

Using Motivational Interviewing Techniques to Address Parallel Process in Supervision

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Abstract:

Supervision offers a distinct opportunity to experience the interconnection of counselor–client and counselor–supervisor interactions. One product of this network of interactions is parallel process, a phenomenon by which counselors unconsciously identify with their clients and subsequently present to their supervisors in a similar fashion (Searles, 1955). Addressing parallel process has the potential to be valuable in the advancement of counselor development, but few strategies exist in the literature for working with the phenomenon. The authors describe the use of motivational interviewing as one method for effectively addressing parallel process in supervision.

Keywords: parallel process | motivational interviewing | supervision | counselor development | supervisory intervention

Article:

Supervision offers a unique opportunity for each member of the counselor–client–supervisor triad to influence the other members, sometimes through the phenomenon of parallel process. Originally, parallel process stemmed from psychoanalytic theory and referred to an unconscious phenomenon when counselors present to their supervisors in the same fashion that their clients presented to them. This unconscious identification with clients allows counselors to show their supervisors what they are experiencing in the counseling session by enacting the behavior during supervision and thus ask for help (Searles, 1955). When identifying parallel process, a supervisor recognizes that an emotional experience may be a representation of the dynamics in the counselor–client relationship. Specifically, a supervisor may become aware that a counselor (supervisee) shifts to unconscious identification with a client and begins responding in a manner similar to how the counselor may feel in counseling sessions. Thus, it is important for supervisors to consider their own reactions within the dynamics of the supervisory process, as well as the content of supervision (Counselman & Abernethy, 2011; Morrissey & Tribe, 2001; Nelson, Barnes, Evans, & Triggiano, 2008).

Researchers have denoted parallel process as a common and useful element of supervision (Arlow, 1963; Morrissey & Tribe, 2001; Ronnestad & Skovholt, 1993; Sachs & Shapiro, 1976). For example, Alpher (1991) found similarities between the client's presentation to the counselor and the counselor's presentation to his supervisor in a 25-week study of parallel process. Similarly, Friedlander, Siegel, and Brenock (1989) identified instances in which the counselor's ease decreased in a counseling session, followed by a supervision session markedly more challenging to both the supervisor and counselor, indicating that the counselor was enacting in supervision dynamics from the counseling relationship. Perhaps the most notable empirical work related to parallel process is Doehrman's (1976) 20-week study that illustrated the interconnectedness of the supervisor–counselor and counselor–client relationships. Doehrman found that, rather than only originating in the counselor–client relationship, tension or binds in the supervisory relationship directly affected the counselors' work with their clients. Additionally, researchers have found evidence of parallel process occurring between a supervisor and multiple counselors in distinct supervisory relationships (Martin, Goodyear, & Newton, 1987) as well as in group supervision experiences (Sachs & Shapiro, 1976).

Although several researchers have empirically examined parallel process (e.g., Alpher, 1991; Doehrman, 1976; Friedlander, Siegel, & Brenock, 1989; Jacobsen, 2007), little has been written related to strategies for the effective use of parallel process in supervision. Although the definition of parallel process has evolved from Searles's (1955) conceptualization to suggest that it may originate from either the counselor–client relationship or the supervisor–counselor relationship, the focus of the present article is to examine an intervention used to navigate parallel process stemming from the counselor–client relationship. In this article, we seek to fill this gap in the literature by describing how motivational interviewing (MI; Miller, 1983; Miller & Rollnick, 2002) can be used to address parallel process in supervision. First, we discuss general methods for identifying and intervening with parallel process. Then, we describe MI and illustrate its use in supervision through a case vignette as well as provide implications for supervisors.

Identifying and Addressing Parallel Process

Searles (1955) regarded the emotional experiences of the supervisor as the crux to identifying parallel process in supervision. He stated that supervisors' awareness of their emotional responses to counselors—and the knowledge that these feelings could be reflections of the counselor–client relationship—is critical to recognizing parallel process. Therefore, supervisors

must be in tune with their own affective reactions in supervision and assess whether their emotions are providing insight into the counseling relationship (Counselman & Abernethy, 2011; Morrissey & Tribe, 2001; Nelson et al., 2008). Other signs that parallel process may be occurring are atypical behaviors exhibited by the counselor in supervision, changes in the supervisory relationship, and difficulties or impasses in counseling dynamics between the counselor and client (Deering, 1994; Sachs & Shapiro, 1976). A counselor who historically arrives to supervision on time and is compliant with assigned tasks but is suddenly late and begins to exhibit uncooperative behavior may be unconsciously presenting as a defiant client with whom he or she is working. Similarly, a steady supervisory working relationship that suddenly reaches a stuck place may warrant the consideration of parallel process.

Addressing parallel process enriches supervision and positively affects both counselors and their clients (Arlow, 1963; Haber et al., 2009; McNeill & Worthen, 1989; Ronnestad & Skovholt, 1993; Searles, 1955), yet details concerning how often, when, and in what way the phenomenon should be addressed remain largely conceptual rather than empirically supported in the literature. In case examples provided by the authors, Searles (1955) asserted that sharing his observation of parallel process when it took place was highly beneficial to the counselor, yet Arlow (1963) did not find it necessary to explicitly name the phenomenon, but rather worked to navigate the situation indirectly. Others have posited that the counselor's developmental levels should be the primary consideration for whether parallel process is overtly identified, in that beginning counselors may lack the maturity to benefit from the observation (McNeill & Worthen, 1989; Morrissey & Tribe, 2001). Finally, Tracey, Bludworth, and Glidden-Tracey (2011) suggested supervisors use metacommunication to make parallel process more explicit for supervisees, yet a complete theoretical framework as to how supervisors can best intervene with parallel process is lacking. Therefore, in light of the importance of addressing parallel process and the gap in the literature related to how supervisors can best facilitate the navigation of the phenomenon, we introduce MI as an effective supervisory strategy. This approach allows supervisors to join with counselors in their stage of readiness for recognizing parallel process and explore a menu of options from which the counselor and supervisor can proceed.

Another consideration when addressing parallel process is the potential for resistance and defensiveness to emerge. Researchers have described situations in which counselors have had difficulty accepting a supervisor's feedback that parallel process is occurring. On the basis of their observations of therapists' identifications with their patients in supervision, Sachs and Shapiro (1976) explained, "To tell the therapist that he was unknowingly acting like the patient and identifying with him, was equivalent to accusing the therapist of letting his personal problems interfere with treatment" (p. 412). Furthermore, as the result of his observations of parallel process occurring within a supervision course, Williams (1987) stated that a supervisor's

interpretation of the phenomenon to a counselor involved in parallel process is an art, because revealing it too early leads to denial or intellectualizing the situation. These remarks provide further support for the use of MI, because the approach offers an effective way to sidestep counselor defensiveness by using techniques with a spirit of collaboration and “rolling with resistance” (i.e., strategies to decrease defensiveness; Miller & Rollnick, 2002). By addressing parallel process from an MI stance, supervisors can facilitate the identification and interpretation of parallel process in a way that is meaningful to the counselors involved.

MI

MI is a metatheory that was initially developed to enhance motivation to change in clients who abused substances (Miller, 1983; Miller & Rollnick, 1991; Miller, Zweben, & Johnson, 2005), yet there is increasing research support with regard to its utility with a variety of forms of behavior change, including the management of diabetes (Channon et al., 2007), depression (Arkowitz & Burke, 2008), and anxiety (Westra & Dozois, 2006). Miller and Rollnick (2002) defined MI as “a client-centered, directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence” (p. 25). The active ingredient that becomes the focus of the MI counselor is facilitating the expression of change talk in the client. The overall goal of MI is to create an environment of empathy in which the client can consider whether to engage in behavior change and how to implement these changes (Zerler, 2009). This premise naturally applies to the process of supervision, in which the supervisor ideally provides a balance of the dialectics of challenge and support, independence and dependence, feedback and encouragement, self-awareness and skill development, and goal and process focus (Blocher, 1983; Borders & Brown, 2005).

There is substantial research on the effectiveness of MI as a clinical intervention (Lundahl & Burke, 2009) and a growing body of literature on supervising helping professionals in the use of MI with their clients (Martino et al., 2011; Mitcheson, Bhavsar, & McCambridge, 2009). Researchers have demonstrated that those trained in MI improve their ability to use MI microskills (Schoener, Madeja, Henderson, Ondersma, & Janisse, 2006; Walters, Vader, Nguyen, Harris, & Eells, 2010) and MI spirit, which refers to the collaborative and client-centered presence of the counselor (Mitcheson et al., 2009), although supervision is essential beyond initial training for MI skills to develop (e.g., Smith et al., 2007). Recently, MI has been discussed on a conceptual level as a supervision intervention itself. Madson, Bullock, Speed, and Hodges (2008) described integrating MI microskills, such as the use of double-sided reflections, into the supervision of counselors working with clients who abuse substances. The authors emphasized the utility of MI as a supervisory intervention and explored how the approach fits

within the supervisor's role of educator, supporter, consultant, and evaluator. In sum, the application of MI in supervision has been limited to increasing counselor MI skills and using the approach specifically with counselors working with clients who abuse substances. However, MI has utility with regard to a variety of supervisory issues, such as parallel process. Therefore, the growing utility of MI as an effective supervisory approach, coupled with the dearth of strategies pertaining to how supervisors can address parallel process, makes the exploration of MI as a means to navigate parallel process the next step in this body of research.

Parallel Process Through a Motivational Lens

Before we define and explore applications of MI as a supervision intervention, it is important to examine the utility of this metatheory in conceptualizing parallel process. The primary goal of MI in a counseling setting is to help the client negotiate thoughts and feelings of ambivalence in order to facilitate change. Ambivalence occurs when a client has not made behavioral changes because of a lack of resolution concerning the decision to change (Miller & Rollnick, 2002). With regard to parallel process in supervision, the feelings of ambivalence relate to the counselor feeling divided about whether to explore his or her atypical behaviors that may be markers of the existence of parallel process. As counselors unconsciously identify with their clients and present to their supervisors in the same way that their clients present to them, counselor behavior change occurs and shifts transpire within the supervisory relationship. Although perceptive supervisors may identify these as signs that parallel process is transpiring, the existence of the phenomenon is outside the awareness of counselors. The supervisor using MI helps counselors navigate the ambivalence by facilitating counselor movement from unconscious identification with clients to a conscious awareness of the occurrence of parallel process. Furthermore, supervisors using MI help counselors work through any ambivalence they may have toward directly addressing the parallel process issue once it is in their awareness.

Case Example

We use a hypothetical case vignette of a female counselor identifying with a female client involved in intimate partner violence to explore how facets of MI can be applied to parallel process in supervision to induce counselor change. Because of the vastness of the entirety of MI, this article addresses only a select number of MI components that represent the utility of this intervention. The client in this case is self-loathing, disclosing what she perceives as personal flaws and inadequacies that contribute to the violence she encounters from her partner. She

makes little eye contact with the counselor and often appears to be cowering in shame in her sessions. During one particularly challenging counseling session, the client presents a harsh description of her faults followed by the counselor's attempts to come to her defense by listing her positive qualities. In the subsequent supervision session, the counselor begins by discussing what she perceives to be her insufficiencies for working with this client. She recounts instances she believes to be careless oversights and lapses in clinical judgment. The counselor discloses that she has had difficulty sleeping and experiences anxiety about her client such that it interferes with her daily functioning. However, she notes that these consequences are fitting because of her apparent inadequacy as a counselor. In that moment, the supervisor becomes aware of an urge to come to the counselor's defense. He feels compelled to highlight the counselor's strengths and assure her that her self-denigration is not warranted and she has many clinical skills.

As a result of this process, the supervisor recognizes that his emotional experience may be a representation of the dynamics in the counselor–client relationship. Just as her client demonstrates self-loathing behavior and feels deserving of the violence inflicted upon her, so too is the counselor engaging in self-denigrating self-talk and feels deserving of anxiety and sleepless nights. The supervisor becomes aware that the counselor appears to have shifted to unconscious identification with her client, and he is responding in a manner similar to how the counselor feels in her counseling sessions.

Assessment of Motivation to Address Parallel Process

A critical first step in using MI with counselors in parallel process is to assess the counselor's awareness of and motivation to address the markers of parallel process, such as atypical behaviors. Rather than merely telling counselors about the presence of parallel process and thus risking the emergence of defensiveness or resistance, MI allows counselors to simultaneously assess and explore the phenomenon and make changes based on their own momentum. This can be done through processing the MI domains of importance, confidence, and readiness (Miller & Rollnick, 2002) with counselors during parallel process situations.

Importance refers to the counselor's perception of the significance of the atypical behaviors manifesting as a result of parallel process (Miller & Rollnick, 2002). In the case example, the atypical behaviors are the counselor's pattern of using self-denigrating language and emphasizing flaws in supervision, as well as a lack of eye contact and closed body posture. If the counselor self-reports a high level of importance for exploring these new behaviors, there is likely a desire to change. The supervisor using MI can use this desire to navigate the parallel process and bring about change as he helps the counselor become consciously aware of the parallel process. If the

counselor provides a low rating of importance in exploring the pattern, the supervisor and counselor can discuss this low importance and what might be getting in the way of exploring the issue further.

Other domains for the supervisor using MI to consider during the assessment of motivation are confidence and readiness. The domain of confidence pertains to the level of efficacy the counselor has about attending to the atypical behaviors resulting from identification with the client (Miller & Rollnick, 2002). High confidence suggests that the counselor believes in her ability to explore, understand, and use her atypical behaviors, which are markers of parallel process, but does not necessarily imply a desire for change. Readiness to change refers to the willingness and level of priority the counselor gives to addressing the identification issue. The counselor may feel that attending to the pattern of self-denigrating language is important but may rate her readiness low because of the anxiety surrounding a discussion of the topic and the desire to discuss it at a later date. Miller and Rollnick (2002) suggested using a ruler question to ask the counselor to rate the importance, confidence, and readiness of attending to the behaviors in question (1 meaning not at all important, 10 meaning extremely important). (Note. In the dialogues that follow, our reflections are presented in italics.)

Supervisor (S): I've become aware that we have started our last few supervision sessions with your accounts of what you believe to be lapses in clinical judgment and your shortcomings as a counselor. Am I right about this observation?(The supervisor presents observation changes in the counselor's behaviors to assess her level of awareness.)

Counselor (Co): Well, I guess. I just feel like I've been making a lot of mistakes lately, and I've been feeling kind of stuck in my sessions with my client and wanted to talk about it. (The counselor demonstrates initial awareness of atypical feelings, ambivalence, and initial sense of importance of discussing these experiences.)

S: So you've been questioning your abilities, and lately in supervision it has been important for you to discuss what you believe to be clinical mistakes. (The supervisor's reflection emphasizes the importance of discussing changes in the counselor's behavior.)

Co: Yes, that's right.

S: I think this pattern of highlighting your insufficiencies in supervision is worth spending some time on. I am curious, on a scale from 1 to 10 with 1 being very low and 10 being very high, how important is it for you to explore this pattern a little bit more?(The supervisor assesses the counselor's importance level for discussing her atypical behaviors in supervision using an MI ruler question.)

Co: I would say a 6 or 7.

S: Tell me about your rating of a 6 or 7 instead of a 4 or 5. (The supervisor extends the ruler question to elicit the importance of discussing the counselor's changed behavior and increase the counselor's identification of parallel process.)

Co: I don't feel like my usual counselor self when I am with this client. I feel like I am falling short.... I am anxious about it and not sleeping well. I feel like I should be doing more. And I guess talking about my mistakes with you is becoming more of a pattern.... So it is probably important that we talk about it.

S: It must be very challenging to question your abilities. (The supervisor expresses empathy.) It seems you are noticing that the content of our supervision sessions has shifted to focusing on your mistakes because you feel particularly challenged with this client. You also expressed that talking about this shift is important to you. I am curious, what comes up for you as you think about us discussing these changes that have emerged in supervision?(The supervisor explores the counselor's readiness and confidence.)

Co: I guess it makes me a little nervous, because I am not sure what I can do about it ... but I do think it is worth looking into. I would like us to spend time on it, and hopefully something good will come of it. (The counselor's confidence appears low, yet her readiness and importance are high.)

Implementing the MI Principles and Skills

Regardless of the counselor's ratings of importance, confidence, and readiness to address what the supervisor knows to be parallel process, core MI principles should be maintained throughout

the intervention. The first principle, expressing empathy, should always be in the forefront. Arkowitz and Miller (2008) stated, "An empathic therapist strives to experience the world from the client's perspective without judgment or criticism" (p. 4). It is important for supervisors to keep in mind that parallel process emerges as a result of a challenging therapeutic situation in which counselors are seeking guidance by showing their supervisors what they are experiencing. Thus, expressing empathy for a counselor's situation serves to meet his or her need for understanding. Without this empathetic environment, counselors are more likely to feel defensive when the supervisor attempts to discuss observations of identification with clients.

Even within an empathetic environment, supervisors using MI must also be adept at managing resistance as it emerges in supervision. MI clinicians believe that resistance is created by both counselor and client and that if the counselor can roll with resistance, defensiveness can actually be an asset in moving toward change (Miller & Rollnick, 2002). Rolling with resistance involves using empathic listening skills to decrease defensiveness (Westra, 2004). In supervision, the supervisor has the option of using reflections, emphasizing the autonomy of the counselor, or even shifting the focus of the supervision in that moment if the parallel process topic seems to be a hot-button topic for the counselor (Westra, 2004). Depending on the developmental level of the counselor, the supervisor may choose to refrain from explicitly bringing parallel process to the counselor's awareness. Rather, the supervisor can address the counselor's presenting issues in supervision and thus model ways in which the counselor can work with his or her client in counseling. Although the counselor will not consciously acknowledge parallel process, he or she will gain insight as to how to navigate the therapeutic impasse and thereby indirectly resolve the parallel process issue. However, should the supervisor assess that the counselor is at a developmental level in which he or she could benefit from the awareness of parallel process, the supervisor can use ways to develop discrepancy. The goal of developing discrepancy is to create cognitive dissonance between counselors' personal and supervisory goals and their counseling and supervision behavior (Arkowitz & Miller, 2008). With the counselor in the case example, the supervisor develops discrepancy by exploring the counselor's past supervisory behaviors (confidence and language focused on progress) and current atypical behavior resulting from identification with the client (self-denigrating talk). The supervisor continues this process by inquiring about the parallels between the behavior of the counselor and client. Through this line of questioning, the supervisor can develop discrepancy by creating the space for the counselor to reflect upon her uncharacteristic behaviors and the relationship between these actions and those of her client.

S: So you've noticed some shifts lately. Let's talk about those a little more. What are some of the ways you typically act, feel, and think in supervision prior to these shifts you've noticed?(The

supervisor uses an open-ended question to raise the counselor's awareness of discrepancy in her supervision behaviors.)

Co: Well, at the beginning, I thought I was doing all right as a counselor, and I think I used to be more positive in supervision. I felt more confident in myself. I knew that you and I could come up with a game plan for even the toughest issues with my clients.

S: And now ...

Co: Now, every time I meet with you I want to talk about what I am doing wrong, because that is most pressing. I feel anxious about my work with this client. When I come to supervision I want to tell you about my mistakes and my anxiety—even the fact that I'm not sleeping well. I am not telling you so you'll feel sorry for me. In fact, I probably don't deserve to be sleeping well if I am dropping the ball as a counselor. (The counselor demonstrates awareness of discrepant supervisory behaviors; this indicates to the supervisor that the counselor may be able to process the discrepancy resulting from the parallel process.)

S: So, initially, you were confident in your clinical skills and eager to discuss your progress with your client. Lately, those patterns have shifted, and it seems more difficult for you to discuss your strengths. Instead, the focus is on your shortcomings in your work with this client and your anxiety and sleeplessness that you believe you deserve. I am wondering if there is any connection between your experience and the experience of your client. (The supervisor's reflection highlights the discrepancy between the counselor's previous supervision behaviors and current ones and is followed by an open-ended question to elicit further comprehension of parallel process.)

Co: Well, I can see that I have made the change over time.... And I actually do think there are some similarities between how I talk about myself and how my client talks about herself. We are both pretty hard on ourselves. (The counselor begins identifying the parallel process issue.)

S: So you both use strong, critical language when talking about yourselves. What other similarities do you notice?(The supervisor uses an open-ended question to uncover more of the parallel process issue.)

Co: Hmm [pauses to reflect]. Well, she is always saying how she deserves the violence she experiences at home.... And I just told you that I deserve not to sleep well. That is a similarity. You know, I think talking about this is probably good for me because it is helping me understand my client better. (The counselor has identified the parallel process issue. Her level of importance and readiness for addressing parallel process seem high.)

Because the counselor has demonstrated an initial awareness of her atypical behaviors, the supervisor from the case vignette moves the dialogue toward the parallels between the self-denigrating language of the counselor and the client, as well as the belief that they deserve their punishment. This conversation may continue to include parallels between the counselor's and client's nonverbal behavior as well, such as eye contact and body posture. Once the parallel process is discussed in more depth, the supervisor focuses on eliciting motivational statements from the counselor in favor of addressing parallel process.

Another important element in the use of MI is what MI counselors call change talk. Change talk can arise at any point when using MI techniques. Supervisors with the goal of evoking change language from counselors will want to use open-ended questions, affirmations, reflections, and summarization of any change talk (Rosengren, 2009). The purpose of change in the parallel process situation is the shift from unconscious identification with a client to a conscious awareness of the parallels between the counselor's and client's experiences so as to use the parallel process experience to enhance clinical work. By using the MI technique of eliciting change talk, supervisors elicit statements made by counselors that relate their own behaviors to the behaviors of their clients. In the case vignette, the supervisor's line of questioning leads to the counselor's recognition of the importance of addressing the parallel process issue and how it can be helpful in her clinical work.

S: We have had about five supervision sessions together. If you mentally fast-forward another five sessions, and our supervision has positively changed, what would this look like?(The supervisor uses a looking-forward question to elicit change talk.)

Co: I think I would be prepared to discuss specifics of the case rather than my own personal inadequacy. I would be confident in supervision and encouraged that I can be helpful to my client. I would recognize that just because I'm struggling with this client doesn't mean I'm a bad counselor. (The counselor describes desired changes.)

S: You'd be doing things differently in supervision and feeling differently about yourself in our sessions. You would feel encouraged, confident, and demonstrate a higher level of self-kindness. It sounds like those are the same things you want for your client. (The supervisor uses a reflection to highlight change talk.)

Co: I never thought about that before, but yes. I think my client and I have had a lot in common lately, and the changes I would like to make for myself in supervision are similar to the changes I would like my client and I to work toward in our counseling sessions. (The counselor identifies parallel process and elaborates on change talk.)

In the latter stages of the MI process, the focus is on solidifying a plan for behavior change and increasing counselors' confidence that they can carry out these changes. Supporting self-efficacy is a critical component for the creation of this plan (Levensky, Forcehimes, O'Donohue, & Beitz, 2007). The supervisor should draw on the counselor's past counseling and supervision successes to increase her confidence level in creating and implementing a change plan. For instance, the supervisor can ask the counselor to identify a recent progress moment, or a time in which the counselor achieved a goal in her clinical or supervisory work, and identify the positive steps the counselor used to facilitate this development. The supervisor can then draw on this past experience to support the self-efficacy of the counselor in using the parallel process experience to aid her clinical work. Another useful MI technique for supporting self-efficacy is creating a menu of options to help the counselor consider a change plan that fits best for her. The menu may depict ways in which the counselor can use the parallel process experience in her work with her client.

In the presented case example, the supervisor, using MI techniques, creates a space in which the counselor can gain awareness of her identification with her client. This identification leads the counselor to present with self-denigrating talk as well as the belief that she deserves the punishment of troubled sleep.

S: Now that we are recognizing some parallels between your experience in our last few supervision sessions and the experience of your client in counseling, we have some options of how to use this information. We can continue to explore what you've been thinking and feeling lately in supervision to help build a better conceptualization of your client, we can talk about what might be coming up for you personally when you work with this client in session, or we

could brainstorm plans for your next session since this client is particularly challenging. Which option do you think would be most helpful?(The supervisor presents the counselor with a menu of options, emphasizes her autonomy, and models the parallel of encouraging healthy autonomy for her client.)

Co: I am still processing how similar my experience in supervision has been to my client's experience in counseling. I think I'd like to talk more about that so I can understand her better and then brainstorm how I can use that information in my work with her.

S: Sounds like continuing to talk about the parallels between yourself and your client, as well as some session planning, would be most helpful right now. I wonder if you could tell me what your experience has been like in supervision today. Something about our interaction was helpful to you in your process of gaining self-awareness about your experience in supervision. (The supervisor supports the counselor's self-efficacy and asks about her experience to identify elements of the supervision process that could be possible strategies to use with her client during counseling.)

Co: Well, you seemed to really be interested in what I have been feeling and thinking. You gave me time to reflect on my own experience and used questions to help me understand myself a little bit better. I never felt judged by you.... I felt like you were genuinely trying to understand my perspective.

S: I wonder if any of those elements would be important to implement in your counseling sessions with this client. (The supervisor encourages the counselor to think about a plan for change in both supervision and counseling.)

Co: Yes, I think they would be very valuable in my sessions, and as we talk about this, I just know that I have to start doing some things differently, but I am not quite sure how. I've been so down on myself about this client—it's draining—but I don't know where to start doing things differently or if I am even able to. (The counselor elaborates on change talk by discussing the need for change given the consequences of not addressing the parallel process issue. She also exhibits that although the importance of change may be high, her confidence to address parallel process is low.)

S: I hear that you want to make change but you are questioning your ability to do so. Tell me about a time you experienced a struggle in supervision or with a client that you were able to overcome. (The supervisor attempts to support the counselor's self-efficacy and increase her confidence by drawing on information from a previous counseling or supervision success and eliciting evidence that counseling and supervision obstacles can be successfully navigated.)

Co: When I first started seeing clients, I was scared to death that I wouldn't be able to help them. I was insecure in my skills and didn't want my clients to feel bad about anything. I was constantly worried I would mess up and was checking in with you about every little thing. I've come a long way since then. I learned that, even as a new counselor, the skills I possess are helpful and I don't have to be perfect as long as my clients and I are working toward their goals. Hmm... I see what you're getting at [smiles].

S: So, similar to your clients, you have within you the ability to deal with challenges you are faced with. You know this because you have done it before. How can your insights be applied to the changes you want to make in supervision and in your work with this client?(The supervisor reflects the counselor's statement while using an affirmation of her ability. He uses an open-ended follow-up question to encourage the counselor to elaborate on self-efficacy statements.)

In subsequent meetings, the supervisor and counselor engage in continued reflection as to the counselor's emotional experience during parallel process, which leads to greater depths of empathetic understanding of her client. In addition, the supervisor and counselor continue to explore what specific aspects of their supervision sessions allowed for the counselor's exploration of her self-denigrating talk and feelings of inadequacy. A discussion of how the supervisor responded to the counselor's self-denigrating talk provides insight into how the counselor can proceed with her client. Furthermore, the counselor becomes aware of her own propensity to identify with clients who feel unworthy, and this self-awareness enhances her clinical effectiveness. Thus, navigating parallel process in such a way as to avoid counselor defensiveness and foster a greater sense of self-awareness affects the counselor's work with this client in several ways.

Client (Cl): Last week was just as bad as the one before. He started hitting me as soon as he finished his first drink, but I brought it on myself. I started nagging him about money again and he just couldn't take it anymore. I need to learn to bite my tongue.

Co: (The counselor again feels the desire to defend the client and highlight her strengths but decides to express empathy in the way that was modeled by her supervisor.) It must be scary not to know when he will become violent, and the only thing that makes sense is for you to attribute it to things that you do or say.

Cl: Yes, it is terrifying. There does not seem to be any rhyme or reason behind it. He keeps me guessing what I am doing wrong. I just wish I could figure it out.

Co: (The counselor reflects on the parallel process experience and offers a reflection of meaning stemming from her empathy with the client.) Although believing that you deserve the violence is the only way it makes sense to you, I am wondering if what you are longing for is to value and appreciate yourself again, like you did before it started.

Cl: [Becomes tearful.] Yes. I miss that.

Co: (Because of the discussion of the parallel process experience, the counselor recognizes that this client elicits in her a desire to rescue. With this awareness, the counselor pauses and decides to allow the client time and space to “rescue” herself.) I see that there is a lot of emotion coming up. Can you stay with that and tell me more about what you miss?

Through the navigation of the parallel process issue, the counselor increased her understanding and empathy related to the client, gained insight as to how to work with her by observing skills modeled by her supervisor, and acquired self-awareness as to how she is triggered by the client. The use of MI to address parallel process successfully had significant implications on her clinical work.

Limitations

There are several limitations to the MI approach to parallel process in supervision. First, if the counselor's unconscious identification with a client suggests concerns that the counselor is doing harm, a more direct supervision strategy is warranted. Second, depending on the counselor's developmental level, the supervisor may determine that it is better to work through the parallel

process by modeling without ever making the counselor aware of his or her unconscious identification with a client. The supervisor must assess the counselor's cognitive skills pertaining to clinical work as well as level of self-awareness to determine whether the counselor is able to accurately comprehend the parallel process issue and therefore benefit from becoming aware of its existence in supervision. Third, because MI strategies are presented here as a prelude to addressing parallel process concerns, counselors who are already aware of their identification with their client, coupled with high levels of importance, confidence, and readiness to change, may not be helped by MI supervision approaches and the supervisor can simply proceed to another supervision intervention. Finally, supervisors seeking to use MI techniques in supervision with any issue must be thoroughly trained in both supervision and MI in order to work within their realm of competence as a supervisor.

Implications for Practice and Research

In this article, we have identified specific markers that suggest parallel process may be occurring and outlined an MI approach for helping the counselor achieve awareness needed to move beyond the therapeutic impasse at the heart of parallel process. Effective application of MI to address parallel process is dependent on several factors. First, counselors cannot self-report a phenomenon that is unconscious and outside their awareness. Thus, supervisors need knowledge of a range of the counselor's work to be able to identify atypical behaviors. Review of audio and video recordings of counseling sessions, then, is an important source of information, as well as notes of and reflections on supervision sessions. Second, supervisors should keep in mind the positive intent of a counselor's parallel process behaviors, including counselor resistance to addressing these behaviors, and refrain from labeling the behaviors as positive or negative. Finally, supervisors' ability to be self-aware of their reactions during supervision sessions is critical, because this may be a first sign of parallel process.

MI offers several skills and perspectives that seem well-suited for addressing parallel process. Although the depiction of MI here is related to working with an advanced supervisee using an MI intervention only, MI can also be used in conjunction with other supervision modalities with counselors who require a more directive approach. For instance, Madson et al. (2008) integrated MI with a framework that allows for directive interventions and feedback. They also posited that MI provides useful guidelines for giving feedback in general that can be applied in the supervision milieu. Research on the effectiveness of MI at various counselor developmental levels and in combination with other supervisory approaches is needed to explore the application of this evidence-based intervention in the new arena of supervision. In addition, the influence of

gender and other cultural differences in the supervisor–counselor–client triad on the effectiveness of MI in supervision is another element to be examined in future research.

MI is aimed at reducing resistance, demonstrating empathy, and increasing change talk. Thus, measuring counselor anxiety (Perera-Diltz & Yeager, 2009), perceptions of supervisor effectiveness and empathy, and client self-report of counselor effectiveness and empathy would be informative. Researchers could also evaluate coded transcripts of supervision sessions to correlate the frequency of counselors' change talk with their actual implementation of supervisor feedback in counseling sessions. Such empirical endeavors that examine the impact of MI as a supervisory intervention—and with regard to parallel process specifically—would be useful additions to understanding the ways to address some of the dynamics that impede counselors' efforts to help their clients.

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