A comparative study of self-perceived experiences of supervisors and supervisees about supervision in psychology.

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For He knows the way that I take; after He has tested me I shall come forth as gold

(Job 23:10).
Declaration

I Nkosinothando Thembekile Jiyane hereby declare that this dissertation is my own original work. Sources consulted are acknowledged in the text as well as in the reference list.

___________________

N.T. Jiyane
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Abstract

This study was used to compare how supervisors and supervisees experience supervision at the University of Zululand in the department of psychology. A survey was conducted with the use of Likert type questionnaires. The researcher used the data that was gathered during the pilot study (which was conducted in 2008) as well as the recommendations to formulate a 5-point scale. Items were in a counterbalanced order to identify and control response bias. Participants were then asked to suggest what they thought should be done to improve supervision in an open-ended question. Each statement was presented individually in terms of percentages of respondents and their level of agreement with the statement. Statements were designed to elicit particular themes so the researcher condensed them so as to better describe self-perceived experiences of both supervisors and supervisees.

The findings were descriptive of the reality of supervision (what is happening) as perceived by the participants. These findings were then compared with the existing literature on supervision (what should be happening). The findings showed a more positive picture than what had been anticipated by the researcher. Nevertheless, a few gaps were identified and recommendations were made in an attempt to bridge them.

This study has provided valuable information on how supervision is experienced by both supervisors and supervisees. Moreover, it is of value to the university departments that incorporate supervision as part of their training process, especially the helping professions. Furthermore, the study helped in the identification of factors that supervisors and supervisees view as attributes in the promotion of professional development.
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CHAPTER ONE

INTRODUCTION

1. Introduction

Supervision is an integral part of the training process of a mental health professional. In order for one to become an effective and competent practitioner, one has to go through this process. Supervision is defined by Dunbar-Krige and Fritz (2006), as a means of transmission of knowledge, skills and attitudes of a particular profession to the following generation. Thus, through supervision, the supervisee is able to adopt a professional identity (Corey, Scheinder & Callanan, 2007). This is in line with the notion asserted by Dunbar-Krige and Fritz, that supervision aims at enhancing the professional functioning of the junior members, monitoring the professional services offered to the patients, who consult them and gate-keeping for those who are entering the profession.

The mental health discipline is undergoing changes which are reflected by the American Psychiatric Association (APA) committee on accreditation standards. The committee implements programs which specify the education and training objectives in terms of competencies expected of its graduate. Mental health practitioners are expected to have, as one of their competencies, supervisory skills yet the majority of professionals have not received formal training in this area of competence (Kaslow, Borden, Collins, Forrest, Illelder-Kaye, Nelson, Rallo, Vascuez, & Willmuth, 2004).
1.1 Theoretical background to the study

The ethical and legal guidelines view supervised clinical experience as a prerequisite for competence. Supervision is used in Counselling, Psychotherapy and other mental health disciplines as well as many other professions engaged in working with people. It consists of a practitioner with training skills in supervision meeting regularly with a trainee to discuss casework and other professional issues in a structured way. The purpose is to help a trainee learn from his or her experience and progress in expertise as well as to ensure good service to the patients (Page & Wosket, 1995). They further suggested that supervision has to be at a rate of one hour for every eight hours of patient contact. If a supervisee has seen a patient for perhaps eight hours, he or she should be supervised for at least an hour.

Carrol (1996) stipulated that supervisors should be able to demonstrate conceptual knowledge of supervisory methods and techniques and they should be skilled in using this knowledge to the development of supervisees. Lawton and Felthan (2000) further emphasize that it is vital that supervisors have an explicit model of supervision and supervisory methods they use since there is a variety to choose from. Specific models or approaches to both counselling and clinical supervision come from historical standards of thinking about relationships between people. For example, Hawkins and Shohet (2003), developed a humanistic process model and Inskipp and Proctor (1994), developed an approach based on normative, formative and restorative aspects of the relationship between supervisor and supervisee.
There is also a 4S (structure, skill, support and sustainability) stage model which was developed in 2004, which is a solution focused approach to supervision. This model is said to be suitable for use by any helping professional (Corey et al., 2007). Furthermore, empirical literature on supervision presents a more extensive and detailed model with 7 core areas of supervision training: model of supervision; counsellor development; supervisory relationship; supervision methods and techniques; evaluation; executive skills; as well as ethical, legal, professional regulatory issues. Each of these areas includes three essential elements which are: self awareness; theoretical and conceptual knowledge; skills and techniques (Falender, Erikson-Cornish, Goodyear, Hatcher, Kaslow, Sigmon, Stoltenberg, & Grus, 2004). Stoltenberg (1993) provided an integrated developmental model of supervision, which describes trainee characteristics and supervision needs across three levels of development. In each level development is tracked by monitoring changes in three crucial structures: self and other awareness, motivation and autonomy.

Lawton and Felthan (2000) outline commonly used methods of supervision which are: the self report, process notes, audiotapes, videotapes, live supervision (direct observation in which either the supervisor sits in during the session or s/he observes behind the one way mirror) and verbal exchange. The self report is a commonly used method of supervision and it is said to be limited by the supervisee’s conceptual and observational ability. The use of process notes is another method, which builds on the self report by adding a record explaining the content of the session and the process of the interaction. Audiotape recording allows for an assessment of the subtleties of the interaction between the supervisee’s sessions with a patient. It is said to provide the most accurate information about the therapy session. Verbal exchange (whereby the supervisor and supervisee discuss cases, ethical and legal issues and personal development) and direct observation (observation is said to provide a more accurate reflection of these skills and abilities of the supervisees), are the most commonly used methods of supervision. The latter, however, does demand a lot of time and effort on the part of the
supervisor (Lawton & Felthan, 2000). The roles and responsibilities of the supervisor and the supervisee are clarified right from the beginning to minimize any surprises (Corey et al., 2007).

### 1.2 Statement of the problem

A pilot study was conducted by Jiyane, Lunga, Mpata and Ngema (2008) with the aim of evaluating the supervision of professional courses done at the University of Zululand. There are some aspects of supervision which were interpreted by respondents as positive in supervision but apparently, there is still room for improvement. Most responses from supervisees indicated that they perceive support and encouragement from the supervisors as a positive experience more than how the supervisor structures the process. Only a minority of respondents perceive things vice-versa. Supervision was perceived as providing a learning experience by most respondents. The respondents perceived the unavailability of a supervisor as a negative experience in supervision. Being scolded in front of others (which happens in group supervision) was perceived as a challenge. Supervisees further indicated that a competent supervisor is the one who is an expert in the field, who is able to model professional behaviour and can adjust supervision to fit the learning styles of each supervisee. Most respondents stipulated that commitment on the part of the supervisor includes treating supervision professionally and providing assistance. Most responses stressed that a confident supervisor is someone who does not feel intimidated when supervisees forward their opinions. It was also reported by respondents that if the quality of supervision was poor, the confidence of the supervisor would also be challenged leading to the supervisor being defensive toward supervisees. Communication between the supervisor and supervisee was viewed as the most paramount aspect in supervision (Jiyane et al., 2008).

All lecturers in Psychology are expected to perform supervision, yet there is no formal training that takes place to equip them with supervising skills. Hence, the lack of formal training of supervisors
detrimentally affects the competence, commitment and confidence of supervisors which in turn has a negative effect on the experience of supervision by supervisees (Borders, 1994). The researcher, therefore, investigated how supervisors and supervisees experience supervision and how they perceive and interpret their experiences.

1.3 Research questions

The current study sought to answer the following questions:

1.3.1 Is there any gap between what should be happening and what is happening in supervision?

1.3.2 Is there any discrepancy between what has been experienced by the two groups of respondents (supervisees and supervisors)?

1.3.3 Is there any need for formal training of supervisors?

1.4 Aim and objectives of the study

The main aim of the study was to compare the experiences of supervisors and supervisees as they perceived them. This was achieved through the following objectives:

1.4.1 To generalize the findings of the pilot study to a larger sample.

1.4.2 To find out whether or not supervision serves its purpose.

1.4.3 To further explore the challenges faced by supervisors and supervisees in the process of supervision in a larger sample.

1.4.4 To identify gaps in supervision and make recommendations to bridge them if they do exist.
1.4.5 To conduct a further self-perceived evaluation on the competence, confidence and commitment of supervisors, in order to establish whether or not there is a need for formal training.

1.5 Motivation of the study

A study conducted by Gallagher and Brosnan (2001) indicated that some people are not satisfied with supervision. The pilot study sought to explore whether the findings of this study do apply at the University of Zululand. The findings of the qualitative pilot study indicated that both supervisors and supervisees in the Zululand University are not quite satisfied with the way supervision is carried out. The current study sought to investigate if the findings were applicable to a larger sample.

1.6 Significance of the study

This study is of value to the university departments that incorporate supervision as part of their training process, especially the helping professions. Moreover, the project helped in the identification of factors that supervisors and supervisees view as attributes in the promotion of professional development. The generated data has contributed to the improvement of supervision. The project further helped to monitor and evaluate supervision. This was done by comparing what is happening and what ought to be happening in supervision as per literature reviewed, identifying gaps and making further recommendations.
1.7 Résumé

This chapter serves as a foundation for the study. It looked into the theoretical background of the study, statement of the problem, motivation of the study, aim and objectives as well as the significance of the study. In the next chapter, literature related to the topic under study will be reviewed.
CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter reviews the literature that exists on supervision. The transition from being a therapist to becoming a supervisor often takes place with no training and after limited experience; it is even worse in circumstances where the need for supervisors exceeds the number available. Despite the fact that it is obligatory to supervise trainee psychotherapists, formal standards and teaching in supervisors’ training have not yet been established in many countries, and where they exist they are usually limited, voluntary and mostly provided by continuous education rather than by formal teaching institutions (Gilbert & Evans, 2000; Zorga, 1997).

2.2 The development of the supervisee

2.2.1 An overview of the integrated developmental model of supervision

In the current study the integrated developmental model of supervision is used as a model of departure. This model relies heavily on theories of human development and earlier developmental models of supervision. The model proposes three levels of development culminating in an integrated level. Development progress is monitored by attending to change in three crucial structures (self- and other-awareness, motivation, autonomy) across specific domains of competence. In a given level of development, the trainee will attempt to assimilate or integrate new information into existing cognitive structures. This creates disequilibrium or conflict which forces the trainee to loosen existing structures and develop new ones that can accommodate the new information and reduce the internal conflict. Without this disequilibrium, there would be no drive to reorganise or develop new constructs and
change would be horizontal (adding new congruent information, quantitative change) and not vertical (changing structures or schemas and developing to a higher level, qualitative change) (Stoltenberg, 1993).

According to the integrated development model of supervision, Level 1 trainees are those individuals who are new or relatively new to the practice of psychology. They may have considerable course work in psychology as well as exposure to practice in different forms of intervention. Prior to receiving supervision, the trainees should have had some academic preparation introducing them to the literature. It is important to be aware of trainees’ level of development in other aspects of training (Stoltenberg, 1993).

Regarding the structure of self and other awareness, the level 1 trainee will be focusing primarily on him or herself in both cognitive and affective areas. The self-focus at this stage serves a function of being self-conscious and apprehensive about developing a new area of competence and being evaluated by the supervisor or in a case of group supervision, peers. This might, however, not be the case where there is a supportive group climate as it may assist them in becoming more honest and interactive with their peers and motivate them to become invested in the professional development of their peers (Linton, 2003). The motivation of the level 1 trainee will be quite high and this is due to the heightened anxiety which is evident at this stage. The trainee is motivated to learn and become an effective psychologist so that the level of anxiety can be reduced and confidence and feelings of self-efficacy can develop. This motivation is more of a function of wanting to become an effective professional so that this uncomfortable stage can pass. It is probably evident at this point that the level 1 trainee will exhibit very limited autonomy and will be largely dependent on the supervisor and
others viewed as experts in the field. The supervisee will typically seek advice on many issues on a regular basis (Stoltenberg, 1993).

At this stage it might be a good idea for supervisors to assume their role which, according to Dunbar-Krige & Fritz (2006) is of being aware of a supervision policy because this policy has been produced to clarify the goals, principles and good practice associated with supervision. This policy details the key functions performed within the supervision, shared obligations and the framework within which supervision takes place. They are concerned with the mechanics of what is being supervised and must be thoroughly familiar with the process. They must understand the supervisees and be able to get the best out of them, because of the anxiety that the supervisee will be experiencing at times, which is inevitable and necessary for growth, the supervisor is urged to be in a position to observe and identify with both the patient and the supervisee in such a way as to provide perspective and a healthy distance, which helps to put some solid ground under the supervisee's feet (Dunbar-Krige & Fritz, 2006). Overtime the trainee will become more confident with his or her ability to implement various techniques and the initial anxiety will diminish and the trainee is ready to progress to the second level.

The model proposes that the trainee that has progressed to Level 2 is ready to focus on others, meaning that s/he focuses on the emotional and cognitive experience of the patient. This other-awareness however, can result in the overidentification with the patient. This can cause the trainee to experience similar emotions to those of the other person regarding the problem, which can cloud the objectivity and ability to function adequately in the therapist role. At this level the trainee may become as confused and immobile as is the patient and thus be unable to effectively work in developing appropriate goals and intervention plans. Over time the trainee will become aware of the impact that the patient may have on them. The trainee’s motivation is likely to fluctuate during level 2, being high when confidence is high and low when confusion or strong negative affect is experienced. A mixture
of successes and failures will have an impact on the day-to-day motivation of these trainees. The fluctuating motivation is accompanied by a dependency-autonomy conflict in the trainee (Stoltenberg, 1993).

Dunbar-Krige & Fritz (2006) propose that when a supervisee is dealing with a case that causes her emotions to spill over, having a space in which to achieve catharsis and gain some professional objectivity is helpful in preventing the unproductive acting out of those feelings while working with a patient. The supervisor should guard against exacerbating anxiety on the part of the supervisee by colluding with the illusion that as a supervisor s/he understands it all and understands the exact techniques that will definitely be effective with a certain patient. The supervisor should rather show that it is acceptable to experience such feelings and use one of the sessions for debriefing. And also to communicate to the supervisee that it is acceptable to not always know, to wait for the process to unfold at its own pace and that there is no sure way of helping a patient.

The supervisor has the responsibility to provide insight, perspective and practicality regarding patient conceptualisations, treatment plans and goals (Dunbar-Krige & Fritz, 2006). However, s/he should guard against modelling a pessimistic outlook or demotivating the motivated supervisees. Supervisees are keen to learn and in order to move beyond the uncertainties, confusion and anxiety associated with training, they are driven by the need to become competent. At times the keen to learn or the somewhat motivated supervisee may become resistant to remain open to new approaches and technique. The supervisor should generate a positive outlook which lays a foundation for growth and change. Once the outlook is generated, the resistant supervisees may be encouraged to be open to other approaches for the benefit of their clients and to take well calculated risks.
According to the model, the level 3 trainee is able to gauge the emotional impact of the patient on him or her and understand how various techniques and approaches to practice affect the patient. The trainee exhibits heightened self- and other-awareness and remains able to engage in empathic understanding of the impact of the problem on the patient while being able to pull back into a more objective view of the situation. The motivation of this individual is more constant. The trainee is grounded in a firm understanding of the process and his or her own strengths and weaknesses, which enables the development of a more personalised approach to practice. Another characteristic of a level 3 trainee is greater autonomy and conditional dependence. The trainee is aware of his or her areas of competence and will seek advice when experiencing a situation beyond his or her range of expertise without giving up responsibility for the final decision making. At this point supervision becomes more of a collegial sharing of impressions and experiences with a less need for intensive guidance and advice.

### 2.3 Structuring supervision

The basic assumption is that the supervisor’s approach should be varied to provide sufficient structure and guidance to enable learning to occur, yet allow for facilitative levels to be experienced by the trainee to stimulate growth to higher levels. Trainees might be at different levels for different domains (Stoltenberg, 1993). It is necessary that supervision be moderately structured, that it is neither too structured nor too unstructured. The under structuring supervisor allows supervision to happen without any structure, almost by default. Such supervisors see no reason for organising supervision time together.
Some supervisors are exceedingly busy, they let supervision take place by chance, like when they happen to meet with their supervisees. This often amounts to a damage limitation dialogue, with them asking if there are emergences, danger points or red-flag moments with which the supervisee needs help. Kay and Palmer (1961) emphasised the impacts of the structure of supervision. Lack of structure may well be suitable for an experienced practitioner who seeks help when it is needed, but it is poor for a beginner who needs time to reflect and think through the interesting issues emerging from client work. The opposite of under structuring but still bad practice in supervision, is over structuring. Over structuring supervisors are obsessive about every detail and leave nothing to chance. Their lack of relaxation, letting go, spontaneity, takes away the comfortableness of supervision, and makes it into a mechanical process rather than a relationship endeavour. There are lengthy discussions on every aspect of supervision, negotiations and re-negotiations, discussions about discussions, meetings about meetings, supervisions of supervision on supervision (Kay and Palmer, 1961).

2.3.1 Conducive environment for trainees at different levels

2.3.1.1 Conducive environment for the Level 1 trainee

A considerable amount of supervision conducted in training programs and associated field placements will be with level 1 trainees who have little or no experience in the clinical practice. It is important to note that trainees will be functioning largely in level 1 structures with respect to clinical practice, hence, considerable guidance and support will be required to assist the trainee in learning necessary skills and to keep anxiety at manageable levels. As the confidence levels increase the supervisor should reduce the amount of structure provided in supervision and encourage more autonomy on the part of the trainee. It is often more productive to rely more on instruction than on trainee focused
problem solving at this stage. Much remains to be learned, teaching and exemplification are appropriate methods to encourage this learning (Stoltenberg, 1993).

Supervision mechanisms used for this level of trainee will centre on providing information; support; role playing and modelling to encourage growth. Direct observation by the trainee of the supervisor or others, engaging in practice can play a very important role in demystifying the process and providing a template for the trainee to use in his or her own work. Assisting the trainee in conceptualizing the patient’s problems and dynamics is necessary. Where trainees are learning skills in a new area, it is important to provide support and frame feedback in a positive manner. For example trainees are usually more able to accept and integrate criticism or negative feedback if the supervisor has first addressed and reinforced some of the positive things the trainee has demonstrated. Preferred modes of supervision will include live observations and videotapes which allow the supervisor to actually observe the process rather than rely on the trainee’s verbal or written reports, which might not be a true reflection of what really took place during the session. This however is sometimes difficult or impossible. The supervisor needs to monitor the levels of anxiety of the trainee constantly to ensure adequate motivation for growth. Increased levels of ambiguity should be introduced lest the trainees become too comfortable and stagnate (Stoltenberg, 1993).

2.3.1.2 Conducive environment for the Level 2 trainee

Loganbil, Hardy and Delworth (1982) identified five general classifications of supervisor interventions that may prove helpful in conceptualising how one can approach the level 2 trainee. The first category is facilitative interventions that largely consist of support mechanisms for the trainee. It is advisable for the supervisor to remain supportive in response to all levels of trainees. The second category is confrontive interventions which are more appropriate for a level 2 trainee rather than for a level 1
trainee. This category basically involves challenging trainees to include in their competence additional interventions beyond those with which they are comfortable. Then there are conceptual interventions which assist the trainee in tying together theory with practice by challenging the preferred theory and mode of intervention. Prescriptive interventions (telling the trainee what to do) are appropriate for level 1 but are not appropriate for level 2 trainees and catalytic interventions, those which are intended to ‘stir up’ are more appropriate for level 2 trainees. These interventions include comments by the supervisor intended to highlight important interpersonal dynamics within the supervisor and the supervisee, supervisee and the patient and as well as the supervisory relationship. The intention here is to increase the trainee’s awareness of his or her impact on the other party and the other’s impact on him or her.

2.3.1.3 Conducive environment for the Level 3 trainee

These are more likely to be encountered at internship level. The role of the supervisor here is to encourage growth in the domains where less development has occurred. Apparently in most situations, supervising level 3 trainees is a rewarding experience allowing for mutual sharing of impressions, experiences and information (Stoltenberg, 1993). After having learned how the supervisee develops and how to work with a developing supervisee, let us look at how the supervisor evolves.

2.4 The development of the supervisor

Stoltenberg and Delworth (1987) described a level 1 supervisor as highly anxious to do the “right” thing. S/he tends to take a mechanistic, structured approach to the supervisory task and is likely to assume an “expert” stance, eager to impose his or her own theoretical orientation on the supervisee. This level is similar to stage 1, of Watkins’ (1997) developmental supervision model, called the “role
At this stage the supervisor is very much aware of his or her weaknesses, struggles with anxiety and feelings of incompetence. The supervisor typically employs a rule-oriented approach and is likely to impose a rigid structure (Marovic & Snyders, 2010), which Hess (1987) refers to as safe ground of concrete techniques.

At level 2, the supervisor still struggles with confusion but understands supervision to be more complex. Similarly, in Watkins’ stage 2 (referred to as Role recovery and transition) the supervisor gains some perspective but still feels inadequate. At this stage the supervisor is prone to wide fluctuations, from feeling good about his or her abilities to feeling incompetent (Marovic & Snyders, 2010). Co-supervision may be productive in order to facilitate the supervisors own development. According to the integrated developmental model some supervisors stagnate at level 1, some at level 2 and some supervisors will reach level 3.

At level 3, supervisors can work well with supervisees at any level of development and can engage in honest and accurate self-assessment. Watkins (1997) referred to this stage as Role consolidation; this is a third stage according to him. At this stage the supervisor’s confidence is increasing; there is greater utilization of process and there is more attention to supervisees’ needs. The supervisor is less controlling and more supportive and encouraging. Only a few supervisors at level 3 reach an even higher level 3 integrated. Such supervisors are often referred to as “master supervisors”. Stoltenberg and Delworth (1987) described them as supervisors’ supervisors. Watkins (1997) referred to this stage as Role mastery, where by the supervisor is able to take risks and shows greater flexibility, theoretical consistency and greater consolidation of different aspects of him or herself. At this stage the supervisor shows the considerable ability to remain open and adaptable in a manner that allows for
differences between supervisees, while remaining consistent across all supervisory experiences (Marovic & Snyders, 2010).

Borders (1994) argued that these writings provide a fairly consistent profile of novices, but little information is available about how novice supervisors learn about supervision and develop a supervisor identity, how they think and behave at various stages of development, and what factors encourage (and discourage) their development. Perhaps surprisingly, comparison studies have yielded few differences between beginner and experienced supervisors. In general, more experienced supervisors seem to use more teaching and sharing behaviours, and they and their supervisees are more active. Ratings of effectiveness, however, find novices to be equally effective as experienced supervisors (Borders, 1994).

Borders (1994) mentioned two possible explanations for these results. First, he stated that new supervisors typically supervise beginning therapists, which may be the pairing that allows novices to be and/or to be perceived as most effective by their supervisees. Second, "experienced" supervisors in these studies often have received no training in supervision. In other words, comparisons of inexperienced and experienced are not representative of comparisons of novice and expert. In fact, the expert supervisor has yet to be described empirically, particularly in terms of their actual behaviours and conceptual skills.

2.5 Training of supervisors

Constantine and Sue (2007) pointed out that supervisors are responsible for fostering their trainees’ competence and ensuring adequate treatment for patients, yet they have not received adequate training to supervise. Davies, Salmon and MacDonald (2002) suggested that clinical psychologists who also
act as supervisors should undertake training and go through a process of accreditation. In Manchester, training for supervisors has been developed. Their guidelines for accreditation as a clinical psychologist state that courses are required to demonstrate training for supervisors. Supervisors are expected to attend workshops on supervision. There are accreditation criteria to good quality supervisory resources thus accreditation is given to courses but not to individual supervisors. Professional practice guidelines of 1995 stated that relevant workshops should be attended prior to undertaking supervision. The guidelines further stipulate that time should be allowed for supervisors to attend appropriate supervisor groups and that newly qualified supervisors be enabled to enhance their competency in supervision and prior to taking on a trainee, the supervisor will have attended at least one workshop (Fleming & Steen, 2001).

Supervision of their own practice is also recommended as a central activity for all psychologists. Provision of supervision to trainees and newer members of the profession should be a core activity. It is unclear, however, whether attention will be given to the means of improving competencies in supervision. Most training courses recognise supervisors as important stakeholders and encourage them to play a direct role in the organization of clinical training. All supervisors in the database are invited to the workshops and particular invitations are also sent to specific supervisors for example to newly qualified supervisors for the introduction to the supervision workshop. Consideration has also been given to organising events specifically for more experienced supervisors. It was noted that there might be personal concerns about participating in workshops with much less or more experienced supervisors and with people who were previously their trainees. Outside teachers and facilitators are used but members of the course team are the most contributors. Outsiders may have advantages in helping local supervisors scrutinise their practice (Fleming & Steen, 2001).
2.6.1 The roles of a supervisor

Psychologists who supervise play an important role in clinical training and in the development of professional identity. Dunbar-Krine and Fritz (2006) listed the following roles of the supervisor.

2.6.1.1 Containment

Jarmon (1990) emphasised that one of the supervisor's most crucial roles is to create a sense of containment and safety, as a basis for meaningful work that promotes growth. This helps to set up a predictable, mutually agreed upon frame. There has to be a set time each week or fortnight for meeting in a professional space. Dunbar-Krine and Fritz (2006) support Jarmon's argument in that they also assert that when supervisees are involved in time-limited and crisis work, additional time may have to be arranged, telephone and email contact. Lack of a frame, lack of any ground rules or boundaries prevents the supervisor from being able to validate the work done.

2.6.1.2 Helping the supervisee build rapport

The skill of rapport building is of particular importance with supervisees who do short-term and crisis work. There is a need to establish rapport within a short time. It is crucial, from the very beginning, to help supervisees differentiate between building rapport through appropriate empathetic responses and colluding with patients (Dunbar-Krine & Fritz, 2006). For example, a supervisee may come across as siding with a parent, teacher, or a learner, instead of looking at the presenting problem in a broader context. In this instance, it is the duty of the supervisor to directly emphasise, evaluate and practice rapport building so as to enable such supervisees to explore the problem within its bigger context and look for solutions that would be in the best interest of everyone concerned.
2.6.1.3 Validation

Validation refers to assessing the accuracy of a supervisee's intervention in an empathic manner and being supportive regarding the supervisee's cognitive and affective processes (Dunbar-Krige & Fritz, 2006). Dye (1994) emphasised the importance of the supervisee being able to trust his/her supervisor to validate their perceptions or to provide well-motivated alternative conceptualisations. Attending sessions regularly enables supervisees to discover, through mutual participation, what the essential qualities of their patients are and which is the most appropriate way to help them (Dye, 1994). He further stressed that this working together towards a better understanding creates a new sense of inner strength and confidence, since it helps to confirm or supplement supervisee's own insights.

According to Kay and palmer (1961), the supervisor must maintain and direct intelligently the work of the supervisees. The successful supervisor is in communication with the supervisee and sensitive to their needs. As tasks facing the supervisees vary, the supervisor will vary her leadership role to fit the problem at hand. Because people vary in personality and ability, the supervisor will vary in her direction of them. S/he accepts his or her role as a supervisor assuming full responsibility for her actions with the supervisees.

2.6.1.4 Clarifying the goals and expectations of the supervision process

It is of benefit to both the supervisor and supervisee to be clear about the process of supervision as defined by the supervisor, the credentials of the supervisor, the logistics of supervision (time, frequency, emergency procedures, paperwork expected etc), the process and procedure of supervision and the procedures for evaluation and feedback (Dunbar-Krige & Fritz, 2006). A clear discussion and a signed contract at the beginning may help explain most of these issues. A supervisee is in a vulnerable position of being in the middle of important interactions, each of which will impact on
his/her competence as a supervisee, namely interaction with the supervisor and interaction with the patient. In this regard, Dunbar-Krige and Fritz (2006) believe that the task of the supervisor is to bring this dilemma to the supervisee's awareness and for both to explore the implications together.

2.6.1.5 Facilitating self and other awareness

Every person has personality traits that define who s/he is, and determines how s/he interacts with others. There is likelihood that during sessions his or her personality traits will manifest. For example an individual may talk too much or ask too many questions, invalidate clients' experiences, come across as too neutral, impersonal and place contradictory demands on clients. Besides giving consideration to case material, the supervisor should facilitate intra and interpersonal awareness (Dunbar-Krige & Fritz, 2006) perhaps by making the supervisee aware of how his/her personality contributes toward countertransference tendencies. Once the supervisee is aware of this, he/she will avoid doing harm to patients and work effectively because when you are aware that you are more likely to do harm, you become better at not doing it.

The issue of power relations is also of importance when facilitating intra and interpersonal awareness. Power relations struggles that emerge in supervision can also be a replication of similar power struggles between the supervisee and the patient. When a supervisor feels a threat to his or her authority and the supervisee feels a threat to his/her perceived competence, the power struggle that arise has to be recognised and dealt with by the supervisor (Dunbar-Krige & Fritz, 2006). This provides an opportunity to model conflict resolution.
2.6.1.6 Encouraging autonomy

Initially, supervisees show considerable dependency on their supervisors. This is an appropriate response, depending on the developmental level at which they are functioning. They typically rely on their supervisors and other sources for information that they can elaborate on and increasingly integrate into a better overall understanding of the training process. As they become more proficient and knowledgeable, the supervisor needs to encourage supervisees to take some risks and start to rely on their own insight and intuition. This practice helps achieve the long term goal of supervision which is to allow the supervisee to work more independently (Dunbar-Krige & Fritz (2006).

Dunbar-Krige and Fritz (2006) believe that the nature and the complexity of the patient each supervisee works with will determine the degree of autonomy that can be allowed. Working with fairly mild problems may make it possible for supervisee to function more independently. Complex cases such as potential suicide cases will necessitate more careful and intense supervision. The supervisor should assess supervisee training needs and competence to determine the nature and extent of additional training and supervision needed. This should be reassessed over the course of supervision. The supervisee should not be receiving generic supervision; supervision should rather be responsive to his/her particular training needs.

2.6.1.7 Feedback and assessment

The supervisor has to monitor the progress of both the supervisee and their patients (Dunbar-Krige & Fritz, 2006). Feedback becomes part of the validations and goals because in the early phases of their training, supervisees rely heavily on the supervisor for feedback. The supervisor must be able to evaluate a supervisee's performance with different cases and provide feedback in a way that will facilitate personal and professional growth as asserted by (Dunbar-Krige & Fritz, 2006). Another
important aspect of feedback is that it should be interactive and not consists of one-sided comments from the supervisor. The reader will get a more comprehensive discussion on the topic “preparing for supervision” which will be discussed later on.

2.6.1.8 Additional roles of the supervisor

- The supervisor should inform the supervisee of an alternative supervisor who will be available in case of crisis situations or unknown absences.
- The supervisor is legally responsible for the welfare of patients seen by the supervisee (Dunbar-Krige & Fritz, 2006).

2.6.2 The roles of a supervisee

Trainees ought to know the rights and responsibilities of both the supervisor and supervisee as well as to know what is reasonable to expect from the supervision experience and to be collaboration the process of supervision. Clinical supervision is not done to the supervisee but it is a process of learning and discovery the supervisee and the supervisor share. By attending to the following important issues from the outset of the supervisory relationship it is hoped that it will be a mutually satisfying and rewarding experience. It is the responsibility of the supervisee to ensure that patients know that he or she is receiving supervision (Dunbar-Krige & Fritz, 2006).

2.6.2.1 Limits to confidentiality

The supervisee should ensure that informed consent agreements with patient address the limits to confidentiality to include the supervisor’s involvement.
2.6.2.1 The supervisee as a professional

The supervisee should remember the professional obligations s/he has to patients, the supervisor and the profession. Training should be taken seriously and the supervisee must keep in mind the great impact s/he has on patients’ lives. If appropriate the supervisor must be used as a role model. If the supervisee feels that supervision is not adequately meeting his or her training needs, the supervisee must be proactive and assertive and not implicitly comply (Dunbar-Krige & Fritz, 2006).

2.7 Preparation for supervision

Preparation for the supervisory session is a responsibility of both the supervisor as well as the supervisee. The supervisor is expected to manage sessions but he supervisee is also expected to play his or her part. It is important that the supervisee enters the session being mentally prepared to address important issues. Important issue involve growth in the areas of skills, conceptualization, professional behaviours and personal reactions. Supervisees can remind themselves to be open to the supervision experience. Taking a moment to mentally prepare can help the supervisee focus, relax, and be in the supervision session thereby leading to a growth experience (Syracuse University School of education, 1995).

It is important that supervisees come with their own concerns and questions. This helps in that supervision becomes tailored to the supervisee’s experiences and it also shows that commitment on the part of the supervisee. Supervisors do have a responsibility to increase awareness and bring up their own perspective but they are likely to become even more invested when the supervisee shows their own investment (Syracuse University School of education, 1995).
2.8 Characteristics of supervisors

Borders (1994) believed that “good” supervisors seem to have many of the same qualities of good teachers and good therapists making informed choices about which role to employ at any given time with a particular supervisee. They are empathic, genuine, open, and flexible. They respect their supervisees as persons and as developing professionals, and are sensitive to individual differences (e.g., gender, race, and ethnicity) of supervisees. They are also comfortable with the authority and evaluative functions inherent in the supervisor role, giving clear and frequent indications of their evaluation of the supervisee’s performance.

Furthermore, good supervisors really enjoy supervision. They are committed to helping the trainee grow, and demonstrate commitment to supervision by their preparation for and involvement in supervision sessions. These supervisors demonstrate high levels of conceptual functioning, have a clear sense of their own strengths and limitations as a supervisor, and can identify how their personal traits and interpersonal style may affect the manner in which supervision is carried out (Borders, 1994) and it appears that supervision is perceived to work well when it addresses process factors (Fox, 2002). This proposition accounts for the supportive and process factors that seemed to be emerging from the study conducted by (Fox, 2002). Moreover, good supervisors have a sense of humour which helps both the supervisor and supervisee get through rough spots in their work together and achieve a healthy perspective on their work. Such personal traits and relationship factors are considered as significant as technical competence in supervision (Borders, 1994).

In terms of professional characteristics (roles and skills), “good” supervisors are said to be knowledgeable and competent therapists and supervisors and apparently supervision is perceived to
wok well when the supervisor is perceived to be an authority within the field (Fox, 2002). This proposition accounts for the “supervisor as an expert” theme which emerged from the study which that was conducted by (Fox, 2002) and is based on problem solving, practical considerations and clinical standards. According to Borders (1994) “Good” supervisors have extensive training and wide experience in psychology, which has helped them achieve a broad perspective of the field. They can effectively employ a variety of supervision interventions, and deliberately choose from these interventions based on their assessment of a supervisee's learning needs, learning style, and personal characteristics. They seek ongoing growth in therapy and supervision through continuing education activities, self-evaluation, and feedback from supervisees, other supervisors, and colleagues (Borders, 1994).

2.9 Evaluation of the supervisee

Constant monitoring and provision of feedback regarding supervisee performance are essential for quality assurance. Although evaluation is vitally important to supervision, both supervisors and supervisees may find it stressful. Supervisors are urged to balance an understanding of individual differences in conducting therapy sessions with the notion of competent practice as ascribed by the profession. The supervisor utilizes two general methods of evaluation: formative and summative (Corey, et al., 2007).

2.9.1 Formative Evaluation

Formative evaluation facilitates professional development through direct feedback. It is part of the foundation of supervision. The supervisor constantly monitors and provides feedback regarding supervisee performance. Choices of supervision interventions, questions asked to facilitate discussion, comments regarding the appropriateness of a supervisee’s case conceptualization, expression of the
ineffectiveness of a supervisee’s use of a skill – can all be described as formative evaluation. Because formative evaluation is consistent and tends to focus on process and progress, rather than outcome, it tends to be less stressful and threatening for both the supervisor and supervisee. Hawkins and Shohet (1989) recommended that formative evaluation ought to be: Clear in that the supervisor needs to be clear about the message being delivered; owned in that the feedback that supervisors give is rooted in their own perceptions and is not the ultimate truth. Supervision also ought to be regular in that feedback should be given regularly and in a timely fashion; balanced in that both negative and positive feedback should be created over time. It also ought to be specific because generalized feedback is difficult to learn from. Positive and negative evaluations should be accompanied by specific examples.

2.9.2 Summative Evaluation
Summative evaluation is a more formal expression of the counsellor’s skills and abilities. The supervisor must step back, consider all that has been seen and heard, and decide if the trainee’s work with patients and potential for working with future patients “measures up.” When supervision is linked to practicum or internship experiences, summative evaluations typically occur at the mid-point and end of the experience. The summative evaluation process tends to cause more stress for the supervisor and supervisee. By definition, summative evaluation should be the culmination of the evaluation process, if formative evaluation has occurred throughout the process, there should be no real surprises for the supervisee. Rating scales are commonly used as part of summative evaluation. In addition, more specific behavioural feedback may also be provided (Corey et al., 2007).

2.9.3 Evaluation Process Considerations
It is acknowledged that evaluations can be an anxiety provoking experience. A few things need to be taken into consideration when facilitating a growth-producing experience.
• Supervisees and supervisors should discuss grading and evaluation from the onset. The rationale for evaluation, criteria, and methods should be explicit.

• Evaluation should focus on the supervisees’ professional work, not personal issues. The supervisee and supervisor should share the responsibility for evaluation. Supervisors and supervisees should each complete evaluation separately, and then bring them together to compare impressions.

• Students in practicum and internship need to understand that clinical experience is fundamentally different from other academic work. Grades do take on a different meaning. In clinical work, a lack of knowledge or skill has consequences for patients, the supervisor, and the agency/school, as well as the student. It is important to go beyond “grade mentality” to a learning mentality and work to embrace evaluation as a process of receiving feedback about performance.

• Supervisees should communicate with their supervisors about any concerns they may have or ideas for improving supervision.

2.10 Evaluation of the Supervisor

In addition to the flow of feedback from supervisor to supervisee, part of on-going evaluation could include feedback from the supervisee to the supervisor. Attention to the process of supervision helps to facilitate a positive growth experience for all involved. In addition to regular feedback, supervisees should have an opportunity to evaluate the supervisor. Although supervisors and supervisees may have different views on what constitutes “good” supervision, feedback provided by supervisees can reveal important information (Corey et al., 2007).
2.11 Power dynamics

Because supervisors are expected to evaluate their supervisees, they have authority to determine whether their supervisees meet the criteria which is formally set forth by the profession. With such a hierarchy, power dynamics are inevitable. Abuse of power is possible in training institutions and it can cause the supervisee to fear the supervisor and hence withhold important information from the supervisor about a case (Murphy & Wright, 2005). Common ways of power abuse, mentioned by Murphy and Wright (2005), include but are not limited to forcing a supervisee to self-disclose, providing unwanted therapy to the supervisee, sexual harassment, over-focusing on the supervisee’s mistakes, psychopathologizing the supervisee, verbally attacking the supervisee and forcing the supervisee to adhere to a supervisor’s theoretical framework, the list goes on and on. A study conducted by Murphy and Wright (2005) on the supervisees’ perspective of power use in supervision, revealed that both the supervisor and the supervisee possess power in the supervisory relationship and both parties can use it positively or negatively. It would have been very interesting though to get the supervisors’ perspective as well on this subject.

2.11.1 Resistance in supervision

Due to the evaluative component in supervision, supervision-induced anxiety may result. This anxiety causes supervisees to respond in a variety of ways with some of the responses being defensive. It is these defensive behaviours that serve the purpose of reducing anxiety. They are referred to as resistance. This resistance occurs because of the dynamics of the supervision process. The primary goal of resistant behaviour is self protection in which the supervisee guards against some perceived threat. One common threat is fear of inadequacy, not measuring up to the supervisors standards. Supervisee resistance may be a reaction to a loss of control and can evolve into a power struggle.
between the supervisor and the supervisee. Regardless of form, resistant behaviours are coping mechanisms intended to reduce anxiety (Gates, 2003).

2.11.2 Games that supervisees play

Resistance often take the form of games played by supervisees who either consciously or unconsciously attempt to manipulate and exert control over the supervision process. Submission is one of the most common forms of resistance among the five that were mentioned by (Gates, 2003). It occurs when the supervisee behaves as though the supervisor has all the answers. Turning the table is a diversionary tactic by the supervisee to direct the focus away from his or her skills. Fragility is another one that occurs when the supervisee appears brittle and attempts to prevent the supervisor from focusing on the painful issues. Helplessness is the dependency game in which the supervisee absorbs all the information provided by the supervisor. The fifth type is projection which is a self-protective tactic in which the supervisee blames external problems for his or her ineffectiveness. The most effective way to counter resistance is sharing awareness of game playing with the supervisees and focussing on disadvantages inherent in game playing rather than on the dynamics of the supervisee behaviour.

2.12 Résumé

Due to the fact that clinical psychologists have become obliged to supervise trainee members of the profession, clinical supervision has looked to and leant from other related professions that although there is not yet an assessment of competence to supervise, increasing attention ought to be paid to developing effective supervision. Searching for a model of effective supervision is not an easy task but
the search still continues. Corey, et al. (2007) suggested that formal training on how to supervise should be implemented. The subsequent chapter outlines how the study was conducted.
CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1 Introduction

This chapter gives an outline on how the study was conducted. It describes the design and method of this study, how the data was collected as well as the instrument used to collect data. It further describes how the data was analysed and the ethical considerations of the study.

3.2 Research design and Methodology

3.2.1 Research design

The research design provided the logical framework upon which this study was conducted and it enabled the researcher to gather evidence that enabled the research question to be addressed as indicated by David & Sutton (2004). This study has a combination of two designs, the evaluation and descriptive design. Evaluation research is a method that is used to assess the design, implementation and usefulness of social interventions. Bless, Higson-Smith and Kagee (2006) stated that any attempt to change the conditions under which people live (no matter how simple or who is responsible for them) can be thought of as a social intervention. They further mentioned three forms of evaluation: the diagnostic, formative and summative evaluation. The current study is a diagnostic evaluation in that it aims at informing the researcher about the present situation in psychology at the University of Zululand, highlighting current problems as well as the possible consequences of various types of interventions (Bless et al., 2006).
The study is descriptive in that it aims at helping to define the existence and at describing characteristics of a phenomenon (which in this case is supervision). This descriptive information promoted greater understanding of various phenomena and this knowledge was then used to increase the effectiveness of supervision. Such information will be useful in developing interventions that will improve supervision. Both these designs are the most appropriate in answering the research questions of this study.

3.2.2 Methodology

A survey method was employed in this study as it is the most appropriate method when studying mass opinion (Babbie, Mouton, Vorster & Prozesky, 1998). The principal aim of this method is to document the nature of the variable (supervision). The current research used self reports to identify facts, opinions, attitudes and behaviours as well as the relationship among these aspects. Data was collected through questionnaires. The functions of survey research are to describe, explain or explore. In the current study it served a descriptive function and it provided basic information about supervision.

Phase 1 was a pilot study which was of a qualitative nature. Due to its nature the study elicited in depth responses from a limited number of participants. It was conducted in order to enable the researcher to generate statements which would be implemented in formulating the Likert scale for the second phase of the study which would be administered on a bigger sample.
3.3 Procedure

3.3.1 Data collection

3.3.1.1 Sampling

Convenience and snowball sampling was used as sampling techniques. Since supervisors were not readily available, they were selected based upon convenience. Owing to the fact that only a few supervisees were available, they were selected using networks. The researcher started with a few individuals who then identified their classmates who, in turn became the basis of further data collection (Kumar, 2005). Participants comprised students, who had experienced supervision as part of their learning process as well as supervisors who had experienced supervision, as part of their teaching process. To qualify for participation in this study, the student ought to have done a 4th year B. Psychology or Masters in Clinical or Counselling Psychology at the University of Zululand.

3.3.1.1.1 The sample

The sample comprised of thirty two (32) supervisees and seven (7) supervisors. Seventy eight percent (78%) of the supervisees that participated in this study were between the ages of twenty five (25) years and below. Nineteen percent (19%) were between the ages of twenty six (26) and thirty six (36) years and only three percent were between the ages of thirty seven (37) years and above. Twenty two percent (22%) of supervisees were males and seventy eight percent (78%) were females. Eighty eight percent (88%) of the supervisees that participated in the study were African. Nine percent (9%) of supervisees were Coloured and the other racial groups made up three percent of the sample. Fifty percent (50%) of supervisees were in the fourth year level of study while forty four (44%) was in the masters level and six percent (6%) was in the doctorate level.
Forty three percent (43%) of the supervisors that participated in this study were between the ages of twenty five (25) and thirty four (34) years. Twenty nine percent (29%) were between the ages of thirty five (35) and forty four (44) years and another twenty nine percent (29%) were between the ages of forty five (45) years and above. Forty three percent (43%) of supervisors that participated in the study were male and fifty seven (57%) were female. Seventy one percent (71%) of supervisors that participated in this study were African and twenty nine percent (29%) were white. Fourteen percent (14%) of supervisors have supervised fourth year level students. Twenty nine percent (29%) have supervised masters level students and fifty seven percent (57%) of them have supervised both levels. Fifty seven percent (57%) of supervisors have between 0-5 years of supervising experience. Fourteen percent (14%) have 6-9 years of supervising experience and twenty nine percent (29%) have ten 10 years of experience and more.

3.3.1.2 Data collection instrument

Questionnaires were used as a means of data collection. During the pilot study, the questionnaire consisted of the open-ended questions to elicit subjective responses from the participants. In the current study, the questionnaire comprised of a Likert scale. The researcher used the data that was gathered during the pilot study and the recommendations to formulate a 5-point scale with a response set of ‘very much’, ‘quite a bit’, ‘somewhat’ ‘a little bit’, ‘not at all’ and participants were asked to suggest what they thought should be done to improve supervision. This was to ensure that the alternatives were provided for most if not all possible answers (Huysamen, 2001).
3.3.2 Data analysis procedure

Collected data was analyzed quantitatively with the use of descriptive statistics. Frequencies were used to report the findings. The Statistical Package for the Social Sciences (SPSS, version 18) was employed.

3.4 Ethical considerations

Permission to conduct the study was granted to the researcher by the ethics committee of the University of Zululand. Participants were informed about the purpose of the study and their voluntary participation was sought. Consent for participation was assumed by filling in of questionnaire. Participants were also made aware that they could withdraw at any stage of the research process as suggested by David and Sutton (2004). Emphasis was placed on accurate and complete information so that participants fully understood the investigation and consistently made voluntary and thoroughly reasoned decision about their possible participation.

Anonymity was ensured since participants’ names on the questionnaires were omitted. David and Sutton (2004) and Stridom, Founcé, Delport (2005) define anonymity as the practice of ensuring that no one will be able to identify the participants in the study, including the researcher.

The public’s right to know, will be adhered to as the results of this study will be published in a scientific paper which will be presented in a conference.
3.3 Résumé

This chapter reports how the researcher executed the research project. This is where the researcher faced the reality of having to deal with the limitations of the study. The succeeding chapter will present the findings of the study.
CHAPTER FOUR

PRESENTATION OF DATA

4.1 Introduction

This chapter is a presentation of results. Questionnaires were distributed and respondents were asked to fill them in and return them. Even though the researcher had targeted at least fifty participants comprising of forty (40) supervisees and ten (10) supervisors, a total number of thirty nine 39 questionnaires were answered and returned to the researcher. That is thirty two (32) supervisees and seven (7) supervisors. Each question presented in the questionnaire was evaluated individually.

The results presented in this chapter were processed using the Statistical Package for the Social Sciences (SPSS, version 18). The findings are presented graphically to show the level of agreement with each item in the questionnaire. Responses from supervisees are presented first and those of supervisors are presented subsequently.
4.2 Percentages of supervisees and their level of agreement with the statement

![Bar chart](image)

**Figure 4.2.1** The confidence of supervisors as perceived by supervisees

This figure depicts the confidence perceived by supervisees in their supervisors during supervision. A total of sixty nine percent (69%) of supervisees agreed with the statement, that being the thirty seven percent (37%) that agreed very much and the thirty one percent (31%) that agreed to a lesser degree. Twenty two percent (22%) was undecided while nine percent disagreed to a lesser extent. None of them disagreed with the statement.
Figure 4.2.2 Supervisees’ learning experience as they (supervisees) perceived it

This figure describes the supervisees’ learning experience as they (supervisees) perceived it during supervision. A total of thirty four percent (34%) of supervisees agreed with the statement, that being the six percent (6%) that agreed strongly with the statement and the twenty eight percent that agreed to a lesser degree. Thirteen percent (13%) was uncertain. A total of fifty three percent (53%) disagreed with the statement, that being the twenty five percent (25%) that disagreed to a certain degree and the twenty eight percent (28%) that disagreed strongly with the statement.
This figure describes the confidence perceived by supervisees in their supervisors during supervision. A total of twenty five percent (25%) of supervisees perceived their supervisors as not confident that being the three percent (3%) that agreed strongly with the statement and the twenty two percent (22%) that agreed quite a bit. Sixteen percent (16%) was unsure. A total of fifty nine (59%) perceived their supervisors as confident as they disagreed with the statement. Nine percent (9%) disagree partially and fifty percent (50%) disagreed strongly with the statement.
Figure 4.2.4 supervisees’ learning experience as they perceived it

This figure illustrates the supervisees’ learning experience as they perceived it during supervision. A total of forty seven percent (47%) of supervisees reported that they experienced learning during supervision, that being the twenty eight (28%) percent that strongly agreed with the statement and the nineteen percent (19%) that agreed quite a bit. However, total of thirty one percent (31%) perceived a contrary experience that being the twenty two percent (22%) that partially disagreed with the statement and the nine percent (9%) that disagreed strongly. Another twenty two percent (22%) was unsure.
Figure 4.2.5 The vagueness of communication as perceived by supervisees

This figure illustrates the vagueness of communication as perceived by supervisees during supervision. A total of twenty eight percent 28% of supervisees perceived communication as unclear, that being the six percent (6%) which agreed strongly with the statement and the twenty two percent (22%) that agreed quite a bit. On the other hand, a total of thirty seven percent (37%) had a contrary perception, that being the nine percent (9%) that disagreed partially with the statement and the twenty eight percent (28%) which disagreed strongly. Thirty four percent (34%) was uncertain.
This figure describes the learning experience as perceived by supervisees in supervision. A total of sixty nine percent (69%) agreed with the statement, that being the thirty eight percent (38%) that agreed strongly with the statement and thirty one percent (31%) that agreed partially. A total of thirty seven percent (15%) perceived a contrary experience, that being the nine percent (9%) that disagreed with the statement partially and the six percent (6%) that disagreed strongly. Sixteen percent (16%) on the other hand was undecided.

*Figure 4.2.6 The learning experience as perceived by supervisees*
Figure 4.2.7 The supervisors’ motivation about supervision as perceived by the supervisees.

This figure describes the supervisors’ motivation about supervision as perceived by the supervisees. A total of thirty seven percent (38%) of supervisees perceived their supervisors as unmotivated, that being the twenty two percent (22%) that agreed strongly with the statement and the sixteen percent (16%) that agreed quite a bit. On the contrary, a total of forty percent (40%) perceived their supervisors as motivated about supervision, that being the six percent (6%) that partially disagreed with the statement and the thirty four percent (34%) that strongly disagreed. Twenty two percent (22%) on the other hand was uncertain.
This figure illustrates the commitment of supervisors as perceived by supervisees. A total of fifty percent (50%) of supervisees perceived their supervisors as committed in supervision that being the thirty-four percent (34%) that agreed strongly with the statement and the sixteen percent (16%) that agreed partially. On the contrary, a total of thirty-two percent (32%) perceived their supervisors as uncommitted that being the nineteen percent that disagree partially with the statement and the thirteen percent (13%) that strongly disagreed. The other nineteen percent (19%) was uncertain.
This figure describes the commitment of supervisors as perceived by supervisees. A total of twenty eight percent (28%) percent of supervisees perceived their supervisors as uncommitted to supervision that being the thirteen percent (13%) that agreed very much with the statement and sixteen percent (16%) that agreed to a lesser degree. A total of fifty three percent (53%), however, felt differently, nineteen percent (19%) disagreed partially with the statement and thirty four percent (34%) disagreed strongly, meaning that they perceive their supervisors as committed to supervision. The other nineteen percent (19%) was uncertain.
Figure 4.2.11 The availability of the supervisors as experienced by supervisees

This figure describes the availability of the supervisors as experienced by supervisees. A total of forty percent (40%) of supervisees experienced their supervisors as unavailable that being the nineteen (19%) percent that strongly agreed with the statement and the twenty two percent (22%) that agreed quite a bit. A total of forty three percent (43%) had an opposite experience that being the nine percent (9%) that partially disagreed with the statement and thirty four percent (34%) that did not at all agree with the statement. On the hand sixteen percent (16%) was undecided.
Figure 4.2.12 The sufficiency of supervision time as perceived by supervisees

This figure describes the sufficiency of supervision time as perceived by supervisees. A total of thirty one percent (31%) of supervisees perceived the time for consultation as insufficient, that being the nineteen percent (19%) that agree very much with the statement and the thirteen percent (13%) that agreed quite a bit. A total of forty one percent (41%) on the other hand perceive time as sufficient, that being the thirteen percent which thirteen percent (16%) which partially disagreed with the statement and the twenty eight percent (28%) percent that disagreed strongly. Sixteen percent (16%) was uncertain.
This figure describes a competent supervisor as perceived by supervisees. A total of ninety four percent (94%) agreed with the statement, that being the eighty seven percent (87%) that agreed very much with the statement and the seven percent (7%) that agreed partially. Three percent (3%) had a contrary perception and the other three (3%) percent was uncertain. None of them disagreed to a lesser degree.
This figure presents how supervisees perceived feedback received during supervision. A total of sixteen percent (16%) of supervisees agreed with the statement, that being the nine percent (9%) who agreed strongly with the statement and the six percent (6%) which agreed quite a bit. A total of seventy nine percent (79%) of supervisees on the other hand had a contrary view to their feedback, meaning they experienced it as constructive. Six percent (6%) was uncertain.
This figure presents supervisors’ competence as perceived by their supervisees. A total of sixty nine percent (69%) of supervisees perceived their supervisors as competent hence, they wish to be as knowledgeable as their supervisors. This group comprises the fifty percent (50%) who strongly agreed with the statement and the nineteen percent (19%) that agreed quite a bit. A total of twenty two percent (22%) had a contrary perception that being the thirteen percent (13%) who disagreed partially with the statement and nine percent (9%) that disagreed strongly. The other nine percent (9%) was uncertain.
Figure 4.2.16 The clarity of feedback in terms of guidance as perceived by supervisees

This figure describes the clarity of feedback in terms of guidance as perceived by supervisees. A total of twenty five percent (25%) agreed with the statement, meaning that they did not obtain guidance in their feedback. A total of fifty nine percent (59%) on the other hand received clear feedback with guidance and sixteen percent (16%) was unsure.
This figure presents the confidence of the supervisors as experienced by the supervisees. A total of thirty four percent (34%) of supervisees experienced their supervisors as confident that being the twenty two percent (22%) of supervisees who strongly agreed with the statement and the thirteen percent (13%) that agreed partially. A total of fifty percent (50%) had a contrary experience nineteen percent (19%) disagreed partially with the statement and thirty one percent (31%) disagreed strongly. Sixteen percent (16%) of supervisees on the other hand was unsure.
This figure presents who is considered by supervisees as a competent supervisor. A total of seventy eight percent (78%) of supervisees agreed with the statement that being the sixty six percent (66%) of supervisees who strongly agreed with the statement and the thirteen percent (13%) that partially agreed. Nine percent (9%) on the other hand disagreed with the statement while thirteen percent (13%) was unsure. None of them disagreed partially.
Figure 4.2.19 The competence that was demonstrated by supervisors as perceived by supervisees

This figure presents the competence that was demonstrated by supervisors as perceived by supervisees. A total of sixty nine percent (69%) agreed with the statement that being the twenty eight percent (28%) that agreed partially. A total of twelve percent (12%) of supervisees disagreed with the statement that being three percent (3%) who disagreed partially and the nine percent (9%) that disagreed strongly. Nineteen percent (19%) was uncertain.
Figure 4.2.20 The supervisees’ preference of individual supervision over group supervision

This figure presents the supervisees’ preference of individual supervision over group supervision. A total of eighty seven percent (87%) agreed with the statement that being the seventy five percent (75%) who strongly agreed with the statement and thirteen percent (13%) that agreed quite a bit. A total of nine percent (9%) prefer the contrary that being the three percent (3%) that partially disagreed with the statement and the six percent (6%) that disagreed strongly. Three percent (3%) was uncertain.
This figure presents how experiences in supervision were interpreted by supervisees. A total of forty seven percent (47%) of supervisees agreed with the statement that being the thirty eight percent (38%) who agreed strongly with the statement and the nine percent (9%) agreed partially. A total of sixteen percent (16%) disagreed with the statement that being the thirteen percent (13%) who partially disagreed with the statement and three percent (3%) which disagreed strongly. Thirty eight percent (38%) was uncertain.
This figure presents the need for formal training of supervisors as perceived by supervisees. A total of eighty eight percent (88%) of supervisees agreed with the statement that being seventy two percent (72%) who agreed strongly with the statement and sixteen percent (16%) agreed partially. Three percent (3%) disagreed partially. Nine percent (9%) was unsure. None of them disagreed partially.
Figure 4.2.23 The clarity of communication in supervision as perceived by supervisees

This figure presents the clarity of communication in supervision as perceived by supervisees. Ninety three percent (93%) agreed with the statement that being the eighty four (84%) percent which agreed strongly with the statement and the nine percent (9%) which agreed partially. Six percent (6%) was uncertain.
This figure presents how supervisees perceived the feedback they received during supervision. A total of thirty seven percent (37%) of supervisees consider the feedback they received during supervision as constructive, that being the nine percent (9%) who strongly agreed with the statement and the twenty eight percent (28%) that agreed quite a bit. A total of sixty percent (60%) of supervisees disagreed with the statement, meaning that they did not always receive constructive feedback. This group comprises of sixteen percent (16%) that disagreed partially and forty four percent (44%) that disagreed strongly with the statement. Six percent (6%) on the other hand was uncertain.
This figure describes the dissatisfaction of supervisees about their supervisors. A total of forty one percent (41%) of supervisees agreed with the statement that being the twenty eight percent (28%) which strongly agreed with the statement and the thirteen percent (13%) which agreed partially. A total of twenty eight percent (28%) was satisfied with their supervisors, that being the nine (9%) which partially disagreed with the statement and the nineteen percent (19%) which disagreed strongly. Meanwhile thirty one percent (31%) was uncertain.
Figure 4.2.26 The inadequacy of time for supervision as perceived by supervisees

This figure describes the inadequacy of time for supervision as perceived by supervisees. A total of thirty eight percent (38%) of supervisees agreed with the statement, that being twenty five percent (25%) that agreed strongly with the statement and the thirteen percent (13%) that agreed to a certain degree. A total of thirty four percent (34%) disagreed with the statement that being the six percent (6%) that partially disagreed with the statement and the twenty eight percent (28%) that strongly disagreed. The other twenty eight percent (28%) on the other hand was uncertain.
This figure illustrates the availability of supervisors as experienced by supervisees. A total of thirty eight percent (38%) of supervisees experienced their supervisors as available for them, that being the nineteen percent (19%) who strongly agreed with the statement and another nineteen percent (19%) who agree to a lesser degree. A total of forty seven percent (47%) had a contrary experience with their supervisors that being the thirteen percent (13%) who disagreed partially with the statement and the thirty four percent (34%) that strongly disagreed. Sixteen percent (16%) on the other hand was uncertain.
Figure 4.2.28 How supervisors were prepared for supervision as perceived by supervisees

This figure presents how the supervisors were prepared for supervision as perceived by supervisees. A total of thirty eight percent (38%) of supervisees agreed with the statement; that being the twenty eight percent who agreed very much and the nine percent (9%) that agreed partially. A total of forty four percent (44%) disagreed with the statement; that being the twenty five (25%) that disagreed partially and the nineteen percent (19%) that disagreed strongly with the statement. The other nineteen percent (19%) was uncertain.
This figure illustrates the motivation of supervisors as perceived by supervisees during supervision. A total of forty two percent (42%) of supervisees experienced their supervisors as motivated to supervising them, that being the twenty three percent (23%) who agreed strongly with the statement and the nineteen percent (19%) that agreed quite a bit. However, a total of twenty four percent (24%) of supervisees disagreed with the former group, that being the sixteen percent (16%) who disagreed partially with the statement and the eight percent (8%) that disagreed strongly. On the other hand thirty two percent (32%) percent was sitting on the fence.

*Figure 4.2.29* The motivation of supervisors as perceived by supervisees during supervision
This figure illustrates the vagueness of communication or feedback during supervision as experienced by supervisees. A total of thirty six percent (36%) of supervisees experienced communication or feedback during supervision as unclear, that being the sixteen percent (16%) who strongly agreed with the statement and the nineteen percent (19%) that agreed quite a bit. A total of twenty nine percent (29%) on the other hand perceived communication or feedback as clear, that being the thirteen percent (13%) that disagreed partially with the statement and the sixteen percent (16%) that disagreed strongly. Thirty six percent (36%) was uncertain.
This figure describes the confidence of the supervisors as perceived by supervisees during supervision. A total of twenty nine percent (29%) of the supervisees perceived their supervisors as confident, that being the sixteen percent (16%) that agreed strongly with the statement and the thirteen percent (13%) that agreed partially. A total of forty two percent (42%) perceived otherwise, that being the nineteen percent (19%) that partially disagreed with the statement and the twenty three percent (23%) that strongly disagreed. Twenty nine percent (29%) was uncertain.

*Figure 4.2.31* The confidence of the supervisors as perceived by supervisees during supervision
This figure describes the competent of the supervisors as perceived by supervisees. A total of forty six percent (46%) of supervisees their supervisors as competent, that being the thirty one percent (31%) that agreed very much with the statement and the sixteen percent (16%) that agreed quite a bit. A total of twenty three percent (23%) did not perceive their supervisors as competent, that being the sixteen percent (16%) that partially disagreed with the statement and that six percent (6%) disagreed strongly. Thirty one percent (31%) on the other hand was unsure.

Figure 4.2.32 The competent of the supervisors as perceived by supervisees
This figure describes how balanced the supervisees perceived the feedback from their supervisors. A total of forty one percent (41%) of supervisees perceived their feedback as balanced that being the thirteen percent (13%) that agreed strongly with the statement and the twenty eight percent (28%) that agreed quite a bit. A total of thirty eight percent (38%) however perceived the contrary that being the twenty two percent (22%) that disagreed partially with the statement and the sixteen percent (16%) that disagreed strongly. The other twenty two percent (22%) was undecided.
4.3 Percentage of supervisors and their level of agreement with the statement

![Bar chart showing the experience of supervisors supervising motivated students.](image)

**Supervising motivated students is a positive experience for me**

*Figure 4.3.1 The experience that supervisors have when supervising motivated students*

This figure presents the experience that supervisors have when supervising motivated students. Hundred percent of supervisors perceived supervising motivated student as a positive experience; that being the eighty six percent (86%) that strongly agreed with the statement and the fourteen percent (14%) that agreed quite a bit. None of them were uncertain and none of them disagreed.
Figure 4.3.2 How supervisors experience supervising students who take initiative for the work

All supervisors strongly agreed that supervision becomes more productive when students take initiative. None of them either disagreed or were uncertain about the statement.
Figure 4.3.3 How supervisors experience supervising a student who is well prepared

All supervisors like it when a student has prepared their work well; it is a positive experience for them. They all agreed with the statement. None of them were unsure or disagreed with the statement.
This figure describes lack of motivation in supervisees as perceived by supervisors. A total of twenty nine percent 29% of supervisors experienced their supervisees as lacking motivation; that being the fourteen percent (14%) which strongly with the statement and the other fourteen percent (14%) that agreed partially. A total of fifty seven percent (57%) disagreed with the statement; that being the fourteen prevent that disagreed partially and the forty three (43%) that disagreed strongly with the statement. The other fourteen percent (14%) was uncertain.
Figure 4.3.5 The availability of the supervisors as they perceive it

This figure describes the availability of the supervisors as they perceive it. Eighty six percent (86%) of supervisors agreed with the statement; that being the fifty seven percent (57%) that agreed strongly and twenty nine percent (29%) that agreed partially. Fourteen percent (14%) was uncertain. None of them disagreed.
Figure 4.3.6 the lack of understanding that supervisees have about supervision as perceived by supervisors

This figure describes the lack of understanding that supervisees have about supervision as perceived by supervisors. Eighty six percent (57%) strongly agreed with the statement and fourteen percent (14%) had a contrary experience while twenty nine percent (29%) was unsure. None of them agreed strongly or disagreed partially.
Figure 4.3.7 Absolute dependence of supervisees on supervisors as perceived by supervisors

This figure illustrates absolute dependence of supervisees on supervisors as perceived by supervisors. Forty three percent (43%) of supervisors agreed with the statement and fourteen percent (14%) had a contrary experience while the other forty three (43%) was uncertain. Neither of them agreed very much nor disagreed strongly.
This figure describes how supervisors feel about improving their supervising skills. Eighty five percent (85%) of supervisors agree with the statement; that being the fifty seven percent (57%) which agreed very much and the twenty nine percent (29%) that agreed quite a bit. Fourteen percent (14%) was unsure. None of them disagreed with the statement.
Figure 4.3.9 Supervisees do not consult in time but instead they wait for work to pile up and then consult.

This figure describes that supervisees do not consult in time but instead they wait for work to pile up and then consult. All supervisors agreed with the statement; that being the forty three percent (43%) that agreed strongly and the fifty seven percent (57%) that agreed partially. Neither of them was unsure nor disagreed.
Figure 4.3.10 How unprepared the supervisees were when coming for supervision

This figure describes how unprepared the supervisees were when coming for supervision. Fourteen (14%) percent agreed partially with the statement while twenty nine percent (29%) disagreed strongly and fifty seven percent (57%) was unsure. Neither of them strongly agreed nor disagreed to a lesser degree.
This figure describes the challenge that supervisors face when supervising trainees. A total of twenty eight percent of supervisors agreed with the statement; that being the fourteen percent (14%) of those who agreed strongly with the statement and the other fourteen percent (14%) of those that agreed partially. Twenty nine percent (29%) disagreed strongly with the statement and forty three percent (43%) was uncertain. None of them strongly disagreed with the statement.
Figure 4.3.12 Challenge perceived as an attack by supervisees

Twenty nine percent (29%) of supervisors agreed with the statement. A total of forty three percent (43%) disagreed with the statement; that being the fourteen percent (14%) of those who disagreed partially and twenty nine percent (29%) of those who strongly disagreed with the statement. The other twenty nine percent (29%) was uncertain. None of them agreed strongly with the statement.
Figure 4.3.13 The competence of supervisors as they perceive themselves

A total of eighty five percent (85%) of supervisors perceived themselves as competent; that being the seventy one percent (71%) that agreed very much and the fourteen percent (14%) that agreed quite a bit. The other fourteen percent (14%) was uncertain. None of them disagreed with the statement.
Figure 4.3.14 How supervisors feel about training of supervisors

This figure describes how supervisors feel about training of supervisors. All supervisors felt that training for supervisors would be a good idea. None of them disagreed or were unsure.
Figure 4.3.15 Supervisors' confidence as they perceive it

This figure describes supervisors’ confidence as they perceive it. All supervisors were confident as they all agreed with the statement; that being the seventy one percent (71%) that agreed strongly and the twenty nine percent (29%) that agreed quite a bit. Neither of them disagreed or was unsure.
Figure 4.3.16 The need for training of supervisors as perceived by supervisors

All supervisors agreed with the statement; that being the eighty six percent (86%) of those who agreed very much with the statement and fourteen percent (14%) of those who partially agreed. None of them disagreed or were uncertain.
Figure 4.3.17 Commitment of supervisors as they (supervisors) perceived it

All supervisors agreed with the statement; that being the eighty six percent (86%) of those who agreed very much with the statement and fourteen percent (14%) of those who partially agreed. None of the disagreed or were uncertain.
Fourteen percent (14%) of supervisors agreed with the statement and a total of seventy one (71%) percent disagreed while the other fourteen percent (14%) was unsure.

Figure 4.3.18 Confidence of supervisors as they perceived it
Figure 4.3.19 Supervisees understand that a challenge to their work is not an attack

A total of eighty five percent (86%) of supervisors perceived themselves as competent; that being the twenty nine percent (29%) that agreed very much and the fifty seven percent (57%) that agreed quite a bit. The other fourteen percent (14%) was uncertain. None of them disagreed with the statement.
Figure 4.3.20 The commitment of supervisees as perceived by supervisors

All supervisors agreed with the statement; that being the forty three percent (43%) of those who agreed very much with the statement and fifty seven percent (57%) of those who partially agreed. Neither of them was unsure nor disagreed with the statement.
Figure 4.3.21 The supervisors’ perception of a competent supervisor

This figure presents the supervisors’ perception of a competent supervisor. All supervisors agreed very much with the statement. None of them were unsure or disagreed with the statement.
Figure 4.3.22 The supervisors’ perception of a competent supervisor

This figure presents the supervisors’ perception of a competent supervisor. All supervisors agreed very much with the statement. None of them disagreed or was unsure.
Figure 4.3.23 Supervisors preferring individual supervision to group supervision

Twenty nine percent (29%) of supervisors prefer individual supervision. The other twenty nine percent (29%) on the other hand prefers group supervision and forty three percent (43%) was uncertain.
Figure 4.3.24 The need of training as perceive by supervisors

A total of eighty six percent (86%) of supervisors agreed with the statement; that being the seventy one percent (71%) of those who strongly agreed with the statement and the other fourteen percent (14%) of those who partially agreed. Fourteen percent (14%) was uncertain. None of them disagreed with the statement.
All supervisors agreed with the statement; that being the eighty six percent (86%) of those who agreed very much with the statement and fourteen percent (14%) of those who partially agreed. None of them disagreed or was unsure about the statement.
Figure 4.3.26 How supervisors perceive the feedback they give during supervision

All supervisors agreed with the statement; that being the eighty six percent (86%) of those who agreed very much with the statement and fourteen percent (14%) of those who partially agreed. Neither of them disagreed with the statement nor was unsure.
Figure 4.3.27 Supervisors’ preference of group supervision to individual supervision

A total of twenty nine percent (29%) of supervisors agreed with the statement; that being the fourteen percent (14%) of those who strongly agreed with the statement and the other fourteen percent (14%) of those who partially agreed. Seventy one percent (71%) was uncertain. None of them disagreed.
Figure 4.3.28 Adequacy of time for supervision as perceived by supervisors

Eighty five percent (85%) disagreed with the statement, fourteen percent (14%) on the other hand was uncertain. None of them agreed with the statement.
Figure 4.3.29 How balanced the supervisors perceived the feedback they provided to their supervisees

This figure describes how balanced the supervisors perceived the feedback they provided to their supervisees. Eighty six percent (86%) of supervisors agreed with the statement; that being the fifty seven percent (57%) that strongly agreed and the twenty nine percent (29%) which agreed partially. Fourteen percent (14%) was uncertain. None of them disagreed with the statement.
4.4 Résumé
This chapter has presented the findings of the study. Each statement was presented individually in terms of percentages of respondents and their level of agreement with the statement. The following chapter will be a discussion of the results.
CHAPTER FIVE

DISCUSSION OF RESULTS

5.1 Introduction

In the previous chapter, the items were presented individually and they were in a counterbalanced order so as to identify and control response biases. They were designed to elicit particular themes so in this chapter the researcher condensed them so as to better describe the self perceived experiences of both the supervisors and supervisees in supervision. In discussing the findings of the study, a comparative analysis was attempted whereby the findings were discussed in relation to the literature that was reviewed. To end this chapter off, the researcher gives an outline of responses that were given by participants in the open-ended question and then concludes the chapter.

5.2 Perceived competence

Results indicated that supervisors perceived themselves as competent and the majority of supervisees held a similar view. However, results indicated that supervisees had differing experiences as other responses indicated that there were supervisees who did not perceive their supervisors as competent and others were uncertain. Similar to what was asserted by (Fox, 2002), participants (both supervisors and supervisees) perceived supervision to work well when the supervisor is viewed as an authority “expert” within the field. The results indicate that while some supervisees experienced their supervisors as having capacity to model appropriate professional behaviour, some did not and some were unsure (Falender & Shafranske, 2005).
5.3 Perceived confidence

Results indicated that supervisees perceived their supervisors as confident and supervisors also perceived themselves as confident. These supervisors are at the highest level of development and their level of confidence is high hence these supervisors are able to work well with supervisees at any level of development. On the other hand there were a few others who reported a contrary experience and those who were uncertain. This means that there are a number of supervisors who are not operating at the same level of development as the ones mentioned above. Apparently, a problem may result if perhaps a supervisor who operates at the first level of development supervises a supervisee who is operating at the second level of development (Stoltenberg, 1993).

5.4 Perceived commitment

Results suggested that supervisees experienced their supervisors as committed to helping them grow, and demonstrated commitment to supervision by their preparation for and involvement in supervision sessions. Supervisors also perceived themselves as committed in supervision. Results also suggested that supervisors perceived their supervisees as committed and interested and are able to really push the process of supervision forward by having regular supervision or actively seeking it out, often resulting in marked changes in clinical practice. The commitment from both parties was considered central to the success of supervision (Driscoll, 2000).
5.5 Clarity of expectations and feedback

There seemed to be different views on this item. The majority of supervisees perceived communication of expectations as well as feedback as unclear. According to Falender and Shafranske (2005) this unfortunately renders supervision ineffective, hence, difficult to learn from. Contrary to the supervisees’ view, supervisors perceived themselves as clear in communicating expectations and in giving feedback which is basically the principal way supervision can serve its purpose as Hawkins and Shohet (1989) urged supervisors to be clear about the message being delivered and to balance feedback in that both negative and positive feedback should be given to the supervisee.

5.6 Learning experience in supervision

Benard and Goodyear (2004) propose that supervision has two central purposes. The first one is to foster the supervisee’s professional development. The second one is to ensure patient welfare. Responses indicated that the majority of supervisees were able to learn during supervision, which means that supervision served its purpose. However, it is interesting to note that in the previous point (5.5), responses suggested that feedback was unclear hence learning was difficult. There seems to be some inconsistency in the responses.

5.7 Supervisor as a role model

Results indicated that most supervisees perceived their supervisors as their role models and knowledgeable. These supervisors are viewed as mentors, teachers, advisors and role models. Mentoring can be sought out by the supervisee or developed as the supervisory relationship evolves into a working alliance (Borders, 1994). Supervision probably works well under such conditions and more learning takes place for the yearning supervisee.


5.8 Need for formal training

Results from both supervisors and supervisees suggest that both parties see a need for formal training of supervisors. This is in line with what Corey et al. (2007) asserted, that supervisors must be well trained, knowledgeable and skilled in the practice of supervision otherwise it will be difficult to ensure the effective and ethical functioning of the supervisee and they may rely on their previous supervisory experiences as trainees and their clinical knowledge to inform their practice as supervisors.

5.9 Autonomy vs. dependence

Responses from supervisors indicated that autonomy is quite limited in supervisees; they are largely dependent on their supervisor, which is an indication that they might be in the first level of trainee development (Stoltenberg, 1993). Because of the anxiety that the supervisee experiences at times, which is inevitable and necessary for growth, the supervisor is urged to be in a position to observe and identify with both the patient and the supervisee in such a way as to provide perspective and a healthy distance, which helps to put some solid ground under the supervisee's feet (Dunbar-Kringe & Fritz, 2006).

5.10 Motivation

While responses from the supervisors indicated that supervisees are motivated in supervision, supervisees' responses indicated that they (supervisees) are divided. One group perceived their supervisors as motivated, the other perceived the contrary and the other group was uncertain. Apparently, the motivation of a level 1 trainee will be quite high as compared to that of a level 2
This is due to the fact that the motivation of a level 2 trainee is most likely to fluctuate, depending on levels of confidence experienced at a given time (Stoltenberg, 1993).

5.11 Perceived preparedness

The majority of supervisees experienced their supervisors as prepared for supervision whenever they came to consult, but then some supervisees reported experiencing the contrary and others were not certain. Supervisors’ responses indicated that they are rather unsure whether their supervisees prepare for supervision or not. If supervisees do not prepare for their supervision sessions, they run a danger of not receiving supervision that is tailored to their needs and experiences. As much as it is the responsibility of the supervisor to prepare for supervision, the supervisee is also expected to do his or her part. Supervisors do have a responsibility to increase awareness and bring up their own perspective but they are most likely to become even more invested when the supervisee shows their own investment (Syracuse University School of Education, 1995).

5.12 Time

Responses from both supervisors and supervisees suggest that there is insufficient time for supervision, which is quite contrary to what should be happening if supervision is to be effective (Falender & Shafranske, 2005). However considering the fact that at University of Zululand, the same person who lectures about three hundred students and supervises perhaps ten students for casework also supervises quite a few others who are conducting research, it is probably inevitable that supervision time is insufficient.
5.13 Availability of the supervisor

Results indicated that supervisors perceived themselves to be available for their supervisees. On the other hand supervisees disagreed. Some perceived their supervisor as available and some perceived the opposite. For those supervisees whose supervisors are available, there is structure, support and feedback that enable for professional development (Benard & Goodyear, 1998). In addition to that, there is guidance and assistance from their supervisors to pace their work so that they do not become overwhelmed. With that being said, what then, is the case for those supervisees whose supervisors are not available? On the other hand the supervisor has the challenge mentioned above with regards to the time inadequacy. Moreover, this point was not explored further hence, the cause for the unavailability of the supervisors is not known.

5.14 Preferred supervision

Results indicated that supervisors can be divided into a group that prefers group supervision and the one that prefers individual supervision. Responses from supervisees indicated that most supervisees prefer individual supervision to group supervision. If group supervision is conducted properly, it can help supervisees in terms of increased confidence and feelings of independency, clarity in treatment goals, decreased anxiety, ability to take a larger view of cases as well as benefits of learning by watching others (Linton, 2003).
5.15 Dissatisfaction

The majority of supervisees reported that they would have changed their supervisors if it was possible and a minority reported that they would have not and another considerable number was uncertain. According to Gates (2003) supervisees may try to play games (which are a form of resistance) in supervision to manipulate and exert control over the supervision process. If this is not challenged by the supervisor, supervision will be unproductive. The supervisee might then begin to realise that s/he is not getting much out of supervision and perhaps consider ways of avoiding it. On the other hand, if the supervisor counters the resistance by making the supervisee aware of the game, this might make supervision effective but it does not guarantee that the supervisee will be satisfied (Gates, 2003).

5.16 Challenge perceived as a personal attack

According to supervisors’ responses, results indicated that supervisees seem to perceive a confrontation or a challenge to their work as an attack. For a supervisee who is at the second level of development, confrontive interventions (which involve challenging trainees to include in their competence additional interventions beyond those with which they are comfortable) are appropriate for professional development while they are not so appropriate for a level 1 trainee (Stoltenberg, 1993). Hence these supervisees are probably at the first level of development.

Probably due to the dynamics of the supervision process, it might also happen that these supervisees perceive a confrontation as a personal attack due to supervision-induced anxiety. This anxiety may have caused them to respond in a variety of ways with some of the responses being defensive. These defensive responses are coping mechanisms intended to reduce anxiety and they are referred to as resistance. The primary goal of resistant behaviour is self-protection in which the supervisee guards
against some perceived threat. One common threat is fear of inadequacy which is a prevalent concern of not measuring up to the supervisors’ standards (Gates, 2003).

5.17 Challenges

Results indicated that being criticised while not being given a direction on how to tackle a task was not so much of a challenge among supervisees. For supervisors, results indicated that starting from scratch as if teaching in class was not much of a challenge for them.

5.18 Recommendations of improving supervision

The following were themes elicited from respondents (supervisees) regarding suggestions on how supervision can be improved (this was an open-ended question).

5.18.1 Supervisees’ recommendations

- **Induction on expectations**

Supervisees should be inducted to the process of supervision so as to inform them about what is expected of them during supervision.

- **More time**

There should be more time for consultation.

- **A standardised method of supervision**

There should be a standardised method or format to be adhered to during supervision.
• **Workshops for supervisors**

There should be workshops or some sort of training that the supervisors go through to advance their supervising skills.

• **Supervisors’ meetings**

Supervisors should meet to discuss progress of supervisees and discuss areas that still need development. Supervisors should meet to discuss their difficulties.

• **Opportunity for feedback**

There should be an opportunity to give feedback from the supervisor about supervision, without the fear that the feedback will be used against supervisees.

• **Support**

A supportive atmosphere should be created in supervision to ease the anxiety.

• **Respect**

Both the supervisor and the supervisee should be treated with respect during supervision.

• **Approachability**

Supervisors should be approachable so as to ease the anxiety on the side of the supervisee whenever the supervision is to take place.

### 5.18.2 Supervisors recommendations

Following are themes elicited from supervisors on what has and would help them improve their supervising skills as well as what needs to be done to improve supervision.
• Experience and in-service training

• Learning by doing

• Workshops

• Conferences and seminars

• Peer supervision

• Group supervision for supervisees to learn vicariously from others

5.21 Résumé

This chapter has discussed the findings of this study. The subsequent chapter is a conclusion of this study. It will provide the summary of results per objective, strengths and limitations of the study, the value of the study as well as the recommendations
CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

6.1 Introduction

This is the concluding chapter to this dissertation. This section covers the summary of results per objective, limitations, and the value of the study as well as recommendations.

6.2 Summary of results per aim and objectives

6.2.1 To generalize the findings of the pilot study to a larger sample

Even though the results may not be generalizable to supervisors and supervisees in other institutions, the researcher is of the opinion that the sample is representative of the supervisors and supervisees at the University of Zululand. According to the researcher the diversity of the sample in terms of age, gender, race, level of study and supervising experience are a true reflection of the population in the Department of Psychology at the University of Zululand.

6.2.2 To find out whether or not supervision serves its purpose.

This study was used to investigate how the persons involved in supervision experience it and its usefulness at the University of Zululand in the Department of Psychology. The researcher had a set of items in the questionnaire which were counterbalanced so as to identify or control response bias. Through these items the researcher was able to discover that professional development, which takes
place through learning, as well as ensuring patient welfare, was in fact achieved. This means that supervision does serve its purpose.

6.2.3 To further explore the challenges faced by supervisors and supervisees in the process of supervision in a larger sample.

The researcher became informed about the present situation in psychology at the University of Zululand, highlighting current problems as well as the possible consequences of attempts to improve supervision. The challenges that were highlighted by the participants in the pilot study were added to the series of items in the questionnaire and results suggest that what was challenging to the sample of the pilot study was not necessarily a challenge to the current sample. A challenge is rather experienced when it comes to the feedback, which some supervisees perceived as unclear and supervisors seemed to be concerned that supervisees perceive it as a personal attack.

6.2.4 To identify gaps in supervision and make recommendations to bridge them if they do exist.

Gaps in supervision were identified through looking at the findings which reflected the reality of supervision, as the participants experienced and reflected it in their responses, and comparing it with the existing literature on supervision. Recommendations are an attempt to bridge the existing gaps in supervision. Following are a few gaps that were identified during this study:

- Unclear communication or feedback
- Unavailability of supervisors
- Insufficient time for supervision
- Lack of training of supervisors
- Dependence of supervisees on supervisors (expecting to be spoon-fed)
- Lateness of supervisees for set appointments or not turning up.
6.2.5 To conduct a further self-perceived evaluation on the competence, confidence and commitment of supervisors, in order to establish whether or not there is a need for formal training.

Supervisors’ and supervisees’ responses indicated that they both have consensus on what it is that constitutes a competent supervisor. Through a series of statements the supervisors were able to evaluate themselves in terms of competence, confidence as well as commitment. Supervisees also evaluated their supervisors in similar terms. There were also statements suggesting formal training of supervisors and all supervisors unanimously reiterated the suggestion. Supervisees also collectively agreed with this idea. Hence, in fact both the supervisors and supervisees do realise a need for formal training for supervisors.

It was through the above mentioned objectives that the aim of the study was achieved. The main aim of the study was to compare the experiences of supervisors and supervisees as they perceived them during supervision. Apparently, behaviours and experiences of both supervisors and supervisees, during supervision, depend on the level of development at which each one is functioning (Stoltenberg, 1993). Hence supervision is structured differently by each supervisor usually according to his or her style of supervision and his or her level of development. This, in turn, has a bearing impact on the supervisee and supervision experiences will be different for each supervisee.

No one is trained to be a supervisor and literature indicates that the development process of the supervisor is similar to that of a psychotherapist (Marovic & Snyders, 2010). In other words, just like psychotherapy skills, supervising skills improve with experience. While the new supervisor has no experience to rely upon and is expected to supervise, what can s/he rely on? This study gave insight to
the researcher on what is going on in supervision in comparison to what should be going on. Gaps were identified and recommendations were made in an attempt to bridge the existing gaps.

6.3 Limitations

This study focused on describing how supervision is experienced at the University of Zululand’s department of psychology. It does not go further to reach conclusions that extend beyond the immediate data. So, no inferences can be made to more general conditions. The researcher acknowledges that the findings are only applicable to these participants. The limitations of the study to generalizing its results to other populations are acknowledged.

Because a likert scale was used to collect data, the information that was gathered was only about the questions asked. There was no further inquiry as it might have been the case if there was a dialogue.

Supervisees have had more than one supervisor; hence it was difficult to obtain a clear perspective of their experiences in supervision.

6.4 Value of the study

This study is of value to the university departments that incorporate supervision as part of their training process, especially the helping professions. Moreover, the study helped in the identification of factors that supervisors and supervisees view as attributes in the promotion of professional development. The generated data has contributed to the improvement of supervision. The project further helped to monitor and evaluate supervision. This was done by comparing what is happening
and what ought to be happening in supervision as per literature reviewed, identifying gaps and making further recommendations.

6.5 Recommendations

6.5.1 Field of study

The following recommendations which were reviewed by the Criteria for accreditation of postgraduate Training Programmes in Clinical Psychology CTCP (2002) will be necessary in achieving good practice in supervision of clinical trainees. It might be helpful to adapt them to a specific programme.

- Assigning a more experienced supervisor to be a clinical tutor or mentor for a new or relatively new supervisor might help ease the anxiety until s/he gains confidence about his or her competence.

- Supervisors’ workshops and meetings

Training programmes must incorporate regular supervision workshops to train supervisors in methods of supervision; these should be tailored for both the needs of new as well as experienced supervisors. These workshops should rather be compulsory. An opportunity should be granted whereby supervisors meet regularly and share their experiences, information and discuss their areas of development. Appropriate guidance should be given to supervisors and trainees on the procedures which are necessary for good team supervision. In addition, it will probably be a good idea to establish supervisor workshops related specifically to team supervision.
6.5.2 Department of psychology

Both the supervisor and the supervisee should negotiate a clinical contract whereby there is an agreement of their expectations. The following are suggestions when negotiating such a contract:

1. Discuss and document the ground rules you agree to work within for example, expected punctuality, attendance, behaviour and actions.
2. Identify key roles and functions of the supervisee such as preparing for sessions, willingness to listen, challenge and support.
3. Identify key roles and functions of the supervisor such as keeping records confidential, outlining exceptions; timekeeping etc.
4. Both the supervisor and supervisee should outline how frequently they will meet, the venue and the duration.
5. Both the supervisor and the supervisee are to sign and keep a copy of the contract.
6. The contract should be reviewed at regular intervals and amended if necessary.

6.5.3 Further research

Since this study focused on describing how supervision is experienced at the University of Zululand’s Department of Psychology and no inferences could be made to more general conditions, broadening the study to other institutions might yield more generalizable results.

It would be interesting to see if there would be any differences between supervisors of the same level who have undergone a training program and those who have not.
6.5 Conclusion

This study has provided valuable information regarding self perceived experiences of supervisors and supervisees in supervision. It has given the researcher both perspectives on how supervision is experienced. It was interesting to note that the suggestions offered by the participants are in fact in line with what is documented in literature. In other words participants do actually have an idea of what should be happening. The researcher then wondered what is it then, that hinders improvement of supervision? The reality constrains are taking their toll on the process of supervision. Theory does seem appealing and easy but when it has to be put into practice reality comes into place. Nevertheless, any shift to improvement makes a difference so there is no harm in working towards it.

The results showed a more positive picture of how supervision is experienced by both supervisors and supervisees than what the researcher had anticipated. However, there are some loopholes and there are still a minority who are still not satisfied with supervision, which means there is still room for improvement in order to make supervision a more fruitful learning experience. However, due to human nature dissatisfaction will always exist.

In his description of the perspectives on the supervisory relationship, Dyne (1994) suggested that supervisors of beginning students should provide high levels of encouragement, support, feedback and structure. Since advanced students tend to fluctuate between feeling professionally insecure and professionally competent, the supervisor should take responsibility for creating, maintaining and monitoring the relationship which serves to provide structure and a mediating role while students are in turmoil.
Mental health practitioners are expected to play a supervisory and consultant role. In order to function effectively and ethically in these roles, training is required. When one is trained in his or her area of specialisation, he or she is not trained to supervise. Corey, et al. (2007) suggested that specific training, on how to supervise, should be provided.
6.6 References


Cashwell, T. H. & Dooley, K., (2001). The impact of supervision on self-efficacy. The

clinical supervisor. 20, 39-47.


Clinical Psychology. 11, 31-35.


Criteria for accreditation of postgraduate Training programmes in Clinical Psychology.


*Clinical Psychology Forum*, 146, 17-20.


London: SAGE Publications.


*Psychotherapy*, 27(2), 195-201


Appendix A

Questionnaire (supervisees)

Dear prospective participant

The University of Zululand's department of psychology is conducting “A comparative study of self-perceived experiences of supervisors and supervisees during supervision in psychology”. You are requested to volunteer to participate in this study. All information will be treated with the strictest confidentiality. Please do not fill in your name as the information will be analysed and interpreted anonymously. Filling in this questionnaire will imply your consent to participation.

Instructions to respondents

1. Please read each statement carefully before indicating your response
2. Please complete by inserting an “X” in the block which best represents your view.
3. Please ensure that you do not omit a question or skip a page
4. Please be totally honest when giving your response
5. Please return questionnaire after completion

Thank you for your co-operation
**Section A: Biographical information**

<table>
<thead>
<tr>
<th>Age</th>
<th>25 and below</th>
<th>26-36</th>
<th>37 and above</th>
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</thead>
<tbody>
<tr>
<td>Gender</td>
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<td>female</td>
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<tr>
<td>Racial group</td>
<td>African</td>
<td>Coloured</td>
<td>White</td>
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<tr>
<td>Level of study</td>
<td>Honours</td>
<td>Masters</td>
<td>Doctorate</td>
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### Section B

<table>
<thead>
<tr>
<th></th>
<th>Very much</th>
<th>Quite a bit</th>
<th>somewhat</th>
<th>A little bit</th>
<th>Not at all</th>
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</thead>
<tbody>
<tr>
<td>1. My supervisor was very confident in that he or she knew how to do his/her work and to communicate knowledge to his supervisees</td>
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<td>2. I never really got to learn anything from supervision</td>
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<td>3. My supervisor seemed unsure of what h/she was doing</td>
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<td>4. I always learned something new form my supervisor during supervision.</td>
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<td>5. I never really got to know what it was that my supervisor expected from me.</td>
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<td>6. Supervision provided a learning platform for me</td>
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<td>7. My supervisor never seemed motivated about supervision and this made</td>
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<td>8.</td>
<td>My supervisor demonstrated commitment during the process of supervision.</td>
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<tr>
<td>9.</td>
<td>Whenever I came to consult my supervisor, never seemed prepared for supervision, it was as if h/she was caught off guard.</td>
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<td>10.</td>
<td>My supervisor was hardly ever available for supervision.</td>
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<td>11.</td>
<td>There was never enough time for consultation.</td>
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<td>12.</td>
<td>A competent supervisor to me is someone who is able to model appropriate professional behaviour.</td>
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<td>13.</td>
<td>I always received destructive criticism from my supervisor.</td>
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<td>14.</td>
<td>I wished someday I could know as much as my supervisor.</td>
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<td>15.</td>
<td>My challenge was being criticised while not being given a direction to tackle a task.</td>
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<td>16.</td>
<td>My supervisor did not become defensive when I forwarded my opinions</td>
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<td>17.</td>
<td>My idea of a competent supervisor is the one who is an expert in his or her field</td>
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<td>18.</td>
<td>My supervisor demonstrated competence during the process of supervision</td>
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<tr>
<td>19.</td>
<td>I prefer individual supervision to group supervision</td>
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<td>20.</td>
<td>My experiences in supervision taught me that I should not expect that every person will be patient with me</td>
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<tr>
<td>21.</td>
<td>My experiences meant that I had to learn to work independently even when receiving help from my supervisor</td>
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<tr>
<td>22.</td>
<td>There should be a workshop where a standard way of supervising will be taught to new supervisors</td>
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<tr>
<td>23.</td>
<td>I was told from the start what was expected of me in supervision</td>
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<tr>
<td>24.</td>
<td>I always received constructive criticism from my supervisor</td>
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</tbody>
</table>
25. If I could I would have changed my supervisor

26. There was always sufficient time for consultation.

27. My supervisor was always available for our set appointment.

28. My supervisor was well prepared for supervision almost all the time of consultation.

29. The motivation of my supervisor made supervision more meaningful and productive.

30. I never really got to know what it was that my supervisor wanted me to do.

31. I always got the impression that my supervisor knew what s/he was doing.

32. My supervisor was my role model.

33. My supervisor acknowledged my strengths and made me aware of my weaknesses.

What do you think should be done to improve supervision?
Thank you for your participation!!!
Questionnaire

Dear prospective participant

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Thank you for your co-operation
### Appendix B

### Section A

<table>
<thead>
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<th>Age</th>
<th>25-34</th>
<th>35-44</th>
<th>45 &amp; above</th>
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<th>Female</th>
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<th>white</th>
<th>coloured</th>
<th>Other</th>
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<tr>
<th>Level (s) supervised</th>
<th>4th year</th>
<th>Master’s</th>
</tr>
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<table>
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<tr>
<th>Supervising experience</th>
<th>0-5 yrs</th>
<th>6-9 yrs</th>
<th>10 yrs &amp; above</th>
</tr>
</thead>
</table>
Supervising motivated students is a positive experience for me.

Supervising students who take initiative in their work make supervision more meaningful and productive.

I like it if a supervisee comes to supervision having prepared their work well.

Most of my supervisees never seem motivated about supervision and this makes supervision unproductive.

Whenever supervisees come for supervision they never seem prepared for supervision.

I am always available for my supervisees,
<table>
<thead>
<tr>
<th>Provided an appointment was made</th>
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<tbody>
<tr>
<td>I get the impression that most students do not have a clear understanding of the aim of supervision</td>
</tr>
<tr>
<td>My supervisees want to be spoon-fed most of the time</td>
</tr>
<tr>
<td>I would like to improve my supervising skills</td>
</tr>
<tr>
<td>Students wait until their work piles up before they come for supervision, so by the time they come I get overwhelmed by a load of work</td>
</tr>
<tr>
<td>My supervisees come for supervision unprepared</td>
</tr>
<tr>
<td>My challenge is having to start from scratch as if I am teaching in class and the student comes back with the similar mistakes</td>
</tr>
<tr>
<td>My supervisees seem not to understand that I am not attacking them when I challenge their work.</td>
</tr>
<tr>
<td>I perceive myself a competent supervisor</td>
</tr>
</tbody>
</table>
I think a training for supervisors would not be a bad idea

I am confident with the way I supervise

I am not quite confident with the way I supervise since there is no clear format that should be followed

I think I would be more confident if I received some sort of training for supervising

I am committed at supervising my students

My supervisees seem to understand that I am not attacking them when I challenge their work

My supervisees demonstrate commitment during of supervision.

A competent supervisor for me is someone who is able to model appropriate professional behaviour

My idea of a competent supervisor is the one who is an expert in his or her field

I prefer individual supervision to group
<table>
<thead>
<tr>
<th>Supervision</th>
</tr>
</thead>
<tbody>
<tr>
<td>There should be a workshop where a standard way of supervising will be taught to new supervisors.</td>
</tr>
<tr>
<td>I prefer telling my supervisees from the start what is expected of them during supervision.</td>
</tr>
<tr>
<td>I always give constructive criticism to my supervisees.</td>
</tr>
<tr>
<td>I prefer group supervision to individual supervision.</td>
</tr>
<tr>
<td>There is always sufficient time for consultation.</td>
</tr>
<tr>
<td>As a supervisor I acknowledge my supervisees' strengths and make them aware of their weaknesses.</td>
</tr>
</tbody>
</table>

What has helped you improve your supervising skills?
What do you think should be done to improve supervision?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Thank you for your participation!!!