USES OF PARADOX IN SUPERVISION

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RESUMO

Intervenções paradoxais são apresentadas como um meio útil para se ultrapassar as dificuldades de supervisão que não possam ser controladas com métodos mais diretivos. Quatro exemplos ilustrativos retirados da experiência clínica e acadêmica são oferidos.

Supervision, as an activity, falls somewhere in the area of overlap between teaching and therapy. Regardless of whether differences among these endeavors are more a matter of social labeling or reflections of distinct interactional patterns, their differing emphases are readily recognizable. Supervision is like teaching in that it involves the supervisor helping the supervisee to master knowledge and skills that are specifiable in at least a general way. And supervision — at least clinical supervision — is like therapy in that it involves a sometimes intense relationship in which the supervisor attempts to bring about changes in the supervisee's thoughts, feelings and actions, especially self-directed ones.

People come to supervisors for help with different kinds of problems from those they bring to teachers or therapists. For this reason, both the nature of difficulties that arise in the course of supervision and ways of dealing with them tend to be somewhat different. When supervision is going smoothly, the role of the supervisor is more like that of a teacher. Issues of knowledge and skills predominate, and the

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supervisor (or at least this supervisor) attempts to be as clear as possible in order to facilitate learning. When problems arise, however, the supervisor may have to become more like a therapist. That is, rather than focusing solely on the content at hand, the supervisor may have to direct interventions toward the relationship in order to get the process moving again.

Paradoxical interventions have played an important role in recent therapy developments — particularly as ways of dealing with resistant clients as families (Watzlawick, Weakland & Fisch, 1974; Palazzoli, Boscolo, Cecchin & Prata, 1978; Madanes, 1981; Fisch, Weakland & Segal, 1982; Papp, 1983; Haley, 1984). Such interventions, while at first appearing to be inconsistent with the goals of therapy, are actually designed to attain them. Given the wide range of problems with which they have been used, it seemed logical to try using them to resolve impasses in supervision, particularly when more direct approaches failed or appeared likely to fail.

The following examples from my supervisory experience are provided to illustrate the use of paradox in academic and clinical supervision with both individuals and groups of supervisees. My hope in choosing these examples is to illustrate the use of paradox in a range of supervisory relationships.

Example 1: A female graduate student who had done well in a couple of my courses asked to do an independent study with me reviewing research in the area of paradox. While she was a bright and highly motivated student, whose seriousness, competence and imagination I had respect for, I had noticed that a particular pattern of interaction had arisen with her in the past. In brief, she would ask intelligent questions, which I would do my best to answer. She would be appreciative of my answers, but would respond with more questions — indicating that perhaps she hadn't understood fully or that I had neglected to respond to some aspect of her question. Eventually, either in a sequence of questions, or over a period of time, she would become disappointed with me,

communicating nonverbally either frustration at my not telling her the Answer that she knew I possessed, or disappointment that I had not lived up to the high opinion of me that she had believed I merited.

Since the independent study was in an area in which no one had all the answers, I felt reasonably sure that over the course of the semester, the pattern would repeat itself. And since the independent study would involve just the two of us — without other students to turn to once the cycle got going — I felt that preventive measures were in order. I decided to predict the behavior, making its spontaneous occurrence less likely. Thus, in one of our early sessions, I said to her "Since we're going to be working together all semester on this project, I thought I should mention to you a pattern that seems to have occured between us in the past. Sometimes, when I've been unable to answer your questions, I've had the sense that you were frustrated with me or disappointed with me. I thought that I should mention it, so that we can recognize it if it occurs."

"You're doing it !" she said.

"I'm just pointing something out, so that we can both be alert to see if it happens."

She briefly insisted that I was using some kind of paradox with her; but when she saw that I responded only to the subject at hand and not to why I was doing what I was doing, she returned to the topic of the independent study. I am pleased to report that she didn't become frustrated or disappointed with me in the manner predicted. The course went quite well: I referred her to some readings she found helpful, she came up with some references that I had been unaware of, she wrote an excellent paper, and we both had some interesting insights which, however, fell short of divine revelation.

Example 2. A foreign born female graduate student was working with me on a proposal for her doctoral dissertation. While she was competent in the research skills necessary for the task, her written English was quite weak. I had

agreed to direct her research with the understanding that we would have two goals: that she would complete her dissertation and that she would learn to write English on a professionally acceptable level. Accordingly, she had made contact with a friend of hers who was a professor of English and who had agreed to go over all drafts of her work before they were submitted to me. The point of this exercise was not only to save me work, but to use samples of her own technical writing as a basis for improving her skills.

As we worked on the project, she emphasized to me her desire to complete the dissertation rapidly. She indicated that she was a divorced working mother, who had to provide for her adolescent son, and that she needed to complete her graduate training so that she could get a better paying job. I expressed my willingness to do whatever was necessary to move her along as quickly as possible, but emphasized that the key to rapid progress was the quality of her work. She, in turn, said that she would work hard and meet the terms of our agreement in order to finish rapidly.

I soon discovered that the quality of the writing in her drafts was quite poor, that they were extremely messy, and that changes that I requested often did not appear in subsequent drafts. In speaking with her, it seemed that part of the difficulty might have been due to her friend's lack of familiarity with psychological concepts and terminology, and part to a hesitation that some English professors have to tinker with a person's unique style of expression. However, many of the errors were so egregious that it was inconceivable that her friend could have missed them. She then revealed that sometimes she went over drafts with her boyfrind (a lawyer) so as not to trouble her friend too frequently. In addition, she began to criticize me as a nitpicker and refer pointedly to the way I was delaying her dissertation. I, in turn, became frustrated with her, told her that I refused to compromise on quality... and decided that something had to be done to put an end to the conflict that was escalating between us.

As I reviewed in my mind what had been going on, it seemed that the central issue was the one of her self-imposed deadline. She was cutting corners in order to meet it, and I was doing my best to help her to meet it, while getting increasingly angry at her demands on me. Meanwhile, despite the extra time I was putting in going over unsatisfactory drafts, progress was actually slowing down — since it takes more time to submit a hasty draft and then revise it than it does to get it right the first time.

Accordingly, I implemented the following strategy. The next time she handed in a draft, I made corrections on the first page or two, and then stopped. At our meeting, I handed the entire document back to her (about 40 pages) and indicated gently that while I had made corrections at the beginning, there really were too many errors for me to address. I told her that I had thought about the work, and that she really was being too hard on herself. There was no need to hurry in finishing the dissertation. I said that she should take her time with it and enjoy life. After all, she had gotten along without a Ph.D for a long time, and there was no reason that another year or two — or even three — would make a difference. As long as she was working on it, I would stick by her. She reacted with vociferous amazement, protesting that she really did want to finish it as soon as possible. I responded in a calm and supportive manner, reemphasizing that she was being too hard on herself, and suggesting that she take it easy.

The interval before her next draft was longer than preceding ones, but its quality was significantly improved. In addition, she raised issues regarding the organization of the project that indicated inaccurate assumptions that I never suspected she had. For example, she seemed to believe that the point of the literature review was to show that she had read voluminously on the topic (certainly a reasonable secondary goal) but wasn't aware that its primary purpose was to provide a logical and empirical rationale for the study she was proposing to undertake. Naturally, once these assumptions were brought out into the open, it was possible to correct them. In retrospect,

it was easy to see that the conflict we had been locked in prevented her from revealing her inaccurate assumptions — since she felt herself under attack and would naturally hesitate to reveal areas of vulnerability.

In weeks following my new approach, she finally developed an acceptable dissertation proposal. Whenever she began to press me to speed up, I would suggest that she slow down; and in this way the project was completed in an atmosphere of cooperation.

Example 3: I met once a week for three hours with a group of five advanced graduate students to supervise therapy cases that they were attending at placements in field settings. They were all beginning therapists, two women and three men; and one of the men is the subject of this example.

While he spoke in a quiet monotone, and with a carefully deferential manner, his overall style was passive aggressive. In particular, when I would comment on his work — and sometimes when I would discuss a theoretical or technical matter with the group — he would politely disagree with me with extraordinary persistence. Following a string of disclaimers regarding what an interesting thought-provoking or otherwise useful comment I had made, he would offer a well-intentioned BUT, followed by an explanation. This sequence of YES-BUT'S would go on without termination following any further explanations I might offer — or, for that matter, attempts on the part of other members of the group to intervene. The only ways to terminate the sequence were for me eventually to say something like "Well, you may have a point there," or otherwise agree with him — or, alternatively, to infringe impolitely on his freedom of speech by insisting that we move on to discuss other matters. Either of these moves seemed to be followed by the faint trace of a smile on his face.

One day, as I finished commenting on a presentation of his, I noticed him inhaling in preparation for his predictable reply. I held him off with the following request: "Could you phrase what you're about to say in such a way as to disagree with me."

He responded with a protracted and uncharacteristic pause, following which he said that he wasn't sure that he agreed with my orientation and gave specific examples of areas of disagreement. I told him that all that was required from him was to understand the point of view that I was presenting — that I understood that his theoretical orientation was his own concern and that I hoped it would continue to evolve throughout his career. I did expect him to try out my suggestions because I thought he might learn something from them — but if what he learned was that they were bad ideas, that was fine with me.

We had a rational discussion for a few more minutes, following which we returned to the clinical material. The unending series of YES-BUT'S no longer occurred during supervision.

Example 4: I met once a week for three hours with a group of eight advanced graduate students to supervise therapy cases that they were attending at placements in field settings. They were all beginning therapists, five women, and three men; and this example concerns three of the women.

The group of eight was a close-knit one-in part because of comments I had made during an orientation session two years previously, in which I had told them that a strategy of cooperation and working together would be more likely than one of competition to lead to success in the program. They had apparently taken this advice to heart and had developed an unusual degree of comradeship and closeness.

In my introduction to supervision I had emphasized that it required aspects of appropriate behavior that were more like therapy and other clinical interactions than like academic courses. Thus, all supervisees were expected to attend all sessions (barring illness or disaster — in which case they were to call to cancel in advance, if possible) and to be there on time. Since I was doing group supervision, I explained, it was best to start with everyone present.

Despite this introduction, three of the women in the group displayed a pattern of lateness and missing sessions. The first frequently arrived between a half hour and an hour late (though demonstrating the potential for becoming a talented therapist). The second — who still retained some of the flower child rebelliousness of the sixties — arrived equally late and sometimes missed sessions with poor excuses (though performing adequately in her clinical work). The third arrived equally late while missing numerous sessions. This last therapist was performing poorly: her personal problems were clearly interfering with her understanding of and interaction with a client. I should mention that she complained of her client being poorly motivated, coming late and missing sessions. I dealt with this in part with indirect suggestions such as "He'll have to learn that YOU CAN'T SOLVE YOUR PROBLEMS BY COMING LATE." — with indifferent results.)

I first attempted to deal with the problem of lateness and missed sessions by reemphasizing the rules of supervision — to no avail. Next, I attempted to get the group to arrive at a mutually acceptable solution. In the discussion that I led, no one suggested punitive consequences for unacceptable behavior. When I raised the possibility of fines paid by latecomers to those who were on time — or some similar solution — the group was unanimous in its negative reaction. Instead, their solution was for us all to meet a half hour earlier for coffee, and then to begin at the appointed hour.

I went along with this proposal for several weeks — during which time I met with the punctual therapists for coffee, while the pattern of lateness and missed sessions continued unabated on the part of the other three. Eventually, it became clear that stronger measures were called for.

I reasoned that the group's closeness — for which I was at least partially responsible — was preventing them from taking any action to discipline wayward members. It seemed, therefore, that an appropriate intervention would be one aimed at the entire group, in which the acceptance of lateness and

missed sessions was defined as disruptive rather than supportive of group solidarity. Accordingly, once I had the entire group together, I made a little speech more or less as follows:

"I know that you're all starting out as therapists, and that you're self-conscious about your clinical work. For that reason I had hoped that I wouldn't have to say this; but I can't avoid it any longer. I just don't think it's fair that those of you who have been coming on time have set up the latecomers as scapegoats. We seem to be spending much of our time talking about lateness and missed sessions, so that all of you can avoid the anxiety involved in a close examination of your functioning as therapists."

The behavioral changes following this intervention were more dramatic than I had anticipated. The first of the late therapists began coming on time, and the second one stopped missing sessions and began arriving only five or ten minutes late — which I felt I could live with. The third therapist dropped out of the graduate program. She had been having a variety of personal, familial and economic problems — the dimensions of which I had only been dimly aware of — and which ultimately became too much for her. She obtained permission to finish out the semester in her practicum courses, and limped through the remaining weeks more or less as before — but without the "symptomatic" collusion of her classmates.

In considering these four examples, I would like to make two brief points. First, paradoxical interventions were resorted to only when a more straight-forward "teaching" approach either wasn't working or appeared likely to fail. Since the goals of supervision involve the mastery of knowledge and skills, indirect approaches run the risk of creating confusion where clarity is desired. (Naturally, a supervisee might be overly clear, and inaccurately so, about complex and subtle issues. If he or she resisted direct and varied attempts to deal with the matter, the supervisor might want to sow some confusion. But this is not an exception to the general principle of proceeding in a straightforward manner as long as it works.)

In this way, paradoxical interventions can be seen as consistent with the goals of supervision, since they involve removing blocks to a task-oriented intellectual approach.

The other point, which follows from the above, is that once change took place I returned to a straightforward didactic approach. That is, when supervision is achieving its goals there is no need for elaborate indirect interventions, no matter how imaginative or personally satisfying to the supervisor. "If it isn't broken, don't fix it."

ABSTRACT

Paradoxical interventions are presented as a useful way of overcoming difficulties in supervision that do not yield to more direct approaches. Four illustrative examples are offered from academic and clinical supervision.

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