpose...The general gist of it was, this is almost *too much* expectation.

Pat also had personal high expectations that surfaced while hoping to move forward from watching a particular counselling video segment. Being aware of not having the "exact times...to skip" forward to in those moments, Pat's undisclosed, internal thinking process was, "I don't have time to review all these videos (laughter)!" While the supervisor did not explicitly state this expectation, it seemed to be a personal expectation of Pat. Morgan perceived that the supervisor expected a particular response to a question regarding the supervisee's approach with the client. The supervisee was unable to come up with an answer that met the perceived expectations of the supervisor. Morgan's in-the-moment experience and frustration was revealed:

I'm like...what do you want me to say?...Why don't you just go ahead and say it because you know (laughter), you're looking for a particular answer, and I gave you my answer to what was true to me, but...it wasn't the exact answer you were looking for,...so now I'm lost. Why don't you just go ahead and tell me?

Supervisees also experienced pressure around being able to demonstrate their theoretical knowledge base and applied understanding. They felt pressure to successfully or adequately answer their supervisor's questions regarding their intentions, goals, and approaches taken with their client. Morgan began to feel pressure when Dale asked a theoretical question,

What do you notice ...when Taylor talks?...From some perspectives there would be that

interest in what Taylor's doing with the hands.

Morgan alluded to wanting to answer the supervisor's question but feeling the pressure of conceptualizing the answer from a different lens. The supervisee's in-the-moment experience was recalled:

Because for me when I'm with a client it's a lot about what I'm sensing and what I'm, you know, intuitively getting, but I don't think I take the time to dissect into – Taylor's hands are moving this way, and Taylor's moving this other way now.

All supervisees had difficulty and in some cases nervousness around trying to recall particular details from their counselling sessions. For example, Alex verbalized an in-the-moment struggle to remember details while presenting the client's background to Kelly:

I'm trying to focus on (chuckles)...getting all the details right...'cause this client talks a lot too....I'm...trying to make sure I didn't forget anything.

Morgan struggled to stay focused on remembering details to answer an experiential question in which the supervisor wanted an enactment of the client's behaviour. The supervisee's in-the-moment experience was described as a pressure to "replicate Taylor," and to maintain intense concentration on the task:

Be the client, and use the client's movements. So in that moment I was like (makes a breathing/blowing sound) – "Focus! (places both pointer fingers onto temples) Okay, can I do this, you know? (laughter)"

Pat struggled to remember generalities about the recorded counselling session. The supervisee's in-the-moment experience was described:

So Jamie's asking me about, "What are your recollections of the session?" And my memory of the session as a whole was quite fuzzy,...so I opened up the book to take a

look at my notes for that session and see if there was something specific that stood out for me thereThere was something else but I can't remember....Anyhow I just glanced at it briefly and then to see if I could jog my memory but it didn't work, so I just put it back down.

Supervisees were also motivated to recall *accurate* details about their clients and recorded counselling session, and to correctly articulate that information to their supervisors. They took this process very seriously as they were afraid to misrepresent their client. For instance, Alex tried to ensure that an accurate conceptualization of the client was presented to the supervisor. The supervisee's in-the-moment experience was trying to stay focused on accuracy:

Getting all the details right....It's about wording it in a way that accurately represents what this client is going through....If I misspoke and said the wrong words, then that misrepresents Sandy....So by me not saying it the correct way, how does that make my client look?

Two supervisees also had reactions of surprise and sometimes amusement related to their supervisor's expectations. Pat shared an experience of an unexpected turn in the conversation during a particular supervision context:

Jamie: One other thing is that, have you, did you watch this yet...this session?

Pat: No.

Jamie: Okay so that's good, so it's blank (smiles).

Pat: Yeah (smiles).

In the moment, Pat was feeling amused by this unexpected turn in the conversation:

It was funny...it was kind of unexpected, like, “Did you watch this yet?” kind of implies, “[I] expect you to watch it,” and I was thinking in that moment maybe something around the lines, “There’s no way I can watch these videos, I have no time (laughter)!”

Finally, when the supervisor invited the supervisee to engage in something experientially, Morgan’s in-the-moment experience was one of surprise, “And then Dale says, ‘Be Taylor...’ and I was...it caught me...off guard.” Despite the unexpected, the supervisee displayed a positive attitude to engage in the supervisor’s request.

Avoidance

All supervisees had moments in which they avoided various forms of confrontation or self-assertion with their supervisors. In general, there seemed to be both an implicit fear and a general respect for the inherent power differential in the supervisory relationship. Avoidance of confrontation occurred in a few different contexts. First, supervisees wanted to ensure they demonstrated respect for their supervisors and the unique context of their supervisory relationships. This included respecting the unwritten rules or customs of supervision, along with the boundaries and roles within the supervision relationship. For example, Morgan did not assert personal preferences despite feeling impatient about wanting to return more quickly to watching the counselling video. The supervisee described an in-the-moment experience of how the unique context of supervision influenced the supervisee to not speak up:

If it was a friend or if it was someone that wasn’t in this kind of relationship, “Shhh!

Watch first (points toward supervision video) and if you still have questions,” you know,

but I can’t do that with my supervisor, I can’t go, “Shhh!” you know (laughter)?

Morgan then explained that the awareness of the unique supervision context called for a different set of rules or expectations. The supervisee stated, “You use...different words

and...mannerisms...in different situations, and in this situation I expect not to be able to do that...even though...inside I am wishing I could.”

Avoiding self-assertion and confrontation was also related to wanting to respect the supervisor’s expertise and role. For example, Alex wondered if the supervisor would provide feedback on a client intervention where the supervisee had been “kind of winging it.” The supervisee, however, kept this private and described the in-the-moment experience as, “I think if Kelly’s got feedback I trust that Kelly will provide it. I don’t think I have to ask.”

In addition to supervisees wanting to avoid confrontation or self-assertion out of respect, they also avoided it to prevent the risk of having a conflict with their supervisor. For example, Pat reported feeling anxious about the potential consequences of disclosing to the supervisor that there was no goal. The supervisee’s in-the-moment concern was, “Where’s that gonna lead this conversation?” Pat wanted to avoid getting “bogged down trying to iron that out.” Thus, there was a need to avoid conversations that might lead to confrontation or conflict. In another instance, Morgan worried that confronting the supervisor or asserting personal needs would be perceived as coming across as too aggressive. The supervisee articulated an in-the-moment experience of not asking a clarification question:

If I could directly ask “Do you remember or not?”...I wish I could do that, but I don’t feel that I can. And then again...I’m very...what’s the word, very, dah, dah, dah (uses side of right hand to make ‘chopping’ motion on palm of left hand) about my things, ... very assertive I guess, and almost aggressively assertive? So...sometimes I’m afraid that my point might look like I’m angry and upset...I don’t want to...come across as being blunt and assertive in an aggressive way, I don’t want that. I don’t want to risk the good communication.

Supervisees also avoided asserting their own priorities and preferences regarding the overall flow and processes of supervision, especially when those preferences differed from their supervisors. When they believed their supervisor focused too much time on one discussion topic or segment of their counselling video, or when their supervisor re-visited a previously discussed topic, supervisees became impatient or bored. In this context, not only did the supervisees want to avoid confrontation, they also wanted to avoid interrupting the flow of their supervision. For example, Alex reflected on a moment at the start of supervision when the supervisee and the supervisor began to watch the counselling session, and Alex felt bored because viewing that particular video segment wasn't a priority. The supervisee's in-the-moment reaction was, "Yeah and so I think I was just remembering, 'Oh yeah...there's nothing good there (laughter)!" Alex then explained another in-the-moment experience of understanding the value it would have for the supervisor, "Yeah...but...it's good for Kelly to see who that client is." Morgan described impatience around the flow of the supervision session in which Morgan preferred to watch the counselling video as opposed to simply discussing the details. The supervisee's covert in-the-moment thoughts were, "I'm...feeling like, well if we just watch the video, this is going to become clear, so if...we just press play, (laughter), all these questions are going to be answered."

Finally, supervisees avoided bringing up minor concerns or trivial matters, perceiving them as being irrelevant or potentially disruptive of the overall flow of their supervision session. Pat experienced internal dialogue about looking "weird" in the counselling video and stated, "I didn't share that with Jamie because I didn't think it was relevant." Morgan recalled wondering if a personal concern should be discussed with the supervisor in which the client seemed to have become overly agreeable with Morgan. The supervisee did not disclose this, and explained the in-the-moment thoughts as, "If you get ...too caught up in those details then you're going to end

up you know, blocking the session...” Morgan also commented on covert decision-making processes around the personal concern not being relevant:

It wasn't that big of a deal...right then,... and so it's not, ...if we had to divide my mind in 100%, that was just 5% of my mind. It's not like it was overpowering and I actively chose to shut it down.

Discussion

This study examined supervisee nondisclosure experiences as they occurred in supervision with videorecording review. In addressing a gap in the literature, emphasis was on the specific contexts, situational factors, and social interactions that influenced nondisclosures (Mehr et al., 2010; Rosenfeld, 2000; Yourman & Farber, 1996). Prior research has investigated supervisee nondisclosures using retrospective interviews and surveys that examined the content, rationales, and effects of nondisclosures. The current research study used IPR, an interview technique that enabled an in-the-moment, contextualized approach to learning more about the subtle intertwined layers of supervisee nondisclosures as they occurred within the interactive context of supervision. For the sake of clarity in interpreting my findings, I sometimes distinguish between *what* was not disclosed (e.g., the *content* of the nondisclosures), and the overall experiences and processes of nondisclosure, which includes supervisees' thoughts and feelings in the moment, as well as their perceptions of how the nondisclosures were influenced by their situational context. Although these are not mutually exclusive experiences, it was a helpful way to capture nuances of the findings. Outside of my participants' voices, I also highlight possible explanations for the specific findings in this study (e.g., how the unique context might have shaped supervisees' nondisclosures).

Using thematic analysis, I conducted a within-case analysis for each participant followed by a cross-case analysis for all three participants. The cross-case themes include (a) validation, (b) safety, (c) growth and accomplishment, (d) performance anxiety, and (e) avoidance. I discuss the findings within the context of the cross-case analysis and also highlight unique differences from the within-case analyses. Implications for clinical supervision, limitations of this study, and suggestions for future research are addressed.

Discussion of Findings

Participants in this study had a range of nondisclosures from “positive” to “negative.” I begin by discussing the themes of validation, safety, as well as growth and accomplishment, all of which include some of the positive nondisclosures.

All supervisees had nondisclosures related to feeling validated through receiving encouraging statements, helpful feedback, and guidance. They felt affirmed when their supervisors acknowledged their own words and experiences. Ladany et al. (1996) found that supervisees had nondisclosures of feeling supported by their supervisors. In the present study, when participants felt validated by way of receiving helpful feedback and guidance, this might be considered a specific type of support. In Stromme’s (2014) study, nondisclosures pertaining to feeling validated in showing client work to supervisors were also identified. Although the supervisees in the present study experienced validation, they did not share this with their supervisors. Perhaps this is because individuals in Western culture are not accustomed to always verbally expressing how another person makes them feel in each moment. It is possible, that when in a supervision environment, there might be even less acknowledgement or expression of validation due to the professional environment that may feel more formal in nature. The fact that participants in the present study did not always share their validation is consistent with the notion that level one supervisees may find it uncomfortable to process how they are emotionally impacted by the interpersonal dynamics of the supervision relationship (McNeill & Stoltenberg, 2016). When supervisees receive positive feedback, rather than sharing their experience of validation, it is plausible they are more focused on processing and integrating that feedback. In other words, they are making sense of the subject matter rather than focusing on their own internal processes. This is consistent with the beginner’s mind of novice therapists whose focus

is naturally directed at processing concrete information as it relates to helping the client (McNeill & Stoltenberg, 2016).

A second theme of nondisclosures in the present study was safety. Supervisees felt comfortable, relaxed, and safe, although they did not disclose these experiences to their supervisors. The present study is one of the first to report nondisclosures related to feeling safe and comfortable. In a recent study, nondisclosures pertaining to feeling secure, safe, and calm due to the supervisor's affirmation and efforts invested into supervision were reported (Stromme, 2014). In general, however, prior studies of nondisclosures conducted retrospectively are likely to have participants forgetting their more subtle moments related to feeling comfortable and safe, and thus those nondisclosures may not have been reported. A unique finding in the present study was Alex's nondisclosures related to *humour*, which seemed to occur when a sense of ease was present. To my knowledge, nondisclosures pertaining to humour have not been found in other studies. Perhaps this is because the IPR interview in my study allowed participants time and space to recall their private and subtle experiences related to feeling comfortable. In addition, this interview format provides an opportunity for participants to reveal more moments of feeling safe and comfortable as opposed to just intense and negatively charged moments.

With respect to the overall experience of these nondisclosures, there are several reasons why supervisees might not disclose experiences related to feeling safe and comfortable in supervision. First, they might assume that their body language, facial expressions, or engagement in conversation already communicates their feelings. Second, because positive emotions are more fleeting compared to negative emotions that linger (Fredrickson & Branigan, 2000), supervisees may not spend much time focused on their positive experiences. Third, disclosure of all private information or internal processes makes a person vulnerable (Petronio, 2000). It is

possible that supervisees might be self-conscious about sharing their harmonious feelings about the supervisory relationship to their supervisor. Likewise, they might be afraid of being overwhelmed by the intensity of their positive emotions that might include tears of joy and accompanying feelings of vulnerability.

Given some of the positive experiences participants reported in the present study, it is possible that participants also had a good supervisory alliance. It is possible that alongside a strong supervisory relationship, they might have had nondisclosures related to experiencing positive emotions toward their supervisors. Although this type of nondisclosure was not identified in the present study, it has been noted in prior studies. For instance, Ladany et al. (1996) found that 23% of supervisees in their sample experienced undisclosed “positive reactions” (p. 14) to their supervisors that included enjoyable and appreciative thoughts or emotions regarding their supervisors. Mehr et al. (2010) reported nondisclosures related to “positive perception” (p. 108), which included experiencing optimistic cognitions and emotions regarding their supervisors. Perhaps these nondisclosures were too broad in nature to occur in the present study, which focused on in-the-moment experiences cued by watching the counselling video.

Although participants might have experienced good supervisory alliances, Morgan encountered relational impasses that were moments of ruptured trust, defensiveness, feelings of frustration toward the supervisor, and moments of not feeling supported. These are similar to nondisclosures related to “negative reactions” (Ladany et al., 1996, p. 14) to supervisors such as feeling upset with the supervisor, not feeling supported, or having disparaging thoughts toward them. An interesting aspect of Morgan’s experience is that it demonstrates that a supervisee can have moments of affirmation and frustration within the same supervision session. Similarly, Sweeney and Creaner (2014) found nondisclosures related to not having one’s “learning needs”

met in supervision, despite the supervisory relationship being positive overall. This demonstrates that a supervisee can have moments of ruptured trust in the context of a relationship that is positive or has positive elements, but it does not necessarily mean the supervisory alliance is weak. The other two supervisees, Pat and Alex, spontaneously communicated to me that they had good relationships with their supervisor. Alex stated that participating in the study was a chance to share nondisclosures focused on the positive versus negative experiences. Perhaps these two supervisees participated in the study with the mindset of being cautious to not emphasize or share negative nondisclosures. It might have been an intention to protect their supervisors, the supervisory relationship, or to avoid potential guilt around reporting such negative nondisclosures.

All three supervisees had nondisclosures related to growth and accomplishment. The subtheme of pride and confidence was present in all three supervisees; however, somewhat less so for Pat. There are a few points to consider regarding the *content* of these nondisclosures. For instance, Morgan and Alex both felt their counselling sessions went well, and they were excited to show them to their supervisor. This might have contributed to their actual experiences of pride and confidence. On the other hand, Pat admitted that the counselling session did not contain any big breakthroughs, which in turn might have led to feeling less pride and confidence. To my knowledge, only one study (Mehr et al., 2010) found a similar nondisclosure categorized as “clinical successes” (p. 108) in which 3.4% of the supervisees had nondisclosures related to feeling confident about their client interventions. Perhaps in the present study, pride and confidence occurred because supervisees had the ability to choose which of their clients would participate in this study. It is possible that clients were chosen when supervisees perceived a good working alliance or when they felt confident or hopeful about their client work.

The current findings highlight how nondisclosures related to pride and confidence emerged out of a social dialogue and its broader social context (Baxter & Sahlstein, 2000). As Jourard (1971) asserts, disclosures or nondisclosures are influenced by a “conversational chain” (p. 294). Nondisclosures unfold within the social context of reciprocal verbal and nonverbal feedback. In the present study, nondisclosures of pride and confidence occurred when supervisees communicated their client conceptualizations to their supervisor and reported positive client progress. Pride and confidence also emerged as supervisees watched their counselling videos with their supervisor. Additionally, when supervisees observed successful applications of their theoretical orientations, and when their supervisors noticed this and gave positive feedback, this further contributed to supervisees’ pride and confidence.

It is important to consider why supervisees might have chosen to not disclose their pride and confidence. Given that supervisees’ experiences of pride and confidence were captured on video, they might have believed there was no need to make them explicit. Also, in supervision, there seems to be an unwritten rule to not share such experiences, especially because the focus of supervision is on professional development and learning to become competent (Bernard & Goodyear, 2014) rather than discussing one’s accomplishments. Yet, in the present study, there seemed to be a need for supervisees to show their successes on video, and perhaps to receive validation and encouragement that they were on the right track with their work. Supervisees may not have shared their pride and confidence because to a certain extent, they may be influenced by cultural expectations to be humble (Fredrickson & Branigan, 2001).

Unlike other studies in which the modalities of supervision are unknown, or are mostly case management, the present study afforded more of an opportunity for the nondisclosure experiences of pride and confidence to be realized within the context of videorecording review.

In previous studies, not being able to watch one's counselling video in supervision or having to reflect retrospectively on nondisclosures across many supervision sessions, might have led to many missed opportunities for experiencing and also recalling nondisclosures related to pride and confidence.

All three supervisees had nondisclosures related to reflection, and both Pat and Alex had nondisclosures pertaining to aha moments. Prior studies have not found nondisclosures specific to reflection or aha moments. Perhaps this is because those studies asked about supervisees' nondisclosures retrospectively or across *many* supervision sessions, which might have diluted supervisees' memories. The closest that prior research came to finding nondisclosures pertaining to reflection was "general client observations" (Ladany et al., 1996), which referred to supervisee's thoughts regarding clients' appearance, behaviours, clinical conditions, and so forth. This overlaps with nondisclosures related to reflection; however, it leaves out reflective practice specific to the supervisee within the supervision session (e.g., reflecting on a response to give to the supervisor, or constructing helpful meanings from the supervisor's feedback). Thus, the present findings can be explained by the notion that nondisclosures related to reflection and aha moments are perhaps better understood within the context of how their in-the-moment social dialogues unfold. For example, these nondisclosures were often specific to pondering the supervisor's questions or comments, and engaging in collaborative discussions that attempted exploration and problem solving of issues. Another possible reason for not disclosing these experiences is that the visual cue of the counselling video might have facilitated reflective moments in supervision. For instance, when both the supervisee and supervisor watch the actual session, they do not need to expend energy on recalling details because the details are explicit. As a result, they can focus more on their discussions and in-depth reflections. In addition, the

IPR interview format provides many opportunities to notice and remember such reflections or aha moments. This, coupled with the focus on one supervision session, might have created a “zoom-in” effect that enabled supervisees to become aware of their reflections and aha moments. In a sense, it facilitated access to their stream of consciousness and associated experiences.

There may be other explanations for why supervisees might not disclose their reflections. First, reflection is by definition an inner process. While some supervisees might make their reflective process explicit, i.e., “I am just pondering your question,” the present findings indicate that supervisees do not disclose all reflective processes. It may be hard to decipher in the moment which aspects of one’s stream of consciousness should be disclosed. Revealing every single thought would be almost impossible. Second, supervisees may assume that their supervisor already observes them reflecting. For instance, when the supervisor asks the supervisee a question, it is known there is some degree of reflection occurring. In the present study, however, supervisees did not typically share their appreciation of the reflective process or the specific content of all of their reflections. In part this might be due to the fact that level one supervisees (i.e., novice counselling psychology students) are still developing their own ability to reflect on their practice (McNeill & Stoltenberg, 2016). Another reason is that they might be nervous and overwhelmed with many thoughts co-existing.

Nondisclosures pertaining to aha moments were present for Pat and Alex, but not for Morgan. Given Morgan’s few nondisclosures related to reflection, it makes sense that there were no nondisclosures related to aha moments, which typically stem from a reflective process. It is possible that Morgan was less focused on reflective processes because a prominent experience was pride and hoping to receive positive feedback. In particular, this supervisee needed more validation and reassurance during some moments of this supervision session, and so that might

have been a focus. This does not mean that reflective processes were not occurring for Morgan, but simply that they may not have been perceived as meaningful enough to share as nondisclosures to the researcher. Also, due to Morgan's nondisclosures of relational impasses, this might have redirected focus away from reflective processes. Negative emotions and the ancestral area of the brain they activate are known to inhibit the functions of the pre-frontal cortex including one's ability to engage in critical thinking and reflection (Fredrickson & Branigan, 2000; LeDoux, 2015). It is also possible that reflection and aha moments might occur more with supervisees who are feeling open to engaging in those processes at the time. Given that this research project examined only one supervision session, it may not be realistic to find nondisclosures related to reflection and aha moments within each supervision session. It is also possible that in supervision, experiencing nondisclosures related to reflection and aha moments are linked to instances in which one is actively seeking meaning or conclusion on some matter. For Pat and Alex, they might have needed more assistance with problem solving, experienced more challenging moments in general, or, were more open and receptive to exploring particular issues in more depth.

Another interesting finding regarding nondisclosures related to aha moments was found in Pat's within-case analysis. The supervisee had nondisclosures pertaining to parallel processes. These are unconscious patterns of interactions that unfold in either the therapeutic or supervisory relationship, and then subsequently transfer over and occur in the other relationship (Ekstein & Wallerstein, 1972). For instance, a realization occurred that Pat and the client both struggled to access their own emotions. When the supervisee inquired what the client was feeling, the client tended to provide intellectual answers. In the supervision session, as the supervisor asked about Pat's emotions, the supervisee struggled to access and process those emotions. In fact, Pat's

nondisclosure experience was a struggle similar to the client's; rationalizing or intellectualizing in the absence of having an emotional response. The present study provides further empirical support for parallel processes occurring within the supervisory triad. For example, in a study that examined 17 triads of supervisors, supervisees, and clients, the authors administered measures of dominance and affiliation across therapy and supervision sessions. They found that during the supervision session that followed the therapy session, supervisees began to act in ways similar to their client from the most recent therapy session. Likewise, it was found that supervisors also began to act similar to how their supervisees were in the previous therapy session (Tracey, Bludworth, & Glidden-Tracey, 2011).

To my knowledge, the present study is the first to suggest evidence that the parallel process may continue into the IPR research interview. For instance, when I asked the supervisee about thoughts and feelings experienced in supervision, the supervisee sometimes requested that we continue playing the supervision video. Thus, it is possible that it reflected a struggle of the supervisee to access thoughts and emotions in those moments of the research interview. The request to move forward with watching the supervision video during the research interview seemed to have been experienced with the same sense of impatience as it was during the supervision session.

In the following sections, I discuss some of the negative nondisclosures that participants experienced. Prior research highlights that the most frequent types of nondisclosures are negative reactions to supervisors and to supervision in general (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Pisani, 2005; Stromme, 2014; Yourman & Farber, 1996). Given these findings, one might wonder if negative experiences or reactions might have dominated the present findings; however, this was not the case. This might be due to the fact that I examined

nondisclosures in the moment across one supervision session rather than retrospectively across many supervision sessions (e.g., Ladany et al., 1996; Spence et al., 2014; Stromme, 2014). A potential reason that more negative nondisclosures were found in prior studies might be explained by the “negativity bias.” For instance, when a person reflects back on many supervision sessions, it is possible they will experience a negative bias and recall more negative versus positive nondisclosures. This hypothesis would be supported by the fact that the human brain is primed to focus on threats more than positive experiences, because avoiding threats is crucial to our survival (Gilbert, 2009; Kalat, 2009). Also, participants in my study did not get to choose a supervision session based on a significant nondisclosure that stood out (e.g., such as in Hess et al., 2008; Sweeney & Creaner, 2014). The IPR interview, which exposed supervisees to their in-the-moment supervision experiences, would have allowed for better recall of their subtle positive and broad range of nondisclosure experiences that might be missed otherwise. Another possible explanation for why prior studies have found less nondisclosures related to a positive nature might be due to the natural association that supervisees have to the term *nondisclosure*. For instance, the term might be associated with actively hiding something versus unconsciously choosing not to share. People often withhold or hide information for reasons such as fearing they will be negatively judged. This is also fitting with the fact that the reasons for many nondisclosures (Ladany et al., 1996; Mehr et al., 2010) are almost all negative in nature. In the present study, less negative connotations to the term *nondisclosure* may have occurred because watching the videorecording exposed a broad range of moments to reflect on, many of which were not negative experiences.

All supervisees experienced performance anxiety, with self-conscious thoughts and emotions, as well as pressure to be competent during supervision. In the present study self-

consciousness was not a *reason* supervisees did not disclose (e.g., as found in studies by Hess et al., 2008; Ladany et al., 1996; & Mehr et al., 2010); it was the actual content of nondisclosure that arose during supervision. Some of these self-conscious nondisclosures in the current study included self-criticism, self-doubt regarding the supervisee's interventions or theoretical approach, uncertainty around whether to disclose, evaluations or judgments about oneself (e.g., how one appeared or sounded on video), minimization of positive feedback, and fear of receiving corrective feedback. Supervisees also had nondisclosures related to embarrassment, worry over getting in trouble for a mistake or particular actions, and self-consciousness around trying to articulate oneself. Although previous studies reported similar findings, they were often *reasons* for not disclosing as opposed to the actual nondisclosure itself. For instance, "negative feelings" which includes feeling embarrassed, ashamed, or other uncomfortable feelings (Ladany et al., 1996; Mehr et al., 2010; Sweeny & Creaner, 2014); and "impression management" which are concerns about how the supervisor might perceive the supervisee in a less than favourable manner (Ladany et al., 1996; Mehr et al., 2010) have all been reported as reasons for not disclosing. It is important to note, however, that *some* of the self-conscious nondisclosures in my study do overlap with findings from prior studies. For example, nondisclosures related to "clinical mistakes" (Ladany et al., 2010; Sweeney & Creaner, 2014) and "perceived clinical mistakes" (Mehr et al., 2010, p. 108) have been found. This refers to both cognitions associated with possible errors or inadequacies as well as being concerned with how interventions were implemented. In addition, nondisclosures related to "concerns about professional inadequacy" (Mehr et al., 2010, p. 108) have been noted, such as feeling doubtful about one's skills and abilities. The experience of performance anxiety, along with accompanying self-conscious thoughts and emotions, is also consistent with research on level one supervisees who naturally

engage in impression management (Stoltenberg & McNeill, 2010). Indeed, at various levels of supervisees' development, impression management is a common reason for not disclosing (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010; Spence et al., 2014; Stromme, 2014).

Nondisclosures related to self-doubt and self-criticism were likely influenced by the process of watching one's actual counselling performance with one's supervisor. In a sense, there were three "observers" in the supervision room as the videorecording played; the client, supervisee, and supervisor. Viewing their own counselling videos might have enabled supervisees to notice their approaches taken with clients, and to glean first-hand information on how they sounded or appeared to themselves, their client, and their supervisor. All of this might have provided an easy opportunity for self-critique, and for anticipating potential critiques of their supervisors. A particularly new finding in this study were the types of self-judgments that supervisees experienced in the unique context of videorecording review. For example, there was a type of judgment associated with evaluating and observing how supervisees appeared or sounded in their counselling video. Their reactions included self-judgment, self-criticism, amusement, surprise, and neutral observations in which they simply noticed characteristics of themselves. The social context of "observers in the room" (e.g., the client, supervisee, supervisor, and also the researcher) in addition to observing oneself on video might have contributed to some of the nondisclosures pertaining to self-judgments and insecurities.

Videorecording review also provided a concrete foundation upon which supervisors were able to offer concrete feedback or comments regarding their supervisee's counselling work. In turn, exposure of one's work through the videorecording might have intensified the seriousness of such feedback. It is not unexpected that supervisees experienced self-doubt in which they were struggling to process and articulate their thoughts in response to the supervisor's questions

or statements. Likewise, supervisees had nondisclosures related to self-consciousness and discomfort in the moments of being asked questions by the supervisor. Their awkwardness came out of an interactive context in which they were formulating their thoughts and trying to find answers “on the spot” to those questions, and wanting to articulate themselves well.

In the present study, self-consciousness might have occurred because the supervisee was in the presence of the supervisor. In several of these instances the supervisees might have minimized the feedback due to their own insecurities as novice counsellors. One might expect that because the supervisor’s positive feedback was based on concrete observation (i.e., videorecording review) that supervisees would feel more comfortable accepting the feedback; however, this was not always the case. The fact that supervisees are being observed and offered positive or constructive feedback still evokes self-consciousness that supervisees do not reveal. These findings were similar to “reactions to evaluation” (Mehr et al., 2010, p. 108) as well as “evaluation concerns” (Ladany et al., 1996) defined respectively as “positive or negative reaction to summative and formative evaluation procedures” and “uncertainty or uneasiness about the supervisor’s assessment(s) of the supervisee” (p. 14).

Reflecting on how the social context might influence supervisees to withhold their experiences of self-consciousness in general could be understood in light of Goffman’s (1959) impression management theory. Supervision with videorecording review requires that supervisees be on the front stage and conform to habitual socialized roles in which they do not express their more vulnerable selves. In relation to politeness theory (Brown & Levinson, 1987), supervisees would naturally conceal their self-consciousness as they would want to “save face” and avoid “face threatening acts” which might lead to more embarrassment or humiliation. Admitting self-consciousness would be a negative face threat in that after supervisees reveal

their experiences they lose control over what their supervisors will do with that information. Likewise, as supervisees keep their self-consciousness to themselves, they put forward their “positive” face which increases the chances of receiving the supervisor’s approval.

According to communication boundary management theory (Petronio, 2000), when individuals feel threatened or vulnerable they are likely to tighten their boundaries (Petronio, 2000) to avoid face threatening acts (Brown & Levinson, 1987). While the present study supports the aforementioned theories, Gilbert’s (2009) psycho-evolutionary theory might hypothesize an adaptive function of displaying self-conscious behaviours. Applied to clinical supervision, his theory would support the idea that by supervisees displaying self-conscious behaviours in the presence of their supervisors, it may alleviate the need for supervisors to feel threatened by their supervisees. In other words, supervisees who expose their self-consciousness demonstrate their vulnerability and place themselves in a position of less power than their supervisor. This might encourage the supervisor to be more comfortable, protective, and caring toward the supervisee. In this sense, it may be adaptive for the supervisee to show self-consciousness to those in positions that hold greater power. It is possible that in the present study, the aspect of being evaluated prevented supervisees from taking the risk of being this vulnerable. After all, there is no guarantee of how a supervisor will react to such disclosures. Also, for supervisees to display their self-consciousness, they too must be comfortable with their vulnerable emotions.

Within the overarching theme of performance anxiety, supervisees experienced nondisclosures around a felt pressure to perform, which included meeting the perceived high expectations of their supervisors. According to the IDM, level one supervisees have high levels of extrinsic motivation in which they focus on meeting the demands of their supervisors and

program (McNeill & Stoltenberg, 2016). Prior research found nondisclosures related to experiencing “evaluation concerns” (Ladany et al., 1996) and “concerns about the supervisor’s perception of supervisee” (Mehr et al., 2010, p. 108). In the present study, Morgan and Pat had nondisclosures related to surprise or amusement in reaction to their supervisor’s high expectations. Perhaps they did not disclose this in an attempt to avoid confrontation or maintain proper etiquette. They might have felt disbelief in the moment, or that their experiences were not relevant to share. Supervisees all had nondisclosures related to pressure and nervousness around trying to recall details from their counselling session, and struggling to articulate those details to their supervisor. Morgan alluded to experiencing a fear of appearing incompetent in front of the supervisor as details were forgotten. The other two supervisees did not have similar fears around forgetting details. It is possible they simply did not report any associated emotions to me in those moments whereas Morgan did. Struggling to recall details was not found in other studies; however, Pisani (2005) found that supervisees described discomfort admitting that they were disorganized. A possible explanation other studies have not found this is because this reflects an in-the-moment experience based on a supervision session that incorporates reviewing the counselling video. Interestingly, in this study, the issue of struggling to remember details is present despite the activity of watching the counselling video. This highlights the fact that, without a counselling video in supervision, or without the supervisee watching it prior to supervision, memory recall may be drastically reduced. The pressure to perform seemed to be embedded within the reciprocal context of the supervision dialogue. For instance, in reaction to the supervisor’s statements, supervisees feel compelled to give “specific” answers, report their in-the-moment goals and intentions from their counselling session, and demonstrate their theoretical understandings. Unique pressures arising from the context of watching the

counselling video are that the supervisee's work is exposed and not hidden. There is more room for specific questions to be asked about the supervisee's work. Simultaneously, there is less room for supervisees to fabricate answers or to speak in generalities, and this may create added pressure. The conversation is automatically more focused given the context of the counselling video.

Pat's within-case analysis theme, moments of being stuck, overlapped with performance anxiety; yet a nuance was that Pat had several moments of feeling confused by the supervisor's questions and comments, and was unable to think of answers. In addition, this supervisee had nondisclosures related to feeling distracted and wishing there was extra time to access and process emotions. It is possible that Pat had more feelings of confusion and being stuck due to difficulty remembering the counselling session which was recorded a few weeks prior. Pat also had a second counselling session with the client since that time. The supervisee did not report being excited to show the counselling session incorporated into this study, and did not speak often of feeling proud or confident about the supervision session. Perhaps there were more moments of struggles within this counselling session, which then impacted the supervision session (e.g., parallel processes).

All supervisees experienced avoidance, which were moments of wanting to avoid various forms of confrontation with their supervisors. It is helpful to consider how these nondisclosure experiences arose out of different contexts within supervision. First, supervisees wanted to avoid confrontation to respect the unwritten expectations of their roles as supervisees and to maintain appropriate boundaries in supervision. They also expressed wanting to respect their supervisor's authority and associated expertise. This is consistent with communication boundary management (CBM) theory (Petronio, 2000), which explains how individuals negotiate the nature of

disclosing versus non-disclosing in relation to the people and situations in which they are involved. In the present study the supervisees had internalized their own boundary rules regarding their nondisclosures and what they believed was appropriate in the moments of their supervision dialogues. This theory would also posit that the emergence of the supervisees' boundaries was in part automatic or ritualized. In other words, the supervisees each had their own habits around disclosure that would influence their avoidance of confrontation.

Prior studies have cited similar findings around nondisclosures related to avoiding confrontation. However, such studies have focused only on *reasons* for those nondisclosures as opposed to the actual content of those nondisclosures. For instance, deference has been identified as a reason for nondisclosures and has been defined as being aware of what behaviour is most suitable given the position of the supervisee's role and the associated etiquette of respecting authority of the supervisor's position (Ladany et al., 1996; Mehr et al., 2010). Considering the "supervisor as expert" (p. 215) was identified as another reason for nondisclosures (Sweeney & Creaner, 2014). Similarly, awareness of a "power differential" (Hess et al., 2008, p. 404), "power dynamics" (Sweeney & Creaner, 2014, p. 217), and concern for the potential consequences of how it might impact the supervisee are other stated reasons for nondisclosures. In another study, one supervisee did not believe that she "had the power" (Sweeney & Creaner, 2014, p. 217) to bring something up. The present research findings offer an important understanding of nondisclosures related to avoidance as they emerged within their natural context. It is possible that nondisclosures of avoiding confrontation may be more easily recalled by supervisees while watching the supervision video as opposed to attempting to remember such experiences over a longer retrospective time frame. In addition, the present study provides an understanding of the multiple layers of nondisclosures related to avoidance, including the content and in-the-moment

experiences of nondisclosures, as well as a rich understanding of the supervision setting in which the nondisclosures occurred. The current findings also pointed to nondisclosure related to participants' desire to avoid conflict due to perceived negative consequences. This finding is similar to "perceived negative consequences" (Mehr et al., 2010, p. 109), another reason for nondisclosure in which there is fear that sharing might make things worse or have negative implications. In Ladany et al.'s (1996) study, a similar reason for not disclosing was fear of "political suicide" (Ladany et al., 1996), where one worries about the negative impact of disclosing. The benefits and risk theory (Rosenfeld, 2000), which describes how a person's decision to disclose or not disclose is based on a weighing of the perceived pros and cons of disclosing in a given social context, also helps explain supervisees' nondisclosure experiences of wanting to avoid negative consequences. In the present study, in any given moment, supervisees were weighing the benefits and risks of disclosure, and sometimes they imagined the risks of disclosing as outweighing the benefits.

Supervisees also avoided asserting their own priorities and preferences regarding the overall processes of supervision. This is a unique finding in the literature, likely to be found while examining nondisclosures within their situational context. For instance, one supervisee alluded to experiencing a lack of power regarding pacing of watching the counselling session. The supervisee's needs were not asserted because it was felt that the supervisor had already taken control and was rewinding the session to an earlier moment (rather than moving forward as the supervisee wanted). In another instance in which the supervisee did not want to hear so many suggestions, the supervisee did not believe it was possible to change the supervisor's style. Supervisees chose not to assert their needs because they did not want to interrupt the flow of their supervision session. Similarly, in a previous study on nondisclosures, "time constraints"

(Mehr et al., 2010) were noted as a reason for nondisclosures, and this referred to ensuring that time was available for other topics or actions. In the present study, time constraints were also a partial concern for supervisees in that they wanted to make sure there was enough time to watch *several* different parts of their counselling video. Also, supervisees became impatient or bored when their supervisor focused too much time on one video segment and its related discussion topic, or when the supervisor re-visited a previously discussed topic. There was a desire to maintain a flow that offered an idiosyncratic rhythm or structure that was valued by the supervisees, and that satisfied their needs for the supervision session.

It seems that supervisees had nondisclosures related to avoidance when they believed their thoughts or experiences were not relevant. In prior studies, lack of relevance was listed as a reason for nondisclosures (Ladany et al., 1996; Mehr et al., 2010; Spence et al., 2014; Sweeney & Creaner, 2014). For example, in a study of clinical psychologists who were actively receiving supervision, they avoided sharing information with their supervisors when that information was perceived as irrelevant to their performance as a psychologist (Spence et al., 2014). They perceived their nondisclosures as a type of boundary that separated their professional and personal concerns. Specifically, the less relevant that information was perceived to be to their professional work, the more impermeable their boundaries. In addition, when the supervisees had already developed the skills needed to monitor and handle issues or concerns on their own, they did not disclose (Spence et al., 2014).

While the cross-case analysis demonstrated that all three participants had forms of avoidance, Alex had relatively few avoidance nondisclosures compared to the other two supervisees. Pat and Morgan, however, had themes of diplomacy and deference. Alex communicated to me the desire to represent a positive experience of the supervision session, and

this might be one way of understanding this supervisee's within-case analysis. Alternatively, there might have been fewer issues within this particular session where Alex felt the need to avoid confrontation and conflict. A third possible explanation is that given Alex's unique experience of humour and laughter within the supervision session, it might have detracted the focus away from confrontation or potential conflict.

Nondisclosures pertaining to avoidance would be most closely related to Hess' definition of "intentional" (2008) nondisclosures which are conscious decisions to not disclose. They would also be related to Ladany et al.'s (1996) passive nondisclosures which involve avoiding broaching a topic simply because the supervisor does not bring up the topic. In the case of nondisclosures specific to avoidance, supervisees experienced something that bothered them; however, they refrained from disclosing those thoughts to their supervisors as a way of avoiding confrontation and conflict. Although previous studies indicate that supervisees who avoid broaching difficult topics have been known to have weak supervisory alliances (Hess et al., 2008; Ladany et al., 1996; Mehr et al., 2010), my study suggests that supervisees who withhold discussing difficult topics may still have relative strong supervisory alliances.

Implications for Clinical Supervision

Based on the current findings, I have several recommendations for clinical supervision in the context of videorecording review. I discuss ways of supporting a broad range of supervisee disclosures and how supervisors may facilitate those disclosures. I also examine disclosures and nondisclosures in the context of understanding a supervisee's rights, personal and professional boundaries, relevant ethical considerations, and the role of culture.

Encourage a broad range of disclosures. An overarching recommendation is for supervisors to encourage their supervisees to disclose a broad range of experiences in

supervision, both positive and negative. For example, supervisees might be encouraged to share their positive experiences during supervision. The current study indicates that supervisees may experience affirmation, comfort, pride, and confidence; however, they do not necessarily disclose that to their supervisors. There might be benefits, however, to disclosing such positive experiences. That is, if supervisees share these experiences it might positively impact the supervisory alliance, which in turn might positively impact client outcomes. While there is likely no harm in positive nondisclosures, they may represent missed opportunities for enhancing the supervisory relationship. For instance, while supervisors might notice supervisees' body language or tone of voice that demonstrates they are feeling supported or relaxed in some moments, supervisors may not have confirmation of this. They might also wrestle with their own self-doubt around how their supervisees feel. It might be validating for supervisors to know and receive confirmation that their supervisees are feeling supported. This in turn might be beneficial to the supervisory alliance. Supervisors may consider maintaining an in-the-moment presence and curiosity with their supervisees. They might listen attentively and be willing to join into a dialogue with respect to their supervisee's positive experiences. For instance, this might include checking in with supervisees to verify any hunches the supervisor has regarding whether the supervisee feels validated, supported, or the contrary.

There may be benefits to supervisees sharing other positive experiences such as pride and confidence. For instance, this might create space in supervision for a more strengths-based conversation. According to the IDM, level one supervisees are highly anxious (McNeill & Stoltenberg, 2016) and may initially benefit from a strengths-based focus as a way of alleviating some of their anxiety (Stoltenberg & Delworth, 1987). As the supervisee discloses feelings of pride and confidence, the supervisor may join in and positively influence this inner dialogue of

the supervisee. It can provide validation to supervisees that they are indeed performing well, or it can serve as a reality check if something is not going as well as they initially thought.

Alternatively, supervisors might ask how the supervisee is feeling in what seems like a supervisee's proud moment. This would give the supervisee permission to share pride and confidence and to let go of the unwritten cultural rule of needing to be humble (Fredrickson & Branigan, 2001). According to the broaden-and-build-theory of positive emotions (Fredrickson, 2004), experiencing positive emotions such as pride (Fredrickson & Branigan, 2001) has the potential to create an *upward spiral* (Fredrickson, 2004, p. 1373) in which further positive emotions may occur. For instance, pride is associated with "an urge to share the news" (Fredrickson & Branigan, 2001, p. 143) and accomplish more. It might also lead to the experience of higher self-esteem (Fredrickson & Branigan, 2001). In addition, experiencing positive emotion tends to act as a buffer, undoing the effects of other negative emotions and experiences. Applied to the supervision context, expanding on these strengths-based conversations might offset other negative experiences in supervision. This latter benefit might strengthen the supervisory alliance and promote more disclosure by the supervisees. Frederickson's (2004) theory also suggests that experiencing positive emotions can actually enhance the bond in relationships.

In addition to sharing positive experiences, further consideration should be given to encouraging supervisees to share a broad range of their experiences, such as reflections and aha moments. The present study indicated that supervisees intentionally reflect on, and integrate much information from their supervision dialogues as well as from their counselling video. There might be value if supervisees disclosed some of these in-the-moment reflective processes. This would let the supervisor know the supervisee was actively engaged in the process of reflection

which often stems from the supervisor's questions or comments. There may be little harm in not sharing these experiences; however, when supervisors know that supervisees appreciate their comments and questions, it may further expand and improve depth of conversation. Likewise, when supervisors and supervisees know that their in-the-moment priorities are aligned, this in turn is a form of positive input for both people. It may create a reciprocal synergy or contribute to a state of flow within supervision. Making such processes transparent may provide the supervisor with more opportunities to stretch their supervisee's thinking and to facilitate their problem solving. It may also provide helpful input to evaluations.

Given the current findings, there are other pragmatic ideas on how supervisors may support and influence a range of supervisee disclosures. Hawkins and Shohet's (2006) seven-eyed model of supervision highlights various domains in which conversations can be focused in supervision. It may be helpful for supervisors be aware of these domains including focusing on the client (e.g., the client's presenting issues and how the supervisee intervenes), the supervisee (e.g., the supervisee's relationship to the client and the supervisee's own internal process), as well as the supervisory relationship which also includes the supervisor's internal processes (Hawkins & Shohet). This model also underscores the importance of the supervision context, which in the case of the current study incorporates videorecording review. One domain that might be non-threatening for supervisors (and supervisees) to focus on while watching videorecordings are client factors and processes. This might be seen as a safe and concrete place to begin for level one supervisees as it provides an external structure of focusing on the client rather than self. In light of the current findings, I suggest that supervisors utilize videorecording review and also begin introducing a focus on exploring supervisees' own internal processes regarding themselves. For example, the supervisor might ask an open-ended question such as,

“What’s on your mind right now as you watch yourself on video?” If supervisors can ask more open-ended questions about the *supervisee* rather than the *client*, this may invite the supervisee to disclose a range of thoughts and feelings. For instance, this might include feelings that are positive (e.g., affirmation, comfort, pride, or confidence), thoughts related to reflection or aha moments, and more uncomfortable feelings such as insecurities. Exploring the supervisee’s thoughts and feelings about observing the self on video might allow for more processing of self-conscious experiences. This might have particular applications for level one trainees who are in the beginning stages of watching their counselling videos. Although supervisors may want to create a safe space in which supervisees have the option of sharing some of their authentic experiences, supervisors must know their supervisee. In other words, before prodding for disclosures, supervisors might consider issues related to boundaries, relevancy of disclosures, and the supervisee’s overall level of comfort in sharing (I discuss these issues in greater detail below). Utilizing videorecording review in supervision with level one supervisees may be beneficial as it enables more concrete opportunities to focus on supervisees and their inner processes in relation to their counselling work. It also helps to facilitate transparency and minimize the effects of impression management.

Encourage reflective practices to facilitate disclosures. It is known that the practice of supervisee reflection in general is needed for all levels of supervisee development (Ronnestad & Skovolt, 2003). Encouraging independent practices of supervisee reflection, both inside and outside of supervision is recommended. This might increase the chances that supervisees have valuable insights, questions, curiosities, or various other thoughts or emotions worthy of discussion. When supervisee reflection is initiated independently, it might create more engagement, commitment, and openness to spontaneously disclosing and discussing a range of

issues. Supervisors might consider encouraging supervisees to engage in reflective journaling regarding their clinical experiences (Griffith & Frieden, 2000). For instance, each week, they might write about their reactions to watching a videorecording or some other event that occurred in relation to their supervision or counselling sessions. This might help them to develop more self-awareness in general, and to identify issues they believe are worthy of discussion for supervision. After all, it is difficult to disclose issues in supervision when one is not aware of which issues are worth the time. On the contrary, the space that writing holds may provide a safe boundary in which supervisees can explore their intentions for what they would like to disclose in supervision. As supervisees introduce some of their inner reflections in supervision, it may provide an opportunity for the supervisor to assist with scaffolding and deepening of their professional and personal development (Ronnestad & Skovholt, 2003).

Another recommendation is for supervisors to allow extra time for supervisees' reflections to unfold during the supervision session. The present study indicates that during supervision with videorecording review, there is large amount of information to process and digest. Supervisors however, may not always be aware of the extent or intensity of such reflection, especially if supervisees do not share their reflective processes. Thus, a suggestion for supervisors is to allow extra time for supervisees to process and answer the supervisor's questions. Supervisors might explicitly state, "Take a few minutes to think about that." According to the IDM, level one supervisees are developing their abilities to reflect on their practice (McNeill & Stoltenberg, 2016), and thus it might be helpful for supervisors to find ways of further supporting this. In addition, the findings from the present study suggest that supervisors may want to be careful of spending too much time on intense reflection as

supervisees sometimes feel overwhelmed in trying to process information during their supervision session.

Solicit feedback to encourage disclosures. In the present research study, supervisees withheld sharing their uncomfortable experiences; thus, supervisors may facilitate disclosures by routinely soliciting feedback in supervision. Many supervision measures exist to solicit feedback within clinical supervision, and they may help to facilitate conversations that encourage more supervisee disclosure. In a recent review by Wheeler and Barkham (2014), various supervision measures within the literature were examined from the past 34 years. They discovered 59 sound questionnaires, and found that 10 of them were adaptations to the common *Supervisory Working Alliance* (SWA) measure by Efstation, Patton, and Kardash (1990). Sample questions of the SWA include, “My supervisor helps me talk freely in our sessions” (p. 327), and “My supervisor treats me like a colleague in our supervisory sessions” (p. 327). The supervisory questionnaire that received the highest rating in Wheeler and Barkham’s (2014) study, and that could be used routinely in supervision for feedback, was the *Brief Supervisory Alliance Scale* by Ronnestad and Lundquist (2009). Some of the sample questions include, “In supervision, I feel free to address the negative feelings I may have toward my supervisor” (Wheeler and Barkham, 2014, p. 377), and “My supervisor helps me to talk openly in supervision” (Wheeler and Barkham, 2014, p. 377). This measure has both a supervisee version as well as a supervisor version to support reciprocal feedback. Another measure that supervisees can complete after each supervision session is the *Helpful Aspects of Supervision Questionnaire* (HASQ) (Llewelyn, 1988). It can be used routinely, ideally within 24 hours after the supervision session, and it asks about events supervisees found most helpful to themselves or to their clients and some of the reasons those events were experienced as helpful (Llewelyn, 1988; Wheeler & Barkham, 2014). A few other

measures worth noting that were used in Ladany et al.'s (1996) study were the *Supervisory Styles Inventory* (SSI) and *Supervisory Satisfaction Questionnaire* (SSQ). The SSI measures both a supervisor's and supervisee's perceptions of the supervisor's supervision style. Three different facets of supervision styles measured are: attractiveness (e.g., collegial style), an interpersonally sensitive nature (e.g., relationship-focused), and task orientation (e.g., focused on practicalities and content) (Friedlander & Ward, 1984). The SSQ (Ladany et al., 1996) contained eight questions that examined supervision satisfaction from different perspectives. Adapted from a pre-existing *Client Satisfaction Questionnaire*, the items on the SSQ included, "How would you rate the quality of the supervision you received?" (as cited in Bernard & Goodyear, 2014, p. 322), or "If a friend were in need of supervision, would you recommend this supervisor to him or her?" (p. 322).

Based on the present findings, supervisees are sometimes reluctant to provide genuine feedback, especially corrective or negative feedback. Thus, supervisors might get into the habit of asking, "What was one thing that was helpful today?" and "What is one thing you would like to be different in your next supervision session?" This latter question creates an expectation and ongoing invitation for supervisees to consider sharing their more difficult thoughts or feedback with supervisors. It may provide a type of exposure for supervisees to practice discussing uncomfortable topics. Given that negative nondisclosure experiences may have a detrimental impact on the supervisory relationship, they may be important to address. Also, negative emotions may limit a person's ability to reflect and take productive actions in the moment, as they activate structures of the reptilian brain which may limit cognitive focus to survival strategies only (Fredrickson & Branigan, 2001). Thus, supervisors may want to give supervisees time and space to calm down and think more clearly before inviting a discussion on difficult or

negative nondisclosures. This also allows supervisees to reflect on whether they would like to share those nondisclosures with their supervisor. Supervisors might also ask for specific feedback based on their personal hunches. For example, if a supervisor believed she was too dominant, she might disclose this and ask for the supervisee's reaction. Finally, if supervisors have any of their own insecurities or weaknesses around the power dynamic, they can discuss them ahead of time with their supervisees (e.g., "Sometimes I wonder if I do too much talking," or "Sometimes I wonder if I take too much control of how we structure our supervision sessions? What are your thoughts on this?").

In addition to supervisors soliciting feedback from supervisees, it may also be important for supervisors to proceed with caution in forming assumptions about their supervisee's experiences of receiving positive feedback. For example, the current study brought to awareness moments in which it was difficult for supervisees to accept positive feedback. It is possible that the participants felt self-conscious about accepting it or that their own self-criticism made it difficult to integrate the positive feedback. Thus, it might be helpful for supervisors to explore potential self-conscious reactions by asking questions such as, "What is it like to receive that positive feedback?"

Set the expectations. Implementing a supervision contract (Bernard & Goodyear, 2014; Spence et al., 2014; Sweeny & Creaner, 2014) in the first supervision session may act as a springboard for setting expectations, providing education, and outlining the responsibilities and expectations of the supervisor and supervisee. The majority of suggestions outlined within this section can be introduced or implemented within the context of a supervision contract.

Given that participants in this study experienced nondisclosures around the fear of making mistakes, I recommend that supervisors educate supervisees on the fact that it is normal

to make mistakes, and that it is part of an inevitable learning curve (McNeill & Stoltenberg, 2016; Sweeney & Creaner, 2014; Yourman & Farber, 1996). This might alleviate some anxiety and encourage supervisees to be more comfortable in disclosing self-conscious material. In addition, supervisors can bring to supervisees' attention the aspects of supervision that are commonly experienced as anxiety-provoking. These might include topics around the fear of making mistakes, being judged, experiencing evaluation, intimidation around power differences, and struggling to express disagreements. Providing education on the fact that these are difficult topics to discuss might normalize supervisees' self-consciousness and make them more willing to share (Mehr et al., 2010). Similarly, supervisors could inquire what topics might be most difficult or uncomfortable for supervisees to discuss (Mehr et al., 2015). This would allow supervisors to become familiar with contexts in which they might want to be sensitively attuned to discussing particular experiences, self-conscious or otherwise, in further detail.

Supervisees should be informed about their power and rights in supervision. This might reduce their avoidance of broaching difficult conversations. For instance, supervisors might bring attention to the underlying power dynamics that exists due to the evaluation context, and the barriers this may pose to supervisees' disclosures. In the present study, supervisees avoided various types of confrontations, in part, because they were aware of the power differential and were cautious about overstepping their boundaries. Perhaps if supervisors provided supervisees with a concrete checklist of their rights and responsibilities, this would be helpful. Bernard and Goodyear (2014) have presented an example of a Bill of Rights and other supervision agreements that address such issues. I recommend that such documents be incorporated into supervision as they would facilitate conversations that specifically address the power dynamics within the relationship. For instance, they might outline that although it is difficult to discuss

disagreements, personal differences, needs, or uncomfortable feelings that arise in supervision, it is an expectation that disclosures occur regarding those experiences. Supervisors can also make explicit that such disclosures will not impact supervisees' evaluations in a negative manner. Knowing this may help supervisees to feel comfortable in regards to asserting their needs or opinions. Finally, supervision documents might be used as a springboard to offer education on the negative impacts of nondisclosures (Sweeney & Creaner, 2014).

Supervisors might also normalize supervisees' desire to strive for perfection and to prove competencies. Participants in this study had nondisclosures related to the pressure to live up to the expectations of their supervisor, and to prove their abilities. Supervisors might be explicit and tell their supervisees, "There will be times when I ask you challenging questions for reflection, and sometimes you might not have an answer, and that's perfectly normal. That is part of the growth and development process." In a similar vein, a few of the participants felt their supervisors were looking for specific answers and this created pressure. One supervisee experienced a nondisclosure of, "Why don't you just go ahead and tell me [the answer]?" Thus, a suggestion is for supervisors to consider balancing their questions for reflection with providing education and specific guidance as well. Incorporating such a balance in structure is compatible with the IDM's theory that level one supervisees are low on autonomy, and they develop and thrive in the presence of their supervisor providing structure (McNeill & Stoltenberg, 2016). In Ronnestad and Skovholt's (2003) longitudinal study on trainees' development they found that during the "advanced student phase," (p. 14) which is tantamount to level one supervisees, that supervisees had "considerable external dependency" (p. 15) and needed their supervisor's structure. Supervisees should also receive education that it is beneficial for them to discuss their performance anxiety as their supervisors can help them work through it. It has been suggested

that when supervisees have performance anxiety it impedes their ability to be fully present and empathic with their clients (Stoltenberg & McNeill, 2010).

Supervisor disclosure to facilitate supervisee disclosure. Another recommendation is for supervisors to engage in their own self-disclosures during supervision (McNeill & Stoltenberg, 2016; Sweeney & Creaner, 2014). Participants in the present study had self-conscious emotions such as embarrassment and awkwardness but did not share this aloud. To help facilitate such disclosures supervisors could role model disclosure of their own self-conscious thoughts and emotions while demonstrating appropriate boundaries of self-disclosure. For instance, they might share a specific client scenario from their past, and their own emotional reaction that occurred in supervision. They might choose an example that seems relevant to the supervisee's situation, and then normalize such reactions while encouraging the supervisee to share such experiences. This might allow for a more relaxed and safe environment in which supervisees can openly share a range of their thoughts and feelings. McNeill and Stoltenberg (2016) stated that sharing experiences specific to being a novice counsellor can help reduce the supervisee's anxiety in general. Another way of promoting self-disclosure is for supervisors to discuss their own examples of clinical work (McNeill & Stoltenberg, 2016), and to show examples of their own video recordings (Gonsalvez et al., 2016). Novice trainees seek to emulate seasoned therapists (e.g., their supervisors) and renowned experts, as it provides supervisees with concrete examples they can incorporate into their work with clients (Ronnestad & Skovholt, 2003).

Ethical decision making around nondisclosures. The decision for supervisees to disclose information in supervision is embedded within their professional and personal boundaries. It may be challenging for supervisees to know what to disclose. Likewise, it may be

difficult for supervisors to discern when to respect a supervisee's boundaries of personal information and experiences versus when to probe the supervisee's boundaries and to expect more disclosure. I will discuss this challenging decision-making process within the context of the Canadian Psychological Association's ethical guidelines for supervision (2009). According to principle of *Respect for the Dignity of Persons*, it is reasonable to expect that supervisees disclose information regarding their theoretical orientations and practices, as well as their personal viewpoints or characteristics that may impact the supervisory triad. It is also advised that dissimilarities or disagreements within the supervisory relationship be acknowledged and worked through in a transparent and professional manner. The principle *Integrity in Relationships*, espouses that care be taken to respect "professional boundaries," (p. 7), avoid harm or exploitation of others, and avoid dual roles within the supervisory relationship. Respecting the boundary between clinical supervision versus being a therapist to the supervisee is important. For instance, a supervisor who delves too deeply into the supervisee's emotions regarding the supervisory triad, could easily cross the supervision-therapy boundary into the supervisee's unfinished personal issues (Barnett & Molzon, 2014). Not only is a boundary crossed, but a dual role develops within the relationship. Due to the power imbalance, the supervisee is at risk of being harmed and exploited, at which point this slippery slope turns into a boundary violation (Gottlieb et al., 2007). As a result, supervisors should be careful to not ask or push supervisees to disclose too much emotionally sensitive information. They might read the supervisee's body language and pay attention to whether the supervisee feels safe and comfortable. Supervisors might also seek consent or ask directly if the supervisee would be comfortable disclosing an answer to a difficult question.

Another guideline for both supervisors and supervisees to keep in mind is the principle of *do no harm* (Canadian Psychological Association, 2017). It is possible that broaching particular topics or emotions might damage the supervisory relationship. Supervisors might think of disclosures existing on a continuum in which there are sensitive versus less sensitive topics. They might try discussing fairly comfortable topics first before more risky topics. Supervisors must consider this principle of *do no harm* in relation to their supervisees, and to the clients who are the most vulnerable. Given the potential for nondisclosures to negatively impact supervisees' competence and client work (Hess et al., 2008), a guiding principle for supervisors might be to prompt for disclosures when there is suspicion of a potentially harmful nondisclosure. For the supervisees, they too must keep the principle of *do no harm* in mind. When reflecting on whether they need to disclose a matter, they should consider the extent to which withholding that information might negatively impact their supervisory relationship or their client work.

The role of culture and nondisclosures. Supervisors may also want to consider the role that culture plays in supervisee nondisclosures. In the present study I did not explicitly explore the role of supervisees' culture, and therefore I cannot offer specific considerations based on my own participants. However, supervisors may need to consider how acculturated their supervisees are, or the extent to which they have integrated themselves into Western culture and its values. In the context of the present study, there are a few general considerations to keep in mind regarding how culture might have impacted nondisclosure. All of these ideas would depend on the degree of the supervisee's acculturation which is not known. For instance, it is possible that Asians may lean toward briefer verbal communication, more silence, and may value respecting hierarchies or those in positions of power. They may see their supervisors as an expert and prefer to receive more advice or structure. The concept of self-disclosure might not be valued especially since the

disclosure of personal or more emotional topics might be viewed as a weakness. Discussing one's in-the-moment feelings might be challenging, and the notion of seeking insight may not be valued (Farber, 2006). In the Latino culture as well, there is less focus on individuality, and more on the collective self. Respecting people in positions of authority might be valued, as well as being polite, maintaining harmony, and generally disclosing to others in indirect or round about manners (Farber, 2006). An important consideration however, is that every ethnic group is diverse and heterogeneous in nature, and so generalizations can only be starting points for consideration. For instance, the term "Asian" may include individuals from China, Hawaii, Phillipines, Pakistan, India, and other countries (Farber, 2006). Supervisors may want to broach conversations on supervisees' experiences of disclosure, in general, in relation to their own cultural values, rather than making general assumptions.

Implications for Videorecording Review in Supervision

I present several ideas for utilizing videorecording review in supervision, and doing so in a manner that might promote disclosures. First, supervisors could explicitly discuss requirements for watching videos within supervision, especially if this is a requirement of their supervisee's program. A discussion of how to *do* videorecording review might be helpful. In the case of Alex, uncertainty existed around when to talk versus pause the video. This consideration may be especially true for level one supervisees, as this is likely their first time in formal clinical supervision, and they might benefit from a collaborative discussion on how videorecording could be incorporated into supervision (McNeill & Stoltenberg). One benefit of this is that it might enhance the supervisory relationship. It is known that a strong supervisory relationship is based on having collaboratively determined goals and mutually agreed-upon tasks for how to reach those goals (Bordin, 1983). This in turn, may decrease a supervisee's nondisclosures. Also,

supervisees are not always aware of how to maximize the effectiveness of their supervision time (Sweeny & Creaner, 2014). Another benefit of introducing such structure is that it may reduce supervisees' performance anxiety (McNeill & Stoltenberg, 2016). It is known that increased supervisee anxiety is associated with an increase in nondisclosures (Mehr et al., 2010). Morgan for example, considered replaying a segment of the counselling video, but felt too self-conscious or awkward to take the time to do so.

Alongside introducing basic structures of incorporating videorecording review, another key is for supervisors to maintain flexibility in their approach. In the present study, supervisees experienced nondisclosures around wanting more control over how much time was spent watching particular video segments. Thus, supervisors might continuously encourage their supervisees to develop autonomy (Bordin, 1983) and to give them permission to direct or change the pacing of their videorecording review. Given that supervisees may not know how to structure their time with watching their videos, the supervisor might present various alternatives on this. For example, the supervisor might say, "Every student has different preferences for how they like to incorporate video recording review. Some students like to watch as much of the video as possible, and they enjoy stopping it when significant moments arise. Other students like to focus on showing one specific segment of the video." This helps the supervisee to understand what choices of structure are available to them. Additionally, the supervisor can highlight that the supervisee's preferences and needs might change within or between sessions, and that it is acceptable for them to change their minds and express what would be most helpful.

Supervisors might encourage supervisees to watch their videorecording, or parts of it, ahead of time. In the present study, participants sometimes felt overwhelmed processing a lot of information during their supervision session, and they also had difficulty remembering details

from their counselling sessions. Thus, watching their video ahead of time and taking notes on key points for discussion might be helpful. This might reduce their anxiety and increase their confidence during the supervision session. It may also reduce the overall amount of new incoming stimuli during their supervision session. Watching the video ahead of time provides a type of exposure to their work which might reduce anxiety associated with watching their video in supervision (Huhra et al., 2008). Once again, with decreased anxiety there might be less nondisclosures. Another benefit to watching the video ahead of time is that supervisees could keep track of the times and segments that are most important to watch in supervision. The participants became frustrated or impatient at times with *the pacing* of their video recording review; they wanted to speed up the video or arrive at a particular place within the video, however, because they had not watched their videos ahead of time, they did not know the specific times of the most relevant segment. Thus, if supervisees review their videos ahead of time, they might be more organized, confident, comfortable, and more present to disclosing important issues related to their practice.

Lastly, supervisors might encourage supervisees to show a variety of times and segments that reflect their strengths as well as areas for further growth. Building on strengths might promote supervisee confidence, which is one aim of their training (Bernard & Goodyear). Showcasing strengths allows supervisees to show a video segment in which they are experiencing pride. According to the current study supervisees feel proud showing their work, and might need validation and positive feedback around their work. Supervisors can also encourage supervisees to show a variety of segments so that areas of weakness can be addressed. Showing a variety of segments gives supervisees permission to build on their strengths yet it also

highlights the notion that they are still developing as supervisees, and that there are areas for growth.

There are a few ways in which supervisors might encourage supervisees to develop the habit of watching their videos. First, they might position the task as contributing to developing the supervisee's own reflection and self-awareness skills. The supervision contract might outline specific expectations around watching the videorecordings (as opposed to the requirement of simply creating the recordings). Supervisees could be encouraged to set reasonable goals given their busy schedules. Aiming to watch ten minutes of one video each week might set a realistic expectation, or watching one full video each month might be another option. Supervisors might also require supervisees to hand in one full videorecording each term, which would likely motivate supervisees to begin watching their videorecordings ahead of time.

Limitations

There are several limitations to this case study. First, I had a small sample size ($n=8$) which consisted of three triads (supervisee, supervisor, and client). Therefore, the findings of the present study may not have implications for all level one supervisees; however, in qualitative studies such as this one, the results need to be transferable, or easily made sense of by other readers (Merriam, 2009). One benefit of this study is that it provided rich, in-depth descriptions of the supervisee's nondisclosures as they occurred in the moment during supervision with videorecording review.

A second limitation is that because the participants selected themselves to be in this study, this likely shaped the sample's characteristics. For instance, it is probable that supervisees in this study were naturally comfortable disclosing to me or they would not have participated. In addition, because supervisees needed to obtain the consent of their supervisors to participate,

there is a high likelihood that the supervisory dyads in this study already had a particular level of safety and trust or they might not have participated.

A third limitation is that supervisees had their choice of which client to invite to participate. It is likely that both the supervisee and client experienced a good working alliance and thus agreed to participate. This in turn, might have been one reason why more positive nondisclosures (as opposed to mainly negative) were found within the current study. It is possible that supervisees did not have as many clinical mistakes or many challenges with their clients, which might have led to less negative and uncomfortable experiences in the supervision session as well.

Another limitation pertains to the challenges I encountered around encouraging supervisees to share with me, as the researcher, the depth of their nondisclosure experiences. I noticed that Pat and Alex sometimes struggled to share their in-the-moment experiences, particularly their emotions; and they both indicated their awareness of this to me. Other researchers have had similar difficulties (Sweeney & Creaner, 2014). Participants were also informed during the consent process that it was always voluntary as to what they would disclose to me. Hence, it is possible the supervisees had experiences that they did not feel comfortable sharing with me for whatever reasons. Another drawback to this research study is that participants did not have the option to choose which supervision session they brought into the IPR interview, and therefore they could not pick a supervision session which they perceived as having a major nondisclosure or significant nondisclosure. Instead, this study captured their general experiences of nondisclosures that occurred across one supervision session.

A final limitation of the present study is that due to the small sample, a breadth of cultural diversity could not be captured. The current study provides limited understanding on

nondisclosures within the context of various cultural dynamics, such as how ethnicity, acculturation, gender, age, and sexual orientation, play a role in nondisclosures. Another limitation is that my study did not have a balanced number of participants from each gender. Also, due to the need to protect participants' anonymity by masking gender, I was unable to make interpretations based on gender dynamics. Finally, the supervisors in this study had less than five years of experience as registered psychologists. It is possible that my findings would have been shaped differently with more seasoned supervisors.

Future Research

There are several ways that the design of this study could be improved in the future. Like prior studies, it might be beneficial to survey supervisees and their supervisors regarding the quality of their relationship. In one study (Hess et al., 2008) supervisees completed the Supervisory Styles Inventory (SSI) and Supervisory Satisfaction Questionnaire (SSQ) and the nondisclosures were examined within the context of being in a "good" versus "problematic" supervisory relationship. Nondisclosures in the good supervisory relationship were related to clinical or client issues, whereas in the problematic relationship nondisclosures pertained to concerns regarding the supervisory relationship (Hess et al., 2008). In the present study, it might be helpful to know if all the supervisees experienced positive nondisclosures in the context of having a strong supervisory relationship, or if supervisees who perceived their supervisory relationships as problematic overall would still have positive nondisclosures.

It might be fruitful to conduct a semi-structured interview prior to the IPR research interview. This might explore in detail supervisees' prior supervision experiences with their current supervisor, and this would provide an even richer context. The interview might examine supervisees' reasons for participating in the study, prior experiences of nondisclosures with their

current supervisor, prior experiences watching videorecordings with their supervisor, and why they might have chosen their particular client. Another option would be to include semi-structured interview questions at the end of the IPR interview to learn if nondisclosures in this session were similar or different compared to previous sessions. Finally, having a larger sample size would provide richer information as well.

Another suggestion for future research is to have supervisees watch their counselling video before bringing it into supervision. There might be less nondisclosures related to self-consciousness because they have already seen their work. Alternatively, there might be even more self-consciousness given that supervisees become aware of their weaknesses ahead of time. It is possible that supervisees would exercise more control or initiative over which video segments are reviewed.

IPR interviews are required to occur within 48 hours after the supervision session to help with recall. A similar guideline might be followed with respect to bringing the counselling video into a supervision session. Although a 48 hour window might be difficult, the less time between the counselling and supervision session might assist supervisees with recall of their counselling session details (which was a struggle for a few participants in the present study). In addition, it is recommended that no subsequent counselling sessions take place after the initial recorded counselling session that is watched in the supervision session. In the present study, two participants counselled their client in-between their recorded counselling session and supervision session. This was partly because participants chose to record a counselling session a few weeks in advance of their supervision to plan for the possibility that clients might not attend counselling every week, or to compensate for client no-shows and illness. A future solution would be to have audio recorders placed in a few consecutive counselling sessions before their recorded

supervision session, so that the most recent counselling video can be incorporated into supervision. Following such guidelines might help supervisees remember details better and they would not be distracted or confused between the last counselling session versus two sessions prior. They might also feel that their supervision session was more relevant since it incorporated the most recent counselling session.

Another consideration is to choose specific times during supervisees' practica to conduct nondisclosure research. For instance, there might be more nondisclosures in supervision sessions that occur around the time of formative or summative evaluations. Alternatively, examining nondisclosures in the first month of a practicum might elicit more negative nondisclosures such as self-consciousness. This might be especially true if researchers could explore nondisclosures in a supervisee's first or second supervision session with videorecording review. Another suggestion is to explore the nature of nondisclosures with level two or level three supervisees, or those enrolled in their doctoral internships. It might be valuable to conduct nondisclosure studies with supervisors whose theoretical orientations differ as opposed to being all integrative, which was the case in the present study.

Future research might also use IPR to examine specific types of nondisclosure experiences related to sexual attraction to supervisors or clients, or experiences working with difficult clients or supervisors. It might explore nondisclosure experiences pertaining to videorecording review such as self-consciousness or self-criticism. IPR might be applied simultaneously within the supervisory triad to understand the reciprocal nature of nondisclosure experiences across clients, supervisees, and supervisors. This would allow for further exploration of potential parallel processes that arise out of an interactive context.

This research study might also be conducted with more homogenous ethnic groups as well. For example, understanding nondisclosures from various ethnic groups might provide valuable cross-cultural information on nondisclosures in supervision. Understanding the role that gender, and gender matching plays in nondisclosures would also be helpful. For example, what differences might exist when comparing a female supervisor working with a female supervisee versus with a male supervisee? Similarly, there might be other differences with a male supervisor working with a male supervisee versus a female supervisee.

Conclusion

Supervisee nondisclosures are a common occurrence in supervision. A limitation of previous research, however, was that supervisee nondisclosures were examined from a retrospective lens. This study makes an original contribution to the clinical supervision literature by utilizing IPR and case study methodology to examine supervisees' experiences of nondisclosures as they emerged in the moment. The present findings were unique in that they revealed a broad range of supervisee nondisclosures such as positive experiences and emotions, reflections, and uncomfortable or negative experiences. In addition, this study was novel in its focus on the specific supervision modality of videorecording review. The clinical implications of this research provide important guidelines for both supervisors and supervisees to consider within clinical supervision that incorporates videorecording review. This study provides a foundation for academics to examine specific questions regarding nondisclosures as they occur within various supervision settings and with all developmental levels of supervisees. My hope is that the current research study provides an in-depth understanding of nondisclosures in their context and another rich layer of insight into a complex and fascinating topic.

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Appendix A

Dear counselling psychology supervisors:

FYI Only: Research Announcement

This email is for informational purposes only. You do not need to respond or take any action.

My name is Allison Foskett, and I am conducting doctoral research as part of the Counselling Psychology program at the University of Alberta. The purpose of this email is to inform you of my research study, titled: **Understanding Supervisee Nondisclosures in Supervision with Videorecording Review**.

Within the next week I will be approaching supervisees to ask them if they are interested in participating in my study. My study will explore supervisee experiences of nondisclosures in supervision, in which both the supervisee and supervisor review one of the supervisee's videorecorded counselling sessions. In particular, I am interested in the thoughts and feelings that supervisees experience in the moments of supervision, yet keep private.

There are two reasons I'm informing supervisors of this study ahead of time. First, your supervisee may be interested in participating in this study. If so, your supervisee's participation would require that one of their supervision sessions be videorecorded. This would require informed consent from you as their supervisor. Second, I want to remind you that you are *not* required nor expected to participate in this study. Your choice of whether or not you participate is completely voluntary.

Please Note:

This email is not an invitation or request for your participation. If your supervisee becomes interested in this study, he or she will approach you and provide you with further information. In the mean time, you do not need to talk to your supervisee about this study. The purpose of this email is to make you aware of this study in the event that your supervisee invites you to participate in this study.

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at [780-492-2615](tel:780-492-2615).

Appendix B

Are you a:

Master's of Counselling Psychology student registered in your practicum?

Title of Research Project:
**Understanding Supervisee Nondisclosures in Supervision
 with Videorecording Review**

Are you interested in reflecting on your supervision experiences?

My name is Allison Foscett, and I am conducting doctoral research as part of the Counselling Psychology program at the University of Alberta.

I am interested in exploring your experiences of nondisclosure in supervision in which both you and your supervisor review one of your videorecorded counselling sessions. In particular, I am interested in the thoughts and feelings that you experience in the moments of supervision, yet keep private.

Interested in learning more? Please contact Allison by email (foscett@ualberta.ca) or call 780-454-4154 for further information.

You will receive a \$40 Chapters Gift Card for your participation

Allison Foscett
780-454-4154

foscett@ualberta.ca

Appendix C

Supervisee Information Letter

Title of Research Project:

Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

Principal Researcher: Allison Foskett, Ph.D. Student

Research Supervisor: K. Jessica Van Vliet, Ph.D., R. Psych.

Associate Professor, University of Alberta

Purpose of Research: The purpose of this research study is to obtain, from a supervisee's perspective, an in-depth understanding of experiences and processes of supervisee nondisclosures that occur in supervision with videorecording review. Nondisclosures are instances in which supervisees decide *not* to share their thoughts, feelings, inner experiences, or client information with their supervisor.

Participation Criteria: You will need to be (a) registered in a counselling psychology master's or doctoral degree program, (b) currently enrolled in your master's practicum, (c) supervised by a registered psychologist or other licensed professional, (d) regularly videorecording your counselling sessions, and (e) able to access equipment to videorecord your supervision sessions.

What Does My Participation Entail?

- Complete a demographic and consent form that will take about five minutes of your time.

Obtain Interest of Supervisor and Client

- Ask your supervisor if he or she is interested in participating. If yes, you can give your supervisor a copy of the Supervisor Information Letter. A meeting will be set up with the principal researcher or a research assistant, either in-person, via telephone, or via Skype to answer questions and obtain consent.
- Your next step is to identify an adult client who is interested in participating. Give your client a Client Information Letter so they have time before their next counselling session to reflect on their decision to participate.
- Ask your interested client to arrive 10 minutes prior to their next counselling session so that the principal researcher or research assistant can obtain informed consent. Alternatively, another time may be arranged. The client will be given the choice to decline participation, reflect further, or participate right away.

Videorecord and Audiorecord a Counselling and Supervision Session

- You will need to videorecord and audiorecord your counselling session with your consenting client. Place two audiorecorders (one as back-up) in between you and your client.
- Next, you will be asked to videorecord and audiorecord the next supervision session that follows your recorded counselling session. Two audiorecorders will be used.
- During this supervision session you and your supervisor will be expected to review the videorecording of your prior counselling session for which you received client consent.

Participate in a Research Interview

- Within 48 hours of this supervision session you will be required to participate in a research interview (approximately three hours) with the principal researcher (Allison). This research interview will require the principal researcher and you, the supervisee, to watch the videorecorded supervision session. In this research interview, you will be invited to talk about thoughts, feelings, and any experiences during supervision in which you decided not to reveal something to your supervisor. This interview will be videorecorded and audiorecorded.
- You will be asked to review the transcript of your interview to confirm its accuracy or to provide further clarification. You will be invited to participate in a follow-up research interview in which I will clarify meanings around what you shared in the research interview. This interview may occur in-person, via telephone, or via Skype.

Potential Risks and Benefits of Participating

- There is always a slight risk that someone involved in the research study, or reading the study, may believe they can identify a feature that resembles your identity as a supervisee.
- It is possible that as you reflect on your experiences during supervision, you may experience a range of emotions, some of which may be uncomfortable. If this occurs, you will be offered a break. While the risk is minimal, should you become emotionally distressed, I will refer you to appropriate counselling services if needed. I cannot provide you with any counselling.
- Your participation in this study will *not* be used for evaluative purposes.
- You may experience several benefits such as an increased awareness of how your inner experiences, interactions with your supervisor, and the supervision context (e.g., watching your videorecording) affect your nondisclosures. This increased self-awareness may promote further professional growth, and enable you to gain more out of future supervision sessions.
- You may indirectly benefit by giving back to your profession. You will be contributing to an enriched understanding of clinical supervision and counsellor education by providing a more expansive and comprehensive perspective of supervisee nondisclosure in supervision.

Confidentiality and Privacy

- Basic confidentiality principles will apply to supervisees who participate in this study. All matters discussed will be kept confidential unless: (a) you disclose that a child (under age 18) or vulnerable person is currently being hurt, is in danger, or is at immediate risk of being hurt or in danger, (b) there is reason to believe that you have not disclosed to your supervisor that your client is currently being hurt, is in danger, or is at immediate risk of being hurt or in danger, (c) you disclose that you are at risk for committing suicide or harming another person, or (d) your research information is subpoenaed to court for legal reasons.
- To protect your identity, a pseudonym will be used instead of your real name in all data that is collected. All other identifying information or potentially identifying information will be anonymized.
- Your decision to participate or to decline participation in my study will in no way impact your grades. Please note that your professor has no association with my research. Therefore, your professor will never be exposed to any anonymized or raw data. Only the principal researcher and research supervisor will have direct access to any raw data.
- You will also be expected to protect the anonymity of your supervisor. Thus, a condition of participating in this study is that you must agree to not disclose (a) your supervisor's participation in this study, and (b) any other pieces of information about your supervisor that

would enable others to identify your supervisor as a participant in the study. This will honour the need for anonymity and confidentiality of your supervisor's participation. It will minimize the chances of your supervisor being identified in all forms of publication.

Storage of Recordings

- The two audiorecordings from your counselling session, as well as the videorecording and two audiorecordings of your supervision session will be immediately retained by the principal researcher or research assistant and stored in a locked filing cabinet. The videorecordings from your supervision session and the research interview will be stored in an encrypted format on DVD. All audiorecordings will be anonymized, electronically saved, and password protected. Any anonymized hard copies of transcripts will be stored by the principal researcher in a locked filing cabinet. All audio and videorecordings will be destroyed after a minimum of five years. Once the research project is complete, all recordings and anonymized transcripts will be stored in the research supervisor's office in a locked filing cabinet. After fifteen years, all electronic and hard copies of anonymized transcripts will be destroyed.
- All information collected in this study may be published in scholarly journals or presented at professional conferences. Your identifying information will not be revealed in these cases, and all efforts will be taken to minimize any possibility of others recognizing your identity.

Voluntary Participation

- Your choice to participate in this study is completely voluntary. It is always your choice as to how much you want to disclose to the principal researcher during the research interview. You will have the right to withdraw from the study at any time. If you choose to withdraw your data from this study, you must notify me within four weeks after you review your research interview transcript. After this time, your data may already be incorporated into data analysis and cannot be withdrawn. Should you decide to withdraw from the study after your recorded supervision session, your supervisor will not know that you have withdrawn (unless you decide to share this with him or her).
- You may request a copy of the summarized research results once the research is completed.

If you would like to participate in my study, please email me at foskett@ualberta.ca or call me at 780-803-1825. Please feel free to contact me, or my research supervisor, in the event that you have further questions or concerns.

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.

Principal Researcher:

Allison Foskett, M.Sc., Ph.D. student
University of Alberta
Department of Educational Psychology
780-803-1825
foskett@ualberta.ca

Research Supervisor:

K. Jessica Van Vliet, Ph.D., R. Psych.
University of Alberta
Department of Educational Psychology
(780) 492-5894
jvanvliet@ualberta.ca

Appendix D

Supervisor Information Letter

Title of Research Project:

Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

Principal Researcher: Allison Foskett, Ph.D. Student

Research Supervisor: K. Jessica Van Vliet, Ph.D., R. Psych.

Associate Professor, University of Alberta

Purpose of Research: The purpose of this research study is to obtain, from a supervisee's perspective, an in-depth understanding of experiences and processes of supervisee nondisclosures that occur in supervision with videorecording review. Supervisee nondisclosures may consist of thoughts, feelings, inner experiences, or information that supervisees keep private.

Participation Criteria: Should you decide to participate in this study, you will need to be:

- A registered psychologist or other licensed professional, and approved supervisor for a supervisee.
- Working with a supervisee who is registered in a counselling psychology master's degree.
- Supervising a supervisee who is currently enrolled in his or her counselling practicum.
- Reviewing your supervisee's videorecordings with some regularity.
- Able to access a facility in which one of your supervision sessions can be videorecorded, or be willing to use videorecording equipment provided by the principal researcher.

What Does My Participation as the Supervisor Entail?

- You need to fill out a demographic and information form which will take about five minutes.
- You and your supervisee will be asked to videorecord and audiorecord a supervision session.
- During this supervision session you and your supervisee will be expected to review your supervisee's videorecorded counselling session for which client consent was received.
- The principal researcher does not expect that the entire videorecording be reviewed, but rather that videorecording review be the primary modality of supervision for the duration of the supervision session. The principal researcher realizes that other supervision/ethical issues may arise in which the focus of the videorecording review becomes minimized. Under no circumstances is the research protocol expected to be given priority over supervision quality.

Potential Risks and Benefits of Participating

- There is always a slight risk that someone involved in the research study, or reading the study, believes they can identify a feature (e.g., your idiosyncratic word choices) that resembles your identity as a supervisor. Read the "Confidentiality and Privacy" section for details.
- Your participation in this study will *not* be used to evaluate your abilities as a supervisor.
- By agreeing to participate in this study, you will be contributing to an enriched understanding of clinical supervision and counsellor education by providing a more expansive and comprehensive perspective of supervisee nondisclosure in supervision.
- You may request a summary of this research once the study is completed.

Confidentiality and Privacy

- Basic confidentiality principles will apply to supervisees and supervisors who participate in this study. All matters discussed will be kept confidential unless (a) anyone discloses that a child (under age 18) or vulnerable person is currently being hurt or is in danger, or is at immediate risk of being hurt or in danger, (b) there is reason to believe that the supervisee has not disclosed to you, as the supervisor, that a client is currently being hurt, is in danger, or is at immediate risk of being hurt or in danger, (c) anyone discloses that they are at risk for committing suicide or harming another person, and (d) the research information is subpoenaed to court for legal reasons.
- All information collected will be anonymized by giving you your choice of a pseudonym. Any potentially identifying information will be anonymized to protect your identity. Multiple supervisors will be participating in this study. This will also help protect your anonymity.
- You must help protect the anonymity of your supervisee. You must agree to not disclose (a) your supervisee's participation in this study, and (b) any other pieces of information about your supervisee that would enable others to identify your supervisee's participation in the study. This will help ensure anonymity and confidentiality of your supervisee's participation.
- The videorecording of the supervision session, along with the two audiorecordings will be immediately (a) stored in the supervisee's personal and locked filing cabinet or (b) immediately given to the principal researcher or research assistant who will store the data in a locked filing cabinet.
- The videorecording from the supervision session and the research interview will be stored in an encrypted format on DVD. All audiorecordings and anonymized copies of transcripts will be electronically saved and password protected. Any anonymized hard copies of the counselling and supervision sessions as well as the research interview will be stored by the principal researcher in a locked filing cabinet.
- All audio and videorecordings will be destroyed after a minimum of five years. After the research project is complete, all anonymized transcripts will be stored in the research supervisor's office in a locked filing cabinet. After 15 years all electronic and hard copies of anonymized transcripts will be destroyed.
- Findings from this study may be published in journals or presented at professional conferences. Your identifying or potentially identifying information will never be revealed.

Voluntary Participation

- Your choice to participate in this study is completely voluntary. Should you decide to participate in this study, and then change your mind, you will have the right to withdraw within 24 hours after your supervision session is videorecorded and audiorecorded. After this time your data will be incorporated into the next phases of the research study.
- You may request a copy of the summarized research results once the project is completed.
- If you would like to participate in my study, please email me at foskett@ualberta.ca or call me at 780-803-1825. We will arrange a brief meeting either in person, through Skype, or via telephone in which me or my research assistant will address any questions or concerns. If you decide to participate you will be required to sign a letter of consent. At any time, please feel free to contact me, or my research supervisor, if you have further questions or concerns.

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.

Principal Researcher:

Allison Foskett, M.Sc., Ph.D. student
University of Alberta
Department of Educational Psychology
780-803-1825
foskett@ualberta.ca

Research Supervisor:

K. Jessica Van Vliet, Ph.D., R. Psych.
University of Alberta
Department of Educational Psychology
(780) 492-5894
jvanvliet@ualberta.ca

Appendix E**Supervisee Letter of Consent**

Title of Research Project: Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

There are several factors important for you to agree with if you want to participate in this study. Please place a check mark beside your chosen answer.

I received the supervisee information letter and understand the contents of this letter.

Yes: ____ No: ____

I agree to complete the supervisee demographic and information form and return it to the principal researcher and/or research assistant.

Yes: ____ No: ____

I am fully aware of the potential benefits and risks of participating in this study.

Yes: ____ No: ____

I understand that my participation in this study will *not* be used for evaluative purposes.

Yes: ____ No: ____

My questions and concerns regarding my participation in this study have been clarified.

Yes: ____ No: ____

I realize that I can withdraw from this study at any time without giving a rationale. If I wish to withdraw my data, I have until four weeks after I review my research interview transcript.

Yes: ____ No: ____

I understand that my choice to participate or to not participate in this study, will not affect my practicum evaluation or grades.

Yes: ____ No: ____

Principles and limitations of confidentiality have been outlined and clarified to my satisfaction.

Yes: ____ No: ____

I agree to not disclose (a) my supervisor's participation in this study, and (b) other information about my supervisor that would enable others to identify him or her as a participant in this study.

Yes: ____ No: ____

I am aware of what will happen to the information I provide in this study.

Yes: ____ No: ____

I agree to videorecord and audiorecord a counselling session with my client's informed consent.

Yes: ____ No: ____

I grant permission to be videorecorded and audiorecorded during my supervision session, and grant permission for this videorecording to be used as part of the research interview.

Yes: ____ No: ____

I grant permission to have my research interview videorecorded and audiorecorded.

Yes: ____ No: ____

The pseudonym I would like to use to protect my identity is _____

Signatures (written consent)

By signing this supervisee consent form, I agree to participate in this study. My signature indicates that I:

1. Fully understand all the information as presented in both the supervisee information letter and in the supervisee consent form.
2. Consent to be a research participant in this study.
3. Give the principal researcher permission to quote or discuss anonymized information from my data for the purposes of the principal researcher's dissertation, and both the principal researcher's and research supervisor's publications, conferences, and workshops.

I am aware that I can ask for further clarification or information throughout this study.

Participant's Name (please print): _____

Participant's Signature: _____ **Date:** _____

Principal Researcher's Signature (Witness): _____ **Date:** _____

Both the principal researcher and research participant must receive a signed copy of this participant consent form.

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.

Appendix F

Supervisor Letter of Consent

Title of Research Project: Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

There are several factors important for you to agree with if you want to participate in this study. Please place a check mark beside your chosen answer.

I have received a copy of the supervisor information letter, and understand, to my satisfaction the contents of this letter.

Yes: ____ No: ____

I agree to complete the supervisor demographic and information form and return it to the principal researcher and/or research assistant.

Yes: ____ No: ____

I am fully aware of the potential benefits and risks of participating in this study.

Yes: ____ No: ____

I understand that my participation in this study will *not* be used to evaluate or judge my abilities as a supervisor.

Yes: ____ No: ____

I have reflected on questions and concerns important to my participation in this study, and have received clarification from the principal researcher and/or research assistant.

Yes: ____ No: ____

I realize that I can withdraw from this study at any point up until 24 hours after my supervision session is videorecorded and audiorecorded. I do not need to give a rationale if I withdraw.

Yes: ____ No: ____

I understand that my choice to participate, or to not participate in this study, will not affect my standing as a supervisor in the Educational Psychology Department at the University of Alberta.

Yes: ____ No: ____

Principles and limitations of confidentiality have been outlined and clarified to my satisfaction.

Yes: ____ No: ____

I agree to not disclose my supervisee's participation in this study, and to not disclose any other pieces of information about my supervisee that would enable others to identify my supervisee as a participant in this study.

Yes: ____ No: ____

I am aware of what will happen to the information that I provide in this study.

Yes: ____ No: ____

I grant permission to be videorecorded and audiorecorded during a supervision session, and grant permission for this videorecording to be used as part of the research interview.

The pseudonym I would like to use to protect my identity is _____

Signatures (written consent)

By signing this Supervisor Consent Form, I agree to participate in this study. My signature indicates that I:

1. Fully understand all the information as presented in both the supervisor information letter and in this supervisor consent form.
2. Consent to be a research participant in this study.
3. Give the principal researcher permission to anonymously quote or discuss relevant information from my data for the purposes of the principal researcher's dissertation, and both the principal researcher's and research supervisor's publications, conferences, and workshops.

I am aware that I can ask for further clarification or information throughout the course of this study.

Participant's Name (please print): _____

Participant's Signature: _____ **Date:** _____

Principal Researcher's Signature (Witness): _____ **Date:** _____

Both the principal researcher and supervisor must receive a signed copy of this supervisor consent form.

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.

Appendix G

Client Demographic Form

Name: _____

1. Today's Date: _____ / _____ / _____
 Month Day Year

2. Age: _____

3. I identify my gender as:

Male _____

Female _____

Transgendered _____

Other (please specify) _____

4. Ethnic/Cultural Background: _____

Appendix H

Supervisee Demographic and Information Form

Name: _____

Name of University: _____

Name of Program: _____

1. Today's Date: _____ / _____ / _____
Month Day Year

2. Age: _____

3. I identify my gender as:

Male _____

Female _____

Transgendered _____

Other (please specify) _____

4. Ethnic/Cultural Background: _____

5. Highest Level of Education (please check and specify all that apply)

 Undergraduate degree

Degree type (e.g., B.A, B. Ed): _____

Degree Major (e.g., honors psychology): _____

 Partial graduate degree: _____

Degree type (e.g., M.Sc., M.A, Ph.D): _____

Degree Major (e.g., Counselling Psych): _____

 Graduate degree

Degree type (e.g., M.Sc., M.A, Ph.D): _____

Degree Major (e.g., Counselling Psych): _____

 Other _____

6. Did you review the videorecording of your counselling session, or any parts of it, before you watched it in your videorecorded supervision session? Yes: ____ No: ____

7. Number of months completed in current master's practicum _____
8. How many client hours have you completed during your practicum? _____
9. Aside from your participation in this study, how many client sessions, if any, have you videorecorded during this practicum? _____
10. The total number of weeks spent in supervision with your current supervisor is _____
11. The total number of hours spent in supervision with your current supervisor is _____
12. Aside from your participation in this study, how many client videorecordings have you watched in supervision, if any, during this practicum?
13. Please describe your theoretical orientation. Check all that apply:
- Cognitive-behavioural
 - Psychodynamic
 - Interpersonal
 - Integrative
 - Eclectic
 - Humanistic/person-centred
 - Feminist
 - Other (please specify): _____

Appendix I**Supervisor Demographic and Information Form**

Name: _____

Name of University: _____

Name of Program: _____

1. Today's Date: _____ / _____ / _____
Month Day Year

2. Age: _____

3. I identify my gender as:

Male _____

Female _____

Transgendered _____

Other (please specify) _____

4. Ethnic/Cultural Background: _____

5. Highest Level of Education (please check and specify all that apply)

 Partial graduate degree: _____
Degree type (e.g., M.Sc., M.A, Ph.D): _____
Major (e.g., Counselling Psych) _____ Graduate degree
Degree type (e.g., M.Sc., M.A, Ph.D): _____
Major (e.g., Counselling Psych) _____ Other _____

6. Total number of years and months employed as a registered psychologist

Years: _____

Months: _____

7. Total number of years and months working as a clinical supervisor

Years: _____

Months: _____

8. Total number of weeks of supervision spent with current student _____

9. Total number of hours of supervision spent with current student _____

10. Please describe your theoretical orientation. Check all that apply:

- Cognitive-behavioural
- Psychodynamic
- Interpersonal
- Integrative
- Eclectic
- Humanistic/person-centred
- Feminist
- Other (please specify): _____

Appendix J

Sample Interview Questions

1. What do you remember about how you felt in this moment?
2. Can you think back, and try to remember what your thoughts were in that exact moment?
3. What was going on for you during that part of the conversation?
4. Let's take a step back from that moment. What was your inner experience in that moment?
5. Can you recall what you were thinking in that instance in your supervision session?
6. As you reflect back to your own experience at that moment in supervision, what was happening for you?
7. What types of thoughts entered your mind as you observed your supervisor's body language?
8. It appeared as though your body language changed in that moment. Can you recall what was happening for you in that moment?

Probing Questions

1. What influenced you in those moments to keep those thoughts and/or experiences to yourself?
2. Do you remember in those moments what contributed to you wanting to keep that experience to yourself?
3. I'm curious if there was more that you considered sharing in those moments? What might that have been?
4. In those moments what fears did you have as you considered sharing those thoughts?

Appendix K

Client Information Letter

Research Project:

Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

Principal Researcher: Allison Foskett, Ph.D. Student

Research Supervisor: K. Jessica Van Vliet, Ph.D., R.Psych.
Associate Professor, University of Alberta

About the Study

This study is about your counsellor's inner experiences that occur in supervision. This refers to your counsellor's private thoughts and feelings.

Criteria to be in this Study:

If you decide to be in this study, you will need to be receiving counselling at Clinical Services at the University of Alberta.

What Will I Need to Do?

- A meeting will be set up with the principal researcher or a research assistant, either in-person, via telephone, or Skype. During this meeting your questions will be answered.
- It is your choice if you want to be in this study. If you agree to be in this study you need to sign a consent form. You also need to fill out a demographic form. This will take no more than 5 minutes.
- One of your counselling sessions will be videorecorded and audiorecorded by your counsellor.
- The videorecording will be watched by your counsellor and his or her supervisor. This is for training purposes.
- Your audiorecorded counselling session or parts of it may be typed out. This is to provide a background on your counsellor's experiences in supervision.

Risks and Benefits of Being in this Study

- There are few discomforts to being in this study. The focus of this study is on your counsellor's experiences in supervision.
- You being in this study will help contribute to an understanding of your counsellor's experiences in supervision.
- The videorecording of your counselling session will be watched in supervision. This means your counsellor will receive extra support to help you.
- This research may lead to stronger relationships between counsellors and supervisors. It will promote stronger relationships between clients and counsellors. This may lead to improved results for clients.

Confidentiality and Privacy

- To protect your identity, a fake name will be used instead of your real name. All other identifying information will be removed.
- The audiorecording of your counselling session will be typed out. Your real name will always be replaced with a fake name in all documents. Any typed copies of your audiorecording will be stored by the researcher in a locked filing cabinet. Any digital copies of your audiorecording will be stored on a locked computer with a password.
- All audiorecordings and videorecordings will be destroyed after five years. After the research project is complete, all typed documents will be stored in the research supervisor's office. The documents will be kept in a locked filing cabinet. After 15 years all electronic and hard copies of anonymized documents will be destroyed.
- All information collected in this study may be published. It may appear in journals or it may be presented at conferences. Your real identity will never be revealed.

Voluntary Participation

- Your choice to be in this study is completely voluntary.
- If you decide to be in this study, you can later change your mind and quit. If you quit, you must tell your counsellor within 24 hours after your recorded counselling session. After, your information may already be used in the next part of the study.
- You may ask for a copy of the research results after the research project is completed.

Thank you for your time. If you would like to be in this study please contact your counsellor or myself. A 10 minute meeting will be set up with me or my research assistant. Any questions you have will be answered. If you agree to be in this study you will be asked to sign a consent form. You can contact me or my supervisor if you have any questions.

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.

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Appendix L**Client Letter of Consent**

Title of Research Project: Understanding Supervisee Nondisclosures in Supervision with Videorecording Review

There are several important points for you to agree with if you want to participate in this study. Please place a check mark beside your chosen answer.

I have received a copy of the client information letter, and I understand the contents of this letter.

Yes: ____ No: ____

I agree to complete the client demographic form and return it to the principal researcher or research assistant.

Yes: ____ No: ____

I am fully aware of the benefits and risks of being in this study.

Yes: ____ No: ____

I have discussed with the principal researcher or research assistant any questions or concerns I have about being in this study. My concerns and questions have been clarified by the researcher(s).

Yes: ____ No: ____

I realize that I can withdraw from this study, up until 24 hours after my audiorecorded and videorecorded counselling session. I do not need to give a reason for withdrawing.

Yes: ____ No: ____

I understand that my choice to be in this study will not limit my ability to use the counselling services at the Education Clinic.

Yes: ____ No: ____

Principles and limitations of confidentiality have been explained to my satisfaction.

Yes: ____ No: ____

I am aware of what will happen to the information I provide in this study.

Yes: ____ No: ____

I agree to be videorecorded and audiorecorded during a counselling session for research purposes.

Yes: ____ No: ____

I agree that my videorecording and audiorecording of my counselling session can be used for data analysis purposes in this research study.

Yes: ____ No: ____

The fake name I would like to use to protect my identity is _____

Signatures (written consent)

By signing this client consent form, I agree to be in this study. My signature indicates that I:

1. Fully understand all the information in both the client information letter and in the client consent form.
2. Agree to be in this study.
3. Give the principal researcher permission to quote or discuss anonymized information from my data for the purposes of the principal researcher's dissertation, and both the principal researcher's and research supervisor's publications, conferences, and workshops.

I am aware that I can ask the principal researcher for further clarification or information throughout this study.

Participant's Name (please print): _____

Participant's Signature: _____ **Date:** _____

Principal Researcher's Signature (Witness): _____ **Date:** _____

Both the principal researcher and client must receive a signed copy of this client consent form.

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.