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Alliance, power dynamics and response styles in the clinical supervisory relationship

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ALLIANCE, POWER DYNAMICS, AND RESPONSE STYLES IN THE

CLINICAL SUPERVISORY RELATIONSHIP

BY

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Abstract

Supervisors provide evaluations, act as professional gatekeepers, and serve a central function to psychotherapy training, yet little is known about the impact of power dynamics on the supervisory relationship and the psychotherapy trainee. The present study offers a closer examination of Bordin's (1983) concept of supervisory alliance, revealing a largely unappreciated emphasis on defusing tension associated with power. This study is the first to investigate how soft and hard power impact supervisory alliance, while also further validating the recently developed Power Dynamics in Supervision Scale (PDSS; Cook, McKibben & Wind, 2018). The Core Conflictual Relationship Theme (Luborsky & Crits-Christoph, 1998) enriched results with qualitative investigation of supervisors' response style. A diverse sample of $N = 311$ psychotherapy trainees and a subset of 20 matched pairs of trainees and supervisors completed an online self-report survey. A model involving hard power and positive response style by supervisors predicted 56% of variance in trainee-rated supervisory alliance, and a model involving soft power and negative response style by supervisors predicted 51% of variance in alliance. Supervisor use of soft power appeared to serve as a buffer to trainees' perceived negative response styles by supervisors. Whether supervisors explicitly established goals at the outset of supervision predicted 13% of supervisory alliance and 6% of perceived balance of power. Concurrent validity testing supported the construction of the PDSS. Far fewer matched pair supervisory dyads were recruited than aimed for, but in the matched pair subsample, small, non-significant associations were found between trainee and supervisor ratings of alliance, hard and soft power, and the PDSS. Implications of the results for deepening the quality of supervisor-trainee dyads are discussed.

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Chapter I

Introduction

While clinical supervision is a cornerstone component of training as a psychotherapist across specializations (American Association for Marriage and Family Therapy, 2015; American Counseling Association, 2014; American Psychological Association, 2014; National Association of Social Workers, 2017), the roots of contemporary supervisory practice can be found in the field of psychoanalysis (Watkins, 2015; Wheeler & Cushway, 2012). Though Freud was said to have not been a fan of supervision (Chagoya & Chagoya, 1994), historical accounts of supervision typically identify his practice as the first example of clinical supervision (Wheeler & Cushway, 2012). Watkins (2015) identified three seminal events in Freud's career that would set in motion the practice of psychoanalytic supervision: (1) his consultations with Breuer regarding their patients with hysteria, representing an early form of peer-supervision/consultation; (2) Wednesday night meetings that Freud held in his home to discuss both theory and practice (sometimes called the "informal" start to supervision); and (3) Freud's correspondence with Max Graf, the father of the now-famous "Little Hans," wherein Freud advised Graf on how he could best help his young son (sometimes called the "formal" start to supervision). Wheeler and Cushway (2012) further discussed correspondence and personal meetings that Freud conducted with a variety of clinicians seeking guidance and support, noting the lack of resemblance with the formalized structures of supervision today.

More broadly, in the early days of analytic training, trainees typically discussed their patients with their own analysts. However, beginning in the 1920s and championed

in particular by Max Eitingon (1923) at the Berlin Institute, supervision became a vital component of the psychoanalytic training process, with specifications outlining the length, extent, and conduct in supervision (Watkins, 2015). In the nearly 100 years since Eitingon's articulation of clinical supervision, standards of practice and theories of supervision have developed with many variations. By as early as the 1950s, when there were great divides between psychoanalysis and radical behaviorism, supervision had become commonplace across therapeutic orientations in tandem with the proliferation of training programs (Wheeler & Cushway, 2012). Bernard (2006) suggested that while direct supervision continued to occur within psychoanalysis, in other therapy schools such as those developed by Rogers, Krumboltz, and Lazarus, supervision was done more indirectly as master therapists apprenticed newer therapists, particularly through modeling.

In the 1970s and 80s, a number of supervisory models were being articulated, with Kagan et al.'s (1969) development of Interpersonal Process Recall being a major example of techniques developed specifically for supervision, rather than being adapted from psychotherapy. Stoltenberg (1981) and others advanced developmental theories of supervision, wherein trainees moved from early to more advanced stages. However, it was not until 2014, after a number of years of the competency movement, that the American Psychological Association (APA) was the first professional organization to issue any specific policies or recommendations for supervision. The publication of the *Guidelines for Clinical Supervision in Health Service Psychology* (hereafter referred to as *Guidelines for Supervision*; APA, 2014) marked a major advancement for standardization

of practices and expectations for supervision in the realm of psychology, offering a model for other professions to follow suit.

Though decades of formal research have contributed considerably to understanding supervisory dynamics, clinical supervision of psychotherapy trainees has been identified as an area in need of much greater empirical investigation (Falender, 2014). However, agreement does exist on particular aspects of supervision, most notably that the supervisory relationship is the most pivotal component of supervision (APA, 2014; Goodyear, 2014; Tangen & Borders, 2016). Accordingly, much of the supervision literature has centered on this relationship (Holloway, 1995). Drawing from the theoretical contributions of Bordin (1983), the majority of research on supervisory relationships has centered on the relational "working alliance," involving agreement on the goals and tasks of supervision, as well as an emotional bond between supervisor and trainee. A strong supervisory alliance has been linked to a number of positive outcomes, while a weak alliance has been linked to negative experiences. Ladany (2004) summarized that "if supervisors want to be effective in facilitating trainee development, they must readily attend to the supervisory alliance" (p. 6).

An area that has been highlighted as both central to supervisory relationships and in need of much greater investigation is the impact of power dynamics between supervisors and trainees. The relative positions of supervisor and trainee contribute to a particularly salient power differential. The APA's (2014) *Guidelines for Supervision* give substantial emphasis to issues of power, indicating that the "power differential is a central factor in the supervisory relationship" (p. 18). Sources of differential power include the evaluative and gatekeeping roles of supervisors (Falender 2014; Ladany, Ellis, &

Friedlander, 1999), the inability of trainees to either opt out of supervision or choose their supervisor (De Stefano, Hutman, & Gazzola, 2017), and issues associated with discrepancies in expertise between trainee and supervisor (Porter & Vasquez, 1997).

In response to the need for conceptual as well as empirical elaboration of these issues, Cook, McKibben, and Wind (2018) recently published the Power Dynamics in Supervision Scale (PDSS). This measure requires further validation, which was one of the goals of the present study. Validation of the PDSS was conducted through comparison to a widely used measure of interpersonal power from social psychology, the Interpersonal Power Inventory (IPI; Raven, Schwarzwald, & Koslowsky, 1998). The IPI divides power into soft (collaborative) and hard (authoritarian, sometimes referred to as harsh) forms and has been used widely in a number of social contexts, and to a limited degree in studies of alliance in psychotherapy. The present study was also the first to investigate use of soft and hard power within the supervisory alliance.

Finally, few studies have examined interpersonal process factors in the supervisory relationship that may contribute to perceptions of alliance, and no studies have investigated these variables in relation to power dynamics. The Core Conflictual Relationship Theme (CCRT; Luborsky & Crits-Christoph, 1998) is a well-established qualitative measure that was included the current study to facilitate bottom-up qualitative investigation of relational themes in supervision, drawing from a broad, national sample of trainees in the current study. The relationships among these process themes, power dynamics, and alliance were investigated for the first time. The findings of the study further illuminate an understanding of power dynamics and alliance, and how supervisors and trainees can optimally navigate the complex dynamics inherent to the process.

CHAPTER II

Review of the Literature

The literature review will focus on the following areas: 1) supervisory working alliance; 2) power dynamics in the supervisory alliance; 3) power balance in the supervisory alliance; 4) interpersonal power bases in the supervisory alliance; 5) alliance and power dynamics as interpersonal processes; and 6) sociocultural factors in power and alliance.

Supervisory Working Alliance

The concept of the working alliance was first developed within the psychoanalytic literature. Though he never used the term "alliance," most accounts depict the origin of the concept in Freud's (1913) emphasis on collaborating with patients through the use of "unobjectionable positive transference," particularly at the beginning of treatment (Horvath, Del Re, Flückiger, & Symonds, 2011; Safran, Muran, & Proskurov, 2009). Sterba (1934) first identifed an "ego alliance," wherein the analyst would collaborate with the more reflective, reality-based, and observant part of the patient's ego. Using a similar definition to both Freud and Sterba, Zetzel (1956) was the first to discuss the importance of developing a "therapeutic alliance" involving collaboration and support; a complement to the "transference neurosis" involving the patient's projection of (especially parental) relational issues onto the therapeutic relationship. Building on this work, Greenson (1967) also distinguished between the transference aspects of the therapy relationship and the "real" relationship. He further differentiated the latter into the working alliance on the one hand (involving the patient's ability to align with the tasks of

therapy) and the therapeutic alliance on the other (involving the ability to form a personal bond).

Though the working alliance concept was originally developed in the psychoanalytic literature, Bordin (1979) further elaborated the alliance as a bridge to unify an increasingly diverse field of psychotherapy models. He proposed that the working alliance between the person who seeks therapy and the person who provides it, may be the primary mechanism through which therapeutic change occurs. This working alliance, common across all forms of therapy, is characterized by three core elements: mutual agreement on the goals and tasks of therapy, and the development of an emotional bond (Bordin, 1979; 1983). Decades of psychotherapy research support Bordin's theory; the therapeutic alliance is a consistently reliable predictor of change across therapy types (Flückiger, Del Re, Wampold, & Horvath, 2019; Horvath et al., 2011). Safran and Muran (2000) describe Bordin's conceptualization as dynamic and mutual:

> It assumes that there will be an ongoing negotiation between therapist and patient at both conscious and unconscious levels about the tasks and goals of therapy and that this process of negotiation both establishes the necessary conditions for change to take place and is an intrinsic part of the change process. (p. 15).

Bordin (1983) posited elements of the same model could apply to other relationships involving a "change situation" (p. 35), including child-parent, student-teacher, player-coach, and supervisee-supervisor. Regarding clinical supervision, he suggested the optimal quality of emotional bond falls somewhere between that of student-teacher and patient-therapist. In developing this bond, unique challenges in establishing trust for supervisee-supervisor dyads are posed by the high stakes involved for

supervisees and the fact that supervisors act as gatekeepers to the profession through

evaluation of supervisees (APA, 2014; Cook, McKibben, & Wind, 2018). Establishing

the goals of supervision involves identifying the aims or desired results of the dyad's

work together. Bordin (1983) saw the goals of supervision from the perspective of the

person being supervised involving: skill mastery; an enlarged or deepened understanding

of clients, therapy process, and theory; increased self-awareness—particularly one's

impact on the therapy process; overcoming personal or intellectual obstacles toward

mastery and learning, stimulating research, and maintaining professional standards. The

tasks of supervision are the ways in which the dyad will work together to achieve those

goals.

In connection with the above goals, Bordin (1983) outlined three supervisor tasks.

First, a verbal report is provided from the supervisee on patient sessions, followed by

either feedback from the supervisor on skills or alternative interventions, or a deeper

exploration of the patient's feelings and actions. Second, supervisees provide audio/visual

recordings to allow for both parties to review the actual session material, and not be

limited to the (selective) recall of the trainee. Third, the responsibility for the

identification of target problems and issues on which to focus is largely the responsibility

of the supervisee. The supervisor's role is connecting these issues to the larger goals of

supervision, the goals of that therapy case, and the therapeutic process.

In tandem with the overall lack of research on supervision, supervisory alliance

has not been studied nearly as extensively as the patient-therapist alliance. However,

research that has been done indicates that strong supervisory alliance has been linked to

greater trainee satisfaction in supervision (Ladany, Ellis, & Friedlander, 1999; Sterner,

2009), greater trainee self-efficacy (Efstation, Patton, & Kardash, 1990; Morrison & Lent, 2018), and better trainee-patient relationships (Goodyear, 2014). Factors found to predict stronger supervisory alliance include supervisor multicultural competence (Crockett & Hays, 2015), greater supervisor disclosure (Lehrman-Waterman & Ladany, 1999), more advanced racial identity development of both supervisor and trainee (i.e., stronger ability to value one's own race while simultaneously appreciating and empathizing with the experience of other racial groups; Bhat & Davis, 2007), supervisor and trainee emotional intelligence (Cooper & Ng, 2009), and greater trainee coping resources (Gnilka, Chang, & Dew, 2012). A weak supervisory alliance has been linked to greater role ambiguity and role conflict for trainees (Ladany & Friedlander, 1995), and factors found to predict weaker alliance include nonadherence to ethical guidelines (Ladany, Lehrman-Waterman, Molinaro, & Wolgast, 1999), and greater stress in the lives of trainees (Gnilka, Chang, & Dew, 2012).

Power Dynamics in the Supervisory Alliance

In recent years, a number of researchers have increasingly voiced the need for further consideration of the power dynamics that play out in supervisory relationships (Cook, McKibben, & Wind, 2018; Szymanski, 2003, 2005). The APA's (2014) *Guidelines for Supervision* identify the power differential as "a central factor in the supervisory relationship" (p. 17). Ladany, Ellis, and Friedlander (1999) emphasized fundamental differences between the therapeutic alliance between patients and therapists, and the supervisory alliance that center on themes of power, noting that supervision is not voluntary and involves professional evaluation. Trainees often do not choose their supervisors (Bernard & Goodyear, 2014; Milne, Sheikh, Pattison & Wilkinson, 2006). De

Stefano, Hutman, and Gazzola (2017) point out that unlike patients who can (usually) opt out of treatment, trainees typically do not have the option of discontinuing supervision or switching to a different supervisor when they feel their training needs are not being met. While these qualities touch on the inherent power differential in supervision, Murphy and Wright (2005) noted that rarely is the issue of power explored with much depth.

Interestingly, though much of the supervisory research focuses on the three main alliance components (tasks, goals, and bond) that are common across all change relationships, a closer examination of Bordin (1983) illuminates a distinct vision of the supervisory alliance wherein power dynamics are also central, and empowerment of trainees an essential goal. In fact, he made a number of specific points about the importance of "defusing" (Bordin, 1983, p. 39) what Rioch (1980) called the "up-down factor" in supervision. Bordin identified that one of his earliest concerns in meeting a person whom he would supervise was to "defuse" the up-down factor; a word choice that suggests potential explosiveness in supervisory power dynamics. Bordin (1983) also described "the inescapable tension associated with the status difference between supervisor and supervisee and the cultural and psychic pressures around that difference" (p. 39). The very process of building an alliance, he argued, should counteract this tension. Further, he emphasized at least two additionally important ways to address the power imbalance as a supervisor: mutual establishment of a contract and what might be called alliance-centered evaluations.

In establishing the centrality of a supervisory contract, Bordin (1983) described his own practice with supervisees: aiming for a "relaxed discussion" (p. 39) of his own experience, orientation, and theoretical commitments, as well as the supervisee's clinical

experience, didactic training, prior experience in supervision, expectations, and hopes. Vitally, this discussion would result in a written list of agreed-upon goals for supervision. In the context of such a power-laden relationship, the explicit elucidation of supervisory expectations may put trainees at better ease as boundaries are clarified and the focus of evaluations is previewed. While the mutual establishment of goals is important across change relationships, there are a number of unique factors in supervision that underscore the importance of making these goals clear and explicit. The importance of clarifying supervisory goals stands in contrast to relationships where goals may be more easily assumed, such as coach-player. Unique factors in supervision include the shifting nature of the supervisory alliance, with potentially unclear boundaries verging on therapy, the high personal and professional stakes for trainees, and the gatekeeping and evaluative power of supervisors.) Bordin (1983) also compared and contrasted the boundaries of supervision with therapy, and identified how he managed these boundaries with the people he supervised. For example, if a trainee had personal conflicts in responding to anger directed at them, Bordin would keep the focus on the trainee's therapeutic competence by addressing why either incorporating or overcoming this conflict would facilitate greater effectiveness as a therapist.

From an alliance perspective, Safran and Muran (2006) described the supervisory relationship as "semi-therapeutic," harkening to Bordin's (1983) classification of supervisor-supervisee relationships as somewhere between a teacher-student and therapist-patient relationship. As elucidated above, studies of supervisory alliance have examined a number of positive outcomes associated with good alliance and a number of pitfalls of poor alliance. However, the ramifications of whether a contract is explicitly

identified has not, to this writer's knowledge, yet been examined. The present study will begin this investigation through a single item wherein both trainees and supervisors will indicate whether or not expectations were explicitly discussed or outlined at the onset of supervision.

Balance of Power: The Power Dynamics in Supervision Scale

Even as Bordin's (1983) attention to power differences has been neglected within the supervisory alliance literature, a small but growing body of work has investigated power in supervision from a feminist perspective. A number of such studies have involved semi-structured interviews of small sample sizes (i.e., fewer than 15) of graduate student trainees from academic programs or clinics that are convenient to sample (see, for example, De Stefano, Hutman & Gazzola, 2017; Murphy & Wright, 2005; Nelson & Friedlander, 2001). Participants were voluntary, with the option of opting out at any time. In their meta-synthesis of 15 qualitative studies of supervision, Wilson, Davis, and Weatherhead (2016) found that nine involved power-related themes, and from the trainees' perspective, "the experience and impact of the power differential appeared to be more significant than other aspects of the supervisory relationship" (p. 346). Participants in these studies have overwhelmingly been identified as White. In seven of these nine studies that reported demographic information, 73 participants (91%) were White, and none identified as Black/African American; 51 participants (64%) were female. Thus, these studies offer initial empirical support for the salience of power in supervision but have overwhelmingly been focused on the experience of White, mostly female, graduate students.

Some of these qualitative studies have elaborated the potentially negative impact of power dynamics on the supervisory process, including sexual harassment/contact, verbal attacks, and forcing personal self-disclosure (Bonosky, 1995; Martinez, Davis, & Dahl, 1999; Porter & Vasquez, 1997). These findings were echoed in a larger-scale survey study ($N = 336$) of graduate students in both clinical (46.4%) and non-clinical psychology programs in Canada, wherein Yamada, Cappadocia and Pepler (2014) found that 68 respondents (20.2%) reported experiencing workplace bullying by their current supervisors. Most of these experiences occurred once or twice ($n = 52$, 15.5%) or "sometimes" ($n = 34$, 10.1%) as opposed to "regularly" ($n = 15$, 4.5%).

Other findings suggest the potentially positive use of power in supervision. In semi-structured interviews of 11 trainees, Murphy and Wright (2005) found that even when uncomfortable to them, participants identified that appropriate use of power contributed to their growth. Participants expressed appreciation for the evaluation process as a time to clarify their strengths and weaknesses. However, some supervisees also identified incidents of power misuse, including favoritism, imposition of style, and violation of confidentiality. Thus, power dynamics may contribute both positively and/or negatively to the supervisory relationship and may be an important source of variability in the supervisory alliance. These findings echo the arguments of feminist theories of supervision which emphasize shared power and active empowerment of trainees (Szymanski, 2003; 2005). However, with the exception of Murphy and Wright (2005) and Cook, McKibben, and Wind (2018), feminist-informed studies of supervision have overwhelmingly attended to the potential negative contributions of power dynamics to the supervisory relationship.as opposed to positive effects.

Though most investigations elaborate on the influence of supervisor power, a few authors have suggested that trainees also hold power. Worthington, Tan, and Poulin (2002) found that trainees acknowledged having made statements to others intended to negatively impact the reputation of their supervisors or having gossiped about issues in supervision without identifying such issues to the supervisor. Quarto (2002) found more-experienced supervisees felt more power to influence the direction of supervision than less-experienced supervisees. Murphy and Wright (2005) found that trainees were able to explicitly identify ways in which they held power, including the power to withhold or disclose information. The present study utilized a larger sample than has been included in studies, to date, to investigate ways in which trainees exercise power and feel empowered in supervision.

Building on the qualitative studies discussed thus far, Cook, McKibben, and Wind (2018) published the PDSS, a transtheoretical measure designed to assess trainees' perspectives of power dynamics in recent supervision sessions. Influenced by findings, such as from Murphy and Wright (2005), indicating that power dynamics can contribute both positively and negatively to supervision, the authors did not assume that any particular configuration of power was better than another (e.g., the trainee exerting more power was not more optimal than the supervisor exerting more power or vice versa). Thus, respondents indicated on a sliding scale their agreement with statements indicating either they or their supervisor held more power in the recent session. While Cook, McKibben, and Wind (2018) discuss the total score on this scale as representing some type of "dynamic," the resulting score may be better understood as representing the trainee's perception of where the balance of power lay in the recent session. Although it

was created for clinical rather than research purposes, the PDSS requires further validation, which was one of the goals of the present study. The present study also utilized an adapted version of the PDSS for supervisors and explored the extent to which trainees and supervisors agreed in their assessment of the power balance in supervision, as well as how participants' perceptions of power balance were associated with alliance.

One problem with the PDSS, and generally with many studies of power in supervision, is the lack of a clear theoretical foundation for defining power. In fact, as will be elaborated below, the problem of defining power has existed across specializations in psychology for many decades (Cartwright, 1959; Raven, 2008). Further, many of the qualitative studies utilized by Cook, McKibben, and Wind (2018) to develop the PDSS involved very small convenience samples, with 91% of participants identifying as White, and 64% female, greatly limiting the generalizability of findings. The present study addressed these issues by sampling a much broader and larger group of trainees, with particular emphasis on recruiting graduate students of color, males, and those of minority sexual orientations. Further, the study utilized an adapted version of a widely used measure from social and organizational psychology, the Interpersonal Power Inventory (IPI; Raven & Schwarzwald, 1998) which allowed for convergent validity testing of the PDSS in a diverse sample.

Interpersonal Power Bases in the Supervisory Alliance

Though an understudied variable in the clinical realm, social and organizational psychologists have long grappled with issues related to power. Cartwright (1959) referred to "social power" as a neglected variable in need of elucidation and study. At the research center which he headed at the University of Michigan, investigations into social power

were conducted across a variety of settings (Raven, 2008). These include seminal studies of "social contagion" in children, wherein the actions of one child inadvertently influenced the actions of other children (Lippitt, Polansky, & Rosen, 1952). Others studied the dynamics between Air Force officers and soldiers (Biddle, French, & Moore, 1953), husbands and wives (Blood & Wolfe, 1960), and among psychiatrists, psychologists, and social workers (Zander, Cohen, & Stotland, 1959). Through these efforts, a common definition of social power as the potential to influence others came to prominence. Raven, Schwarzwald, and Koslowsky (1998) summarize that "[s]ocial power can be conceived as the resources one person has available so that he or she can influence another person to do what that person would not have done otherwise" (p. 307).

French and Raven (1959) made advances in the theory of social power (sometimes called interpersonal power) that originally focused on social influence, defined as a change in the belief, attitude, or behavior of one person (the target of influence) resulting from the actions of another person (an influencing agent/power figure). A political candidate winning over a crowd, or a teacher showing a student what they are doing incorrectly in calculating a difficult math problem, or a police officer arresting a criminal, are all examples of social power. Social power was defined as the potential for such change—the ability of the influencing agent to bring about social influence using internal and external resources (Raven, 2008). Sometimes called power tactics (Aiello, Tesi, Pratto, & Pierro, 2017), these resources were further articulated as "bases of power," each differing in the way social change is implemented, the relative permanence of such change, and the ways in which power is maintained (Raven, 2008). Through decades of research and further theorizing, eleven bases of power have been

identified (through qualitative means), categorized into either hard or soft types (Raven,

Schwarzwald, & Koslowsky, 1998; Van Knippenberg, Van Knippenberg, Blaauw, &

Vermunt, 1999). Aiello et al. (2017) summarized that "the harsh-soft dimension refers to

the amount of freedom allowed to a target of power (e.g., subordinate) in choosing

whether or not to comply with the requests prompted by an influencing agent" (p. 37).

Table 1 outlines these 11 power tactics and their methods.

Hard power bases are typically coercive, punitive, and overt (Anderson & Levitt,

2014). Raven (2008) summarizes that in coercion (differentiated between impersonal and

personal), the power figure effects change in the target through the threat of negative

consequences (e.g., termination, demotion) should the target of power fail to comply. An

example in psychotherapy training might be a supervisor ensuring the trainee complete

paperwork in a timely way, relying on either the threat of formal probationary actions

trainee (impersonal coercion), or the threat of the supervisor behaving in a hostile manner

toward the trainee (personal coercion). Reward power, on the other hand, involves the

offering of incentives for compliance. Like coercion, reward power is differentiated into

impersonal (promotions, financial incentives) and personal (approval from the

influencing agent). In legitimate reciprocity, the power figure has previously done

something for the target, and the target is made to feel obligated to return the favor. For

example, a trainee may ask the supervisor to run a psychotherapy group late in the day in

order for the trainee to leave early, and later the supervisor asks the trainee to return the

favor in a way that is inconvenient to the trainee. Finally, in legitimate equity, the

influencing agent requires compliance from the target as compensation for their own hard

work. The use of the term "legitimate" in different types of both hard and soft power

Table 1

French and Raven's 11 Bases of Interpersonal Power

Power Category	Power Base	How power is implemented
Soft	Referent Power	Subordinate identifies with, admires, or wishes to be like the supervisor, and thus complies with directives.
	Expert Power	Subordinate believes the supervisor has superior insight/knowledge about the best behavior under the circumstances.
	Informational Power	Supervisor carefully explains to the subordinate how to do a task differently, with persuasive reasoning which the subordinate comes to understand.
	Legitimate Dependence	Supervisor is in need of assistance or the required behavior change, and subordinate feels socially responsible to comply.
	Legitimate Positions	Subordinate accepts the right of the supervisor to require the changed behavior, and their own obligation to comply.
Hard	Reward Power (Impersonal and Personal)	Supervisor provides positive reinforcement/incentive for compliance with a new/different behavior. Impersonal reward power includes promises like a recommendation letter or better evaluation, and personal reward power involves interpersonal approval from the supervisor.
	Coercive Power (Impersonal and Personal)	Supervisor threatens the subordinate with punishment for non-compliance. Impersonal coercive power includes threat of dismissal or being put on probation, while personal coercive power involves interpersonal disapproval.
	Legitimate Reciprocity	Subordinate is obligated to comply with supervisor's request, after the supervisor has done something positive for the subordinate.
	Legitimate Equity	Supervisor demands compliance to either compensate for their hard work/suffering, or harm inflicted by the subordinate.

bases refers to the way a sense of rightness, or obligation for the target of power to comply with the influencing agent. Terms like "ought" or "should" may signal one or another type of legitimate power base. An example of legitimate equity as a power base would be if a supervisor has made

themselves available to a trainee outside of regular operating hours and asks the trainee to hold a phone call over the weekend or otherwise accommodate the supervisor's schedule.

Soft power bases are more subtle and non-coercive, employ principles of persuasion and attraction, and are typically considered more positive (Elias, 2008; French & Raven, 1959). In legitimate dependence, the influencing agent either needs help in some way or needs the desired change, leaving the target to feel obligated to comply. Here, the influencing agent is depending on the change. For example, a trainee may take on a difficult patient from the supervisor's case load to ease the demands on the supervisor. In legitimate positions, the target either accepts the right of the supervisor to require the change and/or their own duty to comply. For example, a trainee may take on an extra patient beyond the stated expectations for their training at that site, simply because the supervisor "said so." In informational power, the influencing agent effectively explains the reasons that make the desired change necessary and optimal, and the target comes to understand and agree. This might involve a supervisor explaining why one intervention strategy may be better suited for a particular patient than another. In expert power, respect or acknowledgement of the power figure's greater experience, knowledge, or training, is the basis for compliance. For example, a supervisor may simply say that one intervention should be used over another, without explaining why. Finally, in referent power, the target has a positive identification with the influencing

agent and complies with instructions based on admiration and/or a desire to be like the influencing agent. In these instances, the trainee's ambitions to act as the supervisor does is sufficient motivation to follow instructions.

While no studies have examined use of these power bases in clinical supervision, one recent study did explore French and Raven's (1959; Raven, 2008) power theory in the context of the alliance between patients and therapists. Anderson and Levitt (2014) investigated the relationship between 161 master's level counselors' use of hard and soft power, their gender self-confidence, and their perceptions of the working alliance with their patient. These authors pointed out that Bordin (1994) emphasized the importance of mutuality and collaboration in the alliance which suggests non-coercive approaches to change. They also drew on findings from a handful of studies that suggest soft power tactics lead to better relationships in similar professional contexts. For example, Erchul, Raven, and Ray (2001) found that the use of soft power was more effective in helping school psychologists effectively collaborate with teachers who may be initially reluctant to accept the recommendations of the school psychologist. Other studies have indicated that college students respond more positively to professors' use of soft power than hard power (Elias, 2007; Elias & Mace, 2005).

In their study of psychotherapy process, Anderson and Levitt (2014), therefore, predicted that soft power bases would positively predict alliance between therapist and patient, while hard power bases would negatively predict alliance. Consistent with their predictions, soft power was a significant positive predictor of alliance while hard power was a statistically significant negative predictor of alliance in their sample. Notably, 95.7% of therapist participants in this study were White, and demographic information

was not included for patients. Effect sizes were small to moderate ($sr^2 = .21$ for soft power, and $sr^2 = -.23$ for hard power). Thus, there have been a number of findings supporting the positive impact of soft vs. hard power in educational and mental health contexts. Given that power dynamics are likely even more salient in clinical supervision, these predictions may hold true for supervisory alliance as well, perhaps with greater effects. The present study, therefore, hypothesized that soft power bases would positively predict supervisory alliance, while hard power bases would be negatively predictive. The study was also the first to describe what bases of power are frequently used in the supervision of psychotherapy trainees, in a diverse sample.

Alliance and Power Dynamics as Interpersonal Processes

Since Bordin's (1983) elucidation of the working alliance in therapeutic and supervisory dyads, much has been learned about the process of developing and maintaining these types of relationships. Safran, Muran, Stevens, and Rothman (2007) discussed their alliance-focused model of supervision as preparing trainees to navigate and continue to strengthen the alliance with their patients, particularly by addressing ruptures in the alliance. Ruptures (alternatively called strains, tears, or breaches in alliance) are defined as a lack of/breakdown in collaboration, or deterioration of relatedness/communication between therapist and patient (see Safran & Muran, 2000). Safran et al. (2007) explain that resolving ruptures in the supervisory alliance is largely accomplished by the supervisor modeling the types of behaviors required of the trainee therapist with their patients, in the context of supervision.

With the development of relational theory, and the accompanying emphasis on the unique interpersonal patterns that comingle when two people enter into any kind of

relationship, traditional perspectives on the working alliance have come under scrutiny (Safran & Muran, 2000, 2006). While the working alliance finds its roots in classical psychoanalytic theory, which assumed a neutral position for the therapist, relational authors, such as Benjamin (1990), emphasized the subjectivity of the therapist. She further argued that the process of negotiation between two subjectivities was at the heart of therapeutic interactions. Safran and Muran (2000) summarized that "[i]n fact, one might say that the processes of developing and resolving problems in alliance are not the prerequisite to change, but rather the very essence of the change process" (p. 13). They also emphasized that in the development of an alliance, both parties enter into a shared, ongoing negotiation, rather than coming to a potentially superficial or static agreement (called a pseudo-alliance). This distinction between *negotiating* the tasks and goals of therapy and *collaborating* is crucial here, as a therapist may end up colluding with an overly compliant patient, misinterpreting their agreement as a positive alliance and missing a rupture marker (e.g., the patient struggles to say no or otherwise present their needs as part of a negotiation and ultimately feels misunderstood; Safran & Muran, 2006; Samstag & Muran, 2019).

From a relational perspective, both members in a relationship bring their own subjectivity, style, and methods of construal that intersect with each other in complex ways. Samstag and Muran (2019) provide an example in the context of psychotherapy, wherein "a patient's agreement with a therapist could, for instance, mask a subtly defensive, unconscious compliance (e.g., withdrawal rupture)" (p. 8). Such compliance could also rest on the power differential between therapist and patient. One could imagine, for example, several of French and Raven's (1959; Raven, 2008) interpersonal

power bases at play in such a withdrawal rupture. If the patient admired the therapist and complied essentially for the therapist's approval, the hard power tactic of personal reward power would be operant. If the patient, perhaps someone who culturally has difficulty challenging authority, agrees on tasks and goals largely because the therapist "said so," the soft power base of legitimate positions would be at play. If the patient agreed with the therapist mainly due to a positive identification with the therapist and a desire to be like them, then referent power would be the power base in operation. Thus, in theory, power bases interact with unique interpersonal behaviors and styles, to contribute to the alliance in an ongoing, ever-changing, mutually negotiated way. The present study was the first to empirically investigate this potential interaction effect between supervisors and trainees.

A well-established qualitative coding method from psychotherapy research, the Core Conflictual Relationship Theme method (CCRT; Luborsky & Crits-Christoph, 1998) can facilitate systematic analysis of an individual's perceptions of interpersonal interactions between themselves and important others. While originally the CCRT was used to code relational schema as manifest in verbalizations by patients during therapy sessions, Luborsky (1998) later developed the Relationship Anecdote Paradigm (RAP) as a means to elicit narratives outside of therapy. The RAP involves a semi-structured interview wherein participants are asked to provide 10 Relationship Episodes (REs) involving a specific interaction with another person that was either problematic or personally important. The RAP interview has also been adapted for specific research purposes to elicit REs about particular relationships, such as with the participant's mother, father, romantic partner, therapist or patient, and the number of REs have ranged from two to five (Barber, Foltz, DeRubeis, & Landis, 2002; Tishby & Wiseman, 2014,

2017). The present study elicited up to three REs from trainees on their experiences in one current supervisory dyad, providing some descriptions of the quality of supervisory relationships of the trainee sample and help to flesh out the self-report measure responses.

To date, neither supervision nor power has been examined in the CCRT literature, but recent innovations have facilitated the assessment of CCRT themes in relation to working alliance in psychotherapy dyads. The Jerusalem-Haifa psychodynamic psychotherapy studies are the first to use RAP interviews with both patients and therapists to learn about their perceptions of themselves and each other while they are engaged in psychotherapy (Wiseman & Tishby, 2011, 2014, 2017). These investigators have produced a handful of papers investigating the relational themes of client-therapist dyads, with the underlying premise that client-therapist narratives "serve as a window into clients' and therapists' unique relational experiences with each other during the session," (Wiseman & Tishby, 2017, p. 285).

Of particular relevance to the present study, Wiseman and Tishby (2017) examined the impact of both client and therapist CCRT themes (Wishes, Responses of Others, and Responses of Self) on their respective ratings of alliance ruptures and resolution at a university counseling center with a psychodynamic orientation. This study involved 67 clients nested within 27 therapists: the clients were primarily Israeli undergraduate students diagnosed with either mild depression and/or anxiety, and presenting with challenges in academics, relationships or identity formation. REs were collected using RAP interviews at three predetermined time points through the course of treatment: early phase (after session 5), middle phase (after session 15), and later phase (after session 28). Single items on the Post-Session Questionnaire (PSQ; Muran, Safran,

Samstag, & Winston, 1991) were used to assess ruptures and resolution in the therapeutic

relationship. Muran et al. (2009) found that lower rupture intensity and higher resolution

positively correlated with alliance ratings.

Wiseman and Tishby's (2017) results involved a number of significant

correlations between CCRT themes and rupture and resolution ratings. However, for both

patients and therapists, the RO (Response of Other) scales were the only consistent

predictors of rupture and resolution ratings across all time points. To facilitate their

analysis, the authors divided ROs into positive (strong, helpful, likes me, understanding),

and negative (controlling, upset, bad, rejecting and opposing). For patients, negative ROs

were associated with greater tension in session at the early phase of treatment ($r =$

$.44, p < .05$), greater problems in session at both the middle phase ($r = .37, p < .01$), and

late phase ($r = .29, p < .05$). For therapists, negative ROs were associated with more

reports of ruptures in both early sessions ($r = .32, p < .01$) and middle phase sessions ($r =$

$.27, p < .05$). In late phase sessions, therapists' negative ROs were associated with greater

tension in session ($r = .39, p < .05$).

In another study of CCRT themes and alliance in therapy, Zilcha-Mano,

McCarthy, Dinger, and Barber (2014) utilized the Central Relationship Questionnaire

(CRQ; Barber, Foltz, & Weinryb, 1998), an alternative, self-report method for surveying

participants' CCRT themes, to assess the relational patterns of 134 patients in a

randomized control trial for depression. Participants filled out separate CRQs for their

mother, father, same-sex best friend, and romantic partner. The RO themes were then

examined as a measure of patients' representations of others to see if they were predictive

of alliance ratings with their therapists. Overall effect sizes were moderate to large,

wherein total variance in alliance explained by ROs generally increased over the course of therapy, starting at 32% (at intake) and peaking at 54% (at week 8). Hurtful ROs with parents were significant negative predictors of patient-rated alliance, while independent ROs with fathers and romantic partners, and loving ROs from mothers and romantic partners were positive predictors. Submissive ROs were not predictive of alliance. Drawing from these findings, it was hypothesized in the present study that positive ROs would moderate the relationship between hard power and supervisory alliance, such that as positive ROs increase, the negative impact of hard power on alliance would decrease. It was further hypothesized that negative ROs would moderate the relationship between soft power and supervisory alliance, such that as negative ROs increase, the positive impact of soft power on alliance would decrease.

Most studies of CCRT assume that the relational themes which emerge in an individual's REs reflect either the person's central internal conflicts, relational schema, or typical methods of interpersonal construal. Thus, the ROs about problematic/worst experiences in supervision provided by participants in the present study may represent a characteristic way that each trainee experiences others (perhaps powerful/authority figures in particular) rather than an account of the supervisor's actual behavior. However, as Safran, Muran, and Proskurov (2009) point out regarding the alliance in therapy, which is extended to the supervisory alliance in this study, ruptures "provide the therapist with an opportunity to explore patients' expectations and beliefs that constitute their core dysfunctional interpersonal schema, since they often emerge when the therapist unwittingly participants in maladaptive cycles," (p. 211). Thus, even if ROs better represent the biased construal of trainees rather than how the supervisor actually behaved,

a report of negative ROs from the supervisor would likely represent the trainee's

perception of the failure of the supervisor to adequately attend to the trainee's experience

of the alliance and make a positive intervention contributing to resolution.

Sociocultural Factors in Alliance and Power

The *Guidelines for Supervision* emphasize the essential importance of diversity-

related concerns in supervision: "Supervisors are encouraged to infuse diversity into all

aspects of clinical practice and supervision, including attention to oppression and

privilege and the impact of those on the power differential, relationship, and on

client/patient and supervisee interactions and supervision interactions," (APA, 2014, p.

15). These issues are particularly salient given the underrepresentation of minority groups

in psychology and psychology graduate programs: Callahan et al. (2018) found that while

no differences existed among academic qualifications, Black/African Americans,

Hispanics/Latinx, and individuals with disabilities are generally underrepresented in

graduate programs as compared to the larger population of the U.S. Averaging data from

graduate programs in 2005-2010 and comparing to U.S. census data of 2010, Callahan et

al. (2018) found that while those identifying as Hispanic/Latinx comprised 16.3% of the

population, they comprised only 10.75% of psychology graduate students. Similarly,

while those identifying as Black/African American made up 12.6% of the population,

they represented only 7.08% of psychology graduate students[1].

All non-White groups are generally underrepresented among those established in

the field. While in 2010, White, non-Hispanic individuals comprised 63.7% of the

population, (Callahan et al., 2018), 83.6% of active psychologists identified as White

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[1] Asian Americans, American Indian/Native Alaskan, Native Hawaiian/Pacific Islander, and multiracial groups were more closely proportionate to the U.S. census data.

(APA, 2015). Callahan et al. (2018) suggest that, according to the data, "the White majority that is emerging in the workforce will join an even greater prevalence of White psychologists already in the workforce, thereby widening the gap between the psychology workforce and the commensurate U.S. population in the coming decades," (p. 278). The authors identify issues at the point of admission, as well as shortcomings in retention, as contributors to such discrepancies. Thus, recruitment and retention for ethnic and racial minorities, as well as other underrepresented groups in the field, is a central concern for training programs. The present study aimed to include a more representative sample of trainees, as disparities in race, as well as sexual orientation or gender are likely to impact power dynamics in supervisory relationships. It may be the case, for example, that the complexities and potential negative impact of the power differential in the supervisory alliance are even greater for racial or sexual minorities.

Given that supervision is a central component of training, the impact of diversity-related concerns in supervision has been examined in a number of studies of power and alliance in supervision. Gender has perhaps been the sociocultural variable most examined in such studies[2]. In their sample of 40 trainees and 40 supervisors (both equally divided between men and women), Nelson and Holloway (1990) found that the inherent power differential in supervision can be exacerbated by gender dynamics. To account for problems in response bias, this observational study used transcripts of actual supervision sessions for students in master's level counseling programs. Independent coders

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[2] While important critiques have been made regarding the binary operationalization of gender, no studies of supervision or clinical training more broadly have yet been able to establish a sufficient sample size of participants identifying outside of the male/female dichotomy. Thus, the present study utilized the same method as prior studies in asking participants to identify as male, female, or other, with the expectation that those identifying as "other" will represent a very small percentage of the sample.

evaluated both manifest (explicit) and latent (implicit) communications within supervisor-trainee dyads. Transcripts were divided into a series of single "communicative acts," according to the Penman (1980) classification scheme which assesses verbal behavior on two dimensions: power and involvement. These two dimensions are superimposed on each other, resulting in a number of bidimensional categories (such as control, initiate, abstain, oblige, and submit). The most extreme of these categories are then clustered into three groups: high power, low power, and high involvement. Results indicated that supervisors of female trainees were "significantly less likely than supervisors with male trainees to respond to a trainee high-power message with a low-power message. Female trainees were significantly less likely than male trainees to respond to a supervisor low-power message with a high-power message," (p. 477). In other words, the results of Nelson and Holloway (1990) suggest that supervisors were more likely to acquiesce to male trainees, and female trainees were less likely to assert themselves in conditions where supervisors were either open to their self-assertion, or perhaps even inviting it.

Gender-related events have also been linked to variations in supervisory alliance. In a relatively large qualitative study involving 81 trainee participants, Bertsch et al. (2014) found that problematic gender-related events (involving any combination of supervisor, trainee, and/or client) explained 18% of variability in supervisory working alliance ($p = .019$). Specifically, supervisor gender discrimination against the trainee was a significant negative predictor of alliance. Still, only 13 men participated in this study, and sexual orientation was not assessed. The present study aimed for greater

representation of males (minorities in most mental health fields) in order to further examine interactions with sexual orientation.

Supervisor gender, and the interaction of supervisor gender and trainee gender, has also been shown to impact experiences in supervision. In the aforementioned study of workplace bullying in Canadian psychology graduate programs, Yamada, Cappadocia, and Pepler (2014) found that students with female supervisors reported significantly more frequent experiences of bullying. Further, within the group with female supervisors, female students reported more experiences being bullied than their male counterparts. Results indicating greater bullying behaviors by female supervisors were consistent with other research on workplace bullying in various domains, wherein individuals with female managers/supervisors have been found to report more bullying behavior (Namie, 2007; Namie, 2008; Quine, 1999). In keeping with other authors, Yamada, Cappadocia, and Pepler (2014) assert that in the supervision of graduate students, as in elsewhere, women tend to perpetuate workplace bullying more than men. This is one possible explanation. However, researchers in workplace bullying seem to fail to consider that women in positions of power may also be victims of discrimination/gender bias, including by the people they manage/supervise, for being assertive or otherwise using power which may be more readily accepted from male managers/supervisors. Whether the same behaviors are perceived differently depending on supervisor gender has yet to be investigated in the workplace bullying literature. Still, findings such as these point to the need to assess gender of both trainees and supervisors, as an expression of the need to consider how power and privilege can operate simultaneously on multiple levels.

In an article addressing both theory and personal experience, Hernández and McDowell (2010) further elaborated on the intersecting identities of trainee and supervisor, and the potential for discrimination or identity marginalization in either direction. The authors discussed, primarily from the perspective of supervisors of color, "the ways in which ethnicity intersects with other diversity dimensions to shape dynamics of privilege and oppression within the supervisory context," (p. 29). Utilizing an intersubjectivist lens, these authors argue that the multiple social identities (involving factors such as ethnicity, class, sexual orientation, ability, nation of origin, and gender) of both supervisor and supervisee intermingle and relate across various interactions and contexts. Acknowledging the power differential expressed in supervisory evaluations, Hernández and McDowell (2010) emphasize the "social and cultural capital," (p. 32) that each party brings to the supervisory dyad by virtue of their own privileged status(es). They provide examples both where a trainee was demeaned and harassed by his supervisory for being gay, and another involving a trainee misusing the power imbued in them by their Whiteness, against a supervisor of color, a scholar with over 20 years of experience. Quoting from their source material, Taylor et al. (2007):

> I was supervising a White upper-middle class woman and I had questions
> about what she was doing with this multiracial couple, and she was
> dealing with it in a very . . . you know, not following through on what I
> had suggested she do and when I challenged her, she would flip it around,
> she would kind of talk to me about my insecurity. And what was that
> about? So it was very interesting because she was a White woman and a
> very wealthy woman and I thought she was using her White privilege and

her class privilege to put me in a position, like, wait a minute, my

insecurity? How is this working, here? So that was difficult too, that was

very hard (p. 94).

These layered experiences and study findings point to the likely salience of

sociocultural factors to variability in alliance or power-related supervisory themes. Thus,

the present study examined gender identity, racial identity, Latinx identity, and sexual

orientation of both supervisors and trainees as exploratory analyses, while also

investigating trainee by supervisor interactions on these variables. Given the

underrepresentation of these groups in the field (Callahan et al. 2018), the present study

made particular efforts to recruit participants who fall into one or more minority identities

within these categories in order for the results to be generalized to these groups.

CHAPTER III

Statement of the Problem

Clinical supervision is a central component of psychotherapy training, but an understudied area in the literature (Falender, 2014). It was not until the publication of the APA's (2014) *Guidelines for Supervision* that any professional organization associated with mental health officially outlined any specific policies or guidelines for supervision. Drawing from the literature that does exist, the *Guidelines for Supervision* emphasize the supervisory relationship as the most central aspect of supervision (APA, 2014). Much of the supervision literature has centered on this relationship (Holloway, 1995). Drawing from Bordin's (1983) theorizing and reflections on supervision, the supervisory alliance is the most commonly operationalized component of the relationship (Tangen & Borders, 2016). As outlined in the literature review, a strong alliance has been linked with a number of positive outcomes and predictors, while a weak alliance has been linked with negative outcomes and predictors (see, also Ladany, 2004 for a summary).

An increasing number of authors have pointed to the need to better understand the impact of power dynamics on the supervisory relationship and process (Cook, McKibben, & Wind, 2018; Murphy & Wright, 2005). The *Guidelines for Supervision* (APA, 2014) also emphasize the centrality of the power differential. Supervisors provide evaluation, act as gatekeepers to the profession (Falender, 2014), and are assumed to have greater expertise or experience than trainees. Unlike patients, who may opt out of treatment, trainees typically do not have the option of discontinuing supervision (De Stefano, Hutman, & Gazzola, 2017). Though issues related to power have been given increased attention in the supervision literature, Murphy and Wright (2005) noted that rarely is the

issue of power explored with much depth, reflecting a current gap in the research on supervisory relationships.

A closer examination of Bordin's (1983) conceptualization of the supervisory alliance reveals a largely unappreciated emphasis on "defusing" (p. 39) tension and pressures associated with the power differential. Toward that end, he advocated for explicitly identifying goals and expectations from the outset of supervision. The present study was the first to assess whether explicit identification of goals at the outset of supervision contributed to supervisory working alliance and perceived balance of power.

A small but growing body of literature on power-related themes in supervision has underscored the salience of power dynamics and challenged a unidirectional model of power being exercised by the supervisor on the trainee. These studies have illuminated ways in which trainees can exercise power toward their supervisors. Worthington, Tan, and Poulin (2002) found that trainees admitted making statements to others intended to negatively impact the reputation of their supervisors or having gossiped about issues in supervision without identifying those issues to the supervisor. Quarto (2002) found more supervisees with more experience providing psychotherapy felt more power to influence supervision than the less experienced supervisees. Murphy and Wright (2005) found trainees themselves identified having the power to withhold or disclose information. Such studies offer intriguing results about the bi-directional nature of power in the supervisory relationship but have typically involved semi-structured interviews of small convenience samples. Further, in Wilson, Davis, and Whitehead's (2016) meta-synthesis of qualitative studies of power in supervision, participants across studies were 91% White, and 64% female, greatly limiting the generalizability of findings. Sexual orientation has

yet to be examined. The current study utilized a comparatively larger, national sample and aimed to recruit trainee participants who identified as racial minorities, Latinx, male, or sexual minorities to investigate power dynamics as a bidirectional process.

Building on the qualitative studies discussed above, Cook, McKibben, and Wind (2018) published the Power Dynamics in Supervision Scale (PDSS), a transtheoretical measure meant to assess trainees' perspectives of the balance of power in recent supervision sessions. In initial testing, this measure has demonstrated good reliability, but it is in need of further validation; this was another goal of the present study. While the PDSS was not created for research purposes, the present study utilized an adapted version of the PDSS for supervisors, to explore whether trainees and supervisors tend to converge or diverge on their perceptions of power balance, as well as how their perceptions of power balance were associated with alliance.

One concern with the PDSS, as with many studies or discussions of power in supervision, is the lack of a clear theoretical foundation for defining power. The current study further addressed this issue through the use of a widely used measure from social and organizational psychology, the Interpersonal Power Inventory (IPI; Raven, Schwarzwald, & Koslowsky, 1998). This measure more explicitly operationalized the use of power in supervision and more firmly established the relationship between power and supervisory alliance. The IPI is based on French and Raven's (1959; Raven, 2008) theoretical contributions to the understanding of power as the potential for one person (influencer) to influence another (target). This measure was included to facilitate concurrent validity testing of the PDSS.

The working alliance remains a widely agreed upon construct that is central to any change relationship (Horvath, Del Re, Flückinger, & Symonds, 2011). However, contemporary developments in relational theory, with increased emphasis on mutual negotiation between two subjectivities, add greater complexity to alliance models (Safran & Muran, 2000). Both members of any dyadic relationship bring their own response style and methods of construal which intersect with each other in complex ways. The present study utilized a well-established method for coding qualitative data from psychotherapy research, the CCRT (Luborsky & Crits-Christoph, 1998) to facilitate systematic investigation of trainees' perspectives of supervisory response style. This qualitative methodology was conducted in the same "ground-up" spirit as other studies of power in supervision (i.e., allowing theory to be synthesized organically from the words of trainees themselves), while utilizing a national sample through online recruitment.

Finally, the *Guidelines for Supervision* (APA, 2014) have emphasized the importance of attention to diversity-related concerns regarding power dynamics and the supervisory relationship. A number of studies have investigated the impact of diversity issues on supervision. Gender is perhaps the most commonly researched sociocultural variable in the literature on power and alliance in supervision. Nelson and Holloway (1990) found that gender dynamics can exacerbate the power differential; in particular, supervisors of both genders were more likely to acquiesce to male trainees, and female trainees were less likely to assert themselves in conditions where supervisors were either open to, or even inviting self-assertion. Bertsch et al. (2014) found that a supervisor's gender discrimination against the trainee was a significant negative predictor of supervisory alliance, and problematic gender-related events predicted 18% of variance in

alliance. Yamada, Cappadocia, and Pepler (2014) found that graduate psychology students (clinical and non-clinical) with female supervisors reported significantly more bullying experiences than students with male supervisors. Further, within the female supervisor group, female students reported being bullied more frequently than their male counterparts. These studies point to the salience of gender, and potentially other sociocultural variables, in power dynamics and alliance in clinical supervision. The current study, therefore, investigated gender identity, and gender interactions between trainee and supervisor, in exploratory analyses of power and alliance in supervision.

Hernández and McDowell (2010) pointed out the salience of marginalized statuses for both trainees and supervisors, and the potential for discrimination or identity marginalization in either direction. For example, supervisors of color may experience power misuse at the hands of trainees with White privilege. The present study, therefore, also investigated race, Latinx identity, and sexual orientation in exploratory analyses. Given the underrepresentation of men, people of color, Latinx individuals, and sexual minorities in both the supervision literature and in the field (Callahan et al., 2018), the present study made efforts to recruit trainee participants who fell into one or more of these categories.

Variable List

Independent Variables

Power Bases. Bases of power were measured using an adapted version of the Interpersonal Power Inventory (IPI; Raven, Schwarzwald, & Koslowsky, 1998), which assessed both trainees' and supervisors' ratings of the likelihood they would comply with the other member of the supervisory dyad asking them to behave differently, according to

each of the eleven power bases. Sum scores were then calculated for two operational variables: Hard Power (Reward – Impersonal, Reward – Personal, Coercive – Impersonal, Coercive – Personal, Legitimate Reciprocity, and Legitimate Equity), and Soft Power (Referent, Expert, Informational, Legitimate Dependence, and Legitimate Positions). Higher scores indicated stronger presence of either hard or soft power bases.

Dependent Variables

Supervisory Alliance. The supervisory working alliance was assessed using the Working Alliance Inventory – Supervision Form (WAI/S; Bahrick, 1989), for both trainees and supervisors. The WAI/S is continuously scaled and results in both a total score for overall perception of the working alliance (agreement on the tasks and goals of supervision, as well as the emotional bond), and a composite score on a subscale measuring agreement on goals. Higher scores on the total score indicated the perception of stronger alliance, and on the subscale, a stronger agreement on the goals of supervision.

Power Balance. Power balance was measured using the PDSS (Cook, McKibben & Wind, 2018) wherein both trainees and supervisors rated their perceptions of power on a visual analog scale, resulting in a mean score on the continuum of trainee-supervisory power; a low score represents more power possessed by the trainee (High Trainee Power, HTP) and a high score represents more power possessed by the supervisor (High Supervisor Power, HSP).

Proposed Moderator Variables

Supervisor Response Styles. Supervisor response style (ROs) was assessed through coding of up to three written RAP REs (Luborsky, 1998) by trainees involving

their supervisor. Drawing from the method of Wiseman and Tishby (2017), coded REs resulted in a total score for both positive response style (positive ROs) and negative response style (negative ROs).

Potential Covariate

Type of Graduate Program. The trainee's graduate program was assessed in a forced-choice response form, indicating their current academic program as either at the master's or doctoral level.

Exploratory Variables

Gender Identity. Trainees and supervisors were asked to identify the gender category with which they most identified (man, woman, non-binary/gender queer, or prefer not to respond). Trainees were also asked to identify their supervisor's gender (speculating, if they were not sure). All participants were also given the option to indicate they preferred not to respond.

Racial Identity. Trainees and supervisors were asked to identify their racial identity, measured as a categorical variable (Black/African American, White/Caucasian/European American, Asian/Asian American, Native American, or other with the option to write out their racial identity). Trainees were also asked to identify their supervisor's race (speculating, if they were not sure). Any participants who selected more than one racial identity were coded as biracial/multiracial in the analyses. All participants were also given the option to indicate they preferred not to respond.

Latinx Identity. Trainees and supervisors were asked to identify whether they identified as Latinx, measured as a dichotomous categorical variable (yes/no). Trainees

were also asked to identify their supervisor's race (speculating, if they were not sure). All participants were also given the option to indicate they preferred not to respond.

Sexual Orientation. Trainees and supervisors were asked to identify their sexual orientation, measured as a categorical variable (gay/lesbian/homosexual, bisexual, pansexual, heterosexual, or other, with the option to write in their identity status). Trainees were also asked to identify their supervisor's sexual orientation (speculating if they were not sure). All participants were also given the option to indicate they preferred not to respond.

Theoretical Orientation. Both trainees and supervisors were asked to identify the theoretical orientation with which they most identified as a clinician (Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, Psychodynamic, Existential/Humanistic, or other, with the option to write in a response). To account for trainees who opted not to have their supervisor invited to participate in the study, they were asked to identify their supervisor's theoretical orientation. All participants were also given the option to indicate they preferred not to respond.

Hypotheses

In a sample of psychotherapy trainees and their supervisors, it was hypothesized that:

1. Trainees' perceptions of the use of: (a) hard power bases will be positively associated with trainees' perceptions of high supervisor power; (b) soft power bases will be positively associated with trainees' perceptions of high trainee power; (c) hard power bases will be positively associated with supervisors'

perceptions of high supervisor power; and (d) soft power bases will be positively associated with supervisors' perceptions of high supervisor power.

2. As rated by trainees, (a) there will be a significant negative effect of supervisors' use of hard power on the supervisory alliance; (b) there will be a significant positive effect of supervisors' use of soft power on the supervisory alliance; (c) the relationship between hard power and alliance will be moderated by positive ROs by the supervisor, such that the main effect of hard power on alliance will be lessened as positive ROs increase; and (d) the relationship between soft power and alliance will be moderated by negative ROs by the supervisor, such that the main effect of soft power on alliance will be lessened as negative ROs increase.

3. As rated by trainees, positive ROs by the supervisor will be (a) positively associated with supervisory alliance; (b) negatively associated with the supervisors' use of hard power; (c) positively associated with the supervisors' use of soft power; and (d) negatively associated with high supervisor power on the PDSS. Conversely, negative ROs by the supervisor will be (e) negatively associated with supervisory alliance; (f) positively associated with supervisors' use of hard power; (g) negatively associated with supervisors' use of soft power; and (h) positively associated with high supervisor power on the PDSS.

Exploratory Questions

1. As rated by trainees, does the explicit identification of goals for supervision predict (a) supervisory alliance, or (b) power balance?

2. As rated by trainees, are there meaningful differences in supervisory alliance depending on whether there has been explicit discussion of the supervisor's (a)

gender identity, (b) racial identity, (c) Latinx identity, (d) sexual orientation, or (e) theoretical orientation?

3. (a) What bases of power are most frequently used in clinical supervision, and (b) how do each of these bases of power relate to supervisory alliance?

4. How do the ratings of supervisors and trainees compare on (a) supervisory alliance and alliance subscales, (b) supervisors' use of hard power, (c) supervisors' use of soft power, and (d) power balance?

5. Does either the trainee's or supervisor's gender identity predict differences in trainee ratings of (a) supervisory alliance, (b) supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance? Further, does the gender composition of the supervisory dyad (female-female, female-male, male-male, male-female) predict trainee ratings of (e) supervisory alliance, (f) the supervisors' use of hard power, (g) supervisors' use of soft power, or (h) power balance?

6. Does either the trainee's or supervisor's racial identity predict differences in trainee ratings of (a) supervisory alliance, (b) supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance? Further, does the racial composition of the supervisory dyad (matched or unmatched) predict trainee ratings of (e) supervisory alliance, (f) the supervisors' use of hard power, (g) supervisors' use of soft power, or (h) power balance?

7. Does either the trainee's or supervisor's Latinx identity predict differences in trainee ratings of (a) supervisory alliance, (b) supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance? Further, does the

composition of Latinx identity of the supervisory dyad (matched or unmatched) predict trainee ratings of (e) supervisory alliance, (f) the supervisors' use of hard power, (g) supervisors' use of soft power, or (h) power balance?

8. Does either the trainee's or supervisor's sexual orientation predict differences in trainee ratings of (a) supervisory alliance, (b) supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance? Further, does the composition of sexual orientation of the supervisory dyad (LGBQ-LGBQ, LGBQ-heterosexual, heterosexual-LGBQ, or heterosexual-heterosexual) predict trainee ratings of (e) supervisory alliance, (f) the supervisors' use of hard power, (g) supervisors' use of soft power, or (h) power balance?

9. Do trainees with supervisors of different theoretical orientations exhibit differences in their ratings of (a) supervisory alliance, (b) supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance?

CHAPTER IV

Method

Participants

This online study utilized data from two types of participants from the United States and Canada: $N = 311$ therapists in training (hereafter referred to as trainees), and $N = 20$ of their supervisors. To participate, trainees needed to be actively enrolled in a psychology graduate program (either master's or doctoral level) of any clinical discipline (psychology, counseling, social work, etc.), or be involved in post-graduate training (i.e., a postdoctoral position). They needed to be currently practicing individual psychotherapy under the direction of an individual supervisor with whom they met approximately once per week. Supervisors needed to possess a graduate degree and a clinical license in order to be eligible to participate in the study. Both trainees and supervisors signed informed consent forms (see Appendix A) before completing any measures.

Trainees

While 421 trainees completed the survey between January 27, 2020 and March 15, 2020, a number were excluded from analysis: 31 did not complete any self-report measures, 35 completed fewer than half of the self-report measures, 2 utilized the same IP address in a very short time-frame (suggesting the same participant completed the survey twice), and 42 reported either zero hours of experience providing individual psychotherapy, or said "not applicable" or "unsure." After removing these participants' data, 311 trainee participants remained to be included in data analyses, as were their descriptive ratings of supervisors. The ages of trainees ranged from 21 to 54 years ($M = 28.41$, $SD = 4.47$) and the mean hours of individual therapy provided was 442.13 ($SD = $

706.81). In general, the sample was largely White, female, heterosexual, and did not identify as Latinx. Additional demographic information for the trainee sample is presented in Table 2.

Supervisors

Far fewer trainees agreed to provide their supervisor's contact information than expected. In fact, of the original 421 trainees recruited, only 47 (11.2%) consented to have their supervisors contacted. Of the 47 supervisors contacted, 20 supervisors provided responses to the survey. Thus, the present study utilized two samples for analyses: the larger sample of trainees ($N = 311$), and a subset of matched pair trainees and their supervisors ($n = 20$). The supervisor sample was split along gender lines, and primarily White, heterosexual, and did not identify as Latinx. Demographic information for the matched pair subsample is presented in Table 3. These demographic data were compared to the larger trainee sample ($N = 311$), and no statistically significant differences were found.

Additionally, whether or not trainees consented to having their supervisor contacted, in line with prior research (Bhat & Davis, 2007; Yamada, Cappadocia, & Pepler, 2014), trainees were asked for basic demographic information on their supervisors. Measures also asked whether these demographic factors had been discussed explicitly with the supervisor. In this way, demographic information was collected for the supervisors of all trainee participants, based on trainees' knowledge or speculation about their supervisors[3].

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[3] Trainees' accuracy in predicting demographic information of their supervisors was assessed and further discussion of this issue can be found in Appendix E.

Table 2

Demographics of Trainee Sample (N = 311)

	n	Percentage
Gender Identity[a]		
Female	241	77.5
Male	62	19.9
Non-binary/Gender queer	6	1.9
Prefer not to respond/Unsure	2	0.6
Race		
Black/African American	28	9.0
White	214	68.8
Asian/Asian American	41	13.2
Native American	3	1.0
Middle Eastern	6	1.9
Biracial/Multiracial	15	4.8
Prefer not to respond/Unsure	4	1.3
Latinx/Hispanic		
Yes	35	11.3
No	273	87.8
Prefer not to respond/Unsure	3	1.0
Sexual Orientation		
Heterosexual	215	69.1
Lesbian/Gay	30	9.6
Bisexual	44	14.1
Pansexual	10	3.2
Asexual	3	1.0
Queer (other)	6	1.9
Other (unspecified)	3	1.0
Prefer not to respond/Unsure	0	0.0
Theoretical Orientation		
Cognitive Behavioral	127	40.8
Dialectical Behavioral	13	4.2
Psychodynamic	78	25.1
Existential/Humanistic	39	12.5
Integrative	6	1.9
Other	45	14.5
Unspecified	3	1.0

	n	Percentage
Program Type		
Master's	68	21.9
Doctorate	243	78.1
Field of Study		
Clinical Psychology	142	45.7
School Psychology	15	4.8
Counseling Psychology	49	15.7
Social Work	17	5.5
Marriage & Family Therapy	3	1.0
Combined Type	12	3.9
Unspecified	73	23.5
Year in Academic Program		
First	43	13.8
Second	111	35.7
Third	60	19.3
Fourth	50	16.1
Fifth	26	8.4
Sixth and above	21	6.8

[a]Participants were asked for transgender status, but only two identified as such. Due to lack of adequate sample size, transgender status was not used in analyses.

Table 3

Demographics of Matched Pairs Subsample (n = 20)

	Trainees		Supervisors	
	Mean *(SD)*	***n* (%)**	**Mean *(SD)***	***n* (%)**
Gender Identity[a]				
Female		17 (85%)		10 (50%)
Male		3 (15%)		9 (45%)
Non-binary/Gender queer		0		0
Prefer not to respond/Unsure		0		1 (5%)
Race				
Black/African American		2 (10%)		0
White		17 (85%)		18 (90%)
Asian/Asian American		0		0
Native American		0		0
Middle Eastern		1 (5%)		0
Biracial/Multiracial		0		1 (5%)
Prefer not to respond/Unsure		0		1 (5%)
Latinx/Hispanic				
Yes		3 (15%)		3 (15%)
No		17 (85%)		17 (85%)
Prefer not to respond/Unsure		0		0
Sexual Orientation				
Heterosexual		14 (70%)		14 (70%)
Lesbian/Gay		5 (25%)		4 (20%)
Bisexual		0		1 (5%)
Pansexual		1 (5%)		1 (5%)
Prefer not to respond/Unsure		0		0
Field of Study				
Clinical Psychology		10 (50%)		16 (80%)
School Psychology		0		1 (5%)
Counseling		1 (5%)		1 (5%)
Social Work		0		0
Marriage & Family Therapy		0		1 (5%)
Combined		0		0
Unspecified		9 (45%)		1 (5%)

	Trainees		Supervisors	
	Mean *(SD)*	***n* (%)**	**Mean *(SD)***	***n* (%)**
Theoretical Orientation				
Cognitive Behavioral		7 (35%)		6 (30%)
Dialectical Behavioral		1 (5%)		0
Psychodynamic		10 (50%)		10 (50%)
Existential/Humanistic		1 (5%)		2 (10%)
Integrative		0		2 (10%)
Other		1 (5%)		0
Program Type				
Master's		2 (10%)		
Doctorate		28 (90%)		
Year in Academic Program				
First		1 (5%)		
Second		7 (35%)		
Third		7 (35%)		
Fourth		4 (20%)		
Fifth		0		
Sixth and above		1 (5%)		
Age	29.10 *(3.88)*		46.22 *(13.85)*	
Hours of Individual Therapy Provided	561.25 *(695.36)*			
Years of Experience Providing Psychotherapy (*n* = 19)			18.45 *(10.61)*	
Number of Supervisees throughout Career (*n* = 19)			31 *(31.02)*	

Note. M = mean; *SD* = standard deviation.

[a]Participants were asked for transgender status, but only 2 identified as such. Due to lack of adequate sample size, transgender status was not used in analyses.

Judges

One free response measure, the Relationship Anecdote Paradigm, was coded by trained judges using the Edition 3 CCRT Coding System (Barber, Crits-Christoph, & Luborsky, 1998). Three graduate students in clinical psychology (including the primary investigator) as well as one professor (a licensed clinical psychologist) served as judges. All of the judges were White. The professor identified as female, two of the students identified as female, and one as male.

Recruitment

As this was a study of the sensitive topic of power dynamics in ongoing supervisory relationships, only trainees (not supervisors) were recruited and invited to participate in a first step in the procedure. Trainee participants were then asked within the survey whether they would consent to having their supervisors participate, with the understanding that both participants' data would be kept confidential. Master's level and doctoral programs, as well as internship sites were identified in clinical and school psychology, counseling, social work, and marriage and family therapy using directories from the Association for Psychology Postdoctoral and Internship Centers (APPIC), the Council on Counseling and Counseling Related Educational Programs (CACREP), and the National Association of Deans and Directors for Schools of Social Work (NADD). Training directors were asked to share a recruitment email seeking trainee participation in the study. The recruitment email was also posted on listservs of graduate students in relevant programs. Outreach materials emphasized a desire to recruit students with diverse racial and sexual identities, as well as those who identified as men, noting that they have been underrepresented in the training literature.

Trainee participants who consented to have their supervisors contacted were asked for an email address for their supervisor, as well as their own first name and last initial (i.e., Jane D.) so their supervisor would know which supervisory relationship they were being asked about. Supervisors were then emailed individually and invited to participate. They were then provided the supervisor study weblink as well as a unique identification number to enter in the survey. Once the supervisor completed the survey, their identification numbers were matched with that of their supervisee, and all records of identifying information (email addresses and names) were destroyed. Supervisors who did not complete the survey received a second outreach email around two weeks after the first email, asking them again for their participation. No further contact was made after the second email reminder.

Measures

After demographic information was collected, measures were presented in random order to control for order effects (see Appendix C for all trainee measures used in the present study, and Appendix D for all supervisor measures).

Power Dynamics in Supervision Scale (PDSS; Cook, McKibben, & Wind, 2018)

To assess perceptions of power dynamics in the supervisory relationship, operationalized in this study as power balance, trainees filled out the PDSS-T (PDSS-trainee Version). Supervisors also completed an adapted Version, the PDSS-S (PDSS-supervision Version). The measures are 16 items, resulting in a mean score, measured using a visual analog scale (VAS) containing two dichotomous statements on opposite ends of a continuum. An example item in the trainee version states, "I decided which interventions will be used with my client(s) in this supervision session," versus "My

supervisor decided which interventions will be used with my client(s) in this supervision session." Participants choose a point on the continuum where the left anchor represents power held by the training (scored most extremely at a 1) and the right anchor represents power held by the supervisor (scored most extremely at a 4). They also had the option to choose 'not applicable' (treated as a missing item in data analysis). In their factor analysis, Cook, McKibben, and Wind (2018) reported the reliability of separation statistic (*Rel*) was 0.91, χ^2 (266) = 2,457.0, *p*<.001. Cronbach's alpha for their sample was .929 (R. Cook, personal communication, October 1, 2018). Reliability for the overall trainee sample in this study was strong, as α = .90. For the smaller subset of matched pairs, α = .62 for supervisors and α = .97 for trainees.

Interpersonal Power Inventory (IPI; Raven, Schwarzwald, & Koslowsky, 1998)

The IPI asks participants who are either supervisors (power agents) or subordinates/trainees (power targets) to recall a situation in which the agent was asking the target to perform a task in a different way, and the target felt reluctant to do so, but ultimately followed the agent's orders. They then respond to 33 items measuring the 11 bases of power, divided into hard and soft types. An example item corresponding to the informational (soft) power base indicates "[o]nce it was pointed out, I could see why the change was necessary." An example corresponding to the personal coercion (hard) power base indicates "[i]t would have been disturbing to know that my supervisor disapproved of me." Items are rated on a Likert-type scale ranging from 1 (much less likely to comply) to 7 (much more likely to comply). Versions were adapted for both trainees (IPI-T) and supervisors (IPI-S). Reliability estimates have ranged from .62 to .86 (Anderson & Levitt, 2014; Raven et al., 1998). For the present study, in the overall trainee sample,

reliability was excellent: for the total scale, $\alpha = .90$, for the hard power scale, $\alpha = .92$, and the soft power scale, $\alpha = .84$. For the smaller subset of matched pairs, reliability was excellent or good; for supervisors, $\alpha = .90$ for the total scale, $\alpha = .92$ for the hard power scale, and $\alpha = .75$ for the soft power scale. For the trainee subset, $\alpha = .79$ for the total scale, $\alpha = .89$ for the hard power scale, and $\alpha = .76$ for the soft power scale.

Working Alliance Inventory - Supervision Form (WAI/S; Bahrick, 1989)

The WAI/S was used to measure supervisory working alliance, with respective versions for both trainees (WAI/S-T) and supervisors (WAI/S-S). The WAI/S is a 36-item self-report measure utilizing a 7-point Likert-type scale. The measure is based on Bordin's (1983) conceptualization of the supervisory alliance, involving three components: agreement on goals, agreement on tasks, and an emotional bond, each of which have 12-item subscales. An example item for the goals subscale (trainee version) indicates "[t]he goals of these sessions are important to me." An example for the tasks subscale (trainee version) indicates "[w]hat I am doing in supervision gives me a new way of looking at myself as a counselor." An example for the emotional bond subscale (supervisor version) indicates "[the trainee] and I respect each other." For trainees, the measure has demonstrated excellent reliability on the overall scale ($\alpha = .93$, Ladany et al., 1999) and each subscale: goals ($\alpha = .93$), tasks ($\alpha = .93$), and bond ($\alpha = .91$) (Ladany & Friedlander, 1995). No studies have yet published reliability estimates for the WAI/S using a supervisor sample.

Reliability for the trainee sample in the present study was excellent: for the overall scale, $\alpha = .97$, for the goal subscale, $\alpha = .93$, for tasks, $\alpha = .92$, and for bond, $\alpha = .89$. For the smaller matched pair subset, reliability was generally strong. For the trainees,

on the overall scale, $\alpha = .95$, for the goal subscale, $\alpha = .92$, for tasks, $\alpha = .89$, and for

bond, $\alpha = .84$. However, for the supervisors, there was much more variability in

reliability: from very good for the overall scale, $\alpha = .86$, for the goal subscale, $\alpha = .79$,

for tasks, $\alpha = .83$, and quite poor for the bond subscale, $\alpha = .17$. Low reliability for the

bond subscale was due to much greater variability in responses, particularly to items 1 ("I

feel uncomfortable with ___"), 17 ("I am genuinely concerned for ___'s welfare"), and

29 ("___ has some fears that if she/he says or does the wrong thing that I will

disapprove") on the WAI/S-S. The bond subscale of the WAI/S was not used in analyses

of the matched pairs subsample due to poor reliability.

The Relationship Anecdotes Paradigm (RAP; Luborsky & Crits-Christoph, 1998)

The RAP is a semi-structured interview of central relationship themes and

patterns (Luborsky & Crits-Christoph, 1998). The RAP was adapted to be completed

online, wherein trainees were asked to describe up to three relationship episodes (REs)

involving their supervisor. Instructions were adapted from Luborsky (1998), asking

participants to write about three important interactions with their supervisor. Trainees

indicated when the RE occurred, what the supervisor said/did, and what they said/did.

Independent judges reviewed each RE using the Edition 3 CCRT Coding System (Barber,

Crits-Christoph, & Luborsky, 1998).

Judges first rated each response of other (RO) within each RE utilizing the full list

of eight possible ROs from Edition 3 (helpful, likes me, understanding, strong, bad,

controlling, upset, and rejecting and opposing). For each response by the supervisor, the

most characteristic RO type was identified. For each RE, sum scores for each of the eight

RO types were calculated. These scores were then added across all REs for each

participant. These scores were then sorted into two clusters: positive ROs (involving the responses of helpful, likes me, understanding, and strong) and negative ROs (involving the responses of bad, controlling, upset, and rejecting and opposing). Proportion scores for each participant were then calculated to give the relative weight of positive to negative responses[4]. Thus, proportion of positive ROs and proportion of negative ROs were used in the statistical analyses.

Procedure

After providing informed consent, participants were asked to complete measures online through Qualtrics software. Given the desired sample size and specialized nature of the trainee and supervisor population, an online design facilitated participation from a variety of geographic areas. Participants were able to withdraw from the study at any time without penalty. At the end of the study, participants read a short debriefing/study description form (see Appendix B), which provided information as to how to seek additional help (e.g., LIFENET) in case participating in the study caused psychological distress. In exchange for their participation, trainee participants were given the option of entering a raffle to win one of three $50 Amazon gift cards upon the completion of data collection.

CCRT Training and Coding

Three graduate students (including the primary investigator) and one professor (a licensed clinical psychologist) underwent training to achieve interrater reliability on the CCRT Edition 3 scoring system (Barber, Crits-Christoph, & Luborsky, 1998). Judges were then divided into pairs. All REs provided by trainee participants were divided

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[4] Proportion scores were calculated for each participant by counting the number of positive responses (*PR)* and negative responses (*NR*), and dividing each by the total number of responses (*PR + NR*).

equally among the coding pairs. Judges were blind to any further information about participants. Each member of a pair reviewed and coded half the pair's narratives for ROs, and then the pairs switched narratives and reviewed the other's ratings. Any discrepancies were discussed, and the pair came to consensus. The rate of discrepancy in coding for both pairs was 10.4%. The consensus codes were used in data analyses.

CHAPTER V

Results

Results will be explicated in two main sections: Preliminary Analyses (descriptive statistics and assessment of normality, exploration of the PDSS, covariates, and inter-variable correlations), and Main Analyses (hypothesis testing and exploratory questions). Due to the complexity of the study design and the smaller-than-aimed-for sample size for supervisor participants, two samples are discussed: the overall sample of trainees ($N =$ 311) with information they provided about their supervisors, and the subsample of matched pair trainees whose supervisors also participated ($n = 20$). The trainee sample was used in hypothesis testing and in some exploratory questions, while the matched pair subsample was used only for the later exploratory questions[5]. All statistical analyses were conducted using IBM's Statistical Package for the Social Sciences (SPSS), Version 26.

Preliminary Analyses

Descriptive Statistics

With the exception of the PDSS, all participants who began a measure were forced to respond to all items for that measure, which was designed to reduce missing responses to individual items. The PDSS includes a "not applicable" option for all 16 items, and thus some participants opted not to respond to all items. As this was a conscious choice (not done by accident or oversight), no effort was made to replace missing responses on the PDSS. Item missingness on the PDSS ranged from 0 to 164.

For the trainee sample ($N = 311$), all continuous variables used in hypotheses testing and exploratory questions were assessed for univariate normality through an

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[5] Due to insufficient sample size for supervisor participants, hypotheses 1(c) and 1(d) were not tested.

evaluation of means, standard deviations, skewness, kurtosis, stem and leaf plots, and histograms. Descriptive statistics for the primary study variables rated by trainees are presented in Table 4. For the main study variables, all scales were normally distributed with skewness and excess kurtosis values falling between 2.0 and -2.0. Not all trainee participants finished all measures, thus sample sizes vary across measures. The continuous demographics variables (age, number of psychotherapy hours provided) were also assessed for univariate normality. Outliers were found in participant age (with five participants age 43-54), and number of individual psychotherapy hours provided (with five participants reporting 3,000-10,000 hours). Descriptive statistics on the primary study variables were calculated both including and excluding these demographic outliers, and no meaningful differences were found. Thus, no participants in the trainee sample were excluded from analyses due to issues in univariate normality.

For the subset of matched pairs ($n = 20$), the same variables and procedures were used to assess univariate normality[6]. As expected with such a small sample size, data were not as normally distributed compared to the larger sample. Descriptive statistics for the primary study variables as rated by trainees in the matched pair subsample are presented in Table 5, and descriptive statistics for the primary study variables as rated by their supervisors are presented in Table 6. The supervisors' data were normally distributed across measures, but the trainees' data on the PDSS-T as well as WAI/S-T and alliance subscales were leptokurtic. Thus, non-parametric tests were used on the exploratory questions involving the matched pair subsample.

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[6] The bond subscale of the WAI/S was not used in analyses due to unacceptably low reliability in the supervisor sample.

Table 4

Descriptive Statistics of Measures in Trainee Sample (N = 311)

Measure	Observed range	Possible range	Mean (*SD)*	Skew (*SE)*	Excess Kurtosis (*SE)*
IPI-T (*n* = 288)					
Hard Power	18-125	18-126	56.00 *(18.94)*	0.38 *(0.14)*	-0.15 *(0.29)*
Soft Power	45-100	15-105	76.78 *(11.06)*	-0.47 *(0.14)*	-0.04 *(0.29)*
PDSS-T (*n* = 264)	1.09-3.64	1-4	1.89 *(0.49)*	1.07 *(0.15)*	0.81 *(0.30)*
WAI/S-T (*n = 275)*					
Total	2.89-7.00	1-7	5.51 *(0.89)*	-0.91 *(0.15)*	0.15 *(0.29)*
Bond	2.42-7.00	1-7	5.54 *(0.90)*	-1.04 *(0.15)*	0.97 *(0.29)*
Goals	2.67-7.00	1-7	5.48 *(1.00)*	-0.84 *(0.15)*	-0.06 *(0.29)*
Tasks	3.08-7.00	1-7	5.50 *(0.92)*	-0.76 *(0.15)*	-0.12 *(0.29)*
RAP (*n* = 96)					
RO Positive	0-1.00	0-1.00	0.74 *(0.36)*	-1.07 *(0.25)*	-0.34 *(0.49)*
RO Negative	0-1.00	0-1.00	0.26 *(0.36)*	-1.07 *(0.25)*	-0.34 *(0.49)*

Note. SD = standard deviation; *SE* = standard error; IPI=T = Interpersonal Power Inventory - Trainee Version **(**Raven, Schwarzwald, & Koslowsky, 1998); PDSS-T = Power Dynamics in Supervision Scale – Trainee Version (Cook, McKibben, & Wind, 2018); WAI/S-T = Working Alliance Inventory - Supervision Form - Trainee Version (Bahrick, 1989); RAP = Relationship Anecdote Paradigm; RO - Positive = Response of Other subscale - Positive Response (proportion of total ROs); RO - Negative = Response of Other Subscale - Negative Response (proportion of total ROs; Luborsky & Crits-Christoph, 1998).

Table 5

Descriptive Statistics of Trainee Ratings on Measures in Matched Pair Subsample (n = 20)

Measure	Observed range	Possible range	Mean (*SD)*	Skew (*SE)*	Excess Kurtosis (*SE)*
IPI-T (*n* = 20)					
Hard Power	36-82	18-126	50.40 *(15.24)*	1.04 *(0.51)*	0.03 *(0.99)*
Soft Power	57-94	15-105	79.70 *(9.10)*	-0.94 *(0.51)*	0.81 (*0.99*)
PDSS-T (*n* = 19)	1.19-2.97	1-4	1.77 *(0.43)*	1.65 *(0.52)*	2.81 *(1.01)*
WAI/S-T (*n* = 20)					
Overall	4.06-6.58	1-7	5.87 *(0.68)*	-1.65 *(0.51)*	2.72 *(0.99)*
Goals	3.75-6.83	1-7	5.87 *(0.81)*	-1.87 *(0.51)*	3.65 *(0.99)*
Tasks	4.08-6.75	1-7	5.88 *(0.71)*	-1.45 *(0.51)*	2.01 *(0.99)*

Note. M = mean; *SD* = standard deviation; *SE* = standard error; IPI = Interpersonal Power Inventory – Trainee Rated **(**Raven, Schwarzwald, & Koslowsky, 1998); PDSS-T = Power Dynamics in Supervision Scale - Trainee Rated (Cook, McKibben, & Wind, 2018); WAI/S-T = Working Alliance Inventory - Supervision Form – Trainee Rated (Bahrick, 1989).

Table 6

Descriptive Statistics of Supervisor Ratings on Measures in Matched Pair Subsample
(n = 20)

Measure	Observed range	Possible range	Mean (*SD)*	Skew (*SE*)	Excess Kurtosis (*SE)*
IPI-S (*n* = 20)					
Hard Power	28-76	18-126	45.70 *(14.05)*	0.49 *(0.51)*	-0.86 *(0.99)*
Soft Power	56-84	15-105	69.60 *(7.99)*	-0.02 *(0.51)*	-0.85 *(0.99)*
PDSS-S (*n* = 19)	1.76-2.61	1-4	2.28 *(0.20)*	-0.85 *(0.52)*	0.79 *(1.01)*
WAI/S-S (*n* = 20)					
Overall	5.33-6.64	1-7	5.97 *(0.36)*	-0.27 *(.51)*	-0.18 *(.99)*
Goals	5.17-6.75	1-7	5.96 *(0.44)*	-0.11 *(.51)*	-0.31 *(.99)*
Tasks	5.08-6.58	1-7	5.92*(0.41)*	-0.43 *(.51)*	-0.33 *(.99)*

Note. M = mean; *SD* = standard deviation; *SE* = standard error; IPI = Interpersonal Power Inventory – Supervisor Version **(**Raven, Schwarzwald, & Koslowsky, 1998); PDSS-S = Power Dynamics in Supervision Scale - Supervisor Rated (Cook, McKibben, & Wind, 2018); WAI/S-S = Working Alliance Inventory – Supervision Form – Supervisor Version (Bahrick, 1989).

The data across samples were also assessed for multivariate normality. Investigators set the criteria that any cases which were identified as a potential outlier based on both an assessment of Mahalanobis Distance and Cook's Distance were to be excluded from analyses. The assessment of Mahalanobis Distance for the three predictor variables was conducted for both trainee sample and the subsample of matched pairs. Two potential outliers were found in the trainee sample. The assessment of Cook's Distance was conducted using IPI-Hard, IPI-Soft and the PDSS as predictors. Cook's D ranged from 0.00 to 0.45. These values were well within acceptable limits for Cook's D. The full protocols of these potential outliers and influencers were also reviewed and no abnormalities were apparent in ratings. Thus, for the trainee sample, no cases were excluded from analyses.

For the subset of matched pairs, no cases met the criteria as a potential outlier based on calculations for Mahalanobis Distance. Observed values for Cook's D ranged from 0.00 to 1.00, with four cases identified as potential influencers. As no cases met both criteria, none were excluded from analyses for the subset of matched pairs. A collinearity diagnostic assessment for the main sample (which involved regression tests and MANOVAs) also demonstrated that the data fell within acceptable limits: for hard power, tolerance was 0.66 and VIF was 1.51; for soft power, tolerance was 0.84 and VIF was 1.19; and for power balance, tolerance was 0.68 and VIF was 1.47. Thus, initial assumptions necessary for the regression analyses as well as MANOVAs were met.

Exploration of Items on the Power Dynamics in Supervision Scale

As a step toward further validation of the recently-developed PDSS (Cook, McKibben, & Wind, 2018), the present study examined the relationships among all items

on the PDSS and (a) overall supervisory alliance, (b) supervisory alliance – tasks subscale, (c) supervisory alliance – goals subscale, (d) supervisory alliance – bond subscale, (e) supervisors' use of hard power, and (f) supervisors' use of soft power. A negative relationship was expected between all PDSS items and the WAI/S-T total scale, as well as all subscales, indicating that greater power held by the trainee (represented by a lower score on PDSS) would be associated with better alliance (represented by a higher score on the WAI/S-T). A negative relationship was also expected between all PDSS items and the IPI – Soft Power subscale, indicating that greater power held by the trainee would be associated with greater use of soft power techniques by supervisors. A positive relationship was expected among all PDSS items and the IPI – Hard Power subscale, indicating that less power held by the trainee would be associated with greater use of hard power techniques by supervisors. These questions were assessed utilizing Pearson's r correlation among all 16 items on the PDSS, the four supervisory alliance scales, and the IPI hard and soft power subscales. Results of these analyses are presented in Table 7.

All but one item (item 4) on the PDSS exhibited statistically significant, small to large negative relationships with overall supervisory alliance. For the three alliance subscales, again with the exception of item 4, relationships were also negative, ranged from small to large, and overwhelmingly statistically significant. Negative relationships were expected, as lower scores on the PDSS indicate that the trainee felt empowered. Thus, when trainees felt they held more power, they also reported stronger alliances. Item 4 on the PDSS asked trainees to choose a point on the continuum between "I initiated discussion of power in our supervisory relationship in this supervision session" (low

Table 7

Pearson's Correlations for Trainee Ratings on Individual Items on Power Dynamics in Supervision Scale, Supervisory Alliance, and Power Bases (N = 311)

	WAI/S-T Overall	WAI/S-T Tasks	WAI/S-T Bond	WAI/S-T Goals	IPI-T Soft Power	IPI-T Hard Power
PDSS Item 1	-.27**	-.26**	-.24**	-.26**	-.02	.19**
PDSS Item 2	-.14*	-.12	-.17**	-.12	.05	.17**
PDSS Item 3	-.16*	-.11	-.20**	-.13*	-.02	.15*
PDSS Item 4	.28**	.25*	.22*	.35**	.27**	.00
PDSS Item 5	-.35**	-.31**	-.35**	-.32**	-.05	.24**
PDSS Item 6	-.67**	-.68**	-.56**	-.66**	-.23**	.32**
PDSS Item 7	-.69**	-.70**	-.59**	-.67**	-.22**	.35**
PDSS Item 8	-.67**	-.63**	-.67**	-.61**	-.23**	.38**
PDSS Item 9	-.52**	-.47**	-.56**	-.47**	-.17**	.40**
PDSS Item 10	-.52**	-.53**	-.43**	-.51**	-.01	.42**
PDSS Item 11	-.52**	-.49**	-.47**	-.53**	-.07	.32**
PDSS Item 12	-.65**	-.61**	-.64**	-.61**	-.18**	.40**
PDSS Item 13	-.68**	-.63**	-.66**	-.65**	-.19**	.34**
PDSS Item 14	-.61**	-.55**	-.64**	-.55**	-.13*	.43**
PDSS Item 15	-.61**	-.56**	-.62**	-.55**	-.13*	.43**
PDSS Item 16	-.47**	-.44**	-.45**	-.44**	-.14*	.37**

Note. N = 264. WAI/S-T = Working Alliance Inventory - Supervision Form - Trainee Version (Bahrick, 1989); IPI-T Soft Power = Interpersonal Power Inventory – Trainee Version, Soft Power Subscale; IPI-T Hard Power = Interpersonal Power Inventory – Trainee Version, Hard Power Subscale (Raven, Schwarzwald, & Koslowsky, 1998); PDSS = Power Dynamics in Supervision Scale-Trainee Rated (Cook, McKibben, & Wind, 2018).
*p < .05; **p < .01.

rating, high trainee power) and "my supervisor initiated discussion of power in our supervisory relationship in this supervision session," (high rating, high supervisor power). The unique negative relationship between this item and the supervisory alliance scales suggested that trainees likely preferred their supervisor initiate discussion of power dynamics, and perhaps that they actually felt more empowered when supervisors took this step. While either removing or reverse scoring item 4 might be suggested for future research, this item was included in the analyses to follow, in the interests of investing the measure as originally constructed by the authors. Notably, for the trainee sample, item 4 had the largest number of participants who chose "not applicable": 168 of the 264, or 64% trainees who completed the measure chose "not applicable" on item 4, while on the rest of items, the number of "not applicable" responses ranged from 0-30.

The results for hard power and individual items on the PDSS were also consistent, with the exception of item 4. Significant, small to moderate positive relationships were found for all of the other 15 items on the PDSS and the hard power scale, suggesting that trainees who perceived that their supervisors were using hard power tactics felt less empowered, or that the supervisor held more power. Results for soft power and individual items on the PDSS were somewhat less consistent, wherein 10 of the 16 items exhibited significant, small negative relationships with soft power. This suggested that trainees who perceived that their supervisors were using soft power tactics felt more empowered, or that their supervisor held less power.

Covariate Analysis

A number of demographic factors for both trainees and supervisors could theoretically relate to the main study variables involving power and working alliance.

However, as type of graduate program (master's or doctoral level) would seem most relevant to differences in the main study variables, it was assessed as a covariate. Other demographic factors were examined in exploratory questions. The covariate was assessed using a one-way analysis of covariance (ANCOVA). Both IPI-T Hard Power and IPI-T Soft Power were regressed on type of graduate program, with results that were not statistically significant, $F(1, 286) = 0.88$, $p = .73$ for hard power, and $F(1, 286) = 1.09$, $p = .32$ for soft power. Thus, use of hard or soft power did not vary according to type of graduate program. To assess homogeneity of regression, a comparison of intercepts of IPI-T Hard power, IPI-T Soft power, and type of graduate program were compared. The results were not statistically significant, $F(1, 285) = 1.98$, $p = .15$, and thus the assumptions for the ANCOVA were met. Two regression models were then compared: the first, with IPI-T Hard power and IPI-T Soft power predicting working alliance, and the second was the same model but controlling for type of graduate program. No significant differences were found between models: for IPI-T Hard power, $F(1, 286) = 4.66$, $p = .003$ without the potential covariate, and $F(1, 286) = 4.54$, $p = .004$ controlling for type of graduate program; and for IPI-T Soft power, $F(1, 286) = 3.98$, $p = .006$ without the potential covariate, and $F(1, 286) = 3.73$, $p = .011$ controlling for type of graduate program. Thus, type of graduate program was not a statistically significant covariate for the impact power bases on working alliance and was not controlled for in further analyses.

Inter-variable Correlations

The results of Pearson's *r* correlational analyses of the continuous main study variables for the trainee sample are presented in Table 8. The results of Pearson's *r*

Table 8

Pearson's r Correlation Matrix for Main Study Variables – Trainee Sample (N = 311)

Measure	IPI-Soft	PDSS	WAI/S-T Overall	WAI/S-T Tasks	WAI/S-T Bond	WAI/S-T Goals	RO-Positive	RO-Negative
IPI-T Hard Power	.25**	.48**	-.46**	-.45**	-.44**	-.41**	-.22*	.22*
IPI-T Soft Power		-.18**	.32**	.28**	.34**	.29**	.24*	-.24*
PDSS			-.76**	-.71**	-.73**	-.71**	-.58**	.58**
WAI/S-T Overall				.96**	.91**	.97**	.67**	-.67**
WAI/S-T Tasks					.79**	.94**	.64**	-.64**
WAI/S-T Bond						.80**	.68**	-.68**
WAI/S-T Goals							.62**	-.62**
RO-Positive								-1.00**

Note. IPI-T Hard Power = Interpersonal Power Inventory – Trainee Version, Hard Power subscale; IPI-T Soft Power= Interpersonal Power Inventory – Trainee Version, Soft Power subscale **(**Raven, Schwarzwald, & Koslowsky, 1998); PDSS = Power Dynamics in Supervision Scale (Cook, McKibben, & Wind, 2018); WAI/S-T = Working Alliance Inventory - Supervision Form - Trainee Rated (Bahrick, 1989); RO-Positive = Response of Other - Positive in Relationship Anecdote Paradigm; RO-Negative = Response of Other - Negative in Relationship Anecdote Paradigm.

p < .05; **p* < .01.

correlational analyses for the matched pair subsample of trainees are presented in Table 9, and for the subsample of supervisors in Table 10.

Main Analyses

Hypothesis[7] 1

Hypothesis 1(a) predicted a positive association between the supervisor's use of hard power techniques and high supervisor power, while hypothesis 1(b) predicted a negative association between the supervisor's use of soft power and high supervisor power. For hypothesis 1(a), a Pearson's *r* correlation was run between IPI-T Hard Power and the PDSS-T (as higher scores on the PDSS indicate higher supervisor power compared to trainee power). The results were statistically significant, in the predicted direction, with a large effect size, $r(264) = .48$, $p < .001$. This indicates that trainees' perception of the supervisor using more coercive methods of influence (hard power) was moderately associated with their perception that the supervisor held more power than they did. For hypothesis 1(b), a Pearson's *r* correlation was run between IPI-T Soft Power and the PDSS-T. Again, the results were statistically significant and in the predicted direction, this time with a small effect, $r(264) = -.18$, $p < .01$. Trainees' perceptions of the supervisor using more persuasive, collaborative methods (soft power) was somewhat associated with their perception that they held more power than the supervisor. Both hypotheses 1(a) and 1(b) were supported.

Hypothesis 2

Hypothesis 2(a) predicted a negative effect of supervisors' use of hard power (trainee-rated) on trainees' perceptions of the supervisory alliance. Hypothesis 2(b)

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[7] All of the hypotheses refer to analyses in the trainee sample ($N = 311$).

Table 9

Pearson's r Correlational Matrix for Matched Pair Subsample – Trainee Self-Report (N =20)

	IPI-Soft	PDSS	WAI/S-T Overall	WAI/S-T Tasks	WAI/S-T Goals
IPI-T Hard Power	-.20	.48[*]	-.79[**]	-.65[**]	-.73[**]
IPI-T Soft Power		-.01	.18	.04	.04
PDSS-T			-.64[**]	-.53[*]	-.58[**]
WAI/S-T Overall				.95[**]	.94[**]
WAI/S-T Tasks					.90[**]

Note. IPI-T Hard Power = Interpersonal Power Inventory – Trainee Version, Hard Power subscale; IPI-T Soft Power = Interpersonal Power Inventory – Trainee Version, Soft Power subscale (Raven, Schwarzwald, & Koslowsky, 1998); PDSS-T = Power Dynamics in Supervision Scale, Trainee Version (Cook, McKibben, & Wind, 2018); WAI/S-T = Working Alliance Inventory – Supervision Form - Trainee Rated (Bahrick, 1989).
*p < .05; **p < .01.

Table 10

Pearson's r Correlational Matrix for Matched Pair Subsample – Supervisor Self-Report
(n = 20)

	IPI-Soft	PDSS	WAI/S-S Overall	WAI/S-S Tasks	WAI/S-S Goals
IPI-S Hard Power	.50*	-.36	-.62**	-.50*	-.59**
IPI-S Soft Power		.10	-.10	.02	-.10
PDSS-S			.10	.03	.25
WAI/S-S Overall				.93**	.96**
WAI/S-S Tasks					.92**

Note. IPI-S Hard power = Interpersonal Power Inventory – Supervisor Version, Hard Power subscale; IPI-S Soft Power = Interpersonal Power Inventory – Supervisor Version, Soft Power subscale **(**Raven, Schwarzwald, & Koslowsky, 1998); PDSS = Power Dynamics in Supervision Scale (Cook, McKibben, & Wind, 2018); WAI/S-S = Working Alliance Inventory - Supervision Form – Supervisor Rated (Bahrick, 1989).
*p < .05; **p < .01.

predicted a positive effect of supervisors' use of soft power (trainee-rated) on trainees'

perceptions of the supervisory alliance. Hypothesis 2(c) predicted that the main effect

between hard power and supervisory alliance would be moderated by trainees'

perceptions of positive ROs by the supervisor, such that the main effect of hard power on

alliance would be lessened as positive ROs increased. Finally, hypothesis 2(d) predicted

that the main effect between soft power and supervisory alliance would be moderated by

trainees' perceptions of negative ROs by the supervisor, such that the relationship

between soft power and alliance would be lessened as negative ROs increased.

Hypotheses 2(a) and 2(c) were assessed together using Hayes' (2018) moderation

analysis (SPSS PROCESS 3.4.1 Macro) to estimate the prediction of supervisory alliance

from supervisors' use of hard power, with positive ROs as the hypothesized moderator.

Results were bootstrapped for 20,000 samples as the correlation coefficient was high

between positive ROs and supervisory alliance, $r(94) = .67$, $p < .01$. The model was

significant, $F(3, 92) = 39.15$, $p < .001$, with a large effect size, $R^2 = .56$. Coefficient

results are presented in Table 11. Hypothesis 2(a) was supported; there was a statistically

significant negative main effect of hard power on supervisory alliance. Hypothesis 2(c)

was not supported; there was not a statistically significant interaction effect when

supervisory alliance was regressed on hard power and positive ROs. Positive ROs also

were not a significant predictor of supervisory alliance.

Hypotheses 2(b) and 2(d) were assessed together using Hayes' (2018) moderation

analysis (SPSS PROCESS 3.4.1 Macro) to estimate the prediction of supervisory alliance

from supervisors' use of soft power, with negative ROs as the hypothesized moderator.

Results were bootstrapped for 20,000 samples as the correlation coefficient was high

Table 11

Regression Analysis: Positive Response Style as Hypothesized Moderator between Hard Power and Supervisory Alliance

Effect	b (SE)	95% CI		p
		LL	UL	
Intercept	5.68 (0.65)	4.40	6.98	<.001
IPI-Hard	-0.02 (0.10)	-0.04	-0.004	.001
RO-Positive	0.94 (0.69)	-0.44	2.32	.09
Interaction	0.01(0.01)	-0.01	0.03	.22

Note. CI = confidence interval; LL = lower limit; UL = upper limit; n = 92. Results were bootstrapped for 20,000 samples.

between negative ROs and supervisory alliance ($r(94) = -.67$, $p < .01$). The model was significant, $F(3, 92) = 31.23$, $p < .001$, with a large effect size, $R^2 = .51$. Coefficient results are presented in Table 12. Hypothesis 2(b) was not supported; there was not a statistically significant main effect of soft power on supervisory alliance. While not hypothesized, negative ROs also exhibited a main effect on supervisory alliance. Although there was a significant interaction effect between negative ROs and soft power on alliance, it was not in the hypothesized direction (2d). Rather, as negative ROs increased, the effect of soft power on supervisory alliance became significant. Results of the Johnson-Neyman technique showed that the interaction effect became significant when scores for negative ROs were at 0.225 and above (representing 35.42% of the sample). These results suggest that for supervisors perceived as particularly negative in their response style (in the upper approximately 1/3 of the sample), the use of soft power may have served as a buffer to protect (or strengthen) the alliance.

Hypothesis 3

Hypothesis 3 predicted that positive ROs would (a) be positively associated with supervisory alliance (b) be negatively associated with supervisors' use of hard power, (c) be positively associated with supervisors' use of soft power, and (d) be negatively associated with high supervisor power on the PDSS. Conversely, hypothesis 3 predicted that negative ROs would (e) be negatively associated with supervisory alliance, (f) be positively associated with supervisors' use of hard power, (g) be negatively associated with supervisors' use of soft power, and (h) be positively associated with high supervisor power on the PDSS. To assess these hypotheses, proportion scores[8] from each of the

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[8] Proportion scores were calculated for each participant by counting the number of positive responses (*PR)* and negative responses (*NR*), and dividing each by the total number of responses (*PR + NR*).

Table 12

Regression Analysis: Negative Response Style Moderates Effect between Soft Power and Supervisory Alliance

Effect	b (SE)	95% CI		p
		LL	UL	
Intercept	5.51 (0.60)	4.21	6.56	<.001
IPI-Soft	0.01 (0.01)	-0.01	0.02	.51
RO - Negative	-4.37 (1.71)	-7.84	-1.14	<.01
Interaction	0.04 (0.02)	-0.01	0.08	.05

Note. CI = confidence interval; LL = lower limit; UL = upper limit; $n = 92$. Results were bootstrapped for 20,000 samples.

Edition 3 CCRT categories (positive ROs: helpful, likes me, understanding, and strong, and negative ROs: bad, controlling, upset, and rejecting and opposing; Barber, Crits-Christoph, & Luborsky, 1998) were correlated with each variable using Pearson's *r* analyses. Results of these analyses are presented in Table 13.

Hypothesis 3(a) was supported for three of the four positive ROs: helpful, likes me, and understanding were all moderately positively related to supervisory alliance ($r(73) = .42$, $p < .001$, $r(73) = .28$, $p < .001$, and $r(73) = .37$, $p < .001$, respectively), indicating that these response styles were associated with a strong supervisory alliance. Neither hypothesis 3(b) nor 3(c) were supported as no statistically significant relationships were found between any of the positive ROs and either hard or soft power. Hypothesis 3(d) was supported for two of the four positive ROs: helpful and understanding response types were moderately negatively associated with trainees' perceptions that supervisors possessed more power ($r(72) = - .33$, $p < .001$, and $r(72) = -.37$, $p < .001$, respectively), indicating that helpful and understanding responses by supervisors were associated with trainees feeling more empowered.

Hypothesis 3(e) was supported for three negative ROs: rejecting and opposing, controlling and upset responses were either strongly or moderately negatively associated with supervisory alliance ($r(73) = -.68$, $p < .001$, $r(73) = -.19$, $p < .001$, and $r(73) = -.30$, $p < .01$, respectively), indicating that these response types were associated with a weak alliance. Hypothesis 3(f) and 3(g) was supported for just one negative RO: rejecting and opposing ROs demonstrated a moderate positive relationship with hard power ($r(73) = .29$, $p < .01$), and a moderate negative relationship with soft power ($r(73) = -.25$, $p < .001$), indicating that supervisors who were perceived as rejecting and opposing were also

Table 13

Pearson's r Correlations between RO Types and Trainee Ratings of Supervisory Alliance, Power Bases, and Power Balance (N = 311)

RO Type	WAI/S-T Overall	IPI-T Soft	IPI-T Hard	PDSS-T
Helpful	.42**	.20	-.16	-.33**
Likes Me	.28**	.01	-.14	-.12
Understanding	.37**	.09	-.12	-.37**
Strong	-.21	-.13	.10	.09
Bad	-.15	-.02	.07	.05
Controlling	-.19**	.04	.07	.25*
Upset	-.30*	-.18	-.01	.37**
Rejecting and Opposing	-.68**	-.25**	.29*	.50**

Note. WAI/S-T Overall = Working Alliance Inventory - Supervision Form - Trainee Version, Overall Alliance (Bahrick, 1989); IPI-T Soft = Interpersonal Power Inventory – Trainee Version, Soft Power subscale; IPI-Hard = Interpersonal Power Inventory – Trainee Version, Hard Power subscale (Raven, Schwarzwald, & Koslowsky, 1998); PDSS-T = Power Dynamics in Supervision Scale – Trainee Version (Cook, McKibben, & Wind, 2018).
*p < .05; **p < .01.

perceived as using more coercive power tactics (hard power) and less persuasive and collaborative power tactics (soft power). Hypothesis 3(h) was supported for three of the four negative ROs: rejecting and opposing, controlling, and upset responses were strongly or moderately associated with trainees' perceptions that supervisors possessed more power ($r(72) = .50$, $p < .001$, $r(72) = .25$ $p < .01$, and $r(72) = .37$, $p < .001$ respectively), indicating that these negative response types were associated with trainees feeling less empowered.

Summary of Findings from Hypothesis Testing

Results of hypotheses testing indicated that trainees' perceptions that supervisors were using more hard power methods were moderately associated with their perceptions that the supervisor held more power in the relationship. Additionally, trainees' perceptions that supervisors were using more soft power methods were somewhat associated with their perception that they held more power than the supervisor. Thus, trainees tended to feel they held less power when supervisors used more coercive tactics of influence (hard power) and tended to feel they held more power when supervisors used more collaborative and persuasive tactics (soft power).

Supervisors' use of hard and soft power tactics also predicted trainees' perceptions of alliance. Hard power was a significant negative predictor of supervisory alliance. The prediction that positive ROs by the supervisor would moderate this relationship was not supported, but the combination of hard power and positive ROs had a large effect, predicting 56% of variance in supervisory alliance. Soft power exhibited a significant effect on supervisory alliance, but only at high levels of the hypothesized moderator, when negative ROs were scored at .225 or above. The combination of soft

power and negative ROs also had a large effect, predicting 51% of variance in supervisory alliance. This result suggests that for supervisors whose response style was perceived as particularly negative, the use of soft power may have served as a buffer to protect (or strengthen) the alliance.

Three positive response types by supervisors: helpful, likes, me, and understanding were moderately, positively associated with overall supervisory alliance, indicating that these response types were associated with good alliance. Three negative response types: rejecting and opposing, controlling and upset responses were either strongly or moderately negatively associated with supervisory alliance, indicating that these response types were associated with poor alliance.

Helpful and understanding response types were also moderately negatively associated with trainees' perceptions that supervisors possessed more power, indicating that these positive response types were associated with trainees feeling more empowered. Rejecting and opposing, controlling, and upset responses were strongly or moderately associated with trainees' perceptions that supervisors possessed more power, indicating that these negative response types were associated with trainees feeling less empowered.

Of all eight RO types, 'rejecting and opposing' was the only response style that exhibited any association with hard or soft power, wherein a moderate positive association was found with hard power, and a moderate negative association was found with soft power. These findings indicate that supervisors who were perceived as rejecting and opposing were perceived as using more coercive power tactics (hard power) and less persuasive and collaborative power tactics (soft power). In all of these analyses, findings

indicated that strong (considered positive) and bad (considered negative) responses were apparently not as salient to supervisory relationships as to other relational dyads.

Exploratory Question 1

Exploratory Question 1 asked (a) whether the explicit identification of goals/expectations for supervision predict trainee-rated alliance, and (b) whether the identification of goals/expectations predict trainee-rated balance of power. These questions were assessed using simple linear regression. For exploratory question 1(a), results were significant, $F(1,273) = 42.42$, $p < .001$, and $R^2 = .13$ indicating that when goals and expectations for supervision were set at the outset of the relationship, trainees perceived a stronger working relationship with their supervisors (supervisory alliance). For exploratory question 1(b), results were also significant, $F(1,262) = 17.71$, $p < .001$, and $R^2 = .063$, indicating that when goals and expectations for supervision were set at the outset, trainees perceived themselves as possessing more power in supervision. The explicit identification of goals explained 13% of variance in trainee-rated supervisory alliance, and 6.3% of variance in trainee-rated balance of power.

Exploratory Question 2

Exploratory Question 2 asked whether differences existed in trainees' ratings of supervisory alliance depending on whether explicit discussion of the supervisor's (a) gender identity, (b) racial identity, (c) Latinx identity, (d) sexual orientation, or (e) theoretical orientation had occurred. These questions were assessed using independent samples t-tests. The proportions of trainees who reported discussing these variables, as well as the supervisory alliance mean scores, standard deviations, and results of these t-

tests are presented in Table 14. With the exception of theoretical orientation, the majority

of trainee participants had not discussed these factors with their supervisors.

Additionally, discussion of theoretical orientation was the only factor to exhibit

significant differences in trainee-rated alliance across groups, wherein those that

discussed the supervisor's theoretical orientation reported stronger alliances. For the t-test

of theoretical orientation, Cohen's $d = 0.37$, indicating a medium effect size.

Exploratory Question 3. Exploratory question 3 asked (a) what bases of power

are most used in clinical supervision, and (b) how do each of the bases of power relate to

supervisory alliance? To assess exploratory question 3(a), descriptive statistics were

produced including both a mean score and standard deviation for each of the 11 power

bases. To assess exploratory question 3(b), Pearson's r correlations were calculated

between each of the 11 power bases and overall supervisory alliance. Results of both of

these analyses are presented in Table 15. On average, four of the five soft power bases

were used more than any of the hard power bases, starting with the most frequently used:

informational, expert, legitimate positions, and referent. The first three of these exhibited

significant, moderate to strong positive correlations with overall alliance. For the hard

power bases, both types of rewards (personal and impersonal) were used the most

frequently, followed by personal coercion, legitimate reciprocity and legitimate equity.

Impersonal coercion was the least frequently used of all the power bases, but also showed

the strongest negative correlation with overall supervisory alliance, $r(288) = -.58$, $p <$

.001. Personal coercion, legitimate equity, legitimate reciprocity, and impersonal reward

also exhibited significant, moderate to strong negative correlations with overall alliance.

Table 14

Results of Independent Sample t-Tests of Trainee-Rated. Supervisory Alliance Involving Discussion or Non-Discussion of Supervisory Identity Factors (N = 311)

	Discussed		Did Not Discuss			
	N	*M (SD)*	*N*	*M (SD)*	*t (df)*	*p*
Gender Identity	91	5.60 *(0.90)*	184	5.46 *(0.88)*	1.26 *(273)*	.21
Racial Identity	121	5.57 *(0.96)*	154	5.46 *(0.83)*	1.06 *(273)*	.29
Latinx Identity	48	5.48 *(0.98)*	227	5.51 *(0.87)*	0.24 *(273)*	.81
Sexual Orientation	71	5.60 *(0.91)*	204	5.47 *(0.88)*	1.04 *(273)*	.30
Theoretical Orientation	190	5.59 *(0.86)*	76	5.25 *(0.96)*	2.80 *(264)*	.005

Note. M = Mean; *SD* = Standard Deviation; *df* = degrees of freedom.

Table 15

Descriptive Statistics of Trainee Ratings of Power Bases and Pearson's r Correlations with Supervisory Alliance (N = 311)

	M	SD	Correlation with WAI/S-T Overall
Referent	14.27	3.59	.45**
Expert	16.96	2.89	.26**
Informational	17.43	2.67	.43**
Legitimate Dependence	11.03	3.68	-.08
Legitimate Positions	15.26	3.10	-.03
Reward – Impersonal	11.59	3.86	-.21**
Reward – Personal	12.41	3.62	-.11
Coercive - Impersonal	7.70	4.67	-.58**
Coercive - Personal	10.04	4.33	-.45**
Legitimate Reciprocity	8.20	3.57	-.27**
Legitimate Equity	7.90	4.37	-.35**

Note. N = 288. *M* = Mean; *SD* = Standard Deviation; WAI/S-T Overall = Working Alliance Inventory - Supervision Form - Trainee Version, Overall Alliance (Bahrick, 1989).
p < .05; **p* < .01.

Exploratory Question 4

Exploratory question 4 involved an investigation of the matched pair subset of trainees and supervisors, asking how the ratings of supervisors and trainees compared on (a) supervisory alliance and all alliance subscales, (b) supervisors' use of hard power, (c) supervisors' use of soft power, and (d) power balance. To evaluate these questions, a series of Pearson's r correlations were conducted using the subset of supervisory dyads to compare trainee and supervisor ratings on each of the four variables. Difference scores were also calculated by subtracting trainee ratings from supervisor ratings, to provide a range of differences on each variable.

For exploratory question 4(a), the correlation between trainee and supervisor ratings on overall alliance was very weak though not statistically significant, $r(20) = .09$, $p = .69$. Differences on ratings of overall alliance ranged from -1.06 to 1.97. The correlation between trainee and supervisor ratings on the goals subscale of supervisory alliance was virtually 0.00, with $p = 1.00$, and with differences on ratings ranging from -1.58 to 2.33. The correlation between trainee and supervisor ratings on the tasks subscale of supervisory alliance was -.14, $p = .54$, with differences on ratings ranging from -1.42 to 1.92. For exploratory question 4(b), the correlation between trainee and supervisor ratings on hard power was also weak and not statistically significant, $r(20) = -.26$, $p = .30$. Differences on ratings of hard power ranged from -48 to 40. For exploratory question 4(c), the correlation between trainee and supervisor ratings on soft power was similarly very weak and not statistically significant, $r(20) = .12$, $p = .65$. Differences on ratings of soft power ranged from -32 to 12. For exploratory question 4(d), the correlation between trainee and supervisor ratings on power balance was weak and not statistically

significant, $r(20) = .20$, $p = .43$. Differences on ratings of power balance ranged from -0.52 to 1.19. Thus, the ratings of trainees and supervisors showed little to virtually no relationship to each other on all of the variables in question, and ratings varied greatly across these measures, as supervisors reported sometimes far greater values and sometimes far lesser values.

Note on Exploratory Questions 5 through 9

Examining potential differences in supervisory alliance, supervisors' use of hard and soft power, and power balance according to various sociocultural factors (gender identity, race, Latinx identity, sexual orientation and theoretical orientation) was of central concern to the present study. However, groups were too small to register meaningful statistical differences on the variables of interest. The results of these analyses are included in Appendix F.

Summary of Findings from Exploratory Questions

This study investigated five main exploratory questions, resulting in a number of significant findings that shed light on various aspects of supervisory relationships.

Setting Supervision Goals. Trainees' perceptions that supervisors explicitly identified goals and expectations at the outset of supervision predicted 13% of variance in trainee-rated supervisory alliance, and 6.3% of variance in trainee-rated balance of power. When supervisors elucidated a framework with goals and expectations at the beginning of supervision, this contributed to both better supervisory relationships (alliance) and to trainees feeling more empowered.

Validation of the Power Dynamics in Supervision Scale. As a step toward further validation of the PDSS (Cook, McKibben, & Wind, 2018), correlations were run

between all 16 items on the PDSS and all scales of the supervisory alliance (overall, tasks, bond, and goals), as well as interpersonal hard power and soft power. Strikingly, 15 items on the PDSS demonstrated significant relationships with all of these scales, in the expected directions. When trainees perceived themselves as holding more power in supervision, they also perceived stronger supervisory alliance. Their perception that supervisors were using more soft power (persuasive tactics) was also associated with them feeling more empowered, while their perception that supervisors were using more hard power (coercive tactics) was associated with them feeling less empowered[9].

A conspicuous exception to these trends was item 4 on the PDSS, which asked trainees to choose a point on the continuum between "I initiated discussion of power in our supervisory relationship in this supervision session" (low rating, high trainee power) and "my supervisor initiated discussion of power in our supervisory relationship in this supervision session," (high rating, high supervisor power). This item had, by far, the largest number of participants who chose "not applicable," (64%), and correlations ran directly opposite of the expected direction: the supervisor's initiation of explicit discussion of power dynamics was associated with stronger alliance for trainees, as well as perceptions that supervisors were using soft power tactics. Trainees with supervisors who initiated discussion of power dynamics may have felt more empowered.

Interpersonal Power Bases and Supervisory Alliance. The eleven interpersonal power bases were investigated to see which were most frequently used in clinical supervision, and how they were related to supervisory alliance. On average soft power bases were used more frequently than hard, and typically demonstrated significant,

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[9] Six items of the PDSS did not exhibit significant correlations.

moderate to strong positive correlations with overall alliance. For the hard power bases, both types of rewards (personal and impersonal) were used the most frequently. Impersonal coercion was the least frequently used of all the power bases, but also showed the strongest negative correlation with overall supervisory alliance.

Comparing Matched Pairs of Trainees and Supervisors. The ratings of the subset ($n = 20$) of matched pair supervisory dyads were compared across a number of variables: supervisory alliance and all subscales (tasks, bond, and goals), hard power, soft power, and power balance. The ratings of trainees and supervisors on all of these variables exhibited weak, non-significant correlations: ratings showed virtually no relationship to each other on all of the variables in question.

CHAPTER VI

Discussion

The overarching aim of this study was to investigate the meaning and impact of power dynamics in clinical supervision. While the *Guidelines for Supervision* (APA, 2014) emphasize that the power differential between supervisors and trainees is a central factor in the supervisory relationship, and an emerging body of literature has investigated power in supervision, operational definitions vary and comparisons are confusing, as a result. By examining relationships between two operationalizations of power, the interpersonal power bases (divided into hard and soft) and power balance, and the construct that is perhaps most highly agreed upon in supervision research, the supervisory alliance, empirical insights were gained into the impact of power dynamics on supervisory relationships and themes emerged regarding how power is exercised in supervision. Further, the present study qualitatively explored a number of other facets of power and interpersonal processes in supervision, which enriched the findings. Though there was an attempt to identify differences across various sociocultural factors for both trainees and supervisors (race, sexual orientation, gender identity, Latinx heritage, and theoretical orientation), small sample sizes of various groups rendered these analyses underpowered. While the aim was to conduct this investigation with a large sample of psychotherapists in training and their supervisors, very few trainees (11% of the overall sample) consented to having their supervisors participate. This dynamic itself may underscore tension in the supervisory dyad, which may itself be a product of power dynamics; this is a dimension which will be further discussed below.

Revisiting Bordin's Power Differential in the Supervisory Alliance

In revisiting Bordin's (1983) initial discussion of the supervisory working alliance, an unexpected emphasis was identified in attending to the power differential, or "defusing" what Rioch (1980) called the "up-down factor" in supervision. Bordin (1983) highlighted the power issue in his original description and suggested potential explosiveness in supervision, and that he further described an "inescapable tension associated with the status difference between supervisor and supervisee and the cultural and psychic pressures around that difference" (p. 39). A closer examination of Bordin's work illuminated a vision of the supervisory alliance wherein navigation of power dynamics is a central task, and empowerment of trainees a central goal. He emphasized that in his own work as a supervisor, he focused at the outset on establishing a framework for supervision, resulting in a list of agreed-upon, written goals. The findings from the present study further support this vision, and suggest that in addition to agreement on tasks, goals, and emotional bond, trainee empowerment may in fact be a fourth factor both for conceptualization and measurement of supervisory alliance.

Establishing a Framework for Supervision

Bordin (1983) emphasized the strong value he ascribed to creating an explicit supervisory contract, culminating in a written list of agreed-upon goals for supervision at the outset of the training year. As supervision involves a power-laden relationship, where supervisees require positive evaluations in order to progress in their career, the present study hypothesized that the explicit elucidation of supervisory expectations would improve the quality of the relationship as boundaries are clarified and the focus of evaluations is previewed. This study was the first to examine whether the explicit

identification of goals and setting a framework for supervision at the outset were indeed related to later ratings of alliance, through the use of a single item on our survey asking trainees to identify whether or not their supervisor had done so. Results indicated that whether goals/framework for supervision had been discussed predicted 13% of variance in trainee-rated supervisory alliance, and 6.3% of trainee ratings of power balance. While based on just a single item, this finding offers some empirical support for supervisors not to skip the vital step of discussing with supervisees what their goals are in supervision and how they might best work together. This finding is also in line with considerable research from organizational psychology, which has indicated that goal-setting practices lead to enhanced outcomes across a wide variety of tasks and work behaviors (Locke & Latham, 1990).

Validation Efforts for the Power Dynamics in Supervision Scale

The PDSS is a very recently developed measure, drawn from qualitative supervision studies, to capture essential components of power dynamics in the supervisory relationship (Cook, McKibben, & Wind, 2018). The goal of the present study was to simultaneously investigate the validity of the PDSS, by comparing it with two well-established measures, the IPI (Raven, Schwarzwald, & Koslowsky, 1998) and WAI/S (Bahrick, 1989), and to explore how participants' perceptions of power balance may be associated with alliance in a large and diverse sample. For the trainee sample, the PDSS was highly reliable and demonstrated good convergent validity with both the IPI and WAI/S. In comparing the PDSS with the IPI, it appeared that when trainees perceived supervisors were using more soft power, trainees felt more empowered, while when they perceived supervisors were using more hard power, they felt less empowered

(or that the supervisors held more power). This finding offers an intriguing suggestion: in many (if not most) situations, the use of soft power tactics as opposed to hard power may help to offset the inherent power differential in clinical supervision. However, it also seems reasonable to speculate that there are situations where soft power tactics might not be appropriate, such as treating a patient in crisis or a confronting an ethical violation by the trainee.

Mean scores on the PDSS also exhibited quite a strong negative relationship with the overall scale of supervisory alliance, which was the expected direction, as lower scores on the PDSS indicate more power held by the trainee (i.e., trainees who felt more empowered also reported good alliance). The strength of this relationship was considered a large effect size, indicating that the two scales may be measuring the same construct and/or that power balance may be conceptually close to alliance in supervision and, thus, explains an important dynamic that is central to the supervisor-trainee relationship. A comparison of individual items from the PDSS and the WAI/S illustrates this conceptual overlap. For example, item 1 on the PDSS asks participants to choose a point on the continuum between "I identified the goals for this supervision session," (low rating, high trainee power) and "my supervisor identified the goals for this supervision session," (high rating, high supervisor power). On its face, that item overlaps with item 14 on the WAI/S where participants choose a point on a scale between "never" and "always" for the statement "[t]he goals of these [supervision] sessions are important to me." Further clarifying the relationships and distinctions between power balance and supervisory alliance will be discussed below under Future Directions.

The present study also examined relationships between each of the 16 individual items on the PDSS to supervisory alliance, soft power, and hard power. Findings for the individual items were mainly in line with the findings just articulated for the overall mean score on the PDSS. One item stood out as an exception: item 4 asks trainees to choose a point on the continuum between "I initiated discussion of power in our supervisory relationship in this supervision session" (low rating, high trainee power) and "my supervisor initiated discussion of power in our supervisory relationship in this supervision session," (high rating, high supervisor power). Correlations ran in the opposite direction of expectations – the supervisor's initiation of explicit discussion of power dynamics was associated with trainees' perceptions of stronger alliance, and with perceptions they were utilizing more soft power bases. Thus, trainees did not seem to feel empowered by opening up these discussions themselves, and in fact seemed to appreciate and/or benefit when supervisors did so. This item also had, by far, the largest number of participants who chose "not applicable," (64%), indicating that the majority of supervisory dyads were not explicitly discussing power dynamics. Thus, supervisors may be missing an opportunity to empower trainees and increase alliance through initiating such discussions. Doing so also offers an opportunity to model how to directly address a potentially uncomfortable topic in an interpersonal dyad, and how doing so may actually decrease tension and strengthen the relationship. Such modeling is a central component of alliance-focused supervision models which emphasize an experiential focus within the process of clinical supervision (Safran, Muran, Stevens, & Rothman, 2007).

Empowering Trainees: Navigating the Power Balance in Supervision

This investigation into the PDSS consistently demonstrated a strong association between trainees feeling empowered and experiencing a positive supervisory alliance. Item 13 on the PDSS specifically asks trainee participants to choose a point on a continuum between "I felt empowered by my supervisor in this supervision session," (low rating, high trainee power) and "I did not feel empowered by my supervisor in this supervision session," (high rating, high supervisor power). This item exhibited one of the strongest correlations to overall alliance, offering direct support for the supposition that empowerment of trainees is a central component of the supervisory alliance. None of the items on the current version of the WAI/S directly measure trainee empowerment. Adding some of the most salient items from the PDSS into an updated version of the WAI/S could be an important way to further understand and measure this potential additional factor. Doing so would be in line with Bordin's (1983) original writing on the supervisory alliance. While he identified three theoretical factors (agreement on tasks and goals, and emotional bond) within working alliances across domains (in therapy as well as in supervision), his discussion of his own supervisory practice suggested that offsetting the uneven balance of power in supervision was an important component to this unique relationship.

Broaching the Topic of Power Dynamics in Supervision

Results for item 4 on the PDSS, discussed above (involving initiation of direct discussion about power dynamics), are a salient illustration of how navigation of power dynamics are a central task for the alliance, as trainees in the sample whose supervisors directly initiated discussion of power dynamics in supervision reported stronger alliances. This finding harkens to Safran and Muran (2000) who emphasize, in the therapeutic

alliance between a patient and therapist, the importance of ongoing negotiation on conscious and unconscious levels about tasks and goals as "both necessary conditions for change to take place," and "an intrinsic part of the change process," (p. 15). Data from the present study suggest that, at a conscious level, supervisors should stay alert for times when broaching the topic of power dynamics might serve the alliance and trainee development. Given the inherent tension of the topic, sensitivity and care to both timing and delivery would seem of paramount importance. The emphasis in alliance-focused supervision is on collaborative exploration of both parties' contributions to impasses and issues, which can only be achieved with a foundation involving the supervisor's commitment to humility, self-reflection and openness (Safran, Muran, Stevens, & Rothman, 2007).

Supervisors' Use of Hard and Soft Power Predicts Trainee-Rated Alliance

The methods of supervisor influence were operationalized as the interpersonal power bases, constructs developed by social psychologists (French & Raven, 1959; Raven, 2008) which have been established in dozens of organizational and relational contexts, but never applied to clinical supervision. According to French and Raven (1959), the agent of power (in this case, the supervisor) uses certain power bases (tactics) to influence the target of power (psychotherapy trainee). There are eleven different power bases which are divided into two overall types: hard power, involving coercive or punitive tactics, and soft power, understood to involve more persuasive tactics.

The findings involving the interpersonal power bases also demonstrated strong relationships between supervisors' use of soft and hard power, interpersonal style, and

supervisory alliance. The present study was the first empirical investigation of power bases in the supervisory alliance.

Overall findings underscored that the methods by which interpersonal power is wielded by supervisors has a strong impact on the quality of supervisory alliance. More specifically, hard power was a significant predictor of poor alliance. The hypothesis that positive ROs might moderate this relationship (thus serving as a buffer to protect or strengthen alliance) was not supported, however, the full model wherein hard power and positive ROs predicted alliance was significant and predicted a full 56% of variability in supervisory alliance. This suggests that the use of coercive power, never previously examined in the supervision literature, may have a very large impact on the quality of supervisory alliance. While every path in the model was not significant, this finding provides strong evidence for the negative impact of hard (coercive) power tactics and positive impact of positive response style on the supervisory alliance. This finding, as well as findings on soft power, are consistent with the one prior study of hard and soft power in the therapeutic alliance, wherein Anderson and Levitt (2014) found that hard power negatively predicted a small to moderate amount of variability in therapeutic alliance, whereas soft power had a similar effect, though in a positive direction. Given the larger effect in the present study, suppositions that power dynamics may be more salient in supervision might be given further weight.

The second model tested, wherein negative ROs were hypothesized to moderate the relationship between soft power and alliance, was also significant, predicting 51% of variability in supervisory alliance. Interestingly, soft power only exhibited a significant main effect on alliance when negative ROs were scored at .225 or above (representing

approximately 35% of the sample). Thus, when negative ROs comprised above approximately 1/3 of the overall response style of supervisors, employing soft power tactics served as a kind of buffer for the supervisory relationship, either protecting or strengthening the alliance. This finding harkens to alliance-focused supervision training models, which emphasize the importance of supervisors modeling close attendance to ruptures in the supervisory alliance and working through those ruptures through a process of repair (Safran et al., 2007). An intriguing possibility is that soft power tactics, which emphasize collaboration and explanation for decision-making, may represent an operationalization of how a rupture might be repaired.

Supervisors in the study were generally perceived by their trainees to use soft power tactics more frequently than hard power, but they also used a combination of both soft and hard power. For soft power, the three bases most frequently perceived by trainees, and which demonstrated moderate to strong relationships with supervisory alliance, were informational, expert, and legitimate positions. Informational power involves the supervisor carefully explaining to the trainee how to do something differently, with persuasive reasoning which the trainee comes to understand. The subordinate (in this case, the trainee) is encouraged to learn new skills through dialogue and practice. Expert power happens when the trainee believes the supervisor has superior knowledge and thus complies with their request. The power based called legitimate positions involves the trainee accepting the right of the supervisor to require the behavior change and accepting their own obligation to comply.

Expert power and legitimate positions, while considered soft types, do suggest that the trainee is more or less uncritically following explicit instructions, though for

reasons likely considered legitimate (i.e., that the supervisor has the right to decide on interventions based on their position of authority and licensure status). Some circumstances certainly call for these methods, just as some circumstances call for coercive types of hard power. For example, when a patient is in crisis and being treated by an inexperienced and anxious trainee, the trainee following explicit instructions by a more experienced and less anxious supervisor is very likely in the best interests of the patient as well as the trainee. Still, it may surprise many supervisors, or the field at large, to know how frequently these tactics seem to be in operation. It is important to note that the sample in question was self-selected, and it is possible that trainees who chose to participate were drawn to the opportunity to report on their negative supervisory experiences.

Still, to the extent expert power and legitimate positions are frequently used in supervision, the implications have a potentially negative side: rather than being trained in critical thinking and decision making, trainees may be restricted to following specific instructions by someone in a position of power, reflexively respecting existing hierarchies. Employing more informational power tactics after using expert power or legitimate positions would again seem to be ideal, in that the reasons for the supervisor's decision can be further discussed, thus expanding the trainee's knowledge base, and perhaps facilitating more collaboration and mutuality. When the exercise of expert power or legitimate positions causes a relational rupture in the supervisory alliance, again in line with alliance-focused models of supervision (Safran et al., 2007), metacommunication about power dynamics might serve a function of repairing the rupture, as supervisors and trainees together make sense of what happened and why. At the same time, the data

indicated that both expert power and legitimate positions were positively associated with supervisory alliance (though associations were weaker compared to informational power). As will be elaborated below under Future Research, trainees with differing attitudes toward authority and cultural norms may experience supervisors use of each power base differently.

Regarding hard power, the two types of reward power (personal and impersonal) were perceived by trainees to be the most frequently used by supervisors. As illustrated in Table 1, personal reward power involves the promise of (likely implied) approval or liking from the supervisor. Impersonal reward power in other contexts involves promises like a promotion or better pay, but in clinical supervision may involve things like getting a coveted placement within a training site, a better evaluation, or a much-needed recommendation letter. These are examples of hard power in the form of incentives. Corollaries to the reward power types are two types of coercive power, personal and impersonal, though the coercive power bases involve punishments as opposed to reinforcement. Personal coercion, wherein supervisors were disapproving in some way was also frequently perceived as being used by supervisors in the sample. On the other hand, impersonal coercion, which in clinical supervision may involve actions such as threat of dismissal or being put on academic probation, was the least frequently used power base. However, impersonal coercion showed a strong negative association with supervisory alliance, suggesting that while it was infrequently used, when it was in operation, it either had deleterious effects on the supervisory relationship or was an indicator that a very poor alliance was already in place.

The fact that trainees so frequently endorsed that their behavior shifted in seeking personal rewards from supervisors speaks to how trainees want to be liked by supervisors and are generally seeking their validation and approval. It seems reasonable to speculate that, perhaps even more than with instructors or other authority figures, supervisors may later become colleagues, possibly even friends, underscoring the high stakes of the relationship. Similarly, trainees' endorsement of worrying about personal coercion speaks to their avoidance of being disapproved of or disliked by supervisors. It also seems reasonable to speculate that trainees enjoy social approval and dislike social disapproval. Impersonal rewards, in the context of supervision are also a necessity to advance trainees' careers, as they fundamentally require positive evaluations and good recommendation letters to advance through their training. Without such impersonal rewards, their training could be interrupted or they may face other repercussions, for example in their academic program. In essence, not obtaining impersonal rewards can have the same effect as impersonal coercion. The frequency and salience of both the reward power bases and coercive power bases highlight the both *emotionally* and *materially* dependent position that trainees find themselves in relation to their supervisors; just as in therapy, supervisors carry an important ethical responsibility toward this dependence.

Notably, while the *Guidelines for Supervision* (APA, 2014) briefly indicate that psychologist supervisors are responsible to the *Ethical Principles of Psychologists and Code of Conduct* (APA, 2017), which does emphasize general principles like beneficence, nonmaleficence, fidelity and responsibility toward "those with whom they work," (APA, 2017, p. 3), this fiduciary responsibility is not articulated in the specific supervisory context. Further, other specializations (such as social work, counseling) still

have virtually no guidelines for supervision. Strengthening supervisors' awareness of trainee dependence and processes of professional identity development, and formally establishing specific expectations and standards can only strengthen and protect the training process, particularly for trainees who are objectively in vulnerable positions. Academic programs and training directors have a protective role to play in this process as well.

Supervisor Response Styles and Alliance

The present study also predicted that the interpersonal/response style of the supervisory might moderate the relationship between the power bases – so, for example, the negative impact of a supervisor who was using more hard power in a time of disagreement with the trainee, might be mitigated if the supervisor was otherwise helpful or supportive. Response style was operationalized using RAP narratives which judges coded between eight types of ROs, divided into two clusters previously identified categories by Barber, Crits-Christoph and Luborsky (1998): positive (helpful, likes me, understanding, and strong) and negative (bad, controlling, upset, and rejecting and opposing). Utilizing the RAP narratives added an observer-rated component to this investigation, which otherwise was based on self-report.

Both positive and negative RO clusters demonstrated very strong and expected associations with overall supervisory alliance. Specifically, supervisor ROs rated as helpful, understanding, and liking the trainee were positively associated with trainee-rated alliance while rejecting and opposing, upset, and controlling ROs were negatively associated with trainee-rated alliance. These findings are in line with the CCRT studies of psychotherapy relationships cited earlier, though the strength of associations in the

present study were notably higher than prior research. For example, Wiseman and Tishby (2017) found that patients' perceptions of negative ROs by therapists were associated with greater tension at the early phase of treatment and greater problems both in the middle phase and late phase. They also found that for therapists, negative ROs by patients were associated with more ruptures in the early phase and middle phase, and with greater tension in the late phase. While the present study did not assess phase of supervision, the associations were consistently higher than studies of therapeutic alliance. Again, this finding may underscore heightened tension and stakes for trainees in supervision.

Matched Pair Findings

Trainees' Hesitation to have Supervisors Contacted

While it was expected not all trainees would want to provide contact information for their supervisors, far fewer trainees elected to have their supervisors participate in the study than expected. In fact, only 11% provided consent to contact their supervisor (and of these, only around half of the supervisors actually participated). This discrepancy may highlight another aspect of the supervisory relationship related to power dynamics: on average, trainees reported strong alliances, but may still have perceived some type of risk in inviting their supervisor to participate. Perhaps they worried about their supervisors' privacy; two trainees did indicate they would prefer to gain approval from their supervisor prior to providing contact information. Further, supervisors are typically not paid explicitly for supervision and trainees may be hesitant to ask for more of their time. It also seems reasonable to speculate that trainees worried that if their supervisors became aware they had participated in a study of power dynamics in supervision, this would raise uncomfortable questions from their supervisors or otherwise indirectly broach a sensitive

topic. As discussed above, findings from the PDSS did indicate that trainees preferred their supervisors to broach this topic. As will be discussed under the future directions section, more investigation of trainees' hesitation or alternative recruiting methods will be needed in order to further examine commonalities and differences in trainees' and supervisors' experiences of the same supervisory dyad.

Discrepancies in Trainee and Supervisor Ratings

This study was the first to directly compare supervisory alliance ratings by trainees and their supervisors. For the 20 matched pairs that were successfully recruited, none of the relationships between trainee and supervisor ratings for any of the main study variables were found to be statistically significant (which was anticipated, given the small sample size). Effect sizes were also small. The lack of strong relationships in ratings suggest much more is to be investigated about the relationships between trainee and supervisor ratings on alliance and power. While a small effect, the negative (inverse) relationship found on hard power was particularly intriguing, as it may suggest that supervisors and trainees perceive the use of hard power differently.

Studies comparing the ratings of patients and therapists on therapeutic alliance have been conducted for decades. According to Horvath and Bedi (2002), the "majority of early investigators…noted significant differences between clients' and therapists' ratings," (p. 56). Limitations in these studies were addressed, such that alliance began to be assessed across various time points in therapy, and a number of studies found that patient and therapist ratings become more similar over time. In middle and late phases of therapy, closer ratings on alliance between patients and therapists has been positively related to various measures of outcomes (Gunderson et al., 1997; Hersoug et al., 2001).

Further, as Flückiger, Wampold, and Horvath (2019) summarized, the "alliance of each evaluator (therapist, patient) may be impacted by different social reference groups that may result in divergent alliance ratings. These divergences should be interpreted carefully since they do not have to indicate disagreement," (p. 72).

Limitations

A number of limitations to the present study are important to consider. First, as discussed, participants were self-selected and far fewer matched pairs of supervisory dyads were recruited than originally aimed for. While the goal was to more deeply examine both trainee and supervisor perspectives, and to make comparisons between the two groups, the subsample of matched pairs ($n = 20$) was underpowered to draw any truly meaningful conclusions from the results. As power dynamics are a sensitive issue, trainees were recruited first and then asked for supervisor contact information. The assumption was that trainees would appreciate having the choice of whether to, at least indirectly, broach the topic of power dynamics with their supervisors. However, results indicated that broaching the topic was one area in which trainees seemed to prefer that their supervisors take initiative. This finding offers a key insight that suggests recruiting supervisors first would be ethically reasonable, which will be addressed further under the future directions section.

Second, with the exception of RAP interviews, the present study relied on self-report measures, all at a single timepoint. Supervisory relationships, like all relationships, are ever evolving and change over time. While the design of the present study enabled surveying a large and diverse sample from across the United States and Canada, the data offer a snapshot of the supervisory relationship at one point in time (thereby reducing

complexity) and reflect perceptual and other biases of participants. One observer measure was incorporated, with trained judges rating RAP interviews in order to further validate findings. However, the narratives collected were provided by trainee participants and thus still subject to some of the limitations of self-report.

Finally, while the present study successfully recruited a more diverse sample than is usually the case for psychotherapists in training (in terms of race, Latinx identity, gender identity and sexual orientation), many of the comparisons to conduct between different groups were underpowered. Thus, though few differences were found between most of the sociocultural groups (for trainees, for supervisors, and for various dyadic compositions of these factors), small sample sizes for specific groups may have rendered the ability to detect such differences quite weak. Thus, results may underestimate differences between groups on alliance, hard power, soft power and power balance. One limitation may have been in assessing, for example, only the racial label for participants, as a number of researchers have emphasized the utility of also assessing racial identity attitudes in supervision (i.e., how one thinks, feels, and behaves in regard to oneself, other people within one's identified racial group, and other people outside that racial group; Bhat & Davis, 2007; Cook, 1994; Helms, 1990; Jernigan et al., 2010). Similarly, no measures were utilized to assess cultural attitudes toward authority, independent or interdependent self-construal, or individualism and collectivism, which may have offered better differentiation than demographic labels per se (Singelis, 1994; Triandis & Gelfland, 1998).

Future Directions

Data from the present study further illustrated, first and foremost, that power is highly salient in supervision and in the supervisory relationship. Additional research is warranted in a number of areas, a few of which will be highlighted here: expanding the study of trainee-supervisor matched pairs, expanding measurement methods of supervisory alliance, exploring the impact of power balance, hard and soft power on supervision outcomes, and refinement in operationalization of sociocultural variables.

Expanding the Study of Matched Pair Supervisory Dyads

Given the nature of this study, recruitment efforts aimed to exercise sensitivity toward trainees. However, this sensitivity needs to be balanced against the benefit to trainees in advancing the field's appreciation for and understanding of power dynamics in supervision. Further, findings indicated that trainees seemed to appreciate their supervisors broaching the topic of power dynamics, and at least two trainees identified discomfort in providing the necessary contact information (email address) of their supervisors to researchers. Thus, future research should consider first recruiting supervisors or otherwise finding effective ways to recruit dyads themselves. Ensuring that specific responses, as well as whether or not trainees participate, is kept confidential from supervisors would also be an important way to maintain trainee privacy, a key priority given their vulnerability in the supervisory context. Research would also benefit from a design that addressed the characteristics of poor supervisory relationships in greater depth.

Expanding Measurement of Supervisory Alliance

The present study was the first to utilize the PDSS as a measure of power balance in the supervisory relationship, while also offering further validation of this recently

developed measure. Very strong relationships were found between the overall mean score on the PDSS and all scales of the WAI/S. As discussed above, on their face, a number of items on each scale overlap with each other. A factor analysis of the PDSS would be important in its own right, to investigate whether there are specific, measurable facets of power balance that would shed further light on power dynamics in supervision. Results of the present study suggested that the overall scale (with the exception of item 4, which might optimally be reverse scored) correlates positively with supervisory alliance (with a small to moderate effect), and negatively with hard power (with a small effect). Ten of the 16 items also exhibited small, positive relationships with soft power.

Further, factor analyses of both the PDSS and WAI/S might better illuminate the facets of supervisory alliance, one of which may itself be trainee empowerment, as originally articulated by Bordin (1983). Apparently, the only factor analysis ever conducted on the WAI/S was based on expert judge's ratings as to whether items theoretically corresponded to Bordin's original concept of supervisory alliance (Bahrick, 1989), not drawn from actual responses by trainees or supervisors. Additionally, drawing from methodological developments of alliance studies in psychotherapy (between patient and therapist), future research examining supervisory alliance would benefit from collecting data at various time points in the supervisory relationship to examine whether ratings of trainees and supervisors either become more or less similar over time, and how such ratings may impact other outcomes in supervision.

Power Balance, Hard and Soft Power and Other Supervision Outcomes

This study was the first to investigate interpersonal power bases in supervision, and a number of insights were gained as to how trainees are influenced by their

supervisors, through a variety of both hard and soft power tactics. Further replication is needed to confirm or complicate initial findings. Additionally, calls have been made to better operationalize outcomes in supervision research and to examine supervisory processes in terms of their impact on trainee competence (Falender, 2014). Examining the impact of hard and soft power on specific trainee competencies, the relationship of employment of hard and soft power and supervisor competencies, and the relationship of hard and soft power with other outcome variables in supervision (such as trainee self-efficacy and patient outcomes) is warranted. Additionally, quality/length of supervisory training, as well as personality measures for trainees and/or supervisors may further explain aspects of these sensitive interpersonal processes. Finally, as the reliability estimates for the PDSS (Cook, McKibben, & Wind, 2018) were quite different for trainees in the present study ($\alpha = .90$ for the overall sample, and $\alpha = .97$ for the matched pair subset) as compared to supervisors in the matched pair subset ($\alpha = .62$), an examination of the applicability of this measure for supervisors, and/or the specific adaptations utilized in the present student, would be worthwhile.

Refining Operationalization of Sociocultural Variables

As discussed, in the present study, analyses involving comparisons between various sociocultural or demographic groups were underpowered due to small sample sizes for many groups, even though particular efforts were made to recruit underrepresented groups in prior supervision research, and in fact the final sample was more diverse than most. To achieve adequate power in such analyses, targeted research of specific minority groups is warranted on any number of variables investigated in this study. Perhaps more fundamentally, future research may benefit from moving beyond

general group labels into measurement of various cultural beliefs, attitudes, and orientations – such as racial identity (Cook, 1994; Helms, 1990; Jernigan et al., 2010), cultural interpersonal values (Kim, Atkinson, & Yang, 1999), independent or interdependent self-construal (Singelis, 1994), or individualism and collectivism (Shulruf, Hattie, & Dixon, 2007; Triandis & Gelfland, 1998). Individual differences across these variables, for both trainees and supervisors (and their interaction) may have a more meaningful impact on how power dynamics play out in supervision.

Conclusion

Overall, the results of this study emphasize the salience of power dynamics in the supervisory alliance. Trainees are dependent on supervisors to advance their careers and pursue their dreams, with important material and emotional consequences. Supervisors are in a position where they will influence trainees in a myriad of ways, including as gatekeepers for the field. While contexts and specific circumstances demand different methods of influence, in general the findings here suggest that soft power contributes positively to supervisory alliances, while hard power contributes negatively. Concretely and explicitly establishing a framework/goals for supervision at the beginning of the supervisory relationship also appears to be an important positive predictor for later alliance. Trainees who perceived their supervisors as helpful, understanding, and demonstrating a liking for them reported better alliances, while trainees who perceived their supervisors as rejecting/opposing, upset, and/or controlling reported weaker alliances.

Ensuring that trainees feel empowered in supervision appears to be a critical component of navigating tension in the supervisory relationship. While further research is

needed to confirm this, results from the present study suggest that empowerment could be conceptualized as a fourth factor in supervisory alliance, in addition to the traditional emphasis on agreement on goals and tasks, and emotional bond. In fact, in Bordin's (1983) original writings on supervision, he was sensitive to power dynamics and gave trainee empowerment considerable attention. Power is an inherent component of supervision, which is certainly not always a problem. In fact, as the results here indicate, when wielded in a helpful manner, with openness, humility, and the intention to empower trainees, supervisors can use the power vested in them to have very positive impacts on both the supervisory relationship and overall trainee development.

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Appendix A

LONG ISLAND UNIVERSITY- Brooklyn Campus
Informed Consent Form for Human Research Subjects
(Trainee Version)

You are being asked to volunteer in a research study called Clinical Supervisory

Relationships: Alliance, Power, and Relational Themes conducted by Kara Norlander

M.A., under the supervision of Lisa Samstag, Ph.D. in the Psychology Department at

Long Island University, Brooklyn Campus. The purpose of the research is to better

understand what factors contribute to positive supervisory relationships.

As a participant, you will be asked to fill out a number of questionnaires asking

about one supervisory relationship, as well as some personal characteristics about

yourself. These are questionnaires commonly used in psychosocial research. The study

will take you around 20-40 minutes to complete. During this time, you may be reminded

of difficult experiences in supervision and you may experience some mild emotional

distress. No other risks are anticipated for participating in this study.

Upon completion, you will be entered into a raffle to win one of three Amazon

gift cards worth $50. While there is no direct benefit for your participation in the study,

it is reasonable to expect that the results may provide information of value for the field of

psychology and psychotherapy training. Eligibility for the raffle is contingent upon

completion of the protocol.

Your identity as a participant will remain confidential. Your name will not be

included in any forms, questionnaires, etc. This consent form is the only document

identifying you as a participant in this study; it will be stored securely on the

investigator's password-protected computer and available only to the investigator and

faculty supervisor. ***If your supervisor participates, he/she will not have access to your***

responses. Data collected will be destroyed five years after the study is completed. Results will be reported only in the aggregate. If you are interested in seeing these results, you may contact the principal investigator.

If you have questions about the research you may contact investigator, Kara Norlander at supervisionstudy20@gmail.com, or the faculty sponsor, Dr. Lisa Samstag at lisa.samstag@liu.edu , or the department chair, Dr. Elizabeth Kudadjie-Gyamfi at elizabeth.kudadjie-gyamfi@liu.edu. If you have questions concerning your rights as a subject, you may contact the Institutional Review Board Administrator, Dr. Lacey Sischo, at (516) 299-3591, lacey.sischo@liu.edu.

If completing this study stimulates distressing thoughts about your experiences in supervision, please speak with a trusted advisor or personal therapist. Should you not have an advisor or personal therapist, we recommend that you contact 1-800-NYC-WELL for support.

You understand that you may stop participation at any time. However, you also understand that you will only be eligible for a gift card if you complete the full survey, provide your email address, AND if your participation is deemed adequate (i.e. nonrandom responding in an appropriate time frame). You can withdraw from the study at any time by navigating away from the online survey website. You can have your data deleted at any time by contacting Kara Norlander at supervisionstudy20@gmail.com

If you have fully read the above text, by choosing "I confirm," you verify that you are at least age 18 years or older and give your informed consent to participate.

☐   I confirm my consent to participate   ____ /____/____   Date

_____   By entering my age, I am certifying that I am over 18 years old

LONG ISLAND UNIVERSITY- Brooklyn Campus
Informed Consent Form for Human Research Subjects
(Supervisor Version)

You are being asked to volunteer in a research study called Clinical Supervisory Relationships: Alliance, Power, and Relational Themes conducted by Kara Norlander M.A., under the supervision of Lisa Samstag, Ph.D. in the Psychology Department at Long Island University, Brooklyn Campus. The purpose of the research is to better understand what factors contribute to positive supervisory relationships.

As a participant, you will be asked to fill out a number of questionnaires asking about one supervisory relationship, as well as some personal characteristics about yourself. These are questionnaires commonly used in psychosocial research. The study will take you around 20-40 minutes to complete. During this time, you may be reminded of difficult experiences in supervision and you may experience some mild emotional distress. No other risks are anticipated for participating in this study.

While there is no direct benefit for your participation in the study, it is reasonable to expect that the results may provide information of value for the field of psychology and psychotherapy training.

Your identity as a participant will remain confidential. Your name will not be included in any forms, questionnaires, etc. This consent form is the only document identifying you as a participant in this study; it will be stored securely on the investigator's password-protected computer and available only to the investigator and faculty supervisor. Data collected will be destroyed five years after the study is completed. Results will be reported only in the aggregate. If you are interested in seeing these results, you may contact the principal investigator.

If you have questions about the research you may contact investigator, Kara

Norlander at supervisionstudy20@gmail.com, or the faculty sponsor, Dr. Lisa Samstag at

lisa.samstag@liu.edu , or the department chair, Dr. Elizabeth Kudadjie-Gyamfi at

elizabeth.kudadjie-gyamfi@liu.edu. If you have questions concerning your rights as a

subject, you may contact the Institutional Review Board Administrator, Dr. Lacey

Sischo, at (516) 299-3591, lacey.sischo@liu.edu.

If completing this study stimulates distressing thoughts about your experiences in

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have an advisor or personal therapist, we recommend that you contact 1-800-NYC-

WELL for support.

You understand that you may stop participation at any time. However, you also

understand that you will only be eligible for a gift card if you complete the full survey,

provide your email address, AND if your participation is deemed adequate (i.e.

nonrandom responding in an appropriate time frame). You can withdraw from the study

at any time by navigating away from the online survey website. You can have your data

deleted at any time by contacting Kara Norlander at supervisionstudy20@gmail.com

If you have fully read the above text, by choosing "I confirm," you verify that you

are at least age 18 years or older and give your informed consent to participate.

☐   I confirm my consent to participate   ____ /____/____   Date

_____   By entering my age, I am certifying that I am over 18 years old

Appendix B

Debriefing Form

In the event that you experience a negative reaction to participating in this research, consider engaging in self-care activities that allow you to regain your balance. Should you need to connect with someone, consider the following confidential resources.

- Crisis center resources can be found here: http://www.iasp.info/resources/index.php/Crisis_Centres/
- 1-800-LIFENET is a suicide prevention hotline and a referral service that can help you find a therapist in your area, especially during the evening.
- New York Samaritans: Ph: 212-673-3000
- New York Help Line: Ph: 212-532-2400
- National Sexual Assault Online Hotline: http://apps.rainn.org/ohl-bridge/ Free, 24/7 online chat service.
- Contact a mental health professional of your choice, at your own expense.

If you would like a copy of the results of the study once it is completed, or have any additional questions, you may contact Kara Norlander at supervisionstudy20@gmail.com

Thank you again for taking part in this study!

Appendix C

Trainee Measures

Demographic Questionnaire – Trainee Version

Inclusion Criteria:

Participants must be currently enrolled in a graduate academic program wherein they are training to become a psychotherapist. Students must be currently seeing patients in a clinical training placement (externship, internship, etc.) and must be in their first, second, or third year of clinical practice (i.e., have been seeing patients for less than four years).

1. What gender do you identify with?
    a. Woman
    b. Man
    c. Other: _____ (Specify)
    d. I prefer not to respond

2. What is your age?
    a. ____ (Specify, in years)
    b. I prefer not to respond

3. What is your race/ethnicity?
    a. Black/African American
    b. Latino/Latina/Latinx
    c. White/Caucasian/European American
    d. Asian/Asian American
    e. Native American
    f. Other: _____ (Specify)
    g. I prefer not to respond

4. What is your sexual orientation?
    a. Homosexual
    b. Bisexual
    c. Pansexual
    d. Heterosexual
    e. Other: _____ (Specify)
    f. I prefer not to respond

5. What type of academic program are you in?
    a. Master's
    b. Doctoral

6. What is your field of study?
    a. Clinical Psychology
    b. School Psychology
    c. Counseling

    d. Social Work
    e. Marriage and Family Therapy
    f. Other: _____ (Specify)

7. What is your current status in your academic program?
    a. First year
    b. Second year
    c. Third year
    d. Other:_____ (Specify)

8. Approximately how many hours of clinical psychotherapy have you provided to clients/patients?
    a. ___ hours

9. Would you like to be included in our raffle for one of three $50 Amazon gift cards? If so, please enter your e-mail address below. Your e-mail address will be unlinked from your survey responses and will be kept in a separate file from other data. The raffle will be held upon completion of data collection.
    a. Yes
        i. E-mail address: _____
    b. No

Instructions prior to measures (trainee version):

In the following pages, you will be asked a series of questions about your experience with a current individual (one on one) clinical supervisor. If you have more than one clinical supervisor, please select the person who is either your main supervisor (where applicable) or with whom you have the most contact.

1. Did your supervisor identify clear expectations and explicitly establish goals or a framework for supervision at the beginning of your work together?
    a. Yes
    b. No
    c. Other: _____ (Explain)

2. Are there things you have chosen not to mention to your supervisor? If so, in which of the following categories might this information be put? (May choose more than one.)
    a. Personal information about yourself
        i. Describe: _____
    b. Information about your patient(s) or your work with the patient(s)
        i. Describe: _____
    c. Other
        i. Describe: _____

3. Would you be open to providing an email address for this supervisor, so we may ask for their participation as well?

    Please note: In order to keep data from supervisors and supervisees matched together, we ask for your first name so that we can indicate to your supervisor that you participated and they will know which supervisee to think of when responding to questions. At no point will supervisors have access to your responses. Once your supervisor participates, or at the end of data collection (whichever comes first), your name as well as the name of your supervisor will be removed from our data files.
    a. Yes
        i. Supervisor email address: _____
        ii. Your first name: _____
    b. No

Interpersonal Power Inventory – Trainee Version

<u>Instructions</u>
Often supervisors ask trainees to do their work somewhat differently. Sometimes trainees resist doing so, or do not follow the supervisor's directions exactly. Other times, they will do exactly as their supervisor requests. We are interested in those situations which lead trainees *to follow the requests of their supervisor*.

Think about a time when you were being supervised on a clinical task by your supervisor in question. Choose a time when they asked you to do your work somewhat differently and, though you were initially reluctant, you did exactly as you were asked. In the following sections, there are a number of reasons why you might do so. Read each descriptive statement carefully, thinking of the situation in which you were supervised. Decide how likely it was that this was the reason you complied using the following scale:

(1) Definitely not a reason
(2) Very likely not a reason
(3) Likely not a reason
(4) Not sure
(5) Likely a reason
(6) Very likely a reason
(7) Definitely a reason

1. A good evaluation from my supervisor could lead to better clinical opportunities in the

future.

2. After all, he/she was my supervisor.

3. My supervisor probably knew the best way to do the job.

4. Once it was pointed out, I could see why the change was necessary.

5. I respected my supervisor and thought highly of him/her and did not wish to disagree.

6. I liked my supervisor and his/her approval was important to me.

7. By doing so, I could make up for some problems I may have caused in the past.

8. For past help and consideration I had received, I felt obliged to comply.

9. My supervisor could make things unpleasant for me.

10. I saw my supervisor as someone I could identify with.

11. Unless I did so, his/her job would be more difficult.

12. It would have been disturbing to know that my supervisor disapproved of me.

13. My supervisor probably knew more about the work than I did.

14. Complying helped make up for things I had not done so well previously.

15. My supervisor could help me receive special benefits.

16. My supervisor may have been cold and distant if I did not do as requested.

17. My supervisor gave me good reasons for changing how I did the job.

18. I understood that my supervisor really needed my help on this.

19. My supervisor had the right to request that I do my work in a particular way.

20. My supervisor made me feel more valued when I did as requested.

21. I had made some mistakes and therefore felt that I owed this to him/her.

22. My supervisor could make things more difficult for me.

23. My supervisor had previously done some good things that I had requested.

24. It made me feel personally accepted when I did as my supervisor asked.

25. As a trainee, I had an obligation to do as my supervisor said.

26. I looked up to my supervisor and generally modeled my work accordingly.

27. My supervisor's actions could help me move ahead in my career.

28. My supervisor probably had more knowledge about this than I did.

29. My supervisor could make it more difficult for me to move ahead in my career.

30. I realized that a supervisor needs assistance and cooperation from those working with him/her.

31. I could understand why the recommended change was for the better.

32. My supervisor had let me have my way earlier, so I felt obliged to comply now.

33. Just knowing that I was on the bad side of my supervisor would have upset me.

Power Dynamics in Supervision Scale – Trainee Version

Prompt: Below are examples of experiences, issues, and discussions that commonly occur in supervision between a supervisor and supervisee. All supervisory relationships are different and there is no right or wrong answer for each of these statements.
In responding to these statements, recall your most recent supervision session. Please use the slide bar to indicate **where you perceive the balance of power to lie** between you and your supervisor **in the most recent session** for each prompt. If the event or experience did not occur in this session, please select N/A.

1. I identified the goals for this supervision session < > My supervisor identified the goals for this supervision session

2. I decided which interventions will be used with my client(s) in this supervision session < > My supervisor decided which interventions will be used with my client(s) in this supervision session

3. I conceptualized my client cases in this supervision session < > My supervisor conceptualized my client cases in this supervision session

4. I initiated discussion of power in our supervisory relationship in this supervision session < > My supervisor initiated discussion of power in our supervisory relationship in this supervision session

5. I had the power in our supervisory relationship in this supervision session< > My supervisor had the power in our supervisory relationship in this supervision session

6. The evaluation of my work that I received in this supervision session benefited me as a counselor < > The evaluation of my work that I received in this supervision session did not benefit me as a counselor

7. The feedback I received from my supervisor addressed my needs in this supervision session < > The feedback I received from my supervisor addressed their needs in this supervision session

8. I was able to speak freely in this supervision session < > I withheld information in this supervision session

9. I trust my supervisor to keep what was discussed in this supervision session confidential < > I do not trust my supervisor to keep what was discussed in this supervision session confidential

10. I was provided feedback about the client(s) in this supervision session < > I was not provided feedback about the client(s) in this supervision session

11. I was provided feedback about my skills as a counselor in this supervision session < >
I was not provided feedback about my skills as a counselor in this supervision session

12. I felt like I could be vulnerable in this supervision session with my supervisor < > I
did not feel like I could be vulnerable in this supervision session with my supervisor

13. I felt empowered by my supervisor in this supervision session < > I did not feel
empowered by my supervisor in this supervision session.

14. I think my perspective and experiences were valued by my supervisor in this
supervision session < > I do not think my perspective and experiences were valued by
my supervisor in this supervision session.

15. I think my ideas were respected by my supervisor in this supervision session < > I do
not think my ideas were respected by my supervisor in this supervision session.

16. I think my supervisor maintained healthy boundaries with me in this supervision
session < > I do not think my supervisor maintained healthy boundaries with me in
this supervision session.

Working Alliance Inventory - Trainee Version

Instructions: On the following pages there are sentences that describe some of the different ways a person might think or feel about his or her supervisor. As you read the sentences, mentally insert the name of your supervisor in place of _____ in the text.

Beside each statement there is a seven point scale:

1	2	3	4	5	6	7
Never	Rarely	Occasionally	Sometimes	Often	Very Often	Always

If the statement describes the way you always feel (or think), select the number "7"; if it never applies to you, select the number "1". Use the numbers in between to describe the variations between these extremes.

1. I feel uncomfortable with _____.

2. _____ and I agree about the things I will need to do in supervision.

3. I am worried about the outcome of our supervision sessions.

4. What I am doing in supervision gives me a new way of looking at myself as a counselor.

5. _____ and I understand each other.

6. _____ perceives accurately what my goals are.

7. I find what I am doing in supervision confusing.

8. I believe _____ likes me.

9. I wish _____ and I could clarify the purpose of our sessions.

10. I disagree with _____ about what I ought to get our of supervision.

11. I believe the time _____ and I are spending together is not spent efficiently.

12. _____ does not understand what I want to accomplish in supervision.

13. I am clear about what my responsibilities are in supervision.

14. The goals of these sessions are important to me.

15. I find what _____ and I are doing in supervision is unrelated to my concerns.

16. I feel that what _____ and I are doing in supervision will help me to

accomplish the changes that I want in order to be a more effective counselor.

17. I believe _____ is genuinely concerned for my welfare.

18. I am clear as to what _____ wants me to do in our supervision sessions.

19. _____ and I respect each other.

20. I feel that _____ is not totally honest about his/her feelings toward me.

21. I am confident in _____'s ability to supervise me.

22. _____ and I are working towards mutually agreed upon goals.

23. I feel that _____ appreciates me.

24. We agree on what is important for me to work on.

25. As a result of our supervision sessions, I am clearer as to how I might improve my

counseling skills.

26. _____ and I trust one another.

27. _____ and I have different ideas about what I need to work on.

28. My relationship with _____ is very important to me.

29. I have the feeling that it is important that I say or do the "right" things in supervision

with _____.

30. _____ and I collaborate on setting goals for my supervision.

31. I am frustrated by the things we are doing in supervision.

32. We have established a good understanding of the kinds of things I need to work on.

33. The things that _____ is asking me to do don't make sense.

34. I don't know what to expect as a result of my supervision.

35. I believe the way we are working with my issues is correct.

36. I believe _____ cares about me even when I do things that he/she doesn't

approve of.

**Instructions for Relationship Anecdotes Paradigm (RAP) Interview –
Trainee Version**

Now, please tell us about one to three incidents or events, each involving yourself in relation to your supervisor. <u>Each one should be about a different, specific incident/event</u>. These may be recent or older incidents. For each event, indicate (1) when it occurred, (2) some of what your supervisor said or did, and what you said or did, and (3) what happened at the end. The narratives you provide just need to be about a specific event that was either important or a problem to you in some way. This is a way to tell us about your supervisory relationship. Try to tell the story as you would with someone who you want to get to know you.

Remember to include:
(1) when it occurred
(2) some of what your supervisor said or did, and what you said or did
(3) what happened at the end

Experience 1: [*participants will type in free response format*]
Experience 2: [*participants will type in free response format*]
Experience 3: [*participants will type in free response format*]

[*Participants will also see a button for "I would prefer not to respond."*]

Appendix D

Supervisor Measures

Demographic Questionnaire – Supervisor Version

Inclusion Criteria:
Participants must be currently supervising at least one graduate student in an academic program wherein they are training to become a psychotherapist (at either Master's or Doctoral-level). Survey questions will be related to the relationship with one supervisee only. This supervisee must be currently seeing patients in a clinical training placement (externship, internship, etc.) and must be in their first, second, or third year of clinical practice (i.e., have been seeing patients for less than four years).

1. Do you have your unique participant identification number?
    a. I have it
        i. Enter Unique Participant ID # _____
    b. I don't have it
        i. Your Unique Participant ID # can be found in the email within which you found the hyperlink to this survey.
            1. Enter Unique Participant ID # _____
            2. I still don't have it
                a. Please provide your email address: _____
                Please note: Your Unique Participant ID # helps to de-identify your survey responses. Providing your email address will allow us to track your data immediately upon completion of the survey. We will then fill in your Unique Participant ID # and destroy any records of your email address.

2. What gender do you identify with?
    c. Woman
    d. Man
    e. Other: _____ (Specify)
    f. I prefer not to respond

3. What is your age?
    g. ____ (Specify, in years)
    h. I prefer not to respond

4. What is your race/ethnicity?
    a. Black/African American
    b. Latino/Latina/Latinx
    c. White/Caucasian/European American
    d. Asian/Asian American

  e. Native American
  f. Other: _____ (Specify)
  g. I prefer not to respond

5. What is your sexual orientation?
  a. Homosexual
  b. Bisexual
  c. Pansexual
  d. Heterosexual
  e. Other: _____ (Specify)
  f. I prefer not to respond

6. What is your professional field?
  a. Clinical Psychology
  b. School Psychology
  c. Counseling
  d. Social Work
  e. Marriage and Family Therapy
  f. Other: _____ (Specify)
  g. I prefer not to respond

7. What theoretical orientation do you most identify with as a clinician?
  a. Cognitive Behavioral Therapy
  b. Dialectical Behavioral Therapy
  c. Psychodynamic
  d. Existential
  e. Other: _____ (Specify)
  f. I prefer not to respond

8. How many years of experience do you have in providing psychotherapy to clients/patients?
  a.   ___ years and _____ months (Specify)

9.   How many supervisees have you supervised individually/one-on-one in your professional career?
  a.   ___ (Specify)

Instructions prior to measures (supervisor version):

In the following pages, you will be asked a series of questions about your experience with a current individual (one on one) clinical supervisee. If you have more than one supervisee, you may take the survey multiple times. However, you should be responding to questions only in regard to your relationship with one supervisee for each round of survey questions. This supervisee must also participate in the study in order for your responses to be included in our analyses.

1. Did you identify clear expectations and explicitly establish goals or a framework for supervision at the beginning of your work with this supervisee?
   a. Yes
   b. No

Interpersonal Power Inventory – Supervisor Version

Instructions

Often supervisors ask trainees to do their work somewhat differently. Sometimes trainees resist doing so, or do not follow the supervisor's directions exactly. Other times, they will do exactly as their supervisor requests. We are interested in those situations which lead trainees *to follow the requests of their supervisor*.

Think about a time when you were supervising your supervisee on a clinical task. Choose a time when you asked your supervisee to do their work somewhat differently and, though they were initially reluctant, they did exactly as you asked. In the following sections, there are a number of reasons why they might have done so. Read each descriptive statement carefully, thinking of the situation in which you were supervising. Decide how likely it was that this was the reason your supervisee complied using the following scale:

(1) Definitely not a reason
(2) Very likely not a reason
(3) Likely not a reason
(4) Not sure
(5) Likely a reason
(6) Very likely a reason
(7) Definitely a reason

1. A good evaluation from me could lead to better clinical opportunities for him/her in the future.

2. After all, I was his/her supervisor.

3. I probably knew the best way to do the job.

4. Once it was pointed out, they could see why the change was necessary.

5. My supervisee respected me and thought highly of me and did not wish to disagree.

6. He/she liked me, and my approval was important to him/her.

7. By doing so, he/she could make up for some problems he/she may have caused in the past.

8. For past help and consideration he/she had received, he/she felt obliged to comply.

9. I could make things unpleasant for him/her.

10. My supervisee saw me as someone he/she could identify with.

11. Unless he/she did so, my job would be more difficult.

12. It would have been disturbing to him/her to know that I disapproved of him/her.

13. I probably knew more about the work than he/she did.

14. Complying helped make up for things he/she had not done so well previously.

15. I could help him/her receive special benefits.

16. I may have been cold and distant if he/she did not do as requested.

17. I gave him/her good reasons for changing how he/she did the job.

18. He/she understood that I really needed his/her help on this.

19. I had the right to request that he/she do his/her work in a particular way.

20. I made him/her feel more valued when he/she did as requested.

21. He/she had made some mistakes and therefore felt that he/she owed this to me.

22. I could make things more difficult for him/her.

23. I had previously done some good things that he/she had requested.

24. It made him/her feel personally accepted when he/she did as I asked.

25. As a trainee, he/she had an obligation to do as I said.

26. He/she looked up to me and generally modeled his/her work accordingly.

27. My actions could help him/her get ahead.

28. I probably had more knowledge about this than he/she did.

29. I could make it more difficult for him/her to move ahead in my career.

30. He/she realized that I need assistance and cooperation from those working with me.

31. He/she could understand why the recommended change was for the better.

32. I had let him/her have his/her way earlier, so he/she felt obliged to comply now.

33. Just knowing that he/she was on my bad side would have upset him/her.

Power Dynamics in Supervision Scale – Supervisor Version

Prompt: Below are examples of experiences, issues, and discussions that commonly occur in supervision between a supervisor and supervisee. All supervisory relationships are different and there is no right or wrong answer for each of these statements.
In responding to these statements, recall your most recent supervision session. Please use the slide bar to indicate **where you perceive the balance of power to lie** between you and your supervisee **in the most recent supervision session** for each prompt. If the event or experience did not occur in this session, please select N/A.

1. I identified the goals for this supervision session < > My supervisee identified the goals for this supervision session

2. I decided which interventions will be used with his/her client(s) in this supervision session < > My supervisee decided which interventions will be used with his/her client(s) in this supervision session

3. I conceptualized his/her client cases in this supervision session < > My supervisee conceptualized his/her client cases in this supervision session

4. I initiated discussion of power in our supervisory relationship in this supervision session < > My supervisee initiated discussion of power in our supervisory relationship in this supervision session

5. I had the power in our supervisory relationship in this supervision session< > My supervisee had the power in our supervisory relationship in this supervision session

6. The evaluation of his/her work that he/she received in this supervision session benefited him as a counselor < > The evaluation of his/her work that he/she received in this supervision session did not benefit him/her as a counselor

7. The feedback I provided my supervisee addressed his/her needs in this supervision session < > The feedback I provided to my supervisee addressed my needs in this supervision session

8. My supervisee was able to speak freely in this supervision session < > My supervisee withheld information in this supervision session

9. My supervisee trusts me to keep what was discussed in this supervision session confidential < > My supervisee does not trust me to keep what was discussed in this supervision session confidential

10. I provided feedback about the client(s) in this supervision session < > I did not provide feedback about the client(s) in this supervision session

11. I provided feedback about his/her skills as a counselor in this supervision session < > I did not provide feedback about his/her skills as a counselor in this supervision session

12. My supervisee felt like he/she could be vulnerable in this supervision session with me < > I did not feel like I could be vulnerable in this supervision session with my supervisee

13. I felt empowered by my supervisee in this supervision session < > I did not feel empowered by my supervisee in this supervision session.

14. I think my perspective and experiences were valued by my supervisee in this supervision session < > I do not think my perspective and experiences were valued by my supervisee in this supervision session.

15. I think my ideas were respected by my supervisee in this supervision session < > I do not think my ideas were respected by my supervisee in this supervision session.

16. I think my supervisee maintained healthy boundaries with me in this supervision session < > I do not think my supervisee maintained healthy boundaries with me in this supervision session.

Working Alliance Inventory - Supervisor Version

Instructions: On the following pages there are sentences that describe some of the different ways a person might think or feel about his or her supervisee. As you read the sentences, mentally insert the name of your supervisee in place of _____ in the text.

Beside each statement there is a seven point scale:

1	2	3	4	5	6	7
Never	Rarely	Occasionally	Sometimes	Often	Very Often	Always

If the statement describes the way you always feel (or think), select the number "7"; if it never applies to you, select the number "1". Use the numbers in between to describe the variations between these extremes.

1. I feel uncomfortable with _____.

2. _____ and I agree about the things he/she needs to do in supervision.

3. I have some concerns about the outcome of our supervision sessions.

4. _____ and I both feel confident about the usefulness of our current activity in

supervision.

5. _____ and I have a common perception of her/his goals in supervision.

6. I feel I really understand _____.

7. _____ finds what we are doing in supervision confusing.

8. I believe _____ likes me.

9. I sense a need to clarify the purpose of our supervision sessions for _____.

10. I have some disagreements with _____ about the goals of these sessions.

11. I believe the time _____ and I are spending together is not spent efficiently.

12. I have doubts about what we are trying to accomplish in supervision.

13. I am clear and explicit about what we are trying to accomplish in supervision.

14. The current goals of these sessions are important for _____.

15. I find what _____ and I are doing in supervision is unrelated to his/her concerns.

16. I feel that what _____ and I are doing in supervision will help him/her to accomplish the changes needed for him/her to be a more effective counselor.

17. I am genuinely concerned for _____'s welfare.

18. I am clear as to what I expect _____ to do in our supervision sessions.

19. _____ and I respect each other.

20. I feel that I am not totally honest about my feelings toward _____.

21. I am confident in my ability to supervise _____.

22. _____ and I are working towards mutually agreed upon goals.

23. I appreciate _____ as a person.

24. We agree on what is important for _____ to work on.

25. As a result of our supervision sessions, _____ is clearer as to how to improve his/her counseling skills.

26. _____ and I have built a mutual trust.

27. _____ and I have different ideas about what he/she needs to work on.

28. Our relationship is important to _____.

29. _____ has some fears that if she/he says or does the wrong things that I will disapprove.

30. _____ and I collaborate on setting goals for our supervision sessions.

31. _____ is frustrated by what I am asking her/him to do in supervision.

32. We have established a good understanding of the kinds of things _____ needs to work on.

33. The things that we are doing in supervision don't make much sense to _____.

34. _____ doesn't know what to expect as a result of supervision.

35. _____ believes the way we are working with his/her issues is correct.

36. I respect _____ even when he/she does things that I don't approve of.

Appendix E

Assessing Accuracy in Trainee Ratings of Supervisors

Comparing trainees' descriptions of their supervisors and the supervisors' self-report in the matched pair subsample, a number of discrepancies were found across demographic variables. No discrepancies were noted in transgender status, but in gender identity, one pair differed: a supervisor who identified as male had the trainee identify them as a female. Neither party identified the supervisor as transgender. The trainee did indicate that there had not been discussion of the supervisor's gender. Thus, the discrepancy in gender identification may be indicative of one or both parties' non-careful reporting style/response error, or reflective of some confusion or ideological differences regarding the supervisor's gender. Another supervisor preferred not to respond to gender identity, thus excluding them from this analysis.

One supervisor preferred not to respond to race, and ratings of the supervisors' race differed within two pairs: one supervisor who identified as biracial had the trainee identify them as Native American, and another supervisor who identified as White had the trainee indicate they were biracial. Both of these trainees indicated the supervisor's race had been discussed. Thus, errors in reporting or confusion about supervisor's race may explain these discrepancies. One trainee reported their supervisor was Latinx while the supervisor stated not to be. For sexual orientation, three trainees preferred not to respond, and one pair mismatched: the supervisor identified as bisexual whereas the trainee reported them as heterosexual. As in the above analyses, this discrepancy could reflect errors in reporting, or confusion, perhaps specifically on the part of the trainee if

the supervisor has an opposite-sex partner. The trainee did report the topic had not been discussed.

The most frequent instances of discrepancies in supervisor identify factors occurred in reporting theoretical orientation, wherein 6 pairs (30%) had different ratings: 3 supervisors who identified as "other" had their trainees rate them as either CBT or psychodynamically-oriented, two supervisors who identified as existential/humanistically-oriented had their trainees identify them as either CBT or "other," and one supervisor who identified as psychodynamic had their trainee identify them as CBT-oriented. Interestingly, for all but one of these cases, the trainee reported the topic of supervisor theoretical orientation had been discussed. In fact, by far, for the matched pair subsample, theoretical orientation was much more widely discussed than other characteristics of the supervisors' identities, yet this variable also had the highest number of discrepancies. Perhaps theoretical orientation had been discussed in more specific terms (i.e., use of specific interventions or approaches to conceptualization, rather than use of "brand names") or perhaps trainees perceive differences in how their supervisors identify and operate. Whatever the case may be, the analysis of this small subsample of the larger pool of trainees suggest that results based on trainees' ratings of supervisors would need to be critically assessed, as trainees were not perfect reporters of how their supervisors identify – most markedly so regarding theoretical orientation.

Appendix F

Results for Exploratory Questions 5 through 9

Exploratory Question 5

Exploratory Question 5 asked whether either the trainee's or supervisor's gender identity predicted differences in trainee ratings of (a) supervisory alliance, (b) supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance. Exploratory question 5 also asked whether the gender composition of the supervisory dyad predicted trainee ratings of (e) supervisory alliance, (f) the supervisors' use of hard power, (g) supervisors' use of soft power, or (h) power balance. These questions were assessed using a two-way MANOVA test with the two factors being trainee gender and supervisor gender, resulting in four groups: female supervisor-female trainee ($n = 143$), female supervisor-male trainee ($n = 33$), male supervisor-female trainee ($n = 60$), and male supervisor-female trainee ($n = 19$). Means and standard deviations for alliance, hard power, soft power, and power balance for each of the four groups based on gender composition are presented in Table 16.

A non-significant Box's M test ($p = .06$) indicated homogeneity of covariance matrices of the dependent variables across levels of gender composition. Further, Levene's test for equality of error variances was not significant for any of the dependent variables: for supervisory alliance, $p = .52$, for hard power, $p = .33$, for soft power, $p = .11$, and for power balance $p = .45$. Thus, the assumptions for the MANOVA were met. However, as sample sizes between groups varied greatly (ranging from 19 to 143), analysis of Pillai's Trace offered a more conservative and robust estimator of differences between the four groups opposed to Wilk's Λ.

Table 16

Descriptive Statistics for the Main Study Variables for the Four Groups of Gender Composition
(N = 311)

	Female Supervisor-Female Trainee		Female Supervisor-Male Trainee		Male Supervisor-Female Trainee		Male Supervisor-Male Trainee	
	N	M (SD)	N	M (SD)	N	M (SD)	N	M (SD)
WAI/S-T	143	5.51 (0.91)	33	5.59 (0.77)	60	5.55 (0.90)	19	5.65 (0.77)
IPI-T Hard Power	143	58.10 (19.23)	33	50.12 (16.60)	60	52.68 (19.39)	19	52.68 (14.81)
IPI-T Soft Power	143	77.23 (11.21)	33	74.88 (9.85)	60	76.47 (11.90)	19	75.53 (7.21)
PDSS-T	143	1.89 (0.50)	33	1.84 (0.43)	60	1.90 (0.48)	19	1.88 (0.46)

Note. N = Sample Size; *M* = Mean; *SD* = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-Hard-T = Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-Soft-T = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

The results for the MANOVA indicated non-significant main effects on the dependent variables for both trainee gender, Pillai's Trace = .005, $F(4, 248) = 0.30$, $p = .88$, partial $\eta^2 = .01$, as well as supervisor gender, Pillai's Trace = .010, $F(4, 248) = 0.60$, $p = .67$, partial $\eta^2 = .01$. Thus, no significant differences were observed on trainee ratings of supervisory alliance, hard power, soft power, or power balance based on either the trainee or supervisor's gender. Similarly, the interaction effect between trainee and supervisor gender on the dependent variables was non-significant, Pillai's Trace = .01, $F(4, 248) = 0.60$, $p = .67$, partial $\eta^2 = .01$. Thus, no differences on trainee ratings of supervisory alliance, hard power, soft power, or power balance were found when comparing the four groups of gender composition (female supervisor-female trainee, female supervisor-male trainee, male supervisor-female trainee, and male supervisor-female trainee).

Exploratory Question 6

Exploratory Question 6 asked whether either the trainee's or supervisor's racial identity predicted differences in trainee ratings of (a) supervisory alliance, (b) the supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance. Exploratory question 6 also asked whether the racial composition of the supervisory dyad (matched racial identity or different racial identities[10]) predicted trainee ratings of (e) supervisory alliance, (f) the supervisors' use of hard power, (g) supervisors' use of soft power, or (h) power balance. Six racial identities were represented in the main sample: White ($n = 214$ for trainees, $n = 258$ for supervisors), Black ($n = 28$ for trainees, $n = 19$

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[10] Though more specific dyadic compositions (i.e., Asian/Asian American supervisor with Black trainee, Black supervisor with White trainee, etc.) would have facilitated more nuanced analyses, small sample sizes based on groups of these types were not sufficiently powered.

for supervisors), Asian/Asian American (including Southeast Asian; $n = 41$ for trainees, $n = 23$ for supervisors), Native American ($n = 3$ for trainees, $n = 1$ for supervisors), Middle Eastern ($n = 6$ for trainees, $n = 0$ for supervisors), and Biracial/Multiracial ($n = 15$ for trainees, $n = 4$ for supervisors). Due to uneven distribution of racial identities between trainees and supervisors, the analyses for exploratory question 4 were done in three separate MANOVA tests: first, for trainee race, second, for supervisor race, and third, for dyads with matched and non-matched racial compositions. For each of the analyses, any group with a sample size smaller than 10 were omitted from analyses due to lack of statistical power.

To assess potential differences in trainee ratings of supervisory alliance, hard power, soft power, and power balance between trainees with differing racial identities, a one-way MANOVA was conducted to assess differences between the following groups: White ($n = 180$), Black ($n = 24$), Asian/Asian American ($n = 36$), and Biracial/Multiracial ($n = 12$) trainees. Means and standard deviations for each of these groups is presented in Table 17. While Box's test of equality of covariance matrices was non-significant ($p = .33$), Levene's test of equality of error variances was significant for soft power ($p = .01$), though not significant for power balance ($p = .08$), supervisory alliance ($p = .46$), nor hard power ($p = .81$). Hartley's FMax test also showed significant results for soft power, wherein the variance for the White group ($s^2 = 188.16$) was more than three times the variance of the Asian/Asian American group ($s^2 = 63.30$). Due to the results of both Levene's and Hartley's tests, Welch's test was used to conduct the comparisons of means as the most robust estimator of potential differences. For all of the dependent variables, Welch's test was not significant between any of the trainee racial identities: for

Table 17

Descriptive Statistics for the Main Study Variables for the Four Groups by Trainee Race (N = 311)

	White Trainee		Black Trainee		Asian/Asian American Trainee		Biracial/ Multiracial Trainee	
	N	*M (SD)*	*N*	*M (SD)*	*N*	*M (SD)*	*N*	*M (SD)*
WAI/S-T	180	5.44 (0.94)	24	5.72 (0.83)	36	5.63 (0.77)	12	5.34 (0.91)
IPI-T Hard Power	180	56.77 (18.99)	24	54.42 (22.62)	36	53.50 (17.03)	12	58.50 (20.34)
IPI-T Soft Power	180	76.66 (11.15)	24	76.92 (13.72)	36	74.28 (7.96)	12	76.67 (10.17)
PDSS-T	180	1.92 (0.52)	24	1.79 (0.43)	36	1.93 (0.39)	12	1.82 (0.41)

Note. N = Sample Size; *M* = Mean; *SD* = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-T Hard Power = Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-T Soft Power = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

supervisory alliance, *Welch's F*(3, 38.72) = 1.32, *p* = .28, estimated ω^2 = .004, for hard

power, *Welch's F*(3, 39.99) = 0.22, *p* = .88, estimated ω^2 < .001, for soft power, *Welch's*

F(3, 40.74) = 0.70, *p* = .56, estimated ω^2 < .001, and for power balance, *Welch's F*(3,

37.99) = 0.80, *p* = .28, estimated ω^2 < .001. Thus, no meaningful differences were

observed between trainees of the four racial identities for supervisory alliance, hard

power, soft power, or power balance.

To assess potential differences in trainee ratings of supervisory alliance, hard

power, soft power, and power balance between different trainees with differing

supervisor racial identities, a one-way MANOVA was conducted to assess differences

between the following groups: White (*n* = 219), Black (*n* = 15), and Asian/Asian

American (*n* = 21) supervisors. Means and standard deviations for each of these groups is

presented in Table 18. Box's test was significant (*p* = .02), as was Levene's test for both

supervisory alliance (*p* = .01) and power balance (*p* = .03), though Levene's test was non-

significant for hard power (*p* = .14) and soft power (*p* = .16). Thus, as with trainee racial

identity, Welch's test was used for the MANOVA assessing differences across

supervisory alliance, hard power, soft power and power balance for supervisor racial

identity. Welch's test was significant for two of these dependent variables: for

supervisory alliance, *Welch's F*(2, 26.07) = 3.46, *p* = .05, estimated ω^2 = .02, and for

power balance, *Welch's F*(2, 29.70) = 3.99, *p* = .03, estimated ω^2 = .02, while not

significant for both hard power, *Welch's F*(2, 28.92) = 1.08, *p* = .35, , estimated ω^2 <

.001 and soft power, *Welch's F*(2, 26.70) = 0.70, *p* = .51, estimated ω^2 <.001. This

indicated that differences existed in average ratings for both supervisory alliance and

power balance between trainees who had supervisors with

Table 18

Descriptive Statistics for the Main Study Variables for the Three Groups by Supervisor Race (N = 311)

	White Supervisor		Black Supervisor		Asian/Asian American Supervisor	
	N	*M (SD)*	*N*	*M (SD)*	*N*	*M (SD)*
WAI/S-T	219	5.51 *(0.88)*	15	5.88 *(0.61)*	21	5.15 *(1.19)*
IPI-T Hard Power	219	56.09 *(19.54)*	15	52.60 *(11.61)*	21	60.57 *(20.69)*
IPI-T Soft Power	219	76.60 *(11.10)*	15	77.53 *(7.65)*	21	74.76 *(11.89)*
PDSS-T	219	1.90 *(0.49)*	15	1.71 *(0.24)*	21	1.99 *(0.57)*

Note. N = Sample Size; *M* = Mean; *SD* = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-T Hard Power = Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-T Soft Power = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

different racial identities, though the effect sizes were small: supervisor race accounted for 2% of variance in supervisory alliance and 2% of variance in power balance.

Post hoc tests for supervisory alliance indicated that the biggest difference between groups was between trainees with White supervisors and those with Asian/Asian American supervisors, with the mean difference for alliance ratings for trainees with White supervisors being 0.73 points higher than Asian/American supervisors, though with the more conservative Tamhane's analyses did not reach statistical significance (p = .07). This indicated that trainees with White supervisors in the sample may have had somewhat better alliances than with Asian/Asian American supervisors, though this result requires replication. For power balance, a statistically significant difference was observed between trainees with White and those with Black supervisors, wherein the mean difference for power balance ratings for trainees with White supervisors was 0.19 points higher than those with Black supervisors (p = .04) regardless of trainee racial identity. This result indicated that trainees with Black supervisors typically felt they held more power than those with White supervisors.

For the analyses of supervisory dyads with various racial compositions, participants were first sorted into two groups: dyads with matched racial identities (i.e. supervisor and trainee carried the same racial identity, n = 157) and dyads with non-matched racial identities (i.e. supervisor and trainee carried different racial identities, n = 100). Means and standard deviations are presented in Table 19. Box's test was nonsignificant (p = .82), as were all Levene's tests: for supervisory alliance, p = .94, for hard power, p = .84, for soft power, p = .96, and for power balance, p = .15. Thus, the assumptions for the

Table 19

Descriptive Statistics for Trainee Ratings on the Main Study Variables for the Two Groups by Racial Composition (N = 311)

	Matched Race		Unmatched Race	
	N	*M (SD)*	*N*	*M (SD)*
WAI/S-T	157	5.48 *(0.90)*	100	5.55 *(0.90)*
IPI-T Hard Power	157	57.09 *(18.74)*	100	54.73 *(19.76)*
IPI-T Soft Power	157	77.24 *(10.83)*	100	75.30 *(11.08)*
PDSS-T	157	1.91 *(0.52)*	100	1.88 *(0.45)*

Note. N = Sample Size; *M* = Mean; *SD* = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-T Hard Power= Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-T Soft Power = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

MANOVA were met. The overall model was not significant, *Wilk's Λ* = .99, *p* = .49,

partial η^2 = .01; no differences were found between dyads who were racially matched or

non-matched for trainee ratings on supervisory alliance, hard power, soft power, or power

balance.

Exploratory Question 7

Exploratory question 7 asked whether differences existed for Latinx versus non-

Latinx trainees or supervisors in trainee ratings of four dependent variables: (a)

supervisory alliance, (b) the supervisors' use of hard power, (c) supervisors' use of soft

power, or (d) power balance. Exploratory question 7 further asked whether the

composition of the supervisory dyad on Latinx identity predicted trainee ratings of (e)

supervisory alliance, (f) the supervisors' use of hard power, (g) supervisors' use of soft

power, or (h) power balance. Due to uneven distribution of Latinx identities between

trainees and supervisors, the analyses for exploratory question 7 were done in two

separate MANOVA tests: first, for trainee race and supervisor Latinx identity, and

second, for dyads with matched and non-matched Latinx compositions[11].

The first evaluation was conducting using a two-way MANOVA, with two factors,

trainee Latinx status and supervisor Latinx status to examine the simple main effects of

trainees' Latinx status on the four dependent variables (*n* = 30 for Latinx trainees and *n* =

231 for non-Latinx) and to examine the simple main effects of supervisors' Latinx status

(*n* = 19 for Latinx supervisors and *n* = 227 for non-Latinx supervisors) on the four

dependent variables. Sample sizes, means and standard deviations for these analyses are

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[11] Investigators first tried to split participants into four groups (Latinx-Latinx, Latinx-non-Latinx, non-Latinx-Latinx, and non-Latinx-non-Latinx), but this resulted in groups that were too small for comparison, as both groups with Latinx supervisors only included 9 participants each.

presented in Table 20. Box's M test was insignificant ($p = .007$), while Levene's test was significant for hard power ($p = .03$) and power balance ($p < .001$), not significant for supervisory alliance ($p = .08$) and not significant for soft power ($p = .62$). Hartley's FMax test was not significant for either trainee Latinx status or supervisor Latinx status, and so Pillai's Trace was used for significance testing.

Overall, Pillai's Trace was not significant for supervisor Latinx status, $F(4, 236) = .02$, $p = .26$, partial $\eta^2 = .02$, indicating that there were no meaningful differences on trainee ratings for supervisory alliance, hard power, soft power, or power balance, as a function of whether or not the supervisor was Latinx. However, Pillai's Trace was significant for trainee Latinx status, $F(4, 236) = .05$, $p = .01$, partial $\eta^2 = .06$, indicating that there were differences between trainee ratings on some or all of the dependent variables according to whether the trainee was Latinx. Still, none of the between-subject effects on any of the dependent variables for trainee Latinx status reached significance: for supervisory alliance, $F(1) = 0.49$, $p = .49$, partial $\eta^2 = .002$, for hard power, $F(1) = 2.16$, $p = .14$, partial $\eta^2 = .009$, for soft power, $F(1) = 0.40$, $p = .53$, partial $\eta^2 = .002$, and for power balance, $F(1) = 1.96$, $p = .16$, partial $\eta^2 = .008$. Thus, while the more sensitive MANOVA detected differences for Latinx trainee ratings compared to non-Latinx trainees for the four dependent variables, and whether the trainee was Latinx accounted for 6% of variance in ratings on those dependent variables, the less sensitive ANOVAs looking separately at each dependent variable were not able to detect specific differences.

There were differences in Latinx trainee ratings of either supervisory alliance, hard power, soft power, or power balance compared to non-Latinx trainees, but where the specific differences lie was unable to be identified. Descriptively, on average, Latinx

Table 20

Descriptive Statistics for Trainee Ratings on the Main Study Variables according to Latinx Status for Trainees and Supervisors (N = 311)

	Latinx Trainee N =		Non-Latin Trainee		Latinx Supervisor		Non-Latinx Supervisor	
	N	*M (SD)*	*N*	*M (SD)*	*N*	*M (SD)*	*N*	*M (SD)*
WAI/S-T	30	5.35 *(1.12)*	231	5.54 *(0.85)*	19	5.51 *(1.03)*	227	5.50 *(0.90)*
IPI-T Hard Power	30	54.73 *(19.47)*	231	55.91 *(19.04)*	19	56.58 *(25.00)*	227	55.62 *(18.77)*
IPI-T Soft Power	30	74.37 *(13.66)*	231	76.81 *(10.54)*	19	79.63 *(11.75)*	227	75.96 *(10.97)*
PDSS-T	30	2.12 *(0.70)*	231	1.86 *(0.44)*	19	2.02 *(0.63)*	227	1.90 *(0.48)*

Note. N = Sample Size; *M* = Mean; *SD* = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-T Hard Power = Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-T Soft Power = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

trainees reported weaker alliances, less use of soft power by supervisors, less use of hard power, and feeling less empowered as compared to non-Latinx trainees.

The second evaluation was conducted using a MANOVA to detect potential differences between supervisory dyads of different combinations of Latinx status, where participants were first sorted into two groups: dyads that were matched for Latinx status ($n = 214$), and dyads that were unmatched for Latinx status ($n = 29$). Means and standard deviations for each of the dependent variables for these two groups are presented in Table 21. While Box's test was non-significant ($p = .08$), Levene's test was significant for both hard power ($p = .01$) and power balance ($p < .001$) while not significant for supervisory alliance ($p = .08$), nor hard power ($p = .14$). Hartley's FMax test was not significant for any of the dependent variables, and so Pillai's trace was used for significance testing.

The MANOVA comparing matched and non-matched dyads for Latinx status was significant, Pillai's trace = .05, $p = .02$, partial $\eta^2 = .05$. More specifically, statistically significant differences were found on ratings of supervisory alliance, $F(1) = 10.80$, $p = .001$, partial $\eta^2 = .04$, as well as for power balance, $F(1) = 9.20$, $p < .01$, partial $\eta^2 = .04$. Results for hard power were not significant, $F(1) = 3.18$, $p = .08$, partial $\eta^2 = .01$, and results for soft power were also not significant, $F(1) = 0.24$, $p = .62$, partial $\eta^2 = .001$. Thus, whether dyads were matched for Latinx identity accounted for 4% of variance on trainee-rated supervisory alliance, and, on average, those who were matched rated their alliance 0.57 points higher than those who were unmatched. Similarly, whether dyads were matched for Latinx identity accounted for 4% of variance on trainee-rated power balance, and, on average, those who were matched rated feeling more empowered by 0.29 points. These results indicate that trainees who were in supervisory dyads with one

Table 21

Descriptive Statistics for Trainee Ratings on the Main Study Variables
for Dyads that were Matched and Unmatched for Latinx Identity (N = 311)

	Matched Latinx Status		Unmatched Latinx Status	
	N	*M (SD)*	*N*	*M (SD)*
WAI/S-T	214	5.58 *(0.86)*	29	5.01 *(1.06)*
IPI-T Hard Power	214	54.80 *(18.44)*	29	61.52 *(22.95)*
IPI-T Soft Power	214	76.52 *(10.66)*	29	75.45 *(13.25)*
PDSS-T	214	1.87 *(0.45)*	29	2.16 *(0.49)*

Note. N = Sample Size; *M* = Mean; *SD* = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-T Hard Power = Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-T Soft Power = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

member who was Latinx and one who was not typically felt weaker working

relationships (alliance) with their supervisors compared to dyads where both members

were Latinx, or both members were not Latinx. Further, trainees who were in supervisory

dyads with one member who was Latinx and one who was not typically felt less

empowered than trainees in dyads where either both members were Latinx, or both

members were not Latinx.

Exploratory Question 8

Exploratory question 8 asked whether either the trainee's or supervisor's sexual

orientation predicted differences in trainee ratings of (a) supervisory alliance, (b) the

supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance.

Exploratory question 8 further asked whether the composition of the supervisory dyad on

sexual orientation predicted trainee ratings of (e) supervisory alliance, (f) the supervisors'

use of hard power, (g) supervisors' use of soft power, or (h) power balance. While non-

heterosexual trainees identified with a number of sexual identities (bisexual, pansexual,

etc.), overwhelmingly they identified their non-heterosexual supervisors as either lesbian

or gay. Since many of the individual groups were too small to hold statistical power, both

trainees and supervisors were divided into two categories prior to these analyses:

heterosexual and Lesbian, Gay, Bisexual and Queer (LGBQ). Comparisons were then

made between four groups: LGBQ supervisor – LGBQ trainee ($n = 18$), LGBQ

supervisor – heterosexual trainee ($n = 29$), heterosexual supervisor – LGBQ trainee ($n = 58$), and heterosexual supervisor – heterosexual trainee ($n = 155$). Means and standard

deviations for alliance, hard power, soft power, and power balance as a function of

trainee and supervisor sexual orientation are presented in Table 22.

Table 22

Descriptive Statistics for Trainee Ratings on the Main Study Variables for the Four Groups of Sexual Orientation Composition (N = 311)

	LGBQ Supervisor-LGBQ Trainee N =		LGBQ Supervisor-Heterosexual Trainee		Heterosexual Supervisor-LGBQ Trainee		Heterosexual Supervisor-Heterosexual Trainee	
	N	M (SD)	N	M (SD)	N	M (SD)	N	M (SD)
WAI/S-T	18	5.30 (0.98)	29	5.23 (1.23)	58	5.31 (0.94)	155	5.66 (0.76)
IPI-T Hard Power	18	56.89 (21.29)	29	58.62 (21.59)	58	59.31 (21.55)	155	54.15 (17.26)
IPI-T Soft Power	18	75.00 (10.49)	29	71.31 (13.26)	58	76.91 (10.24)	155	77.48 (10.64)
PDSS-T	18	1.95 (0.51)	29	1.98 (0.61)	58	1.98 (0.53)	155	1.84 (0.43)

Note. N = Sample Size; M = Mean; SD = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-T Hard Power = Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-T Soft Power = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

Exploratory question 8 was then assessed using a two-way MANOVA test with the two factors being trainee sexual orientation and supervisor sexual orientation. Box's test was not significant ($p = .008$), while Levene's test was significant for supervisory alliance ($p < .001$), hard power ($p < .01$) and power balance ($p = .01$), while not for soft power ($p = .37$). Hartley's FMax test was not significant, and so Pillai's Trace was used for significance testing. The results for the MANOVA indicated non- significant simple main effects on the dependent variables for both trainee sexual orientation, Pillai's Trace $= .01$, $F(4, 253) = 0.65$, $p = .63$, partial $\eta^2 = .01$, as well as supervisor sexual orientation, Pillai's Trace $= 0.02$, $F(4, 253) = 1.49$, $p = .20$, partial $\eta^2 = .02$. Similarly, the interaction effect between trainee and supervisor sexual orientation on the dependent variables was non-significant, Pillai's Trace $= .01$, $F(4, 253) = 0.85$, $p = .49$, partial $\eta^2 = .01$. Neither trainee or supervisor sexual orientation, nor an interaction between trainee and supervisor sexual orientation were found to have an effect on supervisory alliance, supervisor's use of hard or soft power, nor power balance. Trainees who were LGBQ rated their working relationships with supervisors (alliance), supervisors' use of coercive methods (hard power), supervisors' use of persuasive methods (soft power), and sense of empowerment about the same as trainees who were heterosexual.

Exploratory Question 9

Exploratory question 9 asked whether trainees with supervisors of different theoretical orientations exhibit differences in their ratings of (a) supervisory alliance, (b) supervisors' use of hard power, (c) supervisors' use of soft power, or (d) power balance. Using a one-way MANOVA test with the factor or theoretical orientation having four levels: CBT ($n = 115$), DBT ($n = 13$), Psychodynamic ($n = 78$), and

Existential/Humanistic ($n = 25$). The means and standard deviations for alliance, hard

power, soft power, and power balance as a function of supervisor theoretical orientation

are presented in Table 23. Box's M was not significant ($p = .89$) and none of Levene's

tests reached significance: for supervisory alliance, $p = .99$, for hard power, $p = .52$, for

soft power, $p = .78$, and for power balance, $p = .85$, and so *Wilk's* Λ was used for

significance testing. The MANOVA was not significant, *Wilk's* $= .97$, $F(12, 224) = 0.59$,

$p = .85$, partial $\eta^2 = .01$. Thus, no differences were found in for trainees with supervisors

of different theoretical orientations in their ratings of the supervisory working

relationship (alliance), supervisors' use of coercive methods (hard power), supervisors'

use of persuasive methods (soft power), or sense of empowerment.

Summary of Findings for Exploratory Questions 5 through 9

Discussing Supervisor Factors

Most supervisory dyads did not discuss salient aspects of the supervisor's identity

(gender, race, Latinx heritage, and sexual orientation). No relationship was found

between this lack of discussion and variations in trainee-rated supervisory alliance,

though some trainees did then exhibit confusion or misidentification (or typing errors)

when it came to these basic identity factors in their supervisors. Discussion of the

supervisor's theoretical orientation, on the other hand, both happened more frequently

(more than half the time) and was significantly associated with better alliance, with

medium effect (Cohen's $d = 0.37$). At the same time, theoretical orientation was the

supervisor factor most frequently misidentified by trainees in the matched pair

subsample.

Table 23

Descriptive Statistics for the Main Study Variables across Supervisor Theoretical Orientations (N = 311)

	CBT		DBT		PDT		Existential/Humanistic	
	N	*M (SD)*	*N*	*M (SD)*	*N*	*M (SD)*	*N*	*M (SD)*
WAI/S-T	115	5.53 (0.90)	15	5.44 (0.73)	80	5.53 (0.97)	26	5.58 (0.97)
IPI-T Hard Power	124	55.70 (18.28)	16	58.81 (19.11)	84	53.08 (17.27)	26	56.88 (20.58)
IPI-T Soft Power	124	77.06 (10.56)	16	80.19 (11.56)	84	75.19 (11.22)	26	77.62 (9.88)
PDSS-T	115	1.90 (0.50)	13	1.91 (0.48)	78	1.83 (0.46)	25	1.94 (0.53)

Note. N = Sample Size; *M* = Mean; *SD* = Standard Deviation; WAI/S-T - Working Alliance Inventory - Supervision Form - Trainee version; IPI-T Hard Power = Interpersonal Power Inventory - Hard Power Subscale - Trainee version; IPI-T Soft Power = Interpersonal Power Inventory - Soft Power Subscale - Trainee version; PDSS-T = Power Dynamics in Supervision Scale - Trainee version.

Sociocultural Factors for Trainees, Supervisors, and Dyadic Composition

A number of sociocultural identity factors were examined to see whether mean differences existed between various groups in terms of four dependent variables: supervisory alliance, supervisors' use of hard power, supervisors' use of soft power, and power balance. In terms of supervisor racial identity (comparing White, Black and Asian/Asian American supervisors), significant differences with small effect sizes were found between trainees with supervisors of different races for both supervisory alliance (accounting for 2% of variance in ratings) and for power balance (also accounting for 2% of variance). Tentative results suggested better supervisory alliances for trainees with White supervisors as compared to trainees with Asian/Asian American supervisors. Additionally, trainees with White supervisors felt somewhat less empowered than those with Black supervisors. No differences were found for trainee racial identity (involving analysis of White, Black, Asian/Asian American, and Biracial/Multiracial trainees), nor for combinations of either racially matched or racially unmatched supervisory dyads.

There was also a small effect (accounting for 5% of variance) in comparing dyads that were either matched or non-matched in their Latinx identity. Specific differences were found for two dependent variables: for supervisory alliance, trainees in dyads matched on Latinx identity rated their alliance an average of 0.57 points higher than those in unmatched dyads, and for power balance, those who were in dyads matched on Latinx identity reported feeling an average of 0.29 points more empowered than those in unmatched dyads. A small effect (accounting for 8% of variance) was found in comparing Latinx trainees and non-Latinx trainees, but where the specific differences

were located was inconclusive. No differences were found for supervisor Latinx identity on any of the dependent variables.

No significant differences were observed on the four dependent variables for trainee gender, supervisor gender, or four dyadic gender combinations (female-female, female-male, male-female, and male-male), nor for trainee sexual orientation, supervisor sexual orientation, or four dyadic combinations (LGBQ-LGBQ, LGBQ-heterosexual, heterosexual-LGBQ, and heterosexual-heterosexual). Similarly, no differences were found on the dependent variables between trainees with supervisors of various theoretical orientation (comparing those identifying with CBT, DBT, Psychodynamic, and Existential/Humanistic).