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Addressing Personalization Issues With Trainees Using Solution-Focused Supervision

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Abstract

Solution-focused and strength-based approaches continue to grow as models for the training and preparation of counselors. We believe that they are appropriate frameworks for handling difficult personalization issues trainees experience in their work with clients. In this paper, we describe and discuss solution-focused supervision and further demonstrate its application in helping trainees address personalization issues through a case example. We hope that counselor educators and supervisors across the world will consider the cross-cultural application potential of solution-focused supervision and find the material presented in this paper useful for training purposes. We conclude by discussing research implications.

Keywords: supervision, solution-focused, personalization, strength-based

Supervision plays a vital role in the professional development and practice of mental health counselors and psychotherapists by serving "a critical quality control function" that ensures gatekeeping for clients' safety and care, and clinicians' skill and disposition development (Watkins, 1997, p. 3). As professional counseling is becoming increasingly internationalized (Ng, 2012), the discourse on culturally responsive practice and research of supervision in international platforms is expected to increase. In this article, we seek to contribute to the discourse by expounding on how a solution-focused supervision model—a trainee-centered, culturally sensitive, and strength-based model of supervision—can be used to address trainees' experience of personalization issues (i.e., counselor's own personal reactions) in their work with clients.

Although trainee self-examination is recommended in the counseling training literature as a means to address personalization issues (e.g., Bernard, 1979; Hackney & Cormier, 1979), some authors caution its use. For example, Watkins (2012) contended that this process has the potential to demoralize the therapist because "some trainees can come to feel that their therapist identity struggles and perceived failures are comments on their own personal inadequacy" (p. 191). Certainly, it is not the goal of the supervisor to scorn and shame the trainee; however, when dealing with the trainee's personal issues, the risk of this occurring is possible. In this article, we address this problem and propose that supervisors' focus on trainee strengths in this situation will allow for continued growth, rather than eliciting defensiveness. It is our belief that solution-focused supervision provides a post-modern, strength-based, and culturally sensitive framework for supervisors and trainees

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to conceptualize personalization issues and develop interventions to address these issues in ways that emphasize and capitalize on trainees' expertise, strengths, and past successes. The purpose of this article is to introduce the reader to the use of solution-focused and strength-based approaches in supervision when addressing counselors' own personal reactions that might negatively influence the course of therapy if not handled thoughtfully by counselor and supervisor; we use the concept of personalization issues taken from the discrimination model of supervision to frame this area of supervision (Bernard, 1979, 1997).

Formulated on the principles and tenets of solution-focused brief therapy, a strength-based and culturally responsive therapeutic approach (De Jong & Berg, 2008; Krauth, 1995), solution-focused supervision has been articulated and promoted by a number of authors since the early 1990s (e.g., Marek, Sandifer, Beach, Coward, & Protinsky, 1994; Thomas, 1996, 2013; Wetchler, 1990). Despite a growing interest in solution-focused supervision in the field, to our knowledge, detailed case examples that specifically demonstrate how the model could be used to address trainee personalization issues have yet to be reported in the literature. In this paper, we will (a) describe the concept of personalization issues in counselor development and supervision, (b) briefly describe the idea tradition of strength-based approaches to therapy and supervision, (c) describe the basic framework of solution-focused supervision, (d) illustrate the use of strength-based and solution-focused supervision with a personalization issue through a case example, (e) discuss the addressing of personalization issues within solution-focused supervision, and (f) conclude by discussing research and practice implications.

Personalization Issues in Counselor Development and Supervision

Counselors' emotional responses and reactions to their clients, the issues clients present, and the process of counseling are described as *personalization issues* in the discrimination model of counseling supervision (Bernard, 1979, 1997). The discrimination model is primarily a training model focused on enabling the supervisor to more clearly think about the supervisee's needs ("Discrimination Model" n.d.). In short, this supervision model highlights three areas of focus for skill building; in this article, we will focus on personalization issues and the use of the solution-focused model to address them in supervision. The three areas are as follows:

1. *Process issues* examine how technical aspects of the therapeutic process are handled. For example, is the supervisee reflecting the client's emotion accurately, or offering appropriate interpretations at the right time?
2. *Conceptualization issues* include how well supervisees formulate cases using theory and how well they convey this. They also focus on thinking about how to proceed on the basis of a clear understanding of the theoretical background.
3. *Personalization issues* focus on how therapists use their own experiences, thoughts, and feelings in therapy. This area aims to help practitioners to be nondefensively present in the therapy, be aware of their own feelings and of their impact on the client, and be able to use this information as the session unfolds.

Personalization issues are further defined as "how the supervisee interfaces a personal style with therapy at the same time that he or she attempts to keep therapy uncontaminated by personal issues and countertransference responses" (Bernard & Goodyear, 2009, p. 102). According to early work by Bernard (1979), the handling of these issues form the "more personal aspects of the counselor's learning" (p. 62). Personalization issues include both overt and covert behaviors and may be difficult for supervisors to broach with their trainees. Furthermore, authors have noted that novice counselors, such as practicum and internship trainees, tend to experience greater frequencies and higher levels of personalization issues in relation to performance anxiety (Ronnestad & Skovholt, 1993), and are inexperienced in recognizing and managing transference and countertransference issues (Bernard & Goodyear, 1998). Additionally, we would argue that personalization issues also include counselors' emotional reactions—both positive and negative—when their values and belief systems either concur or conflict with those of their clients.

The ability to address personalization is related to the ability of counselor trainees to be aware of their inner workings, and that ability is a foundational component of becoming an effective counselor (Bernard, 1979; Hackney & Cormier, 1979; Hawkins & Shohet, 2000). In addition to awareness, there is a need to suitably integrate the personal self and the professional self; as Hart (1985) so eloquently stated, "Becoming a psychotherapist involves a process of identity transformation in which trainees bring together who they are as people with the role of psychotherapist" (p. 11). In order for awareness and integration to occur, counselor trainees need a supervisor who is able to help them explore their personal issues, specifically as they relate to professional functioning (American Counseling Association, 2014).

Addressing Personalization Issues in Training/Supervision

The idea of personalization is not new to mental health counseling professionals, and a variety of ways have been proposed to address it. In 1918, the Congress of the International Psychoanalytical Association began mandating that all future psychoanalysts undergo their own personal psychoanalysis (i.e., training analysis) with the aim of helping analysts gain personal awareness and work through their own issues so they could be effective therapists for their clients (Desmond, 2004). The training analysis requirement remains a mandate for training programs accredited by the American Psychoanalytic Association (2012). In addition, the importance of personal reflection is

infused throughout the Council for Accreditation of Counseling and Related Educational Programs' (CACREP, 2009) training standards. Students are asked to consider their personal experiences in order to fully incorporate their counseling skills into their professional identities. Furthermore, the generally accepted multicultural counseling competencies (Arredondo et al., 1996) include the mandate that counselors have cultural self-awareness and awareness of "their negative and positive emotional reactions toward other racial and ethnic groups that may prove detrimental to the counseling relationship" (p. 62).

Supervision models, such as the discrimination model (Bernard, 1979, 1997), have highlighted the need to help trainees develop personalization skills as a major goal and as a focus of supervision. Though the discrimination model has been modified for supervisors in specific settings and/or for work with particular client populations, the importance of attending to personalization issues and skills remains one of the three central foci of supervision—(a) process skills, (b) conceptualization skills, and (c) personalization skills (e.g., Luke & Bernard, 2006). Within the model, supervisors have three roles (i.e., teacher, counselor, and consultant) that they may assume when addressing trainee personalization issues.

Other authors have proposed and outlined interventions counselor educators and supervisors can use to address trainee personalization issues and help trainees explore personalization skills. For example, Fitch and Marshall (2002) provided an outline of the use of cognitive restructuring techniques that target trainees' personalization issues. These authors suggested that the methods cognitive therapists employ (e.g., identifying anxiety and defensive reactions, challenging irrational beliefs, constructing more logical thought processes) can reduce trainees' self-defeating thoughts and anxiety in performing clinically. However, their recommendations did not include a strength-based orientation that recognizes and capitalizes on trainees' expertise, strengths, and past successes.

Strength-Based Therapies and Supervision

The strength-based therapeutic models focus on client strengths as a basic therapeutic intervention and maintain a non-pathologizing perspective on clients and their issues (Smith, 2006). In 2013, Scheel, Klentz Davis, and Henderson summarized the ideas of strength-based therapies and the following research initiatives. They describe:

> The current research was borne from the hypothesis that therapists commonly recognize the importance of positive processes in therapy and use client strengths to effect therapeutic change. Incorporation of a strength perspective in counseling is thought to prevent problems, promote human growth, and maximize human potential (Gelso & Fretz, 2001; Gelso & Woodhouse, 2003; Lopez, 2008). Researchers have also recognized the importance and helpfulness of accessing and using the strengths of clients to gain client cooperation and acceptance of therapy (Conoley, Padula, Payton, & Daniels, 1994; Scheel, Seaman, Roach, Mullin, & Blackwell-Mahoney, 1999). Beyond the possibility that therapists commonly use client strengths as key components of their approaches with clients, the impetus for this investigation also comes from three other sources. The first is Gelso and Woodhouse's (2003) call to counseling psychology for the development through research of methods for accessing and using client strengths within therapy. The second comes from the positive psychology movement, launched through Seligman's 1999 APA presidency and the theme of scientific pursuit of optimal human functioning. And the third is the constructivist and contextual approaches mostly developed within the postmodern era of therapy that emphasize the construction of new meaning in the form of client strengths. (p. 393)

As a concrete example, Smith's (2006) model of strength-based counseling offers an integrative approach drawing from a number of perspectives (e.g., logotherapy, solution-focused therapy, narrative therapy, prevention, positive psychology, drive and need theory).

In supervision, strength-based models are those that correspond to the strength-based framework and, therefore, hold central trainees' experiences, expertise, strengths, and successes. Furthermore, these models do not focus on trainee mistakes and problems, but instead, they recognize trainees' desire to learn in environments that emphasize strengths over problems. These models assist trainees in co-constructing their ideas with their supervisor (Edwards & Chen, 1999) rather than simply being led by an expert, and allow the trainee to explore deep personal issues in a positive and reflective way. At the same time, they also recognize the place for education to help trainees gain professional knowledge that they do not yet have (Wetchler, 1990); however, this need for education is not perceived from a deficit perspective. From this perspective, strength-based approaches also place central value on clients' subjective realities that are constructed within their sociocultural experiences and contexts. Within the training process via a strength-based perspective, trainees have reported an appreciation of the power and value of strengths identification (Fialkov & Haddad, 2012).

Solution-Focused Supervision

Solution-focused supervision grew out of solution-focused brief therapy (SFBT; de Shazer, 1985). SFBT has in recent years become a popular counseling approach across the globe and has received promising empirical support in the literature (Kim, 2008). The literature base on solution-focused supervision began in the early 1990s, primarily within the family therapy training literature (e.g., Thomas, 1996; Wetchler, 1990). It appears that Juhnke (1996)

provided the first article examining the use of this specific supervision framework with trainees conducting individual counseling. Although the empirical base is growing, conceptual literature sources about solution-focused supervision still dominates.

Principles of Solution-Focused Supervision

The founders of SFBT suggested that the singular key to brief therapy is that counselors utilize "what clients bring with them to help them meet their needs in such a way that they can make satisfactory lives for themselves" (de Shazer et al., 1986, p. 207). This statement provides a core tenet of the counseling relationship in SFBT: That clients are the experts on their lives (De Jong & Berg, 2008), and, therefore, are the experts on the solutions that work best for them.

This principle is easily translated into the supervisory relationship, with trainees having the expertise on their clinical work, and being the experts on the solutions that will work for them. Proponents of solution-focused supervision argue that the approach provides an opportunity for trainees to explore their own personal needs and an opportunity to focus on their inner strengths and existing resources (Marek et al., 1994; Wetchler, 1990). Wetchler (1990) noted that such a strength-based model can help trainees "construct a cognitive map based on clinical success rather than personal mistakes," which "is essential to the growth of clinical competency and self-esteem" (p. 138).

Thomas (1996) translated solution-focused therapy into supervision practice by elucidating the following nine guiding principles:

1. It is not necessary to know the cause or function of a complaint in order to resolve it.
2. Therapists [supervisees] know what is best for themselves.
3. There is no such thing as resistance (de Shazer, 1984).
4. The supervisor's job is to identify and amplify change.
5. A small change is all that is necessary.
6. Change is constant, and rapid change is possible.
7. Supervision should focus on what is possible and changeable.
8. There is no one 'right' way to view things.
9. Curiosity is indispensable (Berg & Miller, 1992). (pp. 132–134)

Techniques of Solution-Focused Supervision

Patterson (1997) believed that it is important for supervisors and trainees to be of the same theoretical orientation; therefore, as a supervisor oriented to the solution-focused supervision model, one needs to not only embrace the philosophy of the model, but also utilize specific SFBT techniques as outlined by de Shazer (1984, 1985). Such techniques include, but are not limited to, socializing to the solution-focused theoretical framework, targeting a key focus, setting goals, embracing a future orientation (Thomas, 1996), using the miracle question, amplifying small changes (Juhnke, 1996), examining current coping mechanisms (Knight, 1994), using scaling questions (Trenhaile, 2005), finding exceptions to the problem, and making exceptions meaningful. Besides the aforementioned main techniques, in principle, we believe that other techniques and interventions that focus on trainees' strengths and capabilities can be used in solution-focused supervision.

Outcomes of Solution-Focused Supervision

Empirical research on solution-focused supervision is scarce and findings from existing research are difficult to generalize due to methodological limitations (Thomas, 2013). Among the few who have empirically studied solution-focused supervision, Koob (2003) studied 55 supervisor–therapist dyads and reported that two components of solution-focused supervision—namely, focus on therapists' successes and focus on therapists' work—contributed significantly statistically to therapists' positive perceived self-efficacy. Additionally, Stark and Bruhn (2014) conducted a qualitative study of a group of school counseling students after three group solution-focused supervision meetings, reporting that the students described experiencing increased clinical self-confidence, were interested in learning more about SFBT, and wanted to use SFBT in the future.

From a multicultural perspective, the scholarly efforts of Hsu and colleagues (Hsu & Tsai, 2008) in Taiwan on school counselors' experiences with solution-focused supervision have contributed greatly to the development of solution-focused supervision and enhanced the cross-cultural understanding and application of the approach. Though conceptually solution-focused supervision could be argued to be applicable across cultures given the value it places on trainees' subjective experiences, realities, and strengths, we have not been able to locate any studies that specifically examine its cross-cultural effectiveness. We believe this lack reflects the current lack of cross-cultural research on the effectiveness of clinical supervision models in general. See more discussion and critique on existent empirical research on solution-focused supervision in Thomas (2013).

While Patterson (1997) described the importance of consistency of theoretical orientation between supervisor and supervisee, this is certainly not a hard and fast rule in clinical supervision. Though limited at the moment, the positive outcomes associated with solution-focused supervision are encouraging enough for all clinical supervisors to examine how these techniques may be applied to their own supervisory practice. The non-pathological and process-oriented approach focusing on supervisee development is an appropriate adjunct to supervision across therapeutic modalities.

Case Example

Though solution-focused supervision appears to be gaining attention in the supervision literature and authors have discussed, with examples, how the approach could be

used (e.g., Cigrand & Wood, 2011; Marek et al., 1994; Thomas, 2013), we were not able to locate literature in which authors provided specific examples on how to use solution-focused supervision to address trainee personalization issues. The following case example serves to illustrate how strength-based supervisory skills within a solution-focused supervision framework can be used to help a counseling trainee address and process a personalization issue. The case example was based on the collective recollection of a supervision session between the first and third authors. The purpose of the dialogue is illustrative and constitutes an approximation of the original dialogue. We will identify specific solution-focused/strength-based skills that the supervisor uses.

The male supervisor and female counseling trainee in this case are meeting for a supervisory session. The two individuals have an ongoing supervisory relationship, and have been meeting biweekly for approximately 1 year. The supervisor socialized the trainee to the SFBT theoretical framework during their initial work together.

Supervisor: We have about 30 minutes and I am wondering how you would like to use this time so that it will be most helpful for you. (*Setting time limitation*, *Identifying key focus for the session*)

Trainee: Okay. I had a session, umm—today's Thursday—I had a session on Tuesday that's been sticking with me and I am trying to not let it come home with me, but I can't let it go. I would really like to talk about this.

Supervisor: For some reason, this event, or this issue has been staying with you and you just can't leave it at work. (*Paraphrasing*)

Trainee: Yea! I don't, I didn't feel very successful [Supervisor: Okay.] when I was working with this client. And that's really . . . I keep thinking of things that I wished I could have done differently.

In the beginning of this vignette, the trainee presents as having an emotional reaction to a client—a personalization issue. The trainee describes having a session with a client that has rattled her confidence as a counselor. From a solution-focused/strength-based supervisory approach, the supervisor goes on to help the trainee decide how she would like to process her emotional responses. The intent underlying this technique is to return the power back to the trainee in order to strengthen her professional self-efficacy.

Supervisor: I am curious for your opinion. Would you prefer to process how you feel about this, or you'd rather talk about what you need to do? You can decide how you can use supervision today. (*Identifying supervision goals collaboratively*, *Respecting trainee's ability to decide the direction of supervision*)

Trainee: Um, I think I kind of want to do both, but first just talking about how I am feeling about this and then processing it might help.

Supervisor: Sure, this is important to you because this is your time, and if you feel this is best for you, please go ahead. (*Acknowledging trainee as expert of her own needs*, *Encouraging self-determination*)

Trainee: So . . . I felt like I had no idea what I was doing. I felt like even though here I am in my first internship, I felt like I didn't remember any of the skills . . . like I was back 5 years ago before I knew what counseling was.

Supervisor: Help me understand a bit more by giving me some concrete emotions, descriptors, of how you specifically feel about this issue. (*Clarifying details of personalization*)

Trainee: I guess I feel disappointed in myself. [Supervisor: Okay.] Um, I don't feel confident—I really felt like a failure.

Supervisor: Yea, you know, even when you're talking about it, you sound slowed down, kind of down. [Trainee: Yea.] It seems that you've lost some confidence. (*Reflecting*)

Trainee: Mm-hmm, yes . . . I go in on Mondays and Tuesdays, so I haven't been back there since that session. And, I am scared about going back on Monday.

Supervisor: You're scared? [Trainee: Mm-hmm.] It seems what happened has been quite impactful. It's—it's the way you responded to it. For some reason, it caused you to lose some self-confidence. (*Reflecting*)

Trainee: Yea, a lot. It feels like my confidence has been building and this one session just demolished me.

Supervisor: Just one session and it demolished you. Sounds like you're feeling quite defeated, you're losing so much confidence. I also have a sense that as you are describing that, you feel lost . . . "So, what do I do next?" (*Reflecting*)

Trainee: Yes, like am I supposed to be doing this? Like . . . what, where do I go from here after that session?

Supervisor: And it makes sense why you are feeling afraid of having to go back to the place next Monday. When I feel lost, if I feel such a lack of confidence, I don't want to get back in there. Am I correct? (*Normalizing and personalizing meaning*)

Trainee: Yea, that's exactly how that feels.

The supervisor has focused on using key foundational counseling skills (e.g., listening, reflecting content/feeling, open-ended questions, normalizing) to work on understanding the issue the trainee is presenting. This conveys empathy and helps form a positive supervisory working alliance. The supervisor continues to work with the trainee on identifying resources she is using to help her manage the effects of this personalization issue.

Supervisor: With all these emotions, how are you coping with yourself? (*Coping question*, *Clarifying trainee resources for self-care*)

Trainee: Not well, well I mean, mm-mm.

Supervisor: Say on a scale of 0 to 10, 10 is you are on top of your game and coping well and 0 is no, you feel like a little worm. You just want to crawl into a hole and bury yourself because you are so out of it. Where are you now? (*Scaling question*, *Using metaphor*)

Trainee: Like a 2. [Supervisor: Like a 2?] That worm description feels really comfortable. I can see myself doing that right now.

Supervisor: I'm curious what helps you not feel like a 1 or a 0? (*Clarifying motivation*, *Difference question*)

Trainee: Umm, I mean I don't want to crawl in the hole. I want to be at the 10, I want that so I think having that desire helps me not be at a 0.

Supervisor: So you don't really want to completely feel deflated and completely lost about it, so to speak. ⌈Trainee: Right.⌋ You're still fighting.

Trainee: I want to; I want to keep fighting.

Supervisor: I hear the determination to want to come out and feel confident. What else is helping you to not go below a 2? (*Complimenting*, *Identifying resources*)

Trainee: I mean, I keep trying to remind myself that I can be a 10, and that I have been a 10 before. I don't know why I feel like I am at a 0. So, reminding myself I think is helping. I have been successful with clients, at least I felt successful in that moment with them. This isn't a normal thing. This was just one session with this client.

Hearing the trainee describing a possible exception that could indicate a solution for the first time, the supervisor asks for more details about the incident that led to her emotional reactions. He then invites the trainee to reflect on another difficult case in which she had struggled. Similar to solution-focused counseling, the supervisor is encouraging the trainee to recall how she mastered the previous challenges that might be similar to the current one. The supervisor's intent is to remind the trainee that she has the skillset to deal with personalization issues and how to apply past successes to her current struggles as a counselor.

Supervisor: Although we haven't discussed the details of what actually happened, what I'm hearing you say is that it has something to do with you feeling not successful with a particular client that day.

Trainee: Yea, it was an older male client. We started out okay just talking and seeing how he was doing. As the session went [on], it just felt like the resistance to me was building higher and higher, so at the end of the session it felt, I literally felt like just running out of the room. It was awkward. And I didn't like that.

Supervisor: Somehow things just didn't work. The session became very difficult, you left feeling very unaccomplished and defeated. [Trainee: Yes! Exactly.] I'm wondering if we could go back a little bit. Earlier you said you wanted to process how you feel and also wanted to look at how you could do it differently. I'm curious if you could tell me a time in the past—it could be your experience with another client—when you didn't feel like you were able to do what you needed to do. (*Exception*, *Searching for successful past coping mechanisms*)

Trainee: Okay, umm (trainee pauses in contemplation). A few—a couple of months ago, I worked with a teenager. I had a similar feeling when I left the room.

Supervisor: You had a similar experience before where you felt not as successful. How did you manage that? (*Continuing to identify past successful coping mechanisms*)

Trainee: Talking with you.

Supervisor: Okay, we did spend time processing that. How did that help?

Trainee: I think, it was like you helped—we talked about the reframing. Like, you helped me see that I was really focusing on the negative aspects of the interaction and not thinking about what actually happened in the interaction.

Supervisor: You were able to use supervision as an avenue to help you process your emotions and your perception of the experience and how to reframe your experience. You told yourself "I don't have to allow this experience to define me as a counselor." What else helped you in the past experience? (*Making the exceptions and past coping mechanisms meaningful*)

Trainee: Well, I went back! That was one of the first weeks of internship, so that was back in January and now we are here in April. I kept going. I went back to internship and I kept seeing more clients and that helped me know that it wasn't just a onetime thing. [Supervisor: Okay.] Or, it was just that, I was able to move on beyond that.

Supervisor: By going back there, and keep doing what you are doing, you were able to get other experiences of success to help you be able to say to yourself "I am not a failure, and sometimes things do happen when there is a mismatch between clients and counselors for whatever reason. But I don't have to allow that experience to define who I am as a counselor." You reached out to the supervisor and used supervision to process your experience and you also were very determined to go back out and not allow the experience to put you down. (*Reflecting and complimenting*) I'm curious what part of that experience, your strengths—the things you were able to use to overcome and manage that previous experience—could be brought in to this experience. (*Inviting trainee to apply the past success to current situation*)

Trainee: One of the things I felt similar to last time was that my skills weren't there in that session. I felt like I didn't know how to use those skills. But I was able to then realize that I did use a lot of those skills, but it was just that mismatch. And I can see that here too . . . that I was still using my reflections and skills appropriately. It might have just been that mismatch between us. It might have not just been me.

Supervisor: Because we are limited in our time, I'd like for you to do a piece of homework. Before our next supervision meeting, I'd like for you to think about what this mismatch is about. What factors might have contributed to the mismatch? For example, cultural issues; background factors such as age, gender, and so forth. But, for now, let's just focus on your experience and need to address your reactions. What can encourage you to move on so that come Monday you'll be back out

there again? (*Initializing cultural conversation*, *Assigning homework*, *Embracing a future orientation*)

Trainee: Sure. I'll give more thoughts to the mismatch issue and be ready to process it with you next time. For now, I can actually go back and look at the session tape.

Supervisor: Okay, how might that help?

Trainee: Last time, that's what I did to figure out that I was actually using the skills. And I have the tape from Tuesday, but I didn't even want to look at it because it made me feel so uncomfortable. But maybe actually doing that would be helpful to see if I was using skills at that time.

Supervisor: So last time you went back and listened to your tape and you wanted to see if "I was doing what a counselor is supposed to be doing." So, this time you can do the same looking at your skills and not worrying about how inadequate you feel. (*Reflecting*)

Having processed with the trainee her past coping strategies and successes, the supervisor moves to encourage the trainee to commit to an action plan. This intervention is in line with SFBT's focus on action.

Supervisor: Is reviewing your tape something you want to commit yourself to doing? (*Setting goals*)

Trainee: Yea, I think it would be helpful. I can see it was helpful before.

Supervisor: Great. I do have a have a question here, too. I'm curious to find out if you could recall some moments in that interaction with your clients when you actually did experience something different other than the not-so-good feeling. (*Identifying exceptions to the current problem*)

Trainee: Um, there was one moment that we were talking—we were processing something about, umm, how he was feeling about what was going on, and he was sitting there and just kind of going like "hmm, hmm" and he couldn't name the feeling. And I reflected "sad" to him and it was like I hit him with that in a way that he knew what it was, but he just couldn't find the word to say—he couldn't say that. Looking back, I could see that there was that connection between us at that time. Just reflecting that one feeling. And in the beginning too, I felt like I was able to establish a sort of rapport fairly quickly with him.

Supervisor: So you did start off quite well with him and had a shared moment of empathy. To be able to recall that, what does that mean for you right now? (*Making the exception meaningful*, *Immediacy*)

Trainee: Well, that I can do it. I can do it again on Monday. I have a new client on Monday, so I think that was my fear—starting again with someone new. But I can do it. I can talk to new people and build that therapeutic relationship.

Supervisor: I appreciate your willingness to recall and to talk about your own frustration and disappointment. Before we wrap up, I am just curious to find out that, say, if after everything is resolved, you don't feel defeated anymore, all this weight on you is gone, and you are ready for Monday. Say, there is this great miracle that happened to you and everything is resolved and you imagine going back on Monday. What would you notice different about you? (*The miracle question*)

Trainee: Well, I think I'll be happy going back. I'd feel better. I guess walking taller and walking in there, and I actually want to say "hi" to people. And be a part of the team like before.

Supervisor: Emotionally, you would be upbeat and happy. You'd be in a positive space.

Trainee: Yea, I won't be like that worm in the hole. I want to be out and enjoying things.

Supervisor: What else will be different?

Trainee: Umm, I'll be confident that I will be able to use the skills in the session and not be worrying about the skills.

Supervisor: It's almost like the worm can come out and face the sun. You'd be confident interacting with your clients. Now, before we wrap up, I'd like to do a guided imagery exercise with you. [Trainee: Sure.] Close your eyes (speaking slowly) and imagine that this is Monday and your self-doubt has left behind you; you no longer have the worry and disappointment because a miracle had happened for you. Your confidence has come back. You recall moments in the past when you had good interactions and good working alliances with clients. Let that sink in. Let the confident self sink in. You are seeing your clients and you are seeing your colleagues. You are saying "hi" to them, you are interacting with them, and you're walking tall. And [you] are confident as you go back in there. (Long pause.) Take a deep breath, a slow deep breath and allow that positive emotion, positive energy to sink in. (Long pause.) Alright, so now please come back here. How was it like to just briefly go to that moment to prepare yourself? (*Using a guided imagery technique to positively orient trainee to the future and envision the miracle happening*)

Trainee: It felt good; I felt relaxed and ready to go.

Supervisor: I have some quick feedback for you before we end today. You were able to recall moments in the past that you have [had] similar experiences, yet you were able to find resources to manage. You were able to re-orient yourself back into a mindset where you didn't have to worry about yourself, where you didn't have to feel disappointed. I'm impressed by your courage to talk to me about your emotional reactions and self-doubt. I'm happy for you because you've regained your confidence and decided on what you can do differently. Congratulations! (*End-of-session feedback*)

Discussion

The case presentation demonstrates how solution-focused supervision can be used to empower trainees to make sense and manage personalization, a common issue that is particularly salient for novice counselors. The supervision then can provide a supportive environment in which novice counselors are able to work through

performance anxiety and other issues related to personalization. In fact, a primary goal of supervision during practicum and internship is to develop awareness and self-regulation around personalization issues (Bernard, 1979, 1997). Grounded in a strength-based approach (Fialkov & Haddad, 2012; Smith, 2006), solution-focused supervision demonstrates the benefit of quickly and effectively addressing a trainee's experience of personalization within the context of his or her professional development.

The case presentation highlights the majority of Thomas's (1996) nine guiding principles of solution-focused supervision. Reflective of the postmodern tradition, solution-focused supervision invites the trainee to be an expert on his or her own experiences. The benefit of this perspective for the trainee is an increased ability for introspection and a focus on inner strengths (Marek et al., 1994).

Using a Solution-Focused and Strength-Based Supervision to Address Personalization

Addressing personalization issues with trainees is not an easy task for supervisors (Ronnestad & Skovholt, 1993) and may risk negatively impacting trainees' self-perceptions if handled ineffectively; however, this is a necessary task (Bernard, 1979, 1997). We contend that strength-based models, such as solution-focused supervision, would respect these issues as trainees' experiences are based on their own subjective reality, which is not something to be disputed, but rather acknowledged. The role of the supervisor, thus, is to facilitate trainees' use of their strengths and resources to understand and manage these issues. We may even go further to argue that, from a strength-based perspective, the experience of personalization presents trainees an opportunity to grow professionally and use their emotional experiences to inform their work with clients, and ultimately, "use their self as the instrument" to effect positive therapeutic outcomes.

Therefore, a strength-based environment is one that minimizes the risk involved in addressing personalization issues as noted in the literature. Furthermore, utilizing a strength-based approach in supervision fits very well with the current strength-based emphasis in counselor training and preparation (Fialkov & Haddad, 2012; Smith, 2006). It is our belief that the solution-focused supervision model provides a unique approach to addressing counseling trainees' personalization issues in a safe and encouraging environment. Given its foundation in postmodernism and social constructionism, we believe that trainees' personal and social experiences that include cultural and contextual factors are respected and valued when supervisors practice solution-focused supervision. As such, in this age of internationalization of professional counseling training and practice where the need for cross-cultural competence is required of counselor educators and supervisors, solution-focused supervision provides a philosophically and multiculturally sound approach. It is also important to acknowledge that there are many other supervision models that support a respectful view of trainees' cultural backgrounds, and that it would behoove any supervisor to examine their own approach for consistency with multicultural competency.

Skills to Address Diversity and Cultural Issues

The skills necessary to be a solution-focused supervisor are simple and clear. De Jong and Berg (2008) highlighted the importance of reflective listening. Thus, foundational counseling skills were used throughout the transcript. Additionally, scripted interventions for solution-focused supervision help structure the session in a brief, yet productive format. The supervisor also incorporated a version of the guided imagery technique based on a strength-based orientation to co-construct a positive future based on materials discussed in the conversation.

Additionally, the solution-focused framework allows for supervision to address diversity and cultural issues. In fact, the postmodern foundation of solution-focused supervision necessitates the appreciation of human experience and subjectivity. In the case example, the supervisor encourages the trainee to complete a piece of homework to reflect on cultural and background issues that might have contributed to her perception and experience of mismatch between her client and her. Such cultural and contextual sensitivity in counselor education and supervision is needed to help trainees develop multicultural counseling competence. It is even more important in the cross-cultural supervisory context, in which supervisor and trainees come from different cultural origins.

Research Implications

Personalization issues for novice counselors are well-documented (Bernard, 1979, 1997; Fitch & Marshall, 2002). While the benefits of solution-focused supervision in the case example are clear and positive, and authors have promoted solution-focused supervision in the past two and a half decades, there is little empirical research supporting the model's efficacy (Thomas, 2013). Therefore, we concur with the call by authors (e.g., Koob, 2003; Thomas, 2013; Wetchler, 1990) for more well-designed empirical research to test the efficacy of solution-focused supervision on trainee development and, ultimately, the effects of solution-focused supervision on client outcomes. We suggest that researchers consider studying the efficacy of solution-focused supervision using an array of research designs (i.e., single-subject design, multiple single-subject design, qualitative design, quasi-experimental and randomized experimental design, as well as mixed-methods design). We further recommend that researchers specifically investigate the effectiveness of solution-focused supervision in addressing personalization issues as compared to other supervision models, and that researchers systematically examine the utility of solution-focused supervision in cross-cultural contexts.

Conclusion

Based on the authors' experiences and limited existing empirical literature, solution-focused supervision appears to

be effective in shaping novice counselors, and we believe that the model's strength-based orientation and positive positioning uniquely provide support to trainees as they work through personalization issues. We hope that our case presentation has demonstrated how the process can look in practice. We also hope that the discourse on the utility of solution-focused supervision, in general, and particularly in relation to addressing trainee personalization issues will continue to grow with more empirical evidence coming forth from various counselor preparation settings around the world.

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