

Counselling Supervision

Lecture 12

Counselling Supervision and Technology

Dr. Ngure Jane

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Lecture Twelve Outline

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12.1 Introduction

In this lecture, we will discuss the stages of online supervision, process of online supervision, maintaining Supervisory relationship, benefits of online supervision and challenges to online supervision.

12.2 Expected Learning Outcomes

By the end of this lecture, you should be able to:

- a) Discuss the Stages of Online Supervision,
- b) Process of online supervision, maintaining Supervisory Relationship,
- c) Benefits of online supervision and challenges to Online Supervision.

12.3 What does the use of technologies mean?

In general practice use of any of the following technologies; phone (landline, cell or smartphone), email, text messaging, real time chat, asynchronous text-based, webcam/video, virtual reality/avatars, online evaluation and assessment, applications, wearable technologies, therapist

assisted online mental health treatment programs, social media, scheduling and or record keeping software.

Online counselling supervision can be carried out via email, video chat (such as Skype) or in a text-based online chat room. It is arranged at a mutual time between the supervisor and supervisee(s) where they 'meet' virtually in a private chat room, and talk by typing questions and responses in real time.

12.4 Types of online supervision in counselling practice

In the past 10 years, however, available technology has grown exponentially, and keeping up with these changes is a challenge within the professions of counseling and clinical supervision.

Some prevalent computer-based interventions include live supervision “bug-in-the-eye,” e-mail, chat rooms and instant messaging, and cyber super-vision (Watson, 2003). These different interventions vary widely in the complexity of technology required. For example, most people in today’s society are familiar with the use of e-mail, and would be quite comfortable utilizing this type of technology during supervision. At the opposite end of the spectrum, the use of videoconferencing for cyber supervision can involve purchasing and installing additional hardware and software for your computer, learning to problem solve when technical difficulties in With advances in technology, clinical supervision too can be undertaken using mediums such as videoconference, email and teleconference. This mode of clinical supervision is termed as telesupervision. While telesupervision could be useful in any context, its value is amplified for health professionals working in rural and remote areas where access to supervisors within the local work environment is often diminished (Martin, Kumar, & Lizarondo (2017).

Live supervision technology

In the early days, the cutting edge involved observing the supervisee’s counselling session through a two-way mirror (using headphones to hear what was being said in the session), then knocking on the door to call the counsellor outside when you wanted to make a suggestion for immediate implementation. Then came the use of certain “bug-in-the-ear” techniques involving ever more efficient microphones and transmitters for both the supervisee and supervisor. In this instance, the

supervisor was able to observe the counseling session from an-other room, and also speak directly to the supervisee through a tiny receiver hidden in the supervisee's ear.

Instead of using a transmitter in the supervisee's ear, there is a computer monitor in the counselling room, and the supervisor uses another computer behind the mirror to type verbal cues that the counsellor can read, but the client cannot see. This is what has been called the "bug-in-the-eye" approach to live supervision. Some would say this is even less intrusive than the bug-in-the-ear because the typed message could be articulated with more economy, and the counselor is less likely to lose his train of thought as a result of reading a brief message from the computer screen.

Video technology in supervision

Recording counselling sessions is a requirement in many counselor-training programs. Audiotapes remain the most common type of recording for supervision, yet videotaping in laboratory settings is a regular part of training both in skills classes and other clinically oriented courses. Interestingly, technology in video recording such as analog recorders (videocassette recorders for tape recording) is giving way to digital recorders with the capability of recording to Video CD, DVD, or hard disk. This innovation will allow instant access for review without the need for slow tape searching, and provide for larger storage capacities. The digital signal from these recorders also can be sent via Local Area Network (LAN) to supervisor's offices or classrooms for training purposes. In some training settings, supervisors are monitoring sessions of their supervisees and recording some or all of the session in progress for use in supervision at a designated time. The use of digital recorders and cameras has provided supervisors and supervision instructors with additional visual information to aid in supervision, as with interpersonal process recall (Kagan, 1980). Counselling laboratories, with some modification, can easily accommodate the newest digital, perhaps wireless, technologies for free.

The Chat feature is quite helpful if one of you has audio problems, as you can type messages back and forth, similar to the IM programs discussed earlier. Net meeting also allows you to transfer files, which might mean the supervisee could send you his or her case notes or other written documents, possibly even send you sound or video files as a means of sharing recorded or taped counseling session. The success of any videoconferencing supervision session is dependent impart upon the technical knowledge and comfort level of both the supervisor and the supervisee. Because

the supervisor is the facilitator for the interaction, the onus is on you to be able to assist the supervisee in developing his or her knowledge and comfort with the technology. When the supervisee is in another country, at times the online connection might not be a strong one, and this might interfere with the interaction as well. We have had to connect by telephone in order to reschedule a videoconference session, simply because a major thunderstorm damaged the supervisee's connection. Although it is true that there are many technical things that could go wrong with a videoconferencing supervision session, once you and your long-distance supervisee have worked through the glitches, you may find that meeting in this way is not all that different from meeting face to face.

In the past two decades there has been a rapid growth in technology-assisted supervision and training (McAdams & Wyatt, 2010). Some of the new technologies being used to deliver and enhance supervision include video- conferencing, webcams, the iPad, virtual reality, the Internet cloud, and software for tracking treatment outcomes and coding session videos. Technology is currently being used to enhance supervision in most or all major domains of mental health (e.g., marriage and family therapy, school counselling, rehabilitation counselling, addictions), by therapists in every stage of development (from beginning trainees to seasoned experts), in all major formats of supervision (individual, triadic, group, and live one-way-mirror- supervision), and in all major treatment models.

TAST offers a promising range of potential benefits, including the following:

- Increase the accessibility of psychotherapy training, especially for clinicians in rural or remote areas;
- Reduce the cost for travel and improve the flexibility of scheduling;
- Improve the accessibility of training;
- Increase the ease of recording and documenting supervision and training; and
- Improve clinical services through continuous outcome assessment (Rousmaniere, 2014).

Renfro-Michel, Rousmaniere, and Spinella (2016) conducted a review of the literature and found 63 publications on Internet-based supervision, 33 of which were original research studies. The following draws from that review and provides examples of current uses of TAST.

Web-enhanced (online) supervision

At this point, most of the concerns about using such web-based interventions as e-mail, chat rooms, or instant messaging in counselling also would hold true for use in supervision. The major concern with any of these approaches is how to best maintain client (and in our case, supervisee) confidentiality.

If you plan to use e-mail or instant messaging as a regular part of your supervision process, your supervisees should be warned to protect client confidentiality in these media just as they would in any written notes by using only client initials and giving as few descriptive details as possible. Another appropriate use of e-mail might be to send forms or case notes in digital format as attachments to an e-mail message.

Instant messaging (IM), a more real-time approach to online supervision, could be used when the supervisee needs your response right now. Unlike the telephone, however, an IM program may not be readily accessible for both parties at any given time. That is, both of you would have to be online and signed on to the same IM program at the same time, which entails access to a computer with internet capabilities.

Instant Messaging programs give users the option to make voice and camera connection, which would enable you and your supervisee to hear and possibly even see each other as you have this discussion. This option, however, would require the correct operating system, hardware (microphone, speakers, camera), and software be available to both parties. It should be noted that there is some controversy within the profession about whether successful supervision could ever be entirely web-based.

Cyber supervision

The idea of using videoconferencing technology to conduct individual and group supervision sessions between people separated by long distances is growing. Videoconferencing is the use of

video in real time to connect and this includes use of platforms such as Skype. This usually occurs when the supervisor and supervisee are not in one location. With the rise of social media, tools such as blog, micro-blog, wiki, video chat, virtual world, podcast and social networks can also play a role in telesupervision.

At this point, a great deal of preparation must take place before a supervisor could meet with even a single supervisee through videoconferencing. Nonetheless, as computers, PC cameras, and other incidental hardware become ever more affordable, the once great issue of inaccessibility continues to lessen. Having had some experience in conducting long-distance video-conferencing supervision, we would like to describe one way to set this up and make it work. The rapid rise in Internet connectivity speeds and the decrease in computer costs have made video-conferencing ubiquitous (e.g., Skype, Facetime, etc.). Videoconferencing was used originally to improve the accessibility of supervision in rural areas (e.g., Rees & Haythornthwaite, 2004). A videoconference permits two or more individuals to communicate simultaneously by audio and video via the Internet. Dedicated videoconference systems have been used for clinical purposes for over two decades (e.g., Stamm, 1998). However, the high cost of dedicated videoconferencing systems make them largely impracticable for use by individual clinicians. Over the past decade, however, the rapid rise in Internet connectivity speeds and decrease in computer cost has greatly increased the accessibility of videoconference technology. However, urban clinicians are increasingly using it when seeking supervision or training in particular specializations from geographically distant experts (e.g., Abbass et al., 2011; Rousmaniere & Frederickson, 2013).

E-mail in supervision

A number of authors have addressed the usefulness of e-mail as an adjunct to supervision, Luke and Gordon (2016) summarize recommendations for effective use of e-mail in supervision, emphasizing the benefits of repetition, reinforcement, labeling, reframing, collective pronouns, discourse markers, and constructed dialogue for more effective supervision e-mail communication. Clingerman and Bernard (2004) conducted a qualitative analysis of e-mail used as a supervision tool supplemental to in-person supervision. Interestingly, they found that the primary focus of those e-mails was less on skills and more on supervisees' personal issues and professional behavior.

Texting is a newer medium than e-mail and so has been less explored. Because texts are more quickly sent and received, they have advantages over e-mail. We could imagine their use, for example, in live supervision.

12.5 Process of online counselling supervision

One study by Williams, Bambling, King, and Abbott (2009) has recently examined the process of online counselling using 85 transcripts of online sessions. Using a consensual qualitative research method they identified two general types of processes used during online sessions, including rapport-building processes and task-oriented processes. Rapport-building processes were generally used more consistently than task-oriented processes, though both types of process were found to be important. Interestingly, process interventions that may need more verbal or non-verbal cues to be interpreted correctly were found to be less effective, leading the authors to suggest that counsellors may focus on more rapport-building interventions than task-oriented interventions due to their trying to compensate for the presence of fewer verbal and non-verbal cues.

These findings are consistent with earlier theorising that without the benefit of all the contextual and nonverbal cues that may be present in a face-to-face environment, the ways that counsellors form a therapeutic bond might be different in an online environment than a face-to-face environment (Mallen & Vogel, 2005). For example, understanding subtle emotions can be impeded with limited (in the case of video) or no visual or auditory cues (in the case of text only). In addition, online counselling typically involves the typing of information; thus, there

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may be less overall information transmitted within a session as typing typically occurs slower than verbal speech. As a result, it may be difficult for a counsellor to both portray their feelings as well as to gather enough information to make an accurate diagnosis. Therefore, it is important for researchers to consider how online counsellors can effectively adjust for these differences.

The goal of this research is to build on the work of past researchers such as Williams et al. and examine the types of interventions used and degree of information gathered by the counsellors in an online synchronous chat environment.

Purpose of study

In an effort to further examine what occurs in online counselling sessions, the current study

examined the frequency of interventions (e.g. use of questions, reflections) used by counsellors-in-training during an initial counselling session held in a synchronous chat environment. Synchronous chat is the typing of messages back and forth in real time. In other words, synchronous chat occurs when both participants are online and are able to immediately view the message sent by the other person as it appears on their screen. Once the message is viewed, a response is typed and sent back. This process repeats until one party decides to leave the conversation. For an example of a synchronous-chat counselling session, see Mallen, Vogel and Rochlen (2005). We compared these interventions to the frequency of interventions that have previously been found in initial face-to-face counselling sessions. To further examine whether a positive therapeutic alliance can be established from the counsellors' perspective, we also examined the counsellors' reports of the closeness they felt towards the client and their ability to form a therapeutic alliance with their client. Finally, to examine whether the online environment plays a role in the ability of counsellors-in-training to gather necessary information, we

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examined whether the counsellors-in-training were able to accurately diagnose their clients' presenting concerns at the conclusion of the session

Contracting: Supervisors have ethical duty of care to ascertain that the supervisee is conversant with the chosen mode of technology. Prepare the supervisee where necessary for the technology as well as any logistical concerns like privacy

Online modes: Ascertain and agree the formats on which the supervision will take place. Possibility of interaction using several different modalities – chat, email, videoconferencing etc. for different purposes

Communication Modalities: Agree on the frequency and mode of communication, and whose responsibility it is to initiate contact (usually the supervisee). Possibility of inter-session communication for clarifications. Communication must be concrete and trust-based.

12.6 Maintaining Supervisory Relationship

- Considerations to maintain effective supervisory relationship
- Being knowledgeable of the requisite skills to provide effective supervision

- Having a fun, relaxed understanding of the technology being used
- Understand how to integrate effective supervision skills with technology utilization
- Attending to and mirroring the supervisees writing style,
- Engaging professionally within the space created for supervision,
- Being competent in the use of technology,
- Intentionally attending to the supervisory relationship; dealing with problems as they arise and focusing on the relationship

12.7 Benefits of online supervision

- Convenience in scheduling supervision sessions
- Effective use of time no commuting
- Accessibility of supervisors; increases the scope of supervision; greater variety of supervisors
- Greater access to records in online supervision; no problem with forgetting records behind or carrying sensitive documents to supervision
- Privacy; it enhances the supervisee(s) patience and obscurity.
- Reducing Stigma - Any stigma, stigmatization, or perceived stigma associated with seeking mental help services can be reduced or eliminated by online counselling supervision
- Adherence and Compliance Levels of adherence, attendance and compliance as good as or better than in-person treatment can be achieved using online counsellor supervision.
- Freedom for both Supervisor and Supervisee(s) - It affords greater freedom including more professional opportunities and a better balance between professional and private life.
- Diminishing Intimacy - the distance provided by technology inhibits physical proximity, helps to reduce the risk of supervisor-supervisee (sexual) intimacy
- Informed Consent-The informed consent process can be enhanced by online communication-for example, web pages can be revisited.

12.8 Challenges to Online Supervision

- Technology challenges-unreliability of technology

- Supervisors can be technology "immigrants due to their seniority and lack of familiarity with modern technology
- Process impacted - lack of non-verbal or limitations of non-proximity
- Miscommunication and misunderstanding - not reflecting inflections in written communication, unfamiliarity with jargon.

12.9 Summary

In conclusion, the explosion of technological capacity has affected and continues to affect supervision. The benefits of using technology appear to outweigh its constraints, as long as supervisors use technology in a manner that enhances learning, protects the supervisory working alliance, and is within ethical and legal parameters.

12.10 Further Reading

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