Everyday Resistance of Trainee Therapists under Clinical Supervision[1]

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Abstract

Supervisee resistance is often construed as an execution of their power to diminish the effects of the supervisors' power in the field of counseling psychology. Such a limited view of resistance may ignore its sociocultural context and further support the social structure of domination that necessitates resistance in the first place. Given that resistance and power are connected yet distinct concepts, understanding resistance is necessary to better understand power relations. The discipline of psychology largely recognizes the ability of organized, collective resistance to make social changes, although not that of everyday forms of resistance that intend to survive and simultaneously sabotage domination. To expand the understanding of everyday resistance by recognizing agency that is culturally situated in social relations, this qualitative study used semi-structured interviews with seven supervisee participants to investigate their everyday resistance in clinical supervision, particularly focusing on the tactics they employed in interactions with their supervisors and what was achieved through those tactics, and the agency and subjectivity interwoven with the resistant acts upheld by cultural or professional discourses. The results indicate that the tactics employed (for example, selective presentation of cases or self, note-taking, acting positive, and pretended speculation) are not only aimed at protecting their professional integrity and therapist subjectivity, but also at maintaining harmonious supervisory relationships that may generate valuable social networks (guanxi) for future career development. Under the circumstances in which supervisees are unable to abide by both the professional ideology and cultural ethics of honoring instructors, they adopt the identity of a 'good student' to maneuver through difficult situations in the interest of guanxi. Through these tactics, supervisees demonstrated their agency despite being in vulnerable positions.

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Resistance, which has long been studied in the field of counseling psychology, has traditionally been considered a type of pathology. Psychoanalysis reviews resistance as a defense mechanism aimed at interfering with the progression of therapy or supervision by preventing further exploration and elaboration of unconscious materials (Lowental, 2000). Therapists-in-training who are deemed resistant during supervision are referred to psychotherapy to deal with personal complexes at the unconscious level. Nowadays, supervisee resistance is predominantly regarded as a by-product of supervision in which supervisors as gatekeepers are required to monitor and evaluate supervisees' progress and performance to protect both the welfare of clients and the profession of counseling psychology. In Taiwan and other Western countries, candidates applying for counseling psychologist licensure are required to have successfully completed a year-long clinical internship. Additionally, years of trainings and experience (Bernard & Goodyear, 2019) or expertise in particular areas as advantageous to supervisees' clinical development lends more power to supervisors (De Stefano, Hutman & Gazzola, 2017). All of the above imply that supervisors are powerful in relation to supervisees. In the existing literature, supervisees' resistant behaviors, such as withholding information (Murphy & Wright, 2005), nondisclosure (Lyon & Potkar; 2015; McKibben, Cook, & Fickling, 2018), warning peers about incompetent or disrespectful supervisors, and making group complaints to the supervisor's superior (Wilson, Davies, & Weatherhead, 2016), are construed as supervisees' exerting power to diminish effects of their supervisors' power (Leung, 2012; Murphy & Wright, 2005). Accordingly, supervisee resistance is often viewed as a manifestation of power.

Resistance and power are connected but distinct concepts. The notion of resistance as an execution of power may ignore its sociocultural context and further support the social structure of domination that necessitates resistance in the first place. Practices of resistance illustrate how individuals address, make sense of and counter inequities, and further negotiate the demands of the socio-culturally- and politically-charged contexts (Pacheco, 2012). Social structure of domination can be manifested through examining valuable strategies, analytical tools and knowledge that individuals employ to respond to dilemmas, contradictions and conflicts in their everyday lives. There can be no adequate understanding of power and power relations without the concept of resistance (Barbalet, 1985). Resistance can take various forms, ranging from large-scale collective revolts and organized protests that aim at effecting social changes, to everyday resistance that does

not especially seek to overthrow the system but to undermine the nature of hegemonic structures through daily practice (Vinthagen & Johansson, 2013). Although the concept of everyday resistance has been widely applied and studied in a variety of disciplines such as sociology, politics, feminism, education, anthropology and so forth, it remains in its infancy in the field of psychology. To expand the understanding of resistance in relation to power, this study aims to investigate supervisee resistance from the perspective of everyday resistance with a particular focus on the cultural context in which resistance tactics were embedded.

The notion of power as an individual's capacity to influence the conduct of others (Dahl, 1957) justifies the predominant assumption that supervisors with authority and resources may unintentionally marginalize supervisees. This causes supervisees to experience oppression and thus resist to wrest back power in supervisory relationships. In line with this view, in a study of the power dynamics of supervision, which assumed that power was held more by supervisors in some areas and by supervisees in others, Cook, Mckibben and Wind (2018) revealed that supervisees perceived their supervisors as possessing the most power when identifying interventions to use with clients, setting goals for supervision, and providing feedback about clinical skills in supervision. Meanwhile, supervisees held power only while maintaining boundaries, and deciding whether to be vulnerable to or empowered by the supervisors. Such a view of power inevitably places the responsibility to minimize the power gap on individuals, particularly supervisors. Consequently, a considerable body of existing literature (for example, American Psychology Association, 2014; Cook, McKibben, & Wind, 2018; Murphy & Wright, 2005; Quek & Storm, 2012; Sweeney & Creaner, 2014) is dedicated to providing greater specification concerning how supervisors may appropriately use their power to reduce supervisee resistance in order to maximize the effectiveness of supervision, which is a goal that supervisors strive to attain.

Unlike the concept of power as an individual capacity, Foucault (1980) linked power to knowledge. He particularly construed power in relation to the production of norms or a system of knowledge that shapes and normalizes subjects who eventually become, think, speak, and act in similar manners. Through daily practice and coordination with others, power/knowledge is consolidated. Given that competence-based education and clinical supervision have been predominant in the field of psychology, supervisors' primary responsibilities are to enhance the professional competence (for

example, the issue of diversity and multiculturalism) and science-informed practice of the supervisees (American Psychology Association, 2014), and conduct evaluations accordingly. In effect, supervisees also strive to meet the required standards in pursuit of professional efficiency. While training professional psychotherapists, knowledge both shapes interactions between supervisors and supervisees and is consolidated through these exchanges. Thus, power is simultaneously repressive and productive.

Foucault (1990) argues 'where there is power, there is resistance' (p. 95). Unlike forms of overt resistance such as social movements and revolution, everyday resistance is a type of covert resistance, characterized as hidden or disguised to subvert power/knowledge (Lilja & Vinthagen, 2014). A variety of tactics to minimize power have been identified, including foot-dragging, escape, sarcasm, passivity, misunderstandings, disloyalty, slander, avoidance or theft (Scott, 1985, 1990), as well as reiteration, rearticulation or repetition of the dominant discourse with a slightly different meaning (Butler, 1995), and mimicry (Bhabha, 1984). However, in the field of psychology, everyday forms of resistance that individuals consciously or unconsciously adopt to navigate the ongoing impact of domination on their daily life are often described via damage-centered tropes, implying that they are passive and accepting of repression, responsible for their conditions, or pathological, which risks imposing narrow, deficit views on them and further marginalizes them (Rosales & Langhout, 2019). Likewise, in clinical supervision, supervisee resistance is seen as a negative use of power (Murphy & Wright, 2005), and considered counterproductive to the effectiveness of supervision. Rather, cultural psychologists Chaudhary, Marsico and Villadsen (2017) argued that resistance as an everyday phenomenon is central to human experiences, particularly for generating meaning. Furthermore, everyday resistance is essential to life regulation and transformation (Marsico, 2017), plays a vital part in the developmental process (Villadsen, 2017), and is a crucial phenomenon in people's 'dynamic interactions with others' in everyday life (Chaudhary & Valsiner, 2017, p. 327). Accordingly, everyday resistance as social action in the context of supervision is productive, because it demonstrates the agency of supervisees as well as provides a thread to examine power relations through tactics in daily practice.

To expand the understanding of resistance in the field of counseling psychology, this qualitative study investigates everyday resistance by trainees in clinical supervision, particularly focusing on the tactics they employed in their interactions with their supervisors and what was achieved through the

tactics, and how agency and subjectivity interwoven with the resistant acts were upheld by cultural or professional discourses. This empirical study is significant in two ways, particularly in the field of counseling psychology. First, it identifies the social context in which the supervisees' resistance tactics were developed or created to negotiate or undermine the power of supervision. Additionally, resistance may be framed in a way that focuses on the resisting subjects' agency informed by the discursive traditions in which they are located (Lilja, Baaz, Schulz & Vinthagen, 2017). Last, supervisee agency and subjectivity is illustrated through the tactics informed by cultural or professional knowledge.

Effective supervision as 'truth game'

Foucault (1980) pointed out that power is 'never in anybody's hands […it] is employed and exercised through a net-like organization' (p. 98). The latter functions as an implementation of knowledge-based classification, stratification, and institutionalization (Foucault, 1989). Foucault (1988) also argued that knowledge and science (i.e., in the form of economics, biology, psychiatry, medicine) serve as 'truth games' (p. 18), combining hierarchical observation and normalizing judgments in the constitution of subjects. Additionally, the subject is capable of how to act and what choices to make among the models set by the structures available in his or her living environment. It is the agency of individual allowing them to transform their bodies, thoughts, conduct, and ways of being through their own means, or with external assistance. This transformation aims to achieve happiness, purity, wisdom, perfection, or immortality in accordance with specific truth games.

Supervision is a cornerstone for preparing psychologists-in-training who will eventually be competent to provide psychological services and professional practice. The effectiveness of clinical supervision is particularly crucial given the time constraints of internship, which is completed in one year, before the interns proceed to graduation and licensure. Effective supervision is characterized as encouraging supervisee autonomy, strengthening supervisory relationships, and facilitating open discussion regarding power disparity and multi-cultural issues (Ladany, Mori, & Mehr, 2013). Supervisors' strategies to pursue effective supervision within a Chinese cultural context include the initiation of courageous conversations concerning the disparity issues of power and hierarchy, and the constructive use of authority towards the

empowerment of supervisees, all the while navigating the tension between an expert and a collaborative supervisor (Quek & Storm, 2012). All these efforts that aim to reduce supervisee resistance lead to the amplification of effective supervision. De Certeau (1984) argued that knowledge provides individuals with a rationale for order; and this allows them to employ disciplinary techniques that generate willing conformity to institutional power. The knowledge of effective supervision as a truth game has not only provided standards for the interactions between supervisors and supervisees, but also become the indicator of supervision effectiveness and satisfaction levels for both the supervisor and supervisee.

According to the guidelines for clinical supervision in health service psychology (American Psychology Association, 2014), supervisors balance the protection of the client with the secondary responsibility of increasing the supervisee's competence in knowledge, skills, and attitudes associated with professionalism. Given that trainees are primarily concerned with the development of their professional competence (Wilson, Davies, & Weatherhead, 2016), supervisors may inevitably encounter the dilemma of fulfilling potentially conflicting roles as mentors and evaluators. Despite that the assessment is done in a safe environment and within a collaborative relationship that supervisors strive to create (Borders, 2014), fear of negative evaluation may still affect the supervisees' willingness to raise certain topics, because they think they could place their evaluation in jeopardy (Bottrill, Pistrang, Barker, & Worrell, 2010; Burkard, Knox, Hess, & Schultz, 2009). Thus, supervisee resistance (for instance, nondisclosure) may co-exist with the professional ideologies of clinical supervision, such as effectiveness and professional competence.

Supervisee resistance in supervision

Internships serve multiple functions for trainee therapists. In addition to giving supervisees hands-on experience and knowledge, it provides trainees with an excellent opportunity to network with other professionals and potential employers. The successful completion of an internship is also a part of the requirements for a licensure exam. Supervisors serve as gatekeepers to the profession, as they play a vital role in determining whether supervisees are suitable to enter and remain in the field (American Psychology Association, 2014). The supervisors' evaluations of supervisees' performance largely affects their future careers, as well as their self-perceptions and professional self-

esteem. While attempting to manage their supervisor's impression of them (Wahesh, 2016), trainee therapists may either consciously or unconsciously develop tactics in order to manipulate, or exert control over, the supervisory process. Given that open confrontation is likely to result in consequences (for example, failing grades) for supervisees, their tactics are typically hidden or disguised (Scott, 1990), individual and unarticulated (Johansson & Vinthagen, 2020) to avoid attention from their supervisors.

Everyday resistance encompasses the collection of daily activities that individuals employ to survive, and simultaneously sabotage, the domination experienced in power relations (Vinthagen & Johansson, 2013). This type of resistance is integrated into daily practice and does not intend to thwart existing power mechanisms. Instead, supervisees use tactics to advance their own agendas while mitigating the claims made by their superiors (de Heredia, 2017). Each of these small-scale actions is employed in an attempt to avoid a dominator's attention as much as possible (Scott, 1990). Kadushin (1968) categorized four types of games that supervisees play when under supervision, as follows: manipulating demand levels placed on supervisees; creating ambiguity concerning issues addressed during the supervision; reducing the power disparity by focusing on certain knowledge areas in an attempt to prove that their supervisors are not smart, and attempting to control the situation via a series of questions to direct attention away from their performance, or asking others for help to erode their supervisors' authority. In describing supervisee games, Bauman (1972) presented these five coping strategies supervisees often used: submission; deflecting by shifting the subject of the supervisory conversation to a more manageable one; the 'I'm no good' attitude; demonstrating their helplessness and making the supervisor accountable; and projection by placing all the responsibilities for an ineffective supervision on the supervisor. De Certeau (1984) pointed out that supervisees' tactics in everyday life are calculated, autonomous actions that individuals opportunistically employ to creatively deny and subvert the rational order. In other words, they attempt to turn 'the actual order of things' toward 'their own ends' (de Certeau, 1984, p. 26). Although these resistant acts are positively framed as protective strategies to cope with a perceived threat (Liddle, 1986), or as power over the supervisor (Murphy & Wright, 2005), there is a shortage of empirical studies investigating what supervisees, as active agents, may strive to achieve and how they turn things around in clinical supervision.

Everyday resistance embedded in cultures

Vinthagen and Johansson (2013) suggested that everyday resistance is embedded in multi-levels of power relations; thus, its specifics may change constantly depending on context, opportunities, temporality, and individual choices. Additionally, resistance tactics aim to undermine the power relations in which authority claims are not directly confronted, but are ignored or re-appropriated. Social actors may not regard everyday tactics as resistance because the actions are often established as part of their cultures and traditions (Johansson & Vinthagen, 2020). Bourdieu acknowledged the everyday resistance in subordinate groups, although predicted that it is likely to end with either of two equally bad conclusions: 'assimilation-cum-institutional cooptation or resistance-cum-further marginalization' (Bourdieu & Wacquant, 1992, p. 82). However, Lo (2015) has countered with a more positive outcome: covert maneuvering. The dominated adopts unrecognized cultural currency, referring to resources that gatekeepers do not recognize as valuable. This currency can be used to achieve a sense of control over their situations, through minimizing the impact of being dominated and pretending submissiveness. For greater suitability and effectiveness, subordinate groups often borrow existing elements from mainstream cultures that do not require many changes (Sørensen & Vinthagen, 2012). Thus, resistance acts embedded in cultures may not be recognizable due to cultural normalization.

In the Chinese cultural context, there are a number of cultural values that constitute a superior-subordinate relationship in supervision, including social hierarchy, other-centeredness, filial piety, face concern, and harmony (Quake & Storm, 2012). Tsui, Ho and Lam (2005) discovered that supervisees rarely oppose their supervisors, and often they follow their instructions because of the cultural norm of 'face-giving' (p.59) to superiors. This face-giving mechanism maintains a harmony in the supervisory relationship. Likewise, one participant in Leung's case study (2012), exploring the use of power in Hong Kong, showed deference to his supervisor through leaving all decisions to the supervisor, and then following the given directions. Tactics like these not only reduce potential conflicts, but also places all accountability on the supervisor. These inherent cultural norms not only function as an inspiration for tactic creation, but also assists in justifying those resistance acts. Thus, cultural scripts holding tactics need to be acknowledged particularly in societies where harmonious relationships are highly valued.

Methods

Situatedness of the Researcher

I first wish to refer to my own experiences as a supervisee and supervisor. When I was studying for my Master's degree in the United States, I addressed my supervisors as Dr. [surname], even though they always told me to use their first names. I came from a culture that emphasizes respect toward superiors with special skills and knowledge. This manifests as referring to such individuals by the honorific *lǎoshī* (meaning 'teacher'). I was therefore uncomfortable calling my supervisors by their first names until I became familiar with the culture of higher education in the US, where professors and students have a relationship more along the lines of colleagues. While I generally did not have issues with my supervisors, one experience during my first year of doctoral study caused me to question the effects of cultural ideologies. This particular supervisor worked from a theoretical orientation that was different from mine and required all supervisees to submit client genograms[2] after the first therapy session. He considered my request to postpone submission to the third session as an open confrontation to his authority, regardless of my explanations. His outrage was followed by the silent treatment, a situation that was extremely uncomfortable for both myself and the other supervisee. Given that the neoliberal framework upholds the idea that an 'enterprising self' promotes individual wellbeing and liberty (Martin & McLellan, 2013, p. 112), my cohort encouraged me to fight for myself. However, after this experience, I developed doubts regarding whether my actions would be considered disrespectful according to the ethics of teacher-student relationships in my home culture. My supervisor's subsequent apology did not dispel the self-doubt.

As a trainee, I had enjoyed being challenged by my supervisors to expand my professional knowledge, improve clinical practice, and actively raise questions for further discussion. I have used this experience to inform my own methods as a supervisor, encouraging my supervisees to do the same. However, I left them to decide whether to take my suggested clinical direction. Yet the supervisees I worked with in Taiwan were not used to this

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[2] The genogram is an important assessment tool to evaluate family relationships. Its dynamic has been developed in the marriage and family therapy profession, and has been in widespread use in the field of psychotherapy.

style, which trainees from the US appreciated. Moreover, I found supervisees in Taiwan often adopted professional jargon associated with my choice of clinical approaches to pander to me. Using therapeutic terminology during case discussions not only demonstrated their professionality, it was also an attempt to impress me, although they did not fully understand them.

Upon speaking with other supervisor colleagues, I found that supervisees often took supervisor comments personally. That is, supervisees felt that inquiry into their assumptions, biases, and intentions associated with clinical practice were a confrontation to them as therapists and persons. They then used several tactics to avoid their uneasiness with supervision, such as changing the topic, using visual cues (exchanging glances) to recruit the assistance of another supervisee who asked questions to divert the supervisor's attention, and giving responses that ended the discussion (for instance 'I'll give it a try', or 'I'll think about it'). These tactics shut the door for further processing of the supervisory relationship. Although these actions were frustrating for me, they served to prevent escalation of tension in the supervisory relationship. Furthermore, supervisees could secure their grades, as well as their professional self-esteem. My experiences and those of my colleagues suggest that supervisee-supervisor interactions are shaped by cultural ideologies that are not recognized in the field of counseling psychology. Moreover, although supervisees may be in the one-down position in relation to supervisors, the former possess tacit knowledge to turn the dynamic around. These experiences not only provided the initial research directions for the study but also served a reflexive purpose that enabled me to be aware of how knowledge was produced, how pre-existing understanding was revised in light of new information, and how cultural agendas and professional assumptions informed my decisions during data collection and analysis.

Participants

Seven participants (see Table 1) consented to participate in this study. Six were women and one was a man. At the time of the interview, their ages ranged from 25 to 42 years old. All of the participants were enrolled in graduate programs of counseling psychology at national universities. Two of them had work experience prior to graduate study, as a social worker and an elementary school teacher. Five participants took an internship with student counseling centers at universities or colleges; one was at a district student counseling center providing services to students and their families

from elementary to high school, and one was at a community counseling center.

Table 1. Participants[3]

Name	Age	Gender	Graduate Program	Type of Internship Site
Joyce	26	Women	Counseling Psychology with concentration in Marriage and Family Therapy	University student counseling center
Julie	30	Woman	Counseling Psychology with concentration in Marriage and Family Therapy	District student counseling center
Linda	25	Woman	Counseling Psychology with concentration in Marriage and Family Therapy	University student counseling center
Rachel	25	Woman	Counseling Psychology with concentration in Marriage and Family Therapy	Student counseling center at a junior college
Susan	42	Woman	Counseling Psychology	Community counseling center
Tony	28	Man	Counseling and Applied Psychology	University student counseling center
Vicky	25	Woman	Counseling and Applied Psychology	University student counseling center

Data Collection and Analysis

This qualitative study aimed to investigate everyday forms of supervisee resistance to supervision. Given the lack of empirical studies in the field of counseling psychology, I began with fieldwork in June 2016. I spoke with three trainee interns regarding their struggles with supervision and their tactics to buffer and create a space to breathe, as well as with one on-site

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[3] Participants' names were anonymized in order to protect their identities. These are not their real names.

supervisor about her experiences with supervisee resistance. Additionally, I sat in on an internship course with a faculty supervisor on campus to observe the interactions between the supervisor and the supervisees during case discussions in a group setting. All these efforts provided rich information for this study. The flyers were sent out to recruit participants for counseling psychology graduate programs, excluding my own. Thereafter, I visited two internship courses for recruiting purposes, continuing recruitment until data saturation was achieved. In total, seven participants took part in this study.

Two to three in-depth interviews were conducted with each participant. Each interview lasted 2-2.5 hours. One was scheduled halfway through the internship and the other at the end. Each interview was audio-recorded and transcribed by the research assistants. In total, 15 interviews were completed. The data included verbatim transcriptions, texts (including 50 weekly reflections on the internship, one internship journal, ten emails from participants with further thoughts on subjects in the previous interview, and supervisee evaluation forms), as well as field notes.

Data analysis began with the first interview transcription. Through careful line-by-line reading and constant comparisons of 'qualitatively meaningful undivided units' (Chenail, 2012a, p. 266), I generated in vivo and descriptive codes to develop the themes being discussed. I also wrote memos to explain the relationships between the textual phrases and the codes in order to juxtapose elements that were different but qualitatively connected (Chenail, 2012b). I then sent the first draft of my analysis of the interview transcriptions with each participant for member check. Additionally, peer debriefing served to reflect on my biases and assumptions, while challenging my interpretation of the data.

Results and Discussion

All supervisees embraced the concept of collaboration with autonomy, which is highlighted as one professional ideology of effective supervision, and expected 'democratic participation' during supervision. Julie vividly described her first supervisory session. To enhance the effectiveness of supervision, her supervisor brought out the issue of power and asked what Julie thought of it. As Julie explained the idea of democratic participation, 'supervisees have equal power for determining directions of supervision since they know best what they need and want to learn.' She was stunned by the supervisor's response: 'Power disparity in clinical supervision may be unfair.

It is what it is. I hope you'd understand it.' Then, she noticed that 'Power' on the bullet list was marked done. Linda recalled how her supervisor 'demonstrated her power' when they met for the first time. Asked by the supervisor about her theoretical orientation, Linda shared her enthusiasm for one therapeutic approach. While making a few negative judgments on that particular therapy model, the supervisor handed Linda a copy of case analysis template she had to complete from the theoretical framework the supervisor preferred prior to each meeting.

Most supervisees experienced that their supervisors tended to view the supervisory relationship as more directive, particularly on clinical theories for conceptualizing cases and deciding on interventions with clients. This may be related to the apprenticeship model, which aims to gradually introduce trainees to professional knowledge, skills and roles through a combination of observing, coaching and practice (Feinstein, Huhn, & Yager, 2015). Such an apprenticeship model is suitable for an academic rather than a clinical setting in the field of psychotherapy (Bruscia, 2018), because master-apprentice supervision evokes a hierarchy of power that favors the master as an authority, a dynamic that is not supported in the current trend of supervision, which emphasizes collaboration. However, given that supervision is a part of professional education and training, apprenticeship is inevitable and salient, particularly in traditions that emphasize pedagogy. The master-protege relationship in Taiwan is influenced by the cultural ethics of 'once a teacher, always a teacher,' indicating that novices must treat their masters respectfully as they do their parents, because of the traditional view that while parents give birth to their children, masters not only impart knowledge but also instill moral values in the children and cultivate them to be good citizens. Consider the following instance of supervision I observed in my fieldwork. This particular senior supervisor explained that her responsibility as a 'master' was to assist her 'pupils' (supervisees) with connecting theories to clinical practice. Sitting in on her supervision sessions to observe the supervisor-supervisee interactions, I found that she supervised from her theoretical orientation of choice, and unsurprisingly, the supervisees used the jargon of that particular theory for case conceptualization and treatment development. The supervisees recorded all comments and suggested interventions from the *lǎoshī* without asking questions.

The participants in this study perceived themselves to be 'in the one-down position,' which as Vicky pointed out means being under supervision characterized as a master-apprentice relationship. Given the cultural ethics

of honoring instructors, the supervisees' resistant acts were sophisticatedly integrated into their daily practice. In this section, I introduce the tactics that supervisees used to navigate through their supervision, describe supervisee resistance to therapy suggested by supervisors, and then discuss the cultural scripts regarding relationships that affected supervisee actions.

Tactics to navigate through supervision

One purpose of clinical internships in counseling psychology is to assist trainees to integrate theories with practice. According to the supervisee competence evaluation form, one aspect of professionalism is that trainees are able to theoretically conceptualize client problems and apply counseling techniques consistent with the theoretical rationale. Meanwhile, one responsibility of clinical supervisors is to help supervisees develop case conceptualization and therapeutical techniques based on a particular theoretical model. While eager to make connections between theories and clinical practice, clinical interns in this study began to wonder whose theoretical approach would be adopted to analyze client problems, as they discovered their preferred clinical approach differed from their supervisors'. Linda indicated her clinical interests in one particular therapeutic framework, inducing negative judgments from her supervisor during their first supervisory meeting. Given the evaluation indicator that supervisees willingly increase knowledge and implement effective counseling strategies, she decided to discard her theoretical preference and instead employ her supervisor's clinical theory. In effect, most of the supervisees in this study who made a similar decision struggled with the demands of conceptualizing their cases and developing interventions through the unfamiliar theoretical lens of their supervisors. As Susan described, 'it's like I'm learning a new language.' She was often restless on the days of supervision sessions. As they read transcripts line-by-line together, the supervisor often indicated deviations from the particular counseling approach she favored. Additionally, the supervisor would play the part of a client and quiz Susan's ability to demonstrate the 'correct' (supervisor-preferred) skills. Susan and others adopted multiple tactics to get through the difficult times during supervision.

'I'm learning a new language': Tactics in response to different clinical approaches

Linda's supervisor devoted a few supervisory sessions to illustrate the concepts of one particular theoretical approach the supervisor had adopted in clinical practice. During all supervisory sessions, Linda employed tactics that revealed a process of making the self visible, invisible, and then re-visible. In the early stages of supervision, Linda explicitly added optional therapeutic intentions along with her actual clinical interventions on the transcripts of clinical interactions. The goal of these additions was to help the supervisor better understand Linda as a therapist. However, the supervisor told Linda that the additional therapeutic intentions were 'completely redundant.' Moreover, the critiques Linda received as they went over the transcripts frustrated her; examples included 'your immediate response to what the client just said is inappropriate,' 'you just interrupted his [the client's] train of thought,' and 'you completely missed her [the client's] point.' Thereafter, Linda chose to focus on client information instead of her interventions to avoid 'getting in trouble with the supervisor again.' The aim of this invisibility was to protect Linda's professional self-esteem. After the supervisor noticed her 'disappearance' from the transcripts, Linda made herself re-visible selectively, presenting only segments that she was certain she had done correctly. This functioned both as protection and as impression management, signaling her professional competence to the supervisor.

Supervision involves education. However, although all the supervisees in this study acknowledged that their supervisors had striven to impart their clinical knowledge and experiences to them, preserving professional esteem seemed to be the supervisees' top priority. Consider, for example, Rachael's quest for an external supervisor. Granted funding from the internship site for extra supervision, she decided to hire an external supervisor with expertise in family therapy, her area of interest. However, it turned out that she hired a particular supervisor characterized by her as 'warm-hearted, fully accepting.' She explained, 'I'm not confident in my professional competence (laughter). I often feel intimidated by a supervisor with a strong professional background. As a result, I guard myself all the time.' Despite the supervisees recognizing the pedagogical function of supervision, their need to protect their professional esteem may take precedence over pedagogy.

Joyce's defense for her theoretical orientations often caused impasses with the supervisor in the early phases of supervision. As soon as she

realized that 'I am the one with my clients in a therapy room rather than the supervisor,' she dropped debates over the therapeutic approaches. Instead, to avoid escalating contentions, she pretended to agree with the suggested clinical interventions by telling the supervisor, 'Okay, I'll do it.' During therapy with clients, however, she developed different interventions based on her choice of clinical orientation. Joyce stressed the importance of 'hav[ing] a solid sense that I am the therapist who is in charge of therapy.' To avoid giving the supervisor a chance to check and comment on the progress of the previous cases, Joyce would tactically bring in another case during the following meeting. These tactics revealed the double-edged sword of role segmentation between therapist and supervisee. Although Joyce could ease her own discomfort at supervision and maintain her clinical integrity, she could not help but think of herself as 'a double dealer.' This perception was incompatible with the 'congruence' that she regarded as a primary attribute of an effective therapist. To achieve congruence, she confessed to the supervisor and received a reply indicating that 'there are many clinical approaches; so, I'm in no place to judge which view is better than another. We are just different as therapists,' which was an immense relief for her. She viewed the response as giving her 'liberty' from the supervisor's clinical orientation. Joyce, then, made a distinction between 'easy' and 'challenging' cases. Because she was more confident in dealing with easy ones, Joyce decided to handle them based on her own clinical judgment. For difficult cases, she followed the supervisor's advice. She explained this rationale:

> In case something goes wrong with clients and the supervisor discovers I didn't follow her advice, I'm afraid she's not gonna protect me. As long as I follow through, if something happens to the clients, the supervisor would be responsible. I could defend myself by saying that I just executed the supervisor's instructions. She once told me, 'If something happened, we'd face it together.

This distinction confirmed, as Scott (1990) argued, that the subsistence ethic of subordinates does not aim to maximize profit but to minimize risk. Likewise, Linda mostly followed her supervisor's directions because of liability concerns. She explained, 'I have little clinical experience and no license.' However, she admitted she 'incorporated my own intervention ideas into therapy that I'd never make explicit in supervision.' Her justification was simple: 'After all, I am the therapist.' These instances show that license and

experience as symbolic capital can partially overcome supervisee resistance. However, supervisees still developed tactics to preserve their own subjectivity.

Sweeney and Creaner (2014) observed that theoretical orientations affected supervisory dynamics. The supervisees in this study were eager to integrate their own preferred theories over those of the supervisors into clinical practice. Mismatch of therapeutic approaches between supervisors and supervisees is likely to cause expectation conflict (Nellis, Hawkins, Redivo, & Way., 2011). Supervisees managed their discomfort by avoiding any acknowledgment of differences in theoretical orientations that might cause conflicts (Wahesh, 2016). Additionally, they demonstrated agency through tactics to preserve therapist subjectivity and through decisions to follow their supervisor's clinical suggestions selectively. This latter compliance served two purposes: to manage supervisors' impression of the supervisees' competence and to ensure protection from the supervisors. Thus, vulnerable supervisees cleverly maneuvered through the power disparity.

'I'm a good student': Tactical note-taking

The interns enjoyed being independent therapists who executed interventions they thought were best for their clients. However, they did not express these experiences during supervision because they did not wish to risk disapproval. Vicky considered that the best strategy for completing a supervisory session was 'keeping quiet about what I had done in therapy and let[ting] the supervisor speak.' The point was to 'avoid unpleasant consequences (e.g., dispute, conflict) that [could] sabotage the supervisory relationship,' she added. Similarly, Rachael did not voice her thoughts during sessions; instead, she jotted down the supervisor's instructions and recommended interventions, even though she did not believe all of them would work. Her aim was to avoid awkwardness in the relationship with the supervisor. Most trainees found that note-taking 'encourage[d] supervisors to continue talking' and also put the supervisees in a positive light, an effect that they had not predicted. For instance, Rachael was unexpectedly able to maintain and manage the impression of being a 'good student' through writing in her notepad. Likewise, even though she was disappointed that her supervisor did not approve of her theoretical orientation, Joyce wrote down her supervisor's exact words and highlighted them, generating the impression that she was 'a good student who deserves praise.' Thus, note-taking served to conceal supervisee disappointment with supervision and helped maintain a favorable public image as well as their clinical integrity.

Supervisee note-taking apparently influenced the supervisors. Rachael observed that her supervisor shifted to the position of instructor, correcting her notes while talking to her. Additionally, supervisors took cues from the supervisees' note-taking activity. On occasion, the supervisees were unable to pretend that they agreed with their supervisor's opinions. When this happened, they described putting their pens down and staring wordlessly at the notepad. This gesture provoked anxiety from the supervisors. Linda noticed that her 'supervisor would repeat herself to convince me.' Likewise, Rachael found that 'she (the supervisor) was quite anxious, either talking more or giving explanations in detail.' They also observed that supervisors attempted to decrease the prescriptive nature of their statements with comments such as, 'well, I just wanna share with you about the idea just occurring to me,' or 'I just wanna offer you some thoughts. It's completely up to you.'

De Certeau viewed discourse as 'a cleverness that does not recognize itself as such' (1984, p. 56). He also conceptualized the agency of tactics as both a realization of human relation and morally good actions that emancipate individuals who cannot establish their own strategies (Mitchell, 2007). In a given society that values learning as the noblest and most useful of human pursuits, good students employ a variety of methods to enhance their learning such as note-taking. Additionally, instructors would do the best they can to foster student success. Yet, in this study, note-taking had nothing to do with academic achievement. Instead, it was a productive tactic to create a space for supervisees to present themselves as good students rather than desperate trainees, while reining in the supervisors' instruction. Because supervisees positioned themselves as 'good students,' supervisors became instructors whose job is to impart knowledge, demonstrating mutual influence in the social encounter. Such a modus vivendi, as Goffman (1959) argued, allowed both parties to contribute toward maintaining the relationship while avoiding open conflicts.

'What do I go to therapy for?': Resistance to supervisors suggesting therapy

Addressing trainees' personal issues during supervision aims to ensure high-quality client care. Thus, supervisees were interested in working on personal issues to become better therapists. They embraced the concept that increasing self-awareness and recognizing blind spots enable therapists to

distinguish between their own emotions and thoughts versus those of their clients, thereby helping to avoid imposing their own needs on clients. Most trainees in this study received advice from their supervisors to seek therapy. For instance, Linda's supervisor often recommended individual therapy for her as they went over the transcripts, with comments such as, 'How come you reacted like XX? I'd suggest you go to therapy since you indeed have personal issues.' Likewise, when Vicky failed to execute the instructions, her supervisor said the following: 'Why do you always make the same mistake? What on earth have you been avoiding? You may have to work on your personal issues in therapy.' Julie was often told to see a therapist in that the supervisor insisted she experienced a 'countertransference' by drawing a parallel between Julie's therapeutic relationship with the client and her relationship with the family of origin. Accordingly, the supervisor advised her to seek individual therapy and not to see any clients until she resolved her issues there.

Supervisees were troubled by the perception that their supervisors 'never make it clear what exactly the issue is,' according to Linda, leading them to feel as if they had 'problems.' Upon requesting that their supervisors pinpoint specific issues they could work on, multiple participants revealed that supervisors refused. Linda explained that her 'supervisor was afraid I'd turn clinical supervision into individual therapy, which violates the codes of ethics regarding dual relationship.' However, this generated friction with the supervisees. For example, Vicky was agitated as she stated:

> She [the supervisor] keeps saying she is my supervisor and cannot talk about my issues. She repeatedly asks me to go to therapy without telling me what the issue is. What am I supposed to tell a therapist I need to work on? What do I go to therapy for?

This situation is due to supervisors often misinterpreting the idea of avoiding dual relationships (Liu, 2006). In turn, the issue of self for the therapist-in-training was left unresolved, depriving supervisees of a say in whether they agreed that they had issues and, if so, what those issues were.

Resistance may arise from discomfort with others imposing knowledge on one's competence and qualifications (Foucault, 1982). Vicky defended herself and refused the suggestion of therapy from her supervisor, stating that 'it won't work if you [the supervisor] don't tell me what the issue is.' She explained, 'it makes me feel like I'm the problem. But I'm NOT how she sees

me.' The supervisor also criticized Vicky's rejection of therapy, describing her as 'a therapist-in-training who doesn't have faith in counseling.' This example demonstrates that overt resistance escalates conflicts in the supervisory relationship and can also place the resisting party in a double bind. In Vicky's case, she either accepted the supervisor's viewpoint that she had a personal issue requiring therapy, or admitted that she was in denial of therapy's effectiveness.

In contrast, Linda cleverly flipped her supervisor's recommendation of individual therapy to her own advantage. She had difficulties with some clients who quit therapy without explanation. However, as soon as she realized the supervisor was using conversations about her emotions regarding client dropouts to explore Linda's personal issues, she smiled and said, 'I'm pretty okay with it. Since client dropout from therapy is likely to happen to therapists, it's a good opportunity for me now to learn how to deal with it.' This tactic of 'acting positive' served three purposes. First, the supervisor could not identify any issue about Linda that would lead to a therapy recommendation. Second, the statement demonstrated that Linda is capable of reconciling herself to a challenging clinical situation as a therapist-in-training. Finally, she maintained the boundary of clinical supervision, which the supervisor stated was 'for clients rather than the therapist.' Likewise, when her supervisor began exploring the self of the therapist, Julie pretended to 'cooperate with the supervisor by bowing [her] head, frowning, and pretending to speculate seriously about what the supervisor wanted [her] to see.' Julie then expressed regret: 'I am sorry. I'll keep working on it.' In our interviews, she confessed, 'I feel bad about the acting. Since there is nothing I can do, my goal is to get by and to earn supervisory hours so that I would be qualified for the licensure exam.' Both acting positive and pretended speculation tactically converted the supervisees who have 'problems' to professionals who are competent and continually improve themselves.

Especially worthy of attention is Susan. Her supervisor happened to oversee both her clinical and administrative tasks. Feedback regarding the administrative elements had overtaken the supervisory sessions. The supervisor was unsatisfied with the progress of administrative tasks assigned to Susan. Accordingly, the supervisor was critical of Susan's characteristics, commenting 'you are so passive,' 'you're actively involved in tasks you're interested rather than the required ones,' and 'you're really a pushover', and strongly recommend individual therapy. Susan characterized all such statements as 'enlightenment', and stated: 'I wasn't aware of those parts of me

until she [the supervisor] pointed them out. After some self-reflection, I felt 'yeah, that's truly the way I am'.' She initiated more conversations with the supervisor regarding those personal issues to improve herself as a therapist and as a person. Susan's attempts to address the self may be a tactic against off-topic clinical supervisory sessions that focused too much on administrative affairs. By directly engaging with the issue of self, she created a small space as a therapist in the context of supervision.

'A harmonious supervisory relationship leads to good guanxi': Cultural scripts

The supervisory relationship is an essential component of effective supervision (Bernard & Goodyear, 2019; Ladany et al., 2013). This relationship deeply affected supervisees' willingness to disclose and to participate in discussions on sensitive issues. Both supervisors and supervisees expect good relationships in which the former helps the latter develop professional competence. However, for the supervisees in this study, establishing a good relationship with their supervisors went beyond enhancing professional competence. They were concerned about how *guanxi* would affect their future careers. *Guanxi* is a term literally meaning 'relationship' but denoting social connections that provide special access to resources and operate through personal relations, rather than formal structures (Qi, 2013). One intern I met during my fieldwork recalled that the first supervisory session panicked her, particularly when the supervisor handed her informed consent form that she was required to sign before supervision could begin. While reading the form with her supervisor, she had numerous concerns regarding evaluations of clinical theories, techniques, case conceptualization, and remedy/improvement plans in case she was unable to help clients or possibly jeopardize their best interests. She wondered 'whose theoretical orientation would be used to conceptualize my cases? The supervisor's or mine?', 'based on what criteria would I be evaluated as incapable? Would it be fair to me?', and 'what should I do to keep my internship from being terminated early?' To avoid sabotaging her relationship with the supervisor, however, she kept all doubts to herself. She emphasized that 'a harmonious supervisory relationship leads to good *guanxi*.'

All supervisees described their clinical supervision as 'problem-focused.' As Julie explained, 'the supervisor provides me with detailed treatment plans and interventions to solve client problems.' Linda added, 'what I think of the

issues, therapeutic relationships, and myself as a therapist is left out.' Rachael made a few attempts to shift the focus to her role as the therapist while the supervisor was telling her 'what to do or could've been done with the clients.' Likewise, Julie gently explained what she had done and planned to do in the following sessions, elaborating on the intentions associated with her chosen clinical interventions in supervision to 'bring both therapist- and supervisee-subjectivities back.' Unfortunately, their attempts did not achieve the intended goals. The client-problem-focused supervision objectified trainee therapists, as exemplified by Julie's comment that 'it's like my supervisor does therapy with the clients through me.' Such feelings escalated tension in the supervisory relationship. Julie continued, 'we were locked in standoffs a couple of times. The conversations were pretty intense, which is really NOT what I hope for supervision.' One fellow intern told her that 'the acts seem to confront the supervisor.' Julie believed that the supervisory relationship was trusting but was still afraid that 'she [the supervisor] might think I'm confronting her.' The intern advised her 'to know which way the wind blows,' which caused Julie to consider how her disputes may have consequences for '*guanxi*'. Since then, she kept her thoughts to herself because 'it won't do me any good to put the supervisory relationship in jeopardy.'

Tony, who used to be a teacher at an elementary school, explained why he never challenged his supervisor: 'once a student successfully knocks you down, which undermines your credibility, you may not be able to control the whole class. More importantly, it indicates you are professionally incompetent.' Instead of confrontation, he always replied 'I'll do it,' even if he did not necessarily follow the suggested interventions. However, the supervisor, whom Tony described as open-minded, flexible, caring, and supportive, was eager to hear Tony's perspectives on the clinical suggestions. This situation was anxiety-inducing because Tony had to present himself 'more carefully.' He attempted 'safe' responses for the supervisor, first pretending to ponder before saying something along the lines of 'I'm still figuring that out.' He did so because he knew the supervisor would let him go as long as he appeared to be considering the questions. Tony explained, 'I am afraid the supervisory relationship would be jeopardized if I challenged the advice, which would lead to poor *guanxi*.' Keeping thoughts to himself functioned as a 'protection' not only for the supervisor's professional competence, but also for *guanxi*. Rachael explained the importance of maintaining good *guanxi* with supervisors. She quoted several proverbs to defend her position, specifically 'if you have close ties with someone powerful, what really matters

doesn't matter; if not, what really doesn't matter matters', and '*guanxi* make things easy.' She particularly emphasized, 'building social connections that give you a hand or help solve a problem by pulling some strings is quite important for young professionals, particularly with job seeking.'

Supervisees' nondisclosure (for instance, regarding their disagreement with feedback or suggested interventions), often indicates a weak supervisory alliance (Gibson, Ellis, & Friedlander, 2019) and/or supervisor's lack of multicultural competence (Hutman & Ellis, 2019). To build positive relationships that encourage supervisees to self-disclose, supervisors can also engage in disclosure (Ancis & Marshall, 2010; Bottrill et al., 2010) and demonstrate acceptance and exploration of differences between themselves and their trainees (Ancis & Marshall, 2010; Burkard et al., 2009; Murphy & Wright, 2005). In terms of characteristics, supervisors should strive to be supportive, caring, nonjudgmental and flexible (Murphy & Wright, 2005). However, a micro analysis focusing on individual actions and characteristics in effect overlooks the essential influence of a predominant macro-culture on interpersonal interactions. Supervisees in this study did not disclose because they conformed to the cultural scripts of *guanxi*. Supervisees' nondisclosure preserved supervisor professional competence and aimed to maintain harmonious relationships that would lead to good *guanxi* with supervisors. Supervisees expected supervisory relationships that enhanced their professional competence while forming *guanxi* as social capital that would benefit their professional career.

Conclusion

Understanding human activities requires recognizing both relational and cultural contexts in which the actions are embedded. Participating in a web of power relations, supervisees' daily practices are simultaneously influenced by multiple ideologies associated with social locations. The therapists-in-training, who embraced the dominant ideology of collaborative supervision, elaborated on their thought processes regarding clinical interventions, resisting supervisors who imposed clinical opinions as 'correct' solutions for therapy. However, in a cultural tradition of respect for authority, the supervisees' explanations for their own clinical intentions were deemed to a confrontation to, rather than collaboration with, the supervisors. Furthermore, in the era of psychotherapy professionalization, they were aware that supervisors are gatekeepers whose responsibility is to ensure that trainees meet standards

for entry into the mental health profession. Therefore, supervisees were conscious of hierarchy in their supervisory relationships. Given all these professional and cultural ideologies, all these meticulous, calculated tactics, such as selective presentation of cases or self, note-taking, acting positive, and pretended speculation, the supervisees employed intended to maintain harmonious relationships with their supervisors.

The tactics employed by the supervisees in this study served similar purposes as those identified in existing literature of everyday resistance (for example, foot-dragging, dissimulation, false compliance and so forth), in that all they intend to achieve are the goals of survival and undermining their superiors' domination. However, supervisee resistance in this study did not develop into a 'quiet encroachment' (Bayat, 2009, p.56) that subalterns put into practice to strive for a dignified life (Lilja et al., 2017). This could perhaps be because trainee status is temporary and can be left behind as soon as the one-year internship is completed, after which they will pass a licensure exam and move up in status as licensed counseling psychologists. These tactical actions enabled supervisees to adapt to the difficult situations that they encountered during clinical supervision and, most importantly, enabled them to preserve their own professional integrity and therapist subjectivity, and the harmonious supervisory relationships that generate valuable guanxi networks. In doing so, supervisees demonstrated their agency, even though they were in a vulnerable position.

The selected tactics were largely associated with the 'good student' ideology. Since their internships are part of the curriculum, supervisees still occupied a student role and had already demonstrated their academic performance through attending graduate school. In line with Foucault's technology of the self (1988), supervisees had long internalized the 'good student' concept in a culture that views academic success as part of being winners in life. Long-term training has imbued the supervisees in this study with obedience, respect for authority, and effective learning strategies. In effect, acting as a good student as a tactic did not aim to transform power relations in clinical supervision, rather it allowed for adaption to certain circumstances. Hence, everyday resistance is a self-regarding practice (de Certeau, 1984), where supervisees did not challenge the supervisor directly, but ignored or re-appropriated their suggestions based on the supervisees' own situated knowledge.

Genuineness, congruence and openness in therapeutic or supervisory encounters are valued and encouraged in the profession of counseling psychology. Meanwhile, the cultural discourse of students honoring instructors and their expertise had a strong influence on supervisee interactions with their supervisors. Unable to meet these conflicting expectations, the supervisees chose to conceal what they had to say in circumstances involving different preferences for therapeutic approaches, disagreement on suggested interventions, and frustration with unidentified personal issues requiring therapy. In other words, they adopted the identity of a 'good student' to maneuver through difficult situations in the interest of *guanxi*. Accordingly, supervisees' nondisclosure behind the tactics maintained supervisor professional integrity and harmonious supervisory relationships, which increase the social capital of *guanxi*, needed by supervisees to ease their professional career, as *guanxi* connects them with relevant contacts in the competitive mental healthcare market. Supervisees may be more vulnerable than supervisors, but the cultural context and tactics allow them to manage situations to their own long-term advantage. Thus, nondisclosure is both an act of resistance and a self-serving behavior when considering the cultural discourse of *guanxi*.

Given that supervisee reluctance may be ineluctable, recognizing everyday resistance as part of the nature of supervisory relationships rather than as discord that must be eliminated may be the first step to deal with supervisee resistance. Acknowledging supervisees' everyday resistance fosters an understanding of not only their vulnerability, but also the effects of both professional and cultural discourses on supervisory interactions. Accordingly, I would suggest that both supervisors and supervisees acknowledge resistance while addressing the issue of power disparity. Exploration of the resistance issue may begin with processing both supervisor and supervisee experiences with resistance in their daily life, and identifying tactics employed to advance their interests along with cultural scripts upholding the tactics. The objective of this conversation is to connect both by voicing unspeakable struggles associated with the vulnerable positions each of them used to or currently occupy. Accordingly, addressing potential factors that are likely to contribute to supervisees' resistance in clinical supervision may facilitate better understanding of the social contexts in which supervisees reside. Furthermore, both supervisors and supervisees should examine the constraints of dominant discourse about supervision and its intersection with common or unrecognized cultural scripts through everyday resistance. Such

explorations may help them identify various forms of effective supervision.

One limitation of this study was a lack of analysis of everyday resistance by supervisee participants from the perspective of gender relations. This study was originally deigned to recruit dyads of supervisees and supervisors of the opposite sex. However, given that the sex ratio is 81 female to 19 male therapists in the field of counseling in Taiwan, it was hard to achieve this goal. Furthermore, some prospective supervisee participants declined to participate in this study upon realizing their supervisors would also do so, mainly because of the fear of jeopardizing the supervisory relationship or of retaliation through their final grades if their supervisors chanced to hear what they had to say about clinical supervision. Future research may elaborate upon resistance tactics employed by supervisees and even by supervisors from professional discourses regarding clinical supervision, intersecting with cultures of gender, socioeconomic status, race, nationality, ethnicity, and sexual orientation, to further expand our understanding of everyday resistance in supervision.

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