AN ABSTRACT OF THE DISSERTATION OF

<u>Julie E. Convy Prindle</u> for the degree of <u>Doctor of Philosophy</u> in <u>Counseling</u> presented on <u>August 23, 2012</u>.

Title: <u>Narrative Reflecting Team Supervision: A Literature Review and Quantitative</u>

<u>Examination of Narrative Reflecting Team Supervisions' Impact on Self-Efficacy of</u>

<u>Counseling Trainees</u>

Abstract approved:

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Kathy E. Biles

The purpose of this study was to determine the impact a narrative reflecting team experience has on counselor self-efficacy. Through a quasi-experimental design, the use of a narrative reflecting team supervision model was compared to supervision as usual with graduate counseling students (N=12). The Counselor Self-Estimate Inventory (COSE) was chosen to assess self-efficacy pre and post 8 weeks of a reflecting team intervention and supervision as usual. Results from a Wilcoxon Signed Ranks Test indicate that an 8 week, 11/2 hour, narrative reflecting team experience did not elicit a significant change in counselor self-efficacy over supervision as usual. Counselor self-efficacy is an important concept to explore and emphasize as the field of counseling works to improve educational and supervision practices with developing

counselors. The use of narrative techniques in a reflecting team supervision model, offers an alternative approach to supervision- an approach, which is a collaborative, empowering, and a re-storying experience for counselors in training. The research questions hierarchical, power and fear laden supervision models that negatively impact the efficacy of counselors in training. It further emphasizes a need to develop new practices, which support self-efficacy in new trainees, as their level of efficacy will impact how they will be with clients in the future. Results and suggestions for future research and practice are discussed.

<u>Doctor of Philosophy</u> dissertation of <u>Julie E. Convy Prindle</u>
presented on <u>August 23, 2012</u>.

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I understand that my dissertation will become part of the permanent collection of
Oregon State University libraries. My signature below authorizes release of my
dissertation to any reader upon request.

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Julie E. Convy Prindle, Author

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The journey of a dissertation is not only the accomplishment of all the writing and research, but also the story of one's life that unfolds around this amazing and challenging process. I am so grateful to those who informed my story, supported my story, and challenged my story. The support allowed a co-authored and transformed story about who and what it means to be a professional counselor, researcher, social worker, supervisor, and live in balance with the other roles of life to evolve.

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CONTRIBUTION OF AUTHORS

Dr. Tim Bergquist of Northwest Christian College contributed to chapter 3 by conducting statistical analysis on the data.

Narrative Reflecting Team Supervision: A Literature Review and Quantitative
Examination of Narrative Reflecting Team Supervisions' Impact on Self-Efficacy of
Counseling Trainees

by
Julie E. Convy Prindle

A DISSERTATION

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Narrative Reflecting Team Supervision: A Literature Review and Quantitative Examination of Narrative Reflecting Team Supervisions' Impact on Self-Efficacy of Counseling Trainees

CHAPTER ONE: GENERAL INTRODUCTION

Dissertation Overview

The purpose of this dissertation study is to demonstrate scholarly work by using a manuscript style dissertation format as outlined by the Oregon State University Graduate School. In following this format, chapter 1 provides an explanation as to how two journal-formulated manuscripts found in chapters 2 and 3 are thematically tied, and build toward research conclusions pertinent to teaching and supervision. Chapter 2 is a literature review titled, *The Review of Literature on Self-Efficacy and Narrative Reflecting Teams in Supervision* and chapter 3 presents quantitative research in a manuscript entitled, *Addressing Counseling Trainees' Self-Efficacy through A Narrative Reflecting Team Supervision Experience*. Both of these manuscripts focus on the construct of self-efficacy. Manuscript one and two are thematically tied by their focus and application of narrative reflecting teams in supervision of graduate trainees in the field of counseling. In addition, they are further connected by their examination of counselor self-efficacy and the impact, if any, that a narrative reflecting team supervision experience may have on self-efficacy of counseling trainees.

Narrative reflecting teams offer a collaborative process for a supervision team to co-author a new story about professional identity (Anderson, 1991;White, 2000). This study explores the idea of professional identity in regards to self-efficacy-how competent and capable supervisees feel in their work with clients. Often new trainees struggle with feelings of doubt, fear, lack of confidence, and belief in their abilities to

work effectively with clients, especially when they are beginning to study and practice in a system dominated by hierarchical and expert-laden discourses (Emerson, 1996). I believe it is important to find effective practices, which help deconstruct the influences of these discourses, empower new and competent practitioners, and collaboratively move to a new way of practice with supervisees in training. Empirical evidence posits that reflecting teams offer students the opportunity to work more collaboratively and cooperatively in a team (Landis & Young, 1994). Prest, Darden, & Keller (1990) found reflecting team supervision to provide a non-hierarchical experience of supervision. This non-hierarchical experience led to a safer environment where supervisees felt more comfortable sharing their perspective and more receptive to other ideas generated within the team.

The first manuscript of this dissertation is a literature review that examines background and theoretical underpinnings of self-efficacy, supervision, and narrative reflecting teams. It also examines the benefits of employing reflecting teams in supervision with new trainees. The second manuscript provides descriptive research on the use of reflecting team supervision with graduate counseling trainees with a focus on promoting self-efficacy. This experimental design examines self-efficacy before and after a reflecting team supervision experience with counseling trainees over supervision as usual (SAU). Finally, chapter 4 provides a conclusive examination of the study and suggestions for future research in this specialty area.

Thematic Introduction

The purpose of this study is to examine the construct of self-efficacy and the use of reflecting team supervision with graduate students. The process for using

reflecting teams is based on the three stages employed by Tom Anderson (1987) and his colleagues. This involves a rotation of listening in on conversations and sharing reflections between team, interviewer, and supervisee. The manuscripts overlap on the construct of self-efficacy and the use of reflecting team supervision with trainees. Important components of these overlapping themes include: first, understanding self-efficacy and second, gaining an understanding for the use of narrative reflecting teams in supervision as a tool in building and empowering the story of efficacy of counselors.

The use of narrative reflecting teams was chosen as an intervention because of its history as an empowering strength-oriented approach with clients. It is based on a postmodern social constructionist stance where reality is seen as socially constructed. Clients are the experts in their own lives, and the process is a collaboration between team and client. Multiple stories are seen as possibilities and no one person holds the truth about what is right or wrong. The process becomes one of co-authoring a more preferred story for the client or supervisee and where each member of the reflecting process is changed in someway (Anderson, H., 1997; Anderson, T., 1987, 1991). There is a need in the field of counseling for a more empowering approach with supervisees. Personally, as a supervisor, my attention has been surprised by the stories of incompetence, fear and self-doubt that show up in the supervision room. In addition, I found it fascinating to enter a doctoral program with a cohort of experienced practitioners and to see these highly skilled and seasoned practitioners begin to enter the world of fear and self-doubt. I was curious as to how the discourse of hierarchical education perpetuates the stories of self-doubt and how if any a

narrative reflecting team supervision experience could transform this fear and engage students in a more empowering story about who they are as practitioners. I am passionate about the use of narrative approaches and have incorporated this practice into my discipline for the last decade. I view narrative ideas as a philosophy of practice, which is honoring of clients and supervisees and addresses the many oppressive stories, which hinder them from living a more preferred story as a person and practitioner.

Since the mid-1980s the use of reflecting teams in the counseling field has gained much attention by practitioners seeking a more respectful and honoring way of working with people. (Anderson, 1995; Hoffman, 1992; White, 1990) The use of reflecting teams began in the field of marriage and family therapy and has evolved as a useful approach in the disciplines of counseling, social work, education, and supervision.

The implications of this research serve as an opportunity to bring several voices together, resulting in multiple perspectives and new stories. The reflecting team process can be beneficial in enhancing the depth of knowledge and meaning gained in supervision. The experience serves as a process of bringing forth stories, revealing oppressive dominant stories, and accessing hidden and untapped stories of competence. The usefulness of this approach extends beyond the present study of supervision and has great potential in numerous areas of practice and education.

In the first manuscript, a literature review, I provide a general overview of literature on self-efficacy, supervision, and how traditional methods of supervision can negatively contribute to trainees' sense of efficacy. The review provides a deep

examination of the history and process of using reflecting teams. I then turn my attention to the incorporation of narrative therapy ideas into the reflecting team process. Finally, a shift happens in my review as it turns to literature focusing on the use of these constructionist, postmodern, reflecting team practices in clinical supervision taking place in educational settings.

The second manuscript provides a descriptive review, quasi-experimental design research, and results of research on the use of reflecting teams in clinical supervision with new trainees. I aim to answer my research question, " Does the use of a narrative reflecting team experience with counseling trainees have an impact on self-efficacy over supervision as usual?" The literature review points to the need for more empowering, competence building supervision practices (Neufeldt, 1997). It was the goal of this research project to employ a technique, which aims to fill this supervision need. I conducted an experimental reflecting team experience with counseling trainees while assessing their self-efficacy before and after the reflecting team experience. As a clinical supervisor, I strive to provide empowering practices in supervision and contribute to research findings, which promote stronger supervision practices.

A Brief Introduction to Self-Efficacy and Reflecting Team Supervision

Self-efficacy is the belief that one is capable. When one believes one is capable he or she is more likely to try something, work at it, and stay with it even when it gets challenging. "Perceived self-efficacy refers to beliefs in one's capabilities to organize and execute the courses of action required to produce given attainments" (Bandura, 1997, p. 3). In contrast, when people hold stories of oppression and a lack of power, they do not attempt to try new things, work through challenges, and persevere until

something happens. I place emphasis on this construct and supervision practices as I

recognize the importance of the supervisee believing he or she is capable and

competent in their work with clients.

Narrative reflecting team supervision offers supervisees an opportunity to

re-author stories of incompetence, fear, and doubt around their work with clients. The

experience provides access into areas of new growth; where traditional supervision is

set aside, and egalitarian practices emerge.

> The hierarchical legacy of supervision is being passed down from
> generation to generation…The hierarchical alternative assumes
> continued reliance on the assumption that supervisors are experts and
> the dishonoring of supervisees as co-contributors of knowledge.
> Adoption of a social constructionist conversation helps to escape the
> issue of right or wrong and opens up the gates for co-existence (Todd,
> 1995, p. 151).

Narrative therapists work through a postmodern, social constructionist lens which

views reality as socially constructed with no exact or expert truth taking precedence in

the reflecting process. Multiple perspectives are generated in the reflecting process

and multiple perspectives are welcomed as opportunities for new understanding.

The reflecting team process consists of a minimum of three stages. Stage one

consists of the interview between supervisor and counseling trainee. The supervisor

explores through a curious, non-expert lens the preferred story of the trainee as the

reflecting team listens with intention to this conversation. The second stage requires

the team, supervisor, and trainee to switch positions. A tentative conversation unfolds

among the team about the interview they just witnessed, while the supervisor and

trainee listen intentionally to the team. Finally, in stage three, they all switch positions

again with the team listening and the trainee and supervisor reflecting on the

conversation just held by the team (Anderson, 1991). Through these stages new meaning- making unfolds for everyone participating in the process, and through this co-authoring, a new story is birthed.

Rationale

Providing a Narrative Reflecting Team supervision experience with counseling trainees encourages the counseling field to examine their traditional supervision practices and to seek more empowering, non-oppressive, reflective supervision experiences. Supervision is seen as a critical influence in the development of new trainees as counselors. When trainees feel less capable, their area of practice can suffer. It behooves the profession to develop practices, which build on the professional story of ability and skill in new trainees. Supervisees need experience feeling confident about their work, comfortable talking through challenges with their supervisor, and open to new non-critical, judgment-free feedback in order to grow their professional story. As Bandura (1982) points out, those who feel more competent and more efficacious will feel more empowered to try new things, work through challenges, and not give in when faced with doubt and fear.

> Our position is that supervisees have significantly more intellectual resources than may have been imagined. The probability of having these resources unlocked through partnership discourse in supervision and with one's clients is greater when supervisees begin trusting their own thinking. More importantly, we hope it gives the next generation… greater freedom to utilize their own unique talents and become shapers of the field… rather than simple responders and clones of one another. (Todd, 1995, p. 143)

Finally, as far as I can determine from my in-depth literature review, there is no empirical research addressing the use of narrative reflecting team supervision with counseling trainees focusing on the construct of self-efficacy. Much of the work done with reflecting teams and research involves a qualitative approach. I aim to provide a

quantitative study which contributes to the empirical research relating to counselor self-efficacy, supervision, narrative reflecting teams, and the professional stories held by new and developing supervisees. I aim to add a more collaborative supervision process to the field where the stories and experiences of supervisees are honored, nurtured, and transformed through multiple perspectives.

Glossary of Terms

Appropriately Unusual: A term used with reflecting teams to describe the reflections used by team members. Appropriately unusual comments are ones, which are different enough for the client to appreciate as an alternative perspective, but not so unusual that it may be, disregarded by the client (Janowsky, Dickerson & Zimmerman, 1995).

Collaboration: Two or more individuals working together to achieve a goal and deeper understanding.

Deconstruction: A term which Michael White adopted as the process of dismantling and breaking apart a problem story in order to better understand the culture and influences in which the problem prevails (de Schazer, 1993).

Dialogic process: Unfolds between the members of the reflecting team during their reflective conversation. It is the inspiration of thoughts and questions unfolding between team members (Lax, 1995).

Discourses: A set of more or less coherent stories or statements about the way the world should be. Social practices, organized ways of being. Dominant discourses are the dominant culturally based "truths" that influence ones life. Those who accept are in the in group and those who do not are marginalized (Murdock, 2009).

Epistemology: The study and theory of knowledge.

Epistemological Function: How stories define who we are and how we come to know who we are (Bruner, 2002).

Externalization: Externalizing Conversations- developed by Michael White- these conversation attempt to move the conversation away from self-attack, recrimination,

blame, and judgement- attitudes that work against positive outcomes in counseling (White, 1990).

Hermeneutics: An approach, which "seeks to understand the socially constructed [world] in which perceptions fit within some consensual domain" (Lax, 1995, p. 155).

Milan Sytle: Referring to the clinical approach developed by The Milan Group consisting of Palazzoli, Boscolo, Cecchin, and Prata.

Modernist: An approach, which, " seeks universal truths which are believed to transcend differences in culture and society" (Becvar & Becvar, 1999, p.8)

Multiversa: No one universal truth but rather multiple realities.

Narratives: Stories individuals or groups hold about certain aspects of life.

Orthogonal Interaction: "is the key to therapeutic change"; a slight change in the structure creates a systemic change (Efran & Clarfield, 1992, p. 214).

Pluralistic: Multiple perspectives and truths.

Preferred Story: Based on lived moments that can be performed as a counterplot to the problem saturated story (White & Epston, 1990).

Professional identity: The identity counselors' hold about their professional life and experiences.

Recursive: This involves the ongoing and mutual responsibility in the relationship between the counselor/supervisor and client or supervisee. Everyone involved has a role and responsibility in the relationship (Becvar & Becvar, 1999).

Second Order Cybernetics: A term used in family therapy that describes the therapist/ observer is part of the system. "It is a dance in which all are involved and whatever we create, we create it together" (Becvar & Becvar, 1999, p. 38).

Self-efficacy: "The belief in one's capabilities to organize and execute the courses of action required to manage prospective situations" (Bandura, 1995, p. 2).

Story: A series of experiences that once assembled together become dominant plots in peoples' lives (McKenzie & Monk, 1997).

Story: A process of making meaning around a particular event, situation, or experience.

Storied: The meaning, which unfolded through a particular event, situation, or experience.

Supervisor: Master or Doctoral level counseling professionals who oversee, guide, teach and support counselors in training.

Trainee: Graduate student enrolled in a graduate-level counseling program.

Transformational Process: A dramatic change of perspective and understanding through a meaning-making experience.

Unique Outcomes: Events that are not part of the dominant, problem-saturated story (Murdock, 2009).

A Review of the Literature On Self-Efficacy and Narrative Reflecting Teams in
Supervision

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Abstract

This article reviews the literature related to counseling and supervision, specifically, self-efficacy, reflecting teams, and their connection to narrative therapy and supervision. Counselor self-efficacy is an important concept to explore and emphasize as the field of counseling works to improve educational and supervision practices with developing counselors. The use of narrative techniques in a reflecting team supervision model, offers an alternative approach to supervision - an approach, which is a collaborative, empowering, and a re-storying experience for counselors in training. The research questions hierarchical, power and fear laden supervision models that negatively impact the efficacy of counselors in training. It further emphasizes a need to develop new practices, which support self-efficacy in new trainees, as their level of efficacy will impact how they will be with clients in the future. This article explores the questions: What is counselor self-efficacy? What are Narrative Reflecting Teams? Finally, How might the use of Narrative Reflecting Teams aid in co-creating stronger stories of efficacy in developing counselors?

Introduction

> There are times when therapists are invited to feel overwhelmed, incompetent, and self-doubting. This is often a multifaceted process involving several elements of the therapists' lives. Frequently, this can include a separation from a story or a time in which they believed in themselves. When such a separation is combined with the influence of an authority that introduces a new set of dominant specifications to define their success as persons and as professionals, then a sense of being "outside a story of competence" can follow…. As therapists encounter dominating styles of teaching or supervision, it is quite common for them to misplace accounts about themselves in which they are competent. (Parry & Doan, 1994, p. 191)

As students enter into a counseling graduate program, they enter into an academic world and supervision experience, which can feel overwhelming, invasive, self-doubting, and oppressive at times. The expert and evaluative discourses of supervision and education begin to reign down on the very exciting adventure of becoming a counselor (Carlson & Erickson, 2001). As students enter the supervision room, prepare to work with a client in front of a one-way mirror, or discuss their cases in groups, a critical supervision lens narrows in on problem areas and searches for deficits. The supervision world that students' encounter, approaches students them as vessels or banks in which supervisors can deposit their expert knowledge (Neufeldt, 1997). Understandably, this critical teaching and modernistic lens can immobilize students to feel; uncomfortable risking exposure of their challenges, gaining support from supervisors, talking through challenges, make meaning around the challenges and growing in their skills to better serve clients. Fear often prevails in the relational dynamic between student and supervisor. Students worry they will be seen as deficient in the eyes of their supervisor (Emerson, 1996, p. 394). Why would students want to expose their vulnerabilities in such a critical environment that does not honor their

experience and knowledge? This fear of sharing hinders the learning that should happen through the supervision process and as Emerson (1996) claims, "we may be modeling the abuse of power…when we attack or threaten, no matter how subtly, the self-esteem of our students" (p. 395).

How does the counseling field move beyond this critical lens and hierarchy and make room for students to be vulnerable, grow from mistakes, and be open to the learning that can unfold in the educational environment and supervision experience? How do supervisors help students believe they are capable of being strong professionals who can make an impact even when they may be facing challenges and self-doubt?

Taking the risk to reflect on experiences and look at issues arising in one's work is "no easy task, for clinical practice is fashioned by deeply embedded social norms governed by tradition, authority and embodiment that resist change" (Johns, 2006, p. 3). However, it is this reflection piece that I feel is so powerful in the education and supervision of counselors in training. I advocate for supervision practices, which support a safe environment for reflection and work to build the efficacy of counselors in training- for they are the future of the profession. This literature review explores the concept of self-efficacy, and specifically the self-efficacy of graduate counseling students. The review further explores the use of reflecting teams in supervision as a potential tool in building self-efficacy and the story of professional identity students' hold. It was my intention to write a review where a clearer picture emerges about what it means to have strong efficacy and how

the use of a narrative approach to reflecting teams could potentially aid in the stories supervisees may hold about their efficacy.

Counseling Self- Efficacy

The discussion and interest in self-efficacy dates back as early as the 1940s, however, it was not until the 1970s when Albert Bandura (1977) generated a scientific examination and definition of self-efficacy that it truly surfaced in the literature. Through his research, repeated studies revealed that successes with task performance were highly related to one's belief that they were capable of achieving what they intended to achieve (Kozina, Grabovari, De Stafano & Drapeau, 2010). Bandura (1977) saw self-efficacy as the belief that one was capable of accomplishing and succeeding under a variety of circumstances. He acknowledged there to be great diversity in human capabilities and despite this diversity, the emphasis with self-efficacy theory was on the **belief** of the individual. People are capable of extraordinary things, and when they believe they are capable, extraordinary things can come to fruition even under challenging, unfamiliar, and overwhelming situations. Conversely, when people exhibit self-doubt and lower efficacy their ability to perform can be overshadowed by the hesitation (Bandura, 1997).

Self-efficacy gains strength as people experience success and achievement at identified skills and tasks. Self-efficacy is seen to impact several areas including motivation, follow-through, self-perception, and self-efficacy (Bandura, 1997). Larson, Suzuki, and Gillespie (1992) explain that it is Bandura's idea of perceived self-efficacy that examines what people see themselves capable of doing that impacts their actions, thoughts and emotional state. The implementation is only as good as the

belief of what is capable. People are more likely to engage in an activity when they feel they are capable, and less likely to engage when they lack the confidence in their ability. A strong sense of self-efficacy allows one to excel, work hard, and put in a good effort. This allows them to take on the challenge and put effort into whatever it may be, as the belief that they will succeed is high. These individuals will tend to persevere more as they continue to hold the belief that they are capable. With a strong level of self-efficacy there is a general ability to feel capable to deal with situations that are constantly changing. (Larson et al., 1992) Strong efficaciousness allows one to sustain through the challenge. (Bandura, 1982) When a person has successes their experience with success enlarges and thus builds stronger self-efficacy. These individuals will build confidence through success so that when a failure should arise it will not dominate their experience (Bandura, 1977).

In contrast, a lower sense of self-efficacy erupts when people doubt their ability and lack confidence in their competency (Bandura, 1997). Those who doubt their ability would be less likely to take on the challenge and may give up when it gets more difficult as their belief in the outlook is less capable. Those who are occupied with self-doubt leave no room to over come the challenges (Bandura, 1982). Bandura talks about the idea of what people believe they can do and what they actually do. Those who only have experience with failure will begin to have lowered self-efficacy and will become discouraged in the face of future failures and obstacles (Bandura, 1977). If people do not believe that they have the power to make something happen then they will not even attempt to make something happen (Bandura, 1995).

Bandura's (1977) theory provides the foundation for counseling

self-efficacy which states,

> that successful performance of desired behavior involves a set of beliefs, knowledge, and skills needed to perform the behavior…Counseling self-efficacy is viewed as partly responsible for determining counselors' decisions… and actions during a given session…. [and] refers to counselors' beliefs or judgments about their ability to work effectively with clients (Constantine, 2001, p. 81-82).

The emphasis on belief and what counselors believe they are capable of doing is at the center of this review and research. I am interested in supervision practices, which aid in the development of self-efficacy; I view this as an essential component of counselor development and empowerment. The higher the self-efficacy the more counselors will be able to tune into their clients, connect with their clients, and move though challenges as they arise (Larson et al.,1992; Daniels & Larson, 1998).

Banadura (1995) describes four different sources of information that can influence or hinder self-efficacy:

1. Mastery Experiences- this is the most influential factor in influencing self-efficacy. People need to have success to build efficacy. The more experiences they have working through challenges and finding success the more likely they are to persevere. Failure can undermine efficacy, in particular, failures that happen before success is attained. People will be more likely to work through failures and keep trying if they have success stories to build upon.

2. Vicarious Experiences- this is the second most influential factor in influencing self-efficacy. Through social modeling of people similar to oneself, examples of achieving success through perseverance, overcoming challenges, and re-storying success, self-efficacy of the

observer is enhanced. The greater the similarity there is with the model the greater the persuasion. In contrast, observation of models who work hard and never attain success can lead to lowered self-efficacy in the observer.

3. Social Persuasion- is the third way of supporting the efficacy in people and the belief that they can do it and they have what it takes to be successful. By verbally building up and noticing successes in the individuals, a story of strength is noticed and built upon. When people are verbally encouraged they are more likely to persevere through challenges and spend less time dwelling on deficiencies. Efficacy builders not only focus on verbal success, but they structure situations where success can be demonstrated. Success is measured through self-improvement versus comparison to others (Bandura, 1995).

4. Emotional States- when people are stressed and feeling anxious in a situation they are more vulnerable to the negative thoughts, which can arise during these times. They can begin to interpret these as failure situations. By addressing the somatic components happening in the situation and focusing on reducing stress and misinterpretations, self-efficacy can be preserved and maintained. Ignoring these emotional and somatic experiences and allowing them to dominate the situation can give way to lowered efficacy and feelings of failure.

Counseling self-efficacy has been researched in numerous and various ways in the last few decades. Larson and her colleagues studied the components of Bandura's

(1977) self- efficacy theory and through a detailed five-factor analysis, applied it to

work with counselors in order to develop a scale of measurement to assess counselor

self-efficacy (Larson et al., 1992).   This scale, the Counselor Self-Estimate Inventory

(COSE), along with 9 other scales identified by Daniels & Larson (1998) have been

identified in published studies as measures, which address counselor self-efficacy.

Research conducted by Kristin Barnes (2004), Cashwell &Dooley (2001) and Reese et

al. (2009) use these measurements to assess efficacy and it's contribution to pedagogy,

supervision, and counseling practices; Each with their own unique study and each

hinting at the importance self-efficacy plays in the lives of counselors in training.

Self- Efficacy and Supervision

> As a society we enjoy the benefits left by those before us, who
> collectively resisted inhumanities and worked for social reforms that
> permit a better life. Our own collective efficacy will shape, in turn, how
> future generations will live their lives: The times call for a commitment
> of collective effort, rather than litanies of powerlessness that instill in
> people beliefs of inefficacy to influence conditions that shape the
> course of their lives. (Bandura, 1982, p. 145)

Kozina et al. (2010) view self-efficacy as a precursor to competent practices

with clients, therefore, a vital piece to be cognizant of as one supervises and directs the

learning process. Most professionals in the counseling field are most interested in

self-efficacy and how these beliefs can hinder or aid in the quality of clinical work.

By providing support for supervisees, supervisors can help foster stronger efficacy

beliefs. Bandura found feedback to matter greatly and evaluations, which were

judgmental, were thought to have a profound effect of self-efficacy beliefs (Reese et

al. 2009). The belief that one is capable and can accomplish what they set out to do is

essential to taking action and making stuff happen (Holden, Meehaghan, Anastas &

Metrey, 2002). Believing in their ability has a ripple affect on what course of action they will take, how they will choose to think about the choices, and counseling and working with students (Kozina et al., 2010). Self-efficacy is more than a belief that one is competent, it deals with self-awareness and confidence that one can take on a task or skill and have a successful experience. Future behavior can be predicted based on the level of self-efficacy one has around a certain area (Bandura, 1977; Cashwell & Dooley, 2001; Constatine, 2001; Holden et al. 2002). Counselor self-efficacy is the belief that they (counseling trainees, supervisees, practitioners) can have an impact with their clients and they are competent with their skills set and ability to effectively use these with clients (Kozina et al., 2010). Through a collaborative supervision process, the self-efficacy of counselors in training can potentially be enhanced.

> People do not live their lives in individual autonomy. Indeed, many of the outcomes they seek are achievable only through interdependent efforts. Hence, they have to work together to secure what they cannot accomplish on their own…People's shared beliefs in their collective power to produce desired results are a key ingredient of collective agency. (Bandura, 2001, p. 75)

Supervision

Supervision is seen as a critical component in the professional development of counselors and highly connected to the level of competency supervisees and students attain (Kozina et al., 2010). Historically, supervision not only serves the professional development of the supervisee but holds the services rendered to clients as the highest priority (Gray & Smith, 2009). Receiving supervision is vital in the well-being, growth, and development of counselors, students, and supervisors. Supervision provides a level of structure, feedback, and support for the supervisee to grow (Cashwell & Dooley, 2001). Bernard and Goodyear (1998), as cited in Cashwell &

Dooley (2001), view supervision and clinical training as an opportunity and requirement to nurture a student's confidence in their abilities as a counselor. Parry and Doan (1994) see supervision as an influential piece in the development of the therapists'/students' professional identity. They describe therapists as being influenced by fear, uncertainty, and self-deprecation at times and much like clients they are sensitive to interactions, which feel invasive and insensitive to their story. They bring this to the attention of supervisors in hopes that they will be mindful of this fear and doubt when thinking about supervision and the need to support supervisees. The process is complex and the impact of the process on supervisor, supervisee and client can be powerful.

Traditional Supervision

Traditionally a modernist approach is employed in supervision, which approaches supervisees from that hierarchical and judgmental position with the supervisor as expert and the supervisee as the novice (Neufeldt, 1997). The lens is a critical one and the expectation of practice is one of reproduction-copying the process. Problems arise when students try to copy the "expert," it leads the supervisee away from connecting with their own experience, answering why they are proceeding in the process, and how they came about this approach. The replication becomes a less authentic and more manualized procedure. As Strupp and their colleagues, (as cited in Neufeldt, 1997), found in the Vanderbilt Project research, those who conform to a manual style were less warm and approachable and their demeanor changed when they approached the process in a manualized way. Neufeldt (1997) questions a traditional

model and it's "top-down" expert fashion-how can a supervisor be an expert in "a diverse, multicultural, multistoried society?" (p. 194)

Reflecting Teams

The Evolution of Reflecting Teams

Reflecting teams originated out of Norway with Tom Anderson in 1985. He came to the approach out of a place of discomfort. This place of discomfort revolved around the dynamic between client/s and therapist/s, where the therapist and team were deemed experts and critically conversed about the issues the clients were facing behind closed doors. The therapists were seen as the experts on client's lives thus privileging their own knowledge over knowledge the client/s held about their own lives (Paré, 1999). This approach of watching from behind a one-way mirror, making assessments and critically analyzing clients and families made Anderson uneasy, he wanted a new way of working with clients. His reflecting team idea evolved from this uneasy state and moved towards a practice of respect, collaboration, and working to equalize the hierarchical dissonance existing in the therapy process (Brownlee, Vis & McKenna, 2009).

As his team watched from behind a one-way mirror Milan style and made suggestions of change to a therapist and family who were in a place of being stuck, continually the therapist "was repeatedly drawn into the pessimism of the family he was interviewing" (Anderson, 1987, p. 415). The suggestions appeared to make to make no difference for the therapist and client who were stuck. Tom asked the therapist and clients if they would be willing to try an experiment and listen in on the team. Listening to the team allowed the client and therapist to view the discussion of

the issues from the team's perspective. A conversation, which remained hidden from clients and therapist, now became inclusive of and visible to the client/s (Cole, Demeritt, Shatz, & Sapoznik, 2001). As the discussion between team members ended, the lights and sound were returned to the therapist and family and the session continued on in a more optimistic way (Anderson, 1987). Anderson and his team opened up an opportunity for the clients to hear and be part of the reflective process and to make meaning of the feedback unfolding in the team (Shurts et al., 2006). From this moment, a collaboration was born between client, team and therapist (Brownlee et al., 2009).

Anderson (1987) began to challenge the traditional, all knowing, expert approach. He found having a non-expert discussion in front of the client removed the critical stance and became more respectful and honoring of the clients. The language became more relational and accessible as it intentionally used the language of the client/s, which was less therapized, intellectualized, and medical language. The team waited to have their conversation with one another in front of the client, which again Anderson (1991) felt was a more reputable stance. Clients moved into a new more equal role in the process with the team and became witnesses to alternative ideas and suggestions. Anderson valued this team process as a collaboration and upheld the value of clients being experts in their own lives. He viewed this idea as a way to support clients having the power to adopt new ideas and disregard the ones, which do not fit thus creating their own unique change process (Anderson, 1987; Brownlee et al., 2009).

Tom Anderson's reflecting team process came to fruition through knowledge, experience, and early influences. His early influences included the theoretical underpinnings of Gregory Bateson, Humberto Maturana, and the therapeutic approach of Luigi Boscolo and Gianfranco Cecchin of the Milan school of family therapy out of Italy(Anderson, 1987; Anderson, 1991; Brownlee et al., 2009; Frake & Dogra, 2006; Freedman & Combs, 1996). These early influences shaped the practices of Tom Anderson, and several other therapists who practice in a way, which honors the client, the multiple stories clients possess, and the structures, which influence the stories clients hold as most influential in their lives. The figures presented ideas, which appeared to resonate with Anderson and created a philosophical approach that began to change the position therapist hold with clients.

The influences of Gregory Bateson and Humberto Maturana.

> The basic premise for the effectiveness of reflecting teams is grounded
> in Bateson's (1972) ideas about difference. Different versions of life
> circumstances lead individual family members to argue about which
> perspective is right. Reflecting team conversations create dissonance
> and dilemmas for people, challenge the idea of universal truth, and
> promote the possibility of change and movement (Shurts et al., 2006,
> p. 152).

Anderson narrowed in on the ideas of Bateson and Maturana and their view of epistemology, which asked, "How do we come to know what we know?" Anderson was fascinated with the concept of reality be constructed by the observers (Anderson, 1991). Maturana explored the idea of multiversa, which emphasizes the idea that there are many different meanings that exist and make up the world. Bateson too believed that there is no one true reality but rather many realities, which originate in the meanings from interactions with others and the environment (Anderson, 1987;

Brownlee et al., 2009). Bateson understood life as a constantly shifting and moving system and the dialogues and meanings throughout life are also in constant movement (Anderson, 1991). Knowledge is constantly evolving and what one knows and holds meaning about is part of this evolutionary shift. Bateson was interested in how ideas interacted with one another and why some ideas were privileged over others? Who's reality became dominant and why other ideas became subordinate or did not survive? What would allow ideas to survive? (Bateson, 1972). He focused on second order cybernetics, which views the world as systems, which are in constant interaction all influencing one another. The system is part of the system. Bateson and Maturana make a point of emphasizing the importance of difference and different versions of reality, which can contribute to a richer more diverse picture, an "ecology of ideas". Bateson (as cited in Anderson, 1987) states that, "it is the difference that makes a difference" (p. 416).

Problems arise and ruptures unleash when there is only the perspective of "one true reality". Conflicts become one of "who is right" and "who is wrong"(Parry & Doan, 1994). The system remains stuck unable to accept alternative possibilities. The ideas of multiple perspectives and multiple ideas aid Anderson along with many post-modern, social constructionist, narrative practitioners understanding of the world and their approach with clients. Becvar and Becvar (1999) emphasize the importance of noticing that there are numerous stories that exist for our clients and the therapist's story is one of many, especially among a team. By providing an experience for clients that honors numerous realities, multiple versions of the world, and acceptance of

differences, new possibilities emerge, realities shift, and the conflict over "one true reality" can dissipate (Anderson, 1987).

Modernism, Postmodernism, and Social Constructionism.

Anderson's approach embraced a shift from the modernistic practice where "modernism seeks universal codes, structures, and essences which are assumed to exist 'out there' independent of observers. The goal is to discover, map, and know objectively the truth of the world of human behavior" to a postmodern way of working with clients and the therapeutic system (Becvar & Becvar, 1999). A modernist perspective leans towards a way of practice, which emphasizes the use of labels defined by a western medical model. Labeling of people and groups as normal, abnormal, functional and dysfunctional, and healthy or unhealthy. These labels deemed as a universal and global truth become a definitive way of describing, understanding, and approaching people despite immense diversity. Clients accept services from these experts as they are persuaded to believe the professionals understand their lives better than they do (Becvar & Becvar, 1999; Friggeri, 1992; Tomm, 1993).

The shift from the Romantic period and Modernistic Period where the self was seen as stable over time made room for a postmodern perspective which sees the self as shifting, evolving, and developing constantly. There is no objective reality with a right and wrong. Postmodern questioned this stagnant view of self and insisted that the self is constantly developing through time (Anderson, 1993). People live among many stories and no one person holds the truth or understanding of these stories (Becvar & Becvar, 1999). These postmodern ideas again are part of a running thread

in the ideas which originated with Bateson and Maturana. Anderson and postmodern practitioners embraced the ideas of postmodernism, Bateson, and Maturana as respectful ways to embrace their work with clients.

Social Constructionism builds on the ideas of postmodernism in regards to viewing the world filled with subjective truths. Lynn Hoffman (1992) views social construction as stories, which are embedded in language and culture that define individuals and groups. People are situated in a culture where they develop an identity based on the conversations and language of that particular social group. For example, Hoffman talks about the aboriginal song lines of Indigenous Australians as a metaphor for understanding social constructionism. She describes Aboriginal people being born into the song line of their group, the people they live among. They embark on walkabouts to discover new song lines of others thus gaining a deeper meaning into their history, ancestors and self.

> The beauty of this myth is that it presents a picture of individual identity that is not within the person or any other unit. Instead, it consists of temporal flows which can be simple, like a segmented path, or complex, like a moiré pattern, but which are realized by singing and walking. The mix of ecological and social understanding afforded by this practice is impressive. I offer it as a poetic example of the social construction of self. (Hoffman, 1992 p. 10)

Memories, values, and ideas originate through interactions with others. It espouses again the belief that there is no one truth, as truths exist only within the social realms in which they were created. Knowledge and ideas are renewing and evolving with each new interaction. The culture in which we are born, raised, and exposed to over time influences the norms and values we internalize as our story. (Becvar & Becvar,1999; Frake & Dogra, 2006; Freedman & Combs, 1996; Shotter,

1993) Social Constructionist explore the idea of learning how to be in the world and navigate ones culture as a process of learning how to do certain things the right way-for this is what it means to socially be a part of the group. One begins to story language, think, and act in a way that those around them can understand and relate to on some level.

Practicing through a postmodern and social constructionist lens opens the client, therapist and team to a new and deeper process. The therapist is no longer the expert, the client has more power in the relationship, and the team shifts from experts to curious participants in the process. In a therapeutic sense, therapists understand problems as socially constructed and prevailing as an objective truth within a particular setting or situation. Therapists embrace the idea of a pluralistic view of meaning. They understand that interactions within communities and social institutions have a powerful influence on how identity is shaped and how meaning making of identity gets storied. These subjective meanings become powerful objective meanings (Waliski, 2009; White, 2000). Therapists see the issues and narratives people struggle with existing within a culture. The therapist spends time wondering how these stories gained meaning over time, how one gets recruited into these stories, wondering about the hermeneutics of the situation, and how this identity gets circulated (Frake & Dogra, 2006; White, 1997). Through this reflective wondering with clients, new meaning making evolves through the intersecting of narratives. The collaboration of stories allows new and alternative understanding to emerge (Friedman, 1995).

Reflecting Teams Come to Life

A person who is listening, is touched by what the other expresses. The person who becomes touched will, the next time, be moved. However,

the person will not be passively moved. The person will actively take part in the sense that he/she will be active in the moving of him/herself. One way to clarify what the moved person wants is for the person to search through the language to find how to understand the situation and what to do. The next would be to express that meaning. The expression, in turn, will be touching of the other(s) (Anderson, 1995, p. 35).

Since the mid 80s, Reflecting Teams have evolved from the field of Family Therapy into many different settings. The ideas, concepts, and processes have infiltrated the field of counseling, counseling education, social work, and supervision (Swim, 1995). Practitioners have been moved through their understanding and practice of reflecting teams. Again, each story of reflecting teams is different and each version takes on a new understanding in the process. Anderson laid the foundation for reflecting teams and established an approach, which opened the door for clients and practitioners to witness and collaboratively make decisions on the course of therapy.

Reflecting teams unveiled a new way of being with clients and raised awareness of hierarchical inequities in the therapy process. Who holds the power and why practitioners should question this power is key to this approach. The process is driven by hope and a goal of creating hopeful narratives, especially for those who have been traditionally marginalized (Lobovits, Maisel & Freeman, 1995). The dialogue about the clients and their therapy process emerged from behind closed doors to become a respectful conversation free of secrets and criticism. Clients become first hand witnesses to the conversations and thoughts of the team as they presently unravel through interaction. The critical and judgmental conversation behind the walls is non-existent as the dialogue now emerges center stage. Opportunities to be critical dissipate in this new and respectful approach (Brownlee et al., 2009; Cole et al., 2001;

Frake & Dogra, 2006). Therapist, team, and client get the chance to participate in the co-creation, co-partnership of something new (Hoffman, 1992).

The reflecting team process requires therapists to be present to the stories of the client/s without bringing preconceived ideas and prejudice to the stories. In a modernist approach, the therapist may have already had a discussion about the clients and made judgments about the appropriate approach with the clients based on these judgments. In "See and Hear and Be Seen and Heard", Anderson (1993) discusses these prejudices and how they shape the understanding of the problem, story the problem, and how the problem will be approached. A post-modern approach of reflecting teams asked therapist to listen, be present, hold off discussion with the team, and situate themselves as non-experts, allowing the story and several new stories to unfold.

Bateson's (as cited in Anderson, 1987) idea that "it is the difference that makes the difference" and Maturan's multi-versa are foundational thoughts in the reflecting team process (p. 417). Working with clients in a team format allows multiple perspectives to surface. Bringing these different views on the issue into the therapy process allows clients to understand the issue differently and decide what perspectives fit for them, which ones do not fit, and which ones feel like they will help shift the system. The goal lies in the idea of clients being engaged in the process of hearing a diversity of perspectives and in turn having more options surface for them to choose from- in hopes of a more engaged therapeutic process. (Bateson, 1972) The covert becomes overt and hidden and unanticipated solutions surface by accessing multi-perspectives in the team (Freedman & Combs, 1996; Janowsky et al., 1995). A

pathway to new understanding emerges as therapists provide opportunities for clients to notice aspects of their lives, which feel like strengths and empowering stories. Through this process hope is generated and change emerges (Frake & Dogra, 2006; Janowsky et al.,1995). Epston and White (1995) describe this therapeutic process as,

> A rite of passage from one identity status to another. Importantly, this passage centers around a joining of the person with others… and encourages the recruitment of others in the celebration and acknowledgement of the person's arrival at a preferred destination or status in life (p. 277).

The Process.

Anderson (1991) set the stage for what would become a useful tool for many disciplines. His process follows a fairly simple three stages and maintains just a few guidelines to structure the process (Anderson, 1991; & Janowsky et al., 1995; Lax, 1995). Other practitioners who have taken on the use of reflecting teams have modeled their process much like Anderson's three stages, however, each with it's own unique style.

The initial stage begins with the therapist connecting with the client(s) and using questions to gather an understanding of the issues and goals of the client. The reflecting team, which can include counseling professionals, social workers, supervisors, psychologists, etc., either sits behind a one-way mirror listening or is present in the room but separate from the client(s). The second stage creates a shift in dialogue. The conversation now flows between team members with therapist/interviewer and client/s intentionally listening. The third stage transitions back to the client and therapists as they reflect on the teams' conversation. (Anderson, 1991; Chang, 2010; Shurts et al., 2006.) The therapist explores what the client/s found

to be useful in the conversation and how this new perspective may drive future choices or influence the course of work for client and therapist. In general, stage one lasts about 30 minutes, stage 2 lasts about 10-15 minutes, and stage three lasted about 15 minutes (Hoger, Temme, Reiter & Steiner, 1994; Shurts et al., 2006).

Guidelines.

Over the last three decades several clinicians have discussed ways in which they feel the reflecting process should unfold in counseling. Guidelines and rules for practice have been established over time in order to uphold standards of honoring and respecting clients with non-oppressive, post-modern, social constructionist approaches. The rules Anderson (1987) established and those who followed in his footsteps take the approach of noting what should be cautioned during the process versus many to do's (Lax, 1995). Anderson felt it was important for the team to focus on the context within the interview/conversation and to not pull other issues into the room. He also requested that the process should be empowering, positive, and hopeful, therefore, negative connotations in the reflection should be avoided. "We shall not reflect on something that belongs to another context than the conversation of the interview system, and we must not give negative connotations" (Anderson as cited in Lax, 1995, p. 61).

Whiting (2007) views the reflecting team guidelines as reminders of how to approach clients in a respectful way and not necessarily as rigid rules. Numerous guidelines for reflecting team practice are listed extensively throughout the literature by various postmodern practitioners. These include:

1. Being attentive to the conversation and paying attention to unique outcomes as a way of accessing alternative stories (Janowsky et al.,1995).

2. Affirm strengths and positive developments (Whiting, 2007).

3. No advice giving (Anderson, 1991).

4. Questions are asked of team members in front of clients (Lax, 1995).

5. Questions arise from curiosity (Janowsky et al., 1995).

6. Reflections derive from a genuine and authentic place (Janowsky et al., 1995)

7. Limit time of reflections by the team so the client is not overwhelmed with too much information (Cole et al., 2001; Janowsky et al., 1995; Parry & Doan, 1994).

8. Questions and wonderings should be speculative and tentative (Anderson, 1991; Parry & Doan, 1994; Shurts et al., 1994).

9. Therapist and team remain neutral and open to multiple stories (Parry & Doan, 1994).

10. Participants should be invited freely to participate in the process, fully informed about the process, physical arrangement and their rights and role in the process (Whiting, 2007).

11. Team is fully prepared and has good understanding of postmodern and social construction approach to therapy and understanding clients (Whiting, 2007).

12. Feedback should be given in the language of the client, speculative, relevant, and appropriately unusual (Anderson, 1987).

Stages of Reflecting Teams

       Stage one: The interview and questions.

       The Reflective Postmodern process approaches clients from a place of not knowing. The therapist is curious to be acquainted with the client and asks question that honor clients. Questions, which honor, are questions, which do not have answers. The therapist/interviewer spends time getting to know the client and better understand their story through an inquisitive inquiry. The therapist takes on the task on gathering information from the client to better understand the meaning and narrative and new language unfolding. Questions expand the range of knowledge for the therapist and team (Hoffman, 1992). The team listens intently to the dialogue between therapist and client, silently developing their personal thoughts and questions in the process. Anderson sees the role of therapist in the interview as one which focuses questions on the un-storied or unique stories which have yet to be told (Janowsky et al, 1995) They open up space for undiscovered knowledge and yet to be realized possibilities and narratives (Hoffman, 1992). Approaching clients with questions versus statements unlocks the door to a conversational experience; questions avoid dialogue walls, which appear with expert statements (Anderson, H., 1997; Anderson, T., 1991; Janowsky et al., 1995). Questions, which arise from a place of curiosity, allow the client to elaborate and illuminate on the story. The explorative journey allows the therapist to enter the story and continue to ask questions. One question leads to another question, which leads to another question and so on. "In this local and continuing process of question and answer, of recounting and re-describing, possibilities for understanding, meaning, and change are open and infinite" (Anderson,

1997 p. 146). The therapist does not use questioning to validate their preconceived thoughts but rather allows the client to guide them to question their understanding (Anderson & Goolishian, 1992). "It is this curiosity and not-knowing that opens conversational space and thus increases the potential for the narrative development of new agency and personal freedom" (Anderson & Goolishian, 1992, p. 38).

Approaching clients from a place of not knowing requires a sense of humility. The time has come to practice this humility by setting knowing, judgment filled, expert knowing aside. As the therapist embarks on this new territory, a more natural conversation arises. There is no right question and often therapists are not sure where questions will lead and which questions will connect with clients (Anderson, 1997). Detaching oneself from the importance of their questions frees them to allow the inquisition to flow more organically. Allowing there to be a place to ask questions about un-storied or alternative experiences generates new thinking, new ideas for the team, and more possibilities for the client to be curious about creating openings to new stories (Anderson, 1991; Lax, 1995). Client, team, and therapist can become excited about new possibilities and new meanings, which are surfacing. Freedman and Combs (1993) talk about using opening space questions, which elicit stories, possibilities, alternative meanings and points of view from others to build many possibilities into the picture. Madigan (1993) calls for there to be several stages of questions where the team asks questions, and then the client and therapist can ask questions of the questions. He views this as a step in making the therapeutic process more transparent.

The art of listening.

The team gathers behind the one-way mirror or quietly in the therapy room and settles in for intentional and honoring listening (Hibel & Polanco, 2010). Preconceived thoughts regarding the situation are left at the door and the listener enters as a humbled listener eager to notice special knowledge and alternative stories (Friedman, Brecher, & Mittlemeier, 1995). Entering the room without pre-interpretations is respectful to clients and opens a pathway for listening that allows alternative narratives to enter as new possibilities. This is not to say that a therapist will enter without prejudices as this would be impossible, but it asks that therapist to set this aside as much as possible and open themselves to listening for new meanings and the unsaid (Anderson & Goolishian, 1992). With an intentional ear, stories will capture the interest of the team individually. Deliberately paying attention to what struck them, how it may resonate for them personally, and why it catches their interest is important for team members to be aware of as they listen to the client(s) (White, 2000). The listening team is there to catch the story and by catching and receiving the story in the web of listening they become encouragers of making a new story. They intently listen to the language, as the language and metaphors that emerge are very personal and meaningful to the one telling the story (Anderson, 1992). Listening for the untapped sources of inspiration and looking to see how people may persevere and noting this (Gladdening & Wallace, 2010). The members sit in silence to be available to hear and hypothesize their own ideas, which will in turn generate more possibilities. Greater diversity of possibilities surface as the team listens versus generating a unified story of the client/s behind closed doors (Landis & Young, 1994, Shotter, 1993).

As positions switch and reflections begin, the client/s becomes the listener as the team shares their thoughts. Just as the team sat and watched the interview silently, the client too has this opportunity. The experience permits an opportunity for really taking in what they are hearing and thinking. What fits for them, what might not fit for them, what new reflections and questions are stirring within them? Being in a place of reflection allows the client to avoid being put in a position where they may feel scapegoated. Instead it allows room to just be and to have space available to hear new alternatives (Smith, Winton, & Yoshioka, 1992). When the team raises questions within their conversation, a space of reflection is created for the client to be reflective and have opportunity to ponder these thoughts and ideas and potentially create new meaning (Anderson, 1991).

Stage two: Reflections and the dialogue

The reflection and dialogue process in reflecting teams becomes a really good conversation between team members: each sharing the thoughts and reflections they were holding in their internal conversation behind the mirror. The internal conversations enter the therapy room and an outer dialogue begins (Anderson, 1993). The client listens in on this conversation and becomes the witness to alternative stories emerging within the team. The dialogue creates new options, descriptions, meanings, and ideas, which the client is freely open to accept or reject (Anderson, 1991).

The reflecting portion of the process consists of clear ideas about how the process should proceed. The dialogue is rich thus should remain short (Anderson (1992) recommends 10-15 minutes for this part) so clients do not become overwhelmed with too much information. The reflective conversation is dappled with

words such as both/ and versus either/or, as there is no right conversation here, just

reflections for the client to ponder. According to Anderson, the dialogue needs to be

"appropriate and unusual" which means that it needs to be unusual enough to be

different for the client to notice, but not too unusual so the client rejects it as an

alternative (Anderson, 1993). The team wants to use language that mirrors the clients'

language, allowing for joining to happen between the two. Comments should be

empowering and positive. They need to avoid criticism and judgment, which can shut

the client down from listening and noticing new narratives (Anderson, 1992; Parry &

Doan, 1994). It is kind, anti-oppressive and takes a positivist approach thus not getting

stuck in the problem story, but accessing alternative unheard narratives.

  The team members need to be attentive to the conversation and

questions unfolding in the reflection. They too are listening for the

alternatives, the surprises, asking questions of each other all the while new

direction and meaning enter the space. The conversation breaks the

boundaries and once held rules of the story thus creating new and farther

reaching territories. Unexpected surprises can arise, as language and narrative

become the focus of the experiment (Schon, 1987). The ideas and surprises

generated become the seeds of new understanding (Johns, 2006). Questions

between the team members during the dialogue create a more transparent

process for the clients, which create more connection between the team and

client (Lax, 1995). The conversation between everyone becomes the author in

the room and a collaborative authorship is born versus one that is owned by

the therapist (Hoffman, 1992). Dewey (1933) talks about reflection as the

process of being open to suspense and willing to search for new and deeper

understanding. Rather than being stuck in a certain and static way of seeing

and understanding others, which can be seen as impulsive response, the team

is freed up to be thoughtful and intelligent responders.

> The great reward of exercising power of thinking is that there are no limits to the possibility of carrying over the objects and events of life, meanings originally acquired by thoughtful examination, and hence no limit to the continual growth of meaning in human life" (Dewey, 1933, p. 28).

Collaboration and joining.

> We strive to establish a relationship with our client that engages their views and experiences. We invite people to let us into their worlds to tell us their stories. We allow ourselves to be led through the narrative landscape as our clients describe to us its familiar and defining features. We enter this landscape with the eyes and ears of an alert and appreciative newcomer, noticing and inquiring about aspects of our client's experience they have hitherto overlooked, dismissed, or forgotten. (Labovits et al., 1995, p. 235)

The Reflecting Team offers clients and therapists an opportunity to connect in

a collaborative and transparent way that helps reduce the hierarchical barriers and

opens the door to be co-researchers, co-creators of new meanings and more preferred

stories (Janowsky et al., 1995; Brownlee et al., 2009; Freedman, & Combs, 1996;

Murdock, 2009). The therapist and team spend time joining with the family building a

strong alliance where they are treated as equals. The reflecting team departs from a

critical lens and opens space for acceptance and listening to multiple possibilities

(Anderson, 1987). The equality approach permits the client/s to be an expert on their

own lives and given power to accept or reject the many perspectives generated in the

team.

The sharing between client, therapist and team triggers a ripple effect that can create new and undiscovered stories which may propel change. By sharing reflections that impacted the team personally, a stronger connection is built with the client/s thus allowing the field to be leveled even more in the collaborative process (Anderson, 1987; Anderson, 1991; Cole et al., 2001). "These ideas of helping others create more meaningful narratives relate to the work of Bateson, who points out that what we learn about ourselves we learn through the reflections of others" (Cole et al., 2001, p. 5). Freedman and Combs (1993) along with Stephen Madigan (1993) also believe sharing of personal stories by the team creates a more authentic connection with the client/s. The team shares personal stories, which were tapped by the conversation unfolding between therapist and client/s. These multiple stories are connected to the client and rewoven into new and potential stories (Cole et al., 2001).

> We must be able to commit to a dialogical interplay that encourages an egalitarian and mutual search for understanding. In such a collaborative process, we are less likely, wittingly or unwittingly, to exploit perceived social power in a therapist-client relationship in the interest of preserving our own knowledge base or that of our cultural institutional discourses (Anderson, 1997 p. 137).

Stage three: Follow- up

In the final phase of the reflection process, the team once again switches places as the dialogue navigates back to the therapist and the client(s). They now have the chance to reflect on what they heard, what they are thinking about what they heard, how they are impacted by the conversation, and how if anything has shifted for them after hearing the conversation between the team members. The client can chose to take what resonates most for them from the reflection and leave the pieces which do not connect or maybe were too out of the ordinary (Adams, 1997). The client should

always have the opportunity to have the last word and seek any clarification needed

(Anderson, 1987; Brownlee et al., 2009).

By expounding on the comments, the client gives language to the meaningful

pieces of the dialogue. These co-authored meanings contribute to new insight of

oneself (Madigan, 1993). Madigan and Epston et al. (1995) encourage the opportunity

for the client and therapist to have the opportunity to ask the team questions and for

their to be an open dialogue about the teams conversation, thus connecting to a more

collaborative process and co-authoring of new meanings. The hope in the end is that a

shared understanding will evolve through these reflective conversations; a shared

meaning, which has an impact on everyone involved in the process (Shotter, 1993).

Narrative Approach to Reflecting Teams

> Narrative Therapy requires an optimistic orientation. The main
> character in the plot is frequently positioned in the therapeutic
> conversation as the courageous victor rather than the pathologized
> victim, as a colorful individual who has vivid stories to recount rather
> than a hopeless individual leading a pathetic life. The stories will not
> only change the teller in the telling but will also change the counselor
> as a privileged audience of the tale (Monk, 1997, p. 4).

The field of Narrative Therapy practitioners embraced the use of reflecting

teams and incorporated the process in a way, which honored the work of both

narrative therapy and the reflecting team structure Anderson began in the 80s.

Narrative ideas resonate nicely with the reflecting team as it too builds from a post-

modern, social constructionist perspective that seeks to respectfully work with clients

from a non-blaming curious place. It views the client as an expert in their own lives,

seeing problems existing separate from the person, and believing there are many

stories, which exist for people some highlighted and some hidden (Freedman &

Combs, 1996). Narrative therapist approach their clients with the respect of believing that clients hold great competency and the identified problem and story has hidden these competencies (Durrant & Kowalski, 1993; Hibel, 2010). As meaning-making beings, therapists seek to co-access meaning, which is hidden by negative dominating discourses. In turn, therapists work to support clients in their revision of oppressive stories into descriptions, which are more inclusive and honoring (Polkinghorne, 2004).

The therapist listens with an intentional ear for unique ideas and events in a clients' story, which may be hidden by more dominant stories. The therapist listens for the stories told versus listening for the why and symptoms of the conversation thus giving privilege to the voice of the client (Hibel & Polanco, 2010). They focus on building a community or audience, which stays attuned to the preferred stories of the clients (White, 2000). The therapist and team spend time noticing the competencies present in their story, which are often muted by the dominant problem saturated story. They listen to the hope and intention unraveling in the conversation and build their curiosity from this place (Hibel, 2010). The therapist spends time asking questions which access a more preferred story the client holds. They help deconstruct problem-saturated stories, which are often taken as truth. Through questioning, these taken for granted truths are examined for hidden prejudices and dominant discourses, which may limit access to more preferred stories (White, 1991). Favorable works unfold when the therapist, team and client begin to co-author a rich and thick new story line that fits the preferred story for the client (McKenzie & Monk, 1997; Murdock, 2009).

Narrative: A non-oppressive stance.

> Oppression creates constraints that significantly shape a person's life
> chances and possibility. Oppression restricts both self-development
> and self-determination. It delimits who one can imagine becoming and
> the power to act in support of one's rights and aspirations. (Bell, 2007,
> p. 3)

Narrative therapy works from a place that spends time noticing oppressive

practices, oppressive messages, and oppressive stories, which totalize a person's self-

narrative. Problems are seen to exist in social, political, and cultural domains. By

externalizing these constraining problems and deconstructing the problem story, the

team and client can come to a better understanding of the powerful influences at play

in the dominant story (Monk, 1997). Narrative therapists strive to create an audience,

which will build on a new more empowering alternative story. This dedication frees

therapists up to be present to alternative ideas and free from perpetuating repressive

stories. They spend time thickening the non-oppressive stories in hopes that the

preferred story, will gain some strength, momentum, and deeper meaning (White,

1991).

Narrative work is more than a therapy approach but also a political

commitment to be respectful of clients through language and story. Western

psychology has become a pathologizing approach, which looks for deficits as the

experts and social hierarchies in the room (Drewery & Winslade, 1997). The language

can become oppressive in the search for " what is wrong." Narrative practitioners

intentionally work to fight these oppressive approaches by using language, which is

respectful, hopeful, and attends to the overt or many times covert discourses defining

the lived story (Drewery & Winslade, 1997). They pay attention to oppressive social

and cultural clubs where clients have become members. Membership in these clubs can be constraining and therapist work to provide an orthogonal interaction, which frees people up to connect with options and stories that are not available within the club (Gordon, & Efran, 1997).

Stories as meaning-making.

> Our lives are ceaselessly intertwined with narrative, with the stories we tell and hear told, those we dream or imagine or would like to tell, all of which are reworked in the story of our own lives that we narrate to ourselves in an episodic, sometimes semi-conscious, but virtually uninterrupted monologue. We live immersed in narrative, re-counting and reassessing the meaning of our past actions, anticipating the outcome of future projects, situating ourselves at the intersection of several stories not yet completed (Polkinghorne, 1988 p.160).

Stories and storytelling have endured as part of culture and connection from one generation to the next throughout history. Stories and events are linked together creating meaning. Through anthropological work the discovery of storytelling has surfaced from the earliest civilizations through art, writings, and stories passed through generations. Through these cultural stories meaning is ascribed to past and future experiences (Gladdening & Wallace, 2010). Being human involves being part of a story -creating world (Parkinson, 2009). People create stories about themselves and they become the stories others have created about them through the language they share in interaction with one another. People begin to make meaning of their lives through these evolving stories (Bruner, 2002; White, 1989/90). Meaning evolves through the daily interactions with others- through interactions and language with others meaning surfaces and creates a picture of how one will interpret their own story and the world around them (Forster, 1997). Multiple stories are born over time, some becoming thick and privileged and others remaining thin, lacking time to blossom and

thus withdrawn and silent. The thick story becomes dominant with great power to reinforce and propel it's meaning in ones life (Murdock, 2009).

Maya Angelou (as cited in Gladdening & Wallace, 2010) states that, "There is no greater agony than bearing an untold story inside you" (p. 16). Hermans and Hermans-Jansen (1995) describe people as a bank filled with narratives developed over time waiting to be revealed. Our lives are rich with experience and people can only story so many stories at once. Often the stories, which get storied, fall within in the dominant discourses. Those that fall outside the discourse, White (1992) would call unique outcomes. These are the stories, which provide rich and fertile space for accessing new stories. These are the stories dying to be told. The team pays attention to these dormant stories and provides access through reflections and questions so clients can begin to build meaning from these hidden gems (White & Epston, 1990). The stories clients share with the team allow insight into the emotions, ideas, cultural discourses, and contradictions that are contributing to the identified struggle (Gabriel & Connell, 2010). These untold and undiscovered stories become present in the room and contribute to a transformational process for the entire group. Everyone is changed through the telling.

Creating the shift: Incorporating Narrative Reflecting Team Ideas into the Educational Setting and Supervision

Shifting Education

Education provides an opportunity for students to undergo a transformational process as they begin to internalize, transform, and make meaning of the knowledge unfolding in the classroom (Brooks, & Brooks, 1993). This transformation bestows an

encouraged environment of deeper understandings, exploring and following interests,

making connections and seeking alternative conclusions. Encouraging students to

reflect and think beyond the boundaries creates an experience of many possibilities

(Forster, 1997). As multistoried humans, Phillip Jackson (1995) notes that we hold

great knowledge, as the stories we have come to understand and live by are rich with

meaning and history. Understanding the epistemological function of stories is a key

connection Jackson advocates for students to make. How we come to know what we

know and how stories play a role in this knowledge. Learning reaches a deeper level

as social discussion and reflection on this functional aspect lead to shared meaning.

Creating these experiences of sharing and reflection is a goal of the educational

process, as reflection if the conscious part of learning (Boud & Knights, 1996; Griffith

& Friedan, 2000; Sexton, 1997). Merriam, Caffarella, and Baumgartner (2007)

believe,

> Connecting through stories will create a learning environment which:
> supports and honors the experiences of students, encourages
> connectedness in the learning environment, instills a value of reflective
> learning, and empowers adult learners to trust their stories and expand
> them through a more reflective and shared learning experience (as cited
> in Stroud, Prindle, &England, 2012, p. 67)

Creating a more collaborative classroom has many benefits for students and

educators. Students working collaboratively together through the sharing of meaning,

allows a stronger connection in the classroom to blossom. Connected learning

environments instill a culture where growth is honored and where supporting the

learning of one another are encouraged. This milieu provides space for students to get

to know one another free from competition and hierarchy. Time is spent listening to

one another experiences and stories and making room for personal "truths" to be

transformed through the ideas of others. Students often arrive from a place of authoritative education, so Brufee (1993) emphasizes a need to renegotiate the idea of collaborative learning with students. The idea of reflecting and commenting on another's ideas can feel overwhelming and threatening at times. However, once this hurdle is overcome the potential of peer collaboration can be exciting and promising.

Incorporating the Reflecting Team into the educational setting serves as a useful tool in enhancing this connective transformation. According to their study, Landis and Young (1994) see the use of reflecting teams as a way to address the relational power dynamic that exists by taking advantage of a more respectful and honoring conversation with students. Through the reflecting team process, students have access to immediate feedback from the team. The feedback becomes recursive where each person is touched by the insight and meaning manifesting. Through their research, Landis and Young came to understand live feedback to be a powerful and useful experience for beginning counselors. Providing reflections encourages creative and alternative language of students. This gives them the opportunity to rehearse and try new language with immediate peer feedback readily available. Listening to others creates an opportunity to understand and see new skills as possibilities. Finally, their research study revealed the reflecting team process provided an opportunity to experience greater collaboration and time to work cooperatively as a team over traditional teaching methods.

Alma Harris (1996) reminds educators of the need to have these reflecting experiences as a way to better support students. As students embark on a journey of learning in a helping profession they may encounter new situations, which prove to be

quite new and challenging. Students need an opportunity to reflect on these

experiences with their peers in order to propel them to a new level of understanding.

New perspectives will influence the knowledge schemas students' hold. As they work

with new clients, feelings of isolation, diminished confidence, and fear may arise. If

not processed, these feelings can overshadow the ability to take in new content as

students remain in a state of preoccupation. By exploring these personal dilemmas,

challenges, and success, students begin to develop a professional identity in a more

preferred way.

Shifting Supervision

I am proposing that supervision with students shift from the traditional

approach and as Emerson (1996) views it, a competitive approach, to being explored

from a cooperative social constructionist place using narrative reflecting team ideas

with a focus on the self-efficacy. The literature on working with new

trainees/supervisees, with this emphasis is somewhat limited, but what has been

uncovered resonates with ideas of supporting, nurturing, and building self-efficacy

through collaborative supervision practices (Carlson & Erickson, 2001). This approach

can be honoring of the supervisee's experiences and stories they bring to their

professional identity.

> Narrative ideas encourage us to recognize and honor the more local
> and personal knowledge, skills, ideas, beliefs, and so forth that are so
> often disqualified and marginalized by the privileging of professional
> accounts of work, relationships, and lives as therapists (Carlson &
> Erickson, 2001, p. 201).

Collaborative and connected.

In the shifting to a narrative and reflective supervision model a more collaborative relationship is born. The supervisor and supervisee engage in a dialogic process where they listen and explore the story and re-story in a respectful, non-threatening manner. Through tentative questioning narrative supervision encourages supervisees to tap into their preferred self. Gray (2009) emphasizes that supervision create a space for supervisees to reflect and co–construct new meaning based these new insights. The supervisor and team listen with intention for the preferred story and unique outcomes, which contribute to the narrative of preference. The supervisor spends more time in a curious place around unique outcomes and collaborating around the preferred story versus teaching. This practice allows the supervisor to model the questioning process authentically for the supervisee and team, thus providing a collaborative learning process for all. The modeling and experiencing becomes the collaborative teacher (Anderson, 1991).

Carlson and Erickson (2001) embrace the importance of connecting with new trainees, listening to their hopes, stories, and personal motivations, experiences and desires. They see this relational piece as a vital tool in helping them create meaning around theory and practice. This rite of passage, a metaphor adopted from Epston and White, becomes a passage of creating deeper meaning around personal knowledge and allowing it to come forth in their professional identity. As they make this connection between their stories and new knowledge, supervisees will begin to have a stronger sense of professional identity. What they do, what it is rooted in, and why they do it will become part of their professional story. It is important to emphasize here that it is

the supervisee's identity versus the expert's identity. Tapping into the supervisee's own experience honors their role in the learning process and supports a social construction view of learning (Neufeldt, 1997). Their story as professionals is thickened when supervisors take interest in these hopes, desires and metaphors.

> We also believe that for new therapists to develop confidence in their abilities, they need to experience personal agency in regard to their work, to experience themselves as having an active role in the shaping of their lives as therapists (Neufeldt, 1997, p. 204).

Safety.

Emerson (1996) talks about creating a safe place where students feel comfortable taking risks – the atmosphere is key. It needs to be a place where people feel accepted, safe, involved in the process, a sense of equality, transparency, encouragement from supervisors and peers, and non-judgmental. The narrative reflecting team process aims to create a safe learning environment where supervisees can feel comfortable being vulnerable, bringing up unhelpful narratives around professional identity, struggles with clients, and also to share ways they are learning, feeling proud, and having success. Emerson asks her readers to think about their purpose as supervisors and to "refrain elevating ourselves at the expense of those at our mercy, allow our students to become better therapist than we are" (p. 402).

Developing Supportive Communities

Working in a narrative, collaborative, and reflecting team way envelops a social conversation where alternative knowledge and meanings are co-authored in supervision (Sexton, 1997). No one voice is privileged over another including the voice of the supervisor. Supervisees have the opportunity to tell their story, hear pieces of their story retold, and then retell the story again. Narrative approaches to reflecting

teams with supervisees can be helpful as they embrace the ideas of a community of

concern as described by Carlson and Erickson (2009). They see these communities as

people surrounding the supervisee with support and providing an audience for their

story to be told.

> These are communities dedicated to honoring and privileging the
> experiences of one another, where all members can stand as witnesses
> to the preferred development of one's lives. Narrative therapists see the
> creation of such communities as a vital role of their work…Stories are
> embraced when they are performed before an audience… These
> preferred developments are then witnessed by others in the community,
> thus allowing these developments to be storied by those involved
> (Carlson & Erickson, 2009, p. 208-209).

The team process connects each member by creating a supportive place where

stories can be shared, honored, and new perspectives can evolve.

The supervisor can engage the supervisee in a process of deconstructing their

story to access meanings, assumptions, oppressive discourses, history, and unique

outcomes. The team can also have a tentative conversation with one another in front of

the supervisee about these stories emerging in the deconstructive process. By

deconstructing the story, new and meaningful narratives may be brought forth

(Speedy, 1995; Prest, Darden & Keller, 1990). Supervisees have the opportunity to

identify the oppressive institutions, which are impacting the story of professional

identity. They can be invited into seeing new possibilities and meaning around their

identity through the reflecting process. Through the co-authoring taking place,

supervisees can be encouraged to embrace their competency, their skills, and their

assets by telling and listening to the new narratives evolving. Supervision becomes a

transparent process where they are open about the discourses influencing the process

and playing a part in the room (Fox et al., 2002). The supervisee, supervisor and team

are invited into a creative space of stories, thus allowing them to understand this story as part of a multi-verse of stories where the ones created in the team are just one of numerous possibilities (Speedy, 1995; Prest et al., 1990).

Conclusion

The use of reflecting teams continues to be a widely used in the field of many disciplines and the usefulness of it in supervision is becoming more prevalent in the literature. The power of it lies in its mission to see supervisees, students or new trainees as people filled with immense knowledge and experts of life and experiences. Each person arrives at the threshold of learning with excitement, hopes, fears, and dreams. A supervisor who spends time honoring these stories and uncovering oppressive discourses, which disregard the empowering stories of these new voices, honors the role of educating and supporting new competent practitioners. This supervision model may not only create more supervisees who feel competent in their work, but may in turn impact the clients they work with in their settings. More research and practice in recommended in this area to further develop the impact it may have on the helping profession. The story is never complete as understanding and knowledge development are in constant motion-the ending is yet to be discovered.

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Building Counselor Trainees' Self-Efficacy Through a Narrative Reflecting Team
Supervision Experience

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Abstract

The purpose of this study was to determine the impact a narrative reflecting team experience has on counselor self-efficacy. Through a quasi-experimental design, the use of a narrative reflecting team supervision model was compared to supervision as usual with graduate counseling students (N=12). The Counselor Self-Estimate Inventory (COSE) was chosen to assess self-efficacy pre and post eight weeks of a reflecting team intervention and supervision as usual. Narrative reflecting teams in supervision offer a reflecting opportunity for supervisors, students and supervision teams to re-story counseling practices, professional identity, and counseling efficacy through a supportive, safe and empowering process. Self–efficacy is valuable in determining how counselors think about their ability to work effectively as counselors. Results from a Wilcoxon Signed Ranks Test indicate that an 8week, 1 ½ hour, narrative reflecting team experience did not elicit a significant change in counselor self-efficacy over supervision as usual (t = -0.772, p = 0.46). Results and suggestions for future research and practice are discussed.

Introduction

As counseling professionals and educators, we are growing the roots and laying the foundation for a stronger and more ethical profession aimed at providing the highest quality of services in education, research, practice, and service. This ambitious expectation demands responsible, empowering and creative training. Who best to begin with, than with counseling trainees during their field experience as they are synthesizing their learning into practice, strengthening the foundation that educators and practitioners have helped to build. This foundational responsibility was the inspiration for my research. The research focused on the self-efficacy of counseling trainees and a narrative reflecting team supervision model, in hopes of co-creating stories of stronger counselor self-efficacy. I believe empowering new and stronger stories in counselor trainees' will add to self-efficacy and will contribute to more competent, confident, and strong professionals in the field.

According to Bernard and Goodyear, "the aim of counselor supervision and training is to develop proficient counselors by increasing their level of competency and self-efficacy" (as cited in Fernando & Hulse-Killacky, 2005, p. 294). Self-efficacy is defined by Bandura (1995) as, the "beliefs in one's capabilities to organize and execute the courses of action required to manage prospective situations. Efficacy beliefs influence how people think, feel, motivate themselves, and act" (Bandura, 1995, p.2). In other words, self-efficacy addresses one's belief of being capable of performing and accomplishing tasks. The stronger the self-efficacy, the stronger the belief one is capable. Having this strong belief allows one to work through challenges and persevere in difficult and discouraging times. These experiences of being

successful in turn support a stronger efficacy. However, in individuals with a weaker sense of efficacy, times of challenge and discouragement create more failure and lower determination to stay with the challenge (Bandura, 1995).

The core objective of this research study is to examine if a narrative reflecting team supervision experience enhances the self-efficacy of counselors in training by building on their story as competent and capable counselors. In trainees who may struggle at times with feelings of incompetence and inadequacy, participation in an experience, which elicits personal narratives of strength and ability, can be beneficial. I want to know about the potential benefits a respectful, student-centered, post modern, social constructionist storying process can have on the empowerment and building of trainees' self-efficacy narratives. After a thorough review of the literature, to my knowledge, there is not an empirical study, which examines self-efficacy in counseling trainees, pre and post a narrative reflecting team supervision experience. As supported by Fernando and Hulse-Killacky (2005) "the impact of supervisors' unique styles on the supervisees' perceived self-efficacy has not been examined" (p. 294). It is the unique style of narrative reflecting team supervision that I wish to explore as a tool with which to build self-efficacy during the supervision process of counselors in training. A unique style, which I hope can contribute to the field of supervision and education.

Review of the Literature

Self-Efficacy

Expectations of self-efficacy are the most powerful determinants of behavioral change, because self-efficacy expectancies determine the initial decision to perform a behavior, the effort expended, and persistence in the face of adversity. In addition, experimental research

strongly suggests that self-efficacy is a more powerful predictor of behavior than past performance (Bandura, as cited in Martin & Campbell, 1998, p. 1).

Bandura's theory of self-efficacy describes four areas of information that impact whether or not perceived self-efficacy will increase or decrease (Larson, L.M. Suzuki, L.A., & Gillespie, 1992). These four areas include: experience with successfully performing or mastering a behavior/task; having the opportunity to be witness to a model having success with performing a specific task or behavior; being able to listen to someone successfully describe the behavior; finally, emotional arousal- anxiety that inhibits one's self-efficacy. "Self-efficacy theory is based on the assumption that one's sense of personal efficacy mediates the relationship between the knowledge of how to behave and what is actually done" (Bandura, as cited in Martin & Campbell, 1998, p. 1). How does this all relate to counseling and training counselors? The implications are important because a counselor's perceived self-efficacy can predict the beliefs, thoughts, and behaviors unfolding in the work with clients.

A higher level of counselor self-efficacy plays a vital role in the likelihood that the counselor is engaging the client from a place of great effort and determination to work through issues and challenges, which may arise (Larson et al., 1992). Supervisors can support and encourage stronger efficacy by facilitating a supervision process, which stories successes, models ways to empower stronger efficacy in others, listens for stories of success, and helps re-author stories of anxiety-provoking situations.

In contrast, a lack of supportive supervision for those with lowered efficacy can contribute to "increased stress levels, burn out, feelings of aloneness and

unhappiness…a decrease in confidence and abilities, and an actual decline in counseling skills" (Cruthfield & Borders; Peace; Powell; Spooner & Stone,; Watkins, 1as cited in Cashwell & Dooley, 2001). According to a study reviewed by Larson et al. (1992) of research conducted by Kirsch when failure feedback is at the center of the focus or discussion, self-efficacy is decreased. Their research explored the "debilitating" impact negative feedback can have on self-efficacy versus the empowering impact and effect of success. I question how some traditional supervision experiences, which may focus primarily on negative feedback, contribute to a lowered self-efficacy in students. How is this process contributing to the long-term quality of services that clients receive from counselors who may feel discouraged and less likely to work through challenging situations?

These are some of the leading questions contributing to this focused choice of research. Can an alternative experience of using positive feedback in a non-judgmental, storying process increase self-efficacy of counselors in training? Can this technique potentially add to the field of supervision and education of counselors in training? Can the experience contribute to counselors' belief in their capabilities, thus impacting their motivation, behaviors and thoughts around their capabilities? Can the training of group supervision participants in a post-modern, social constructionist model create a more supportive environment for supervision where the stories of new trainees are transformed into confident, capable, and self-efficacious?

Creating a Shift in Supervision: Narrative Reflecting Team Supervision

> Training and supervision has raised a dilemma for those teachers/supervisors who have concerns that such contexts can be subjugating to participants-concerns that the training context might encourage participants to surrender their own "hard-won" knowledge and submit to the authority of the

teacher/supervisor; concerns that participants could be incited to discipline themselves and shape their "life as therapist" according to certain specifications; concerns that participants might fashion their lives as recruits. Is there a solution to this dilemma? Is it possible to conceive of a process of training/supervision that doesn't have this outcome? (White, 1989, p. 83-84).

Narrative Reflecting Teams bring a fresh perspective to these questions - a perspective that informs the research set forth by the researcher. Reflecting teams originated out of Norway in 1987 by Tom Anderson and his colleagues as a new and respectful approach in family counseling. This approach emerged from the work of the Milan School. Originally, The Milan School of therapy incorporated a team model into their work when client/s and therapist were in a stuck position in the therapy process. The team of therapist would hypothesize about the clients and the problem before a therapy session, watch a therapy session between client/s and their therapist, and then discuss the original hypotheses in regards to what they saw. All of these conversations and questions unfolded behind closed doors. A message would be generated by the team about thoughts and next steps and then delivered to the client/s. The client/s were vessels expected to receive and digest the new points of view. The client/s never had the opportunity of participating in the whole process or being privy to the teams' conversation (Anderson, 1987; Frake & Dogra, 2006).

Anderson (1987) and his colleagues happened upon a new approach, which created a shift in the field of family therapy. They felt responsible to their clients to move the teams' conversation out into the open for the client/s and therapist; the conversation was now available for everyone to hear. Anderson and his colleagues established some rules for this process, which have endured since its creation in the

eighties and remain as the foundation for respectful, hopeful, and empowering practices with clients.

These rules, during specific stages, created by Anderson (1987) and his colleagues consist of the following with a few additions made throughout the years by other therapists- especially those who identify strongly with the practice of Narrative Therapy:

The stages of the Reflecting Team Process (Anderson, 1991; Shurts et al., 2006)

Stage 1: The therapist interviews or has a conversation with the client/s while the team listens and watches the session.

Stage 2: The Therapist and client/s switch places with the team while the team has a tentative, strengths-oriented conversation, which creates numerous possibilities.

Stage 3: The Therapist, client/s and team switch back to their original places. The therapist and client/s resume their conversation that includes their thoughts and ideas about the conversation between the team members.

The Basic Rules for a Reflecting Team Process:

1. The team will listen in silence generating their own thoughts and ideas- this silence eliminates potential negative conversations and hypothesis about the client/s between team members and it provides an opportunity of multiple stories to be generated.

2. The team will be behind a two-way mirror or on the side in the therapy room.

3. The teams' conversation will be positive, tentative, curious, focused on the content discussed, and free of judgments.

The narrative, post-modern and social constructionist contributions of Michael White, David Epston, Stephen Madigan, Jill Freedman, Gene Combs and many more, have added depth, perspective and richness to the reflecting team process. Narrative ideas revolve around the importance of stories in people's lives: stories which give definition to one's life, stories which dominant one's life, stories which oppress one's life, and stories yet to be uncovered and empowered in one's life. A narrative approach to reflecting teams incorporates Anderson's steps and rules but takes it to another level around storying the information generated in all three conversations held throughout the stages. A narrative therapist wants to ask tentative questions about where a problem story was generated, where and how it gained so much power, and if there are alternative stories which exist and contradict the problem-saturated story. The team listens for these stories, questions these stories, and highlights these stories in their team conversation in front of the client and therapist (Monk, 1997). Through curious wonderings and multiple perspectives, new stories are generated and internalized by the client. The client can choose to take the pieces that work and fit into their world and leave the pieces, which do not. The team, therapist and client become a unified force seeking new and more preferred stories for the client. The experience and generation of new stories will be a process that includes everyone and has an impact on everyone. The once hierarchical process of counseling becomes more egalitarian through a narrative and reflecting team experience (Monk, 1997). The client becomes the expert on their own lives, which puts power, hope, confidence and choice back into their hands (White, 1991).

I view this approach as a potentially helpful and empowering approach with counselors in training. The literature shows promise for the use of social constructionist, postmodern approaches in supervision and education. A narrative reflecting team process would allow the stories of efficacy to be explored- first through the intentional and curious questions from the supervisor and second through the tentative conversation held among the team members. The reflection and conversation would generate multiple perspectives available to building and supporting the efficacy of counselors in training.

Rationale for the Use of Narrative Reflecting Team Supervision with Counselors in Training as a Tool for Addressing Self-efficacy

Confident Counselors Produce Stronger Outcomes with Clients

The need to have confident counselors who feel they are capable in their work with clients is important to the field of counseling and most importantly to the clients future counselors will serve. Counselor self-efficacy, defined as the belief that one will be able to counsel clients effectively in the future and handle challenges should they arise (Larson & Daniels, 1998). Clients are at the heart of the training, education, and work of counselors. Placing emphasis on the self-efficacy in supervision creates a strong commitment to the competence counselors in training hold. Emphasizing self-efficacy highlights and contributes to creating the most beneficial relationship between the counselor and clients (Jaafar, Mohamed, Baker, & Tarmizi, 2009).

Contributes Quality and Honoring Supervision Practices with Supervisees

Fostering and encouraging confidence in trainees abilities through Narrative Reflecting Team Supervision (NRTS), encourages "us to recognize and honor the more local and personal knowledge, skills, ideas, beliefs and so forth that are so often

disqualified and marginalized by the privileging of professional accounts of our work, relationships, and lives as therapists" (Carlson & Erickson, 2001, p. 201). Counseling trainees come with diverse stories of success, fear, confusion and at times being in a stuck place with their work. Instead of approaching these new counselors from a critical, game playing, hierarchical lens, the supervisor can open the door to a more empowering supervision experience through the storying process of NRTS. Supervisees, just as all humans, have a need to feel safe and trust. The condition of safety and trust opens the door for supervisees to bring their vulnerable work to supervision. Supervisees can take risks, explore challenges, and have room to make mistakes and improve. This openness and mission of empowering strong, confident, capable, ethical practitioners creates a new space for better therapists (Emerson, 1996).

Adds A Quantitative Study to the Field of Narrative Therapy and Supervision

Quantitative research in the area of Narrative Therapy and Supervision (NRTS) is limited. I believe the addition of a quantitative study to the field of counseling will provide greater legitimacy and greater respect for the work and benefits of Narrative practices; a practice, which brings a more egalitarian approach to supervision.

Addresses Oppressive Practices in Supervision

The process of Narrative Reflecting Team Supervision (NRTS) emphasizes a need to address oppressive stories in the work of counselors in training. A NRTS experience spends time exploring dominant discourses contributing to oppressive stories in the work of supervisees. By exploring these oppressive stories, supervisees

can deconstruct dominant stories, which inhibit their work with clients, their belief in their ability and confidence in their work, and experiences, which tear down their self-efficacy.

Adds to Counseling Education Pedagogy Focused on Transformational Learning

Narrative adult learning is a practice, which falls into the field of transformational learning. Transformational learning "is about change-dramatic fundamental change in the way we see ourselves and the world in which we live" (Merriam, Caffarella, & Baumgartner, 2007, p. 130). Adult learners enter the learning environment with many stories and experiences- these stories and experiences give meaning and roots to the new experiences unfolding in the learning of becoming a counselor. These stories are influenced by many pieces in one's life and each new experience deepens the story of counselors in training (Stroud, Prindle & England, 2012). The sharing and reflecting of stories in the reflecting team process expands the possible stories available to all students participating. Everyone participating in the experience in changed through the telling of their own story, listening to the stories others tell about one's story, and the retelling of the story. Students will be encouraged to be reflective, connect with others, and build new meanings for their work as counselors (Merriam et al., 2007).

Method

Purpose

The purpose of this quasi-experimental pre-post design was to determine the impact a NRTS process has on self-efficacy. Specifically, I wanted to answer the question, "Does the use of a narrative reflecting team supervision experience in a

group supervision setting impact counselor self-efficacy in counseling trainees compared to supervision as usual?" After reviewing the literature related to self-efficacy, supervision, and narrative reflecting teams, I decided to create a quasi-experimental design, which examined the use of this supervision model with graduate students attending Northwest Christian University.

Design.

Twenty-seven students were invited to participate in this study, nine students for the experimental group and eighteen for the control group. The nine students recruited for the experimental group were enrolled in an advanced internship course at Northwest Christian University. The eighteen students recruited for the control group participated in supervision as usual. This supervision as usual model was conducted in a group format focusing on case consultation. The supervision as usual is a student driven process. Both the experimental and control groups were pre-established groups at Northwest Christian University for second year students nearing the end of their graduate counseling program.

Upon approval from the IRB at Northwest Christian University and Oregon State University, participants were recruited via an email/letter (Appendix A). I, the researcher, was responsible for the coordination and execution of research at Northwest Christian University. Each participant ($N = 9$) in the experimental group (a) completed a consent form (See Appendix C), a demographic questionnaire (See Appendix D), and the pretest COSE (b) participated in a eight week narrative reflecting team supervision experience; and (c) completed the posttest COSE. The control group ($N=18$) (a) received an explanation of study (See Appendix B), a

demographic form (See Appendix D), and a pretest COSE; (b) participated in

supervision as usual for eight weeks; (c) completed the posttest COSE. The final

participant sample size resulted in (N=12) total participants in the entire study, (N=9)

for the experimental group and (N=3) for the control group.

Intervention

Narrative Reflecting Team Supervision: The NRTS process consisted of eight

weeks and was facilitated with the nine students enrolled in the on-campus advanced

internship course. Each student (a) attended 2 ½ hour long team building sessions and

narrative reflecting team trainings during weeks one and two; (b) divided into one of

two groups and met at in their separate groups (the morning group consisted of four

students and the afternoon group consisted of five students) for 1 ½ hours the

remaining six weeks; (c) was interviewed during one of the remaining weeks by the

researcher regarding an area they identified as a professional identity struggle or

professional challenge they face with clients; (d) participated as a reflecting team

member when not being interviewed; (e) attended the final debriefing during week

eight on their experience being part of a reflecting team, being interviewed, and

receiving feedback and alternatives during the reflection process.

I created an operational manual for the reflecting team process based on the

guidelines and reflecting team processes established by Tom Anderson (1987) and the

literature reviewed for this study. This addition allowed the researcher to stay

consistent to the process for both experimental groups. It includes a training process

for the experimental group, a five week reflecting team process, and a debrief session.

The initial weeks of training and team building were thought to be a helpful tool in

building rapport among and with the groups, as well as establish a strong understanding of how to be on a reflecting team and honor the rules and guidelines initially set forth by Anderson.

The reflecting team process.

Stage one: (30 minutes) I interviewed a student about an area they were struggling with in their professional identity or professional challenge with clients while the reflecting team sat in silence and listened to the conversation. (Appendix E)

Stage two: (10-15 minutes) The conversation between me and student ended and the conversation then turned to the reflecting team. The reflecting team (counseling students) had a tentative and positive conversation about what they heard from the student and me. The student and I took our turn sitting in silence as we listened to the team. (Appendix E)

Stage Three: (10 minutes) The conversation switched back to the student and me. We reflected on what we just heard from the team, asked questions, and commented on the conversation held between the team members. (Appendix E)

Procedures

Measures.

I chose to use the Counselor Self-Estimate Inventory (COSE) (Appendix F) as a tool to measure self-efficacy pre and post the experimental component. This test was chosen for its applicability to the study and its applicability to counseling students in training. According to the literature, the COSE is the most widely used measurement for counselor self-efficacy (Yeun, Chan, Lau, Lam & Shek, 2004). The COSE scale was developed by Larson and her colleagues; It is "intended for use in training,

supervision, and research regarding the development of strong percepts of self-efficacy, and the population of greatest interest was counselors in training" (Larson et al., 1992, p. 170).

Through a factor analysis (*N*=213), Larson (1992) and her colleagues discovered 5 factors that demonstrate "counselor trainees' confidences in using microskills, attending to process, dealing with difficult client behaviors, behaving in a culturally competent way, and being aware of one's values" (p.105). They started with sixty-seven items on a six point Likert Scale aimed at assessing confidence in regards to trainees' counseling skills. The five assessments used in the factor analysis include: Tennessee Self-Concept Scale (TSCS); State-Trait Anxiety Inventory (STAI); Problem Solving Inventory (PSI); Social Desirability Scale (SDS); Graduate Record Examination (GRE). Thirty-seven items on the COSE were identified as valuable declarative statements in determining a level of self-efficacy for this final assessment. The thirty-even items are used on a 6 point Likert-type scale. The scale ranges from 1(strongly disagree) to 6 (strongly agree). Scores range from 37-220; the higher the score, the higher the perceived self-efficacy, the lower the score the lower the self-efficacy of counselor trainees (Fernando, & Hulse-Kalicky, 2005; Jaafar et al.,2009; Larson et al., 1992).

Reliability and Validity of the COSE as reported in the literature reveals that the overall reliability of the COSE is α = .93.

> Internal consistencies for the COSE Total score and the five factors are as
> follows: for COSE Total, α = .93; for Supervisee's Confidence In
> Implementing Microskills, α = .88; for Attending to Process, α = .87; for

Dealing With Difficult Client Behaviors, $\alpha = .80$; for Behaving in a Culturally

Competent Manner, $\alpha = .78$; and for Being Aware of One's Values, $\alpha = .62$

(Larson et al., 1992). Three week test–retest reliabilities are as follows: COSE

Total, $r = .87$; Supervisee's Confidence in Implementing Microskills, $r = .68$;

Attending to Process, $r = .74$; Dealing With Difficult Client Behaviors, $r = .80$;

Behaving in a Culturally Competent Manner, $r = .71$; and Being Aware of

One's Values, $r = .83$ (Larson et al., 1992). Other studies provide evidence for

the reliability and validity of the COSE (Fernando, Hulse, & Kalicky, 2005;

Jaafar, Mohamed, Bakar, & Tarmizi, 2009; Larson et al., 1992; Larson &

Daniels, 1998).

Participants.

Second year students were chosen for this study due to their fit with the COSE

and the potential positive impact a narrative reflecting team supervision experience

may have on these students as they prepare for a counseling career. These students

were in their last term of their last year in the counseling program at Northwest

Christian University. Each student was at the place of embarking on counseling work

with vulnerable populations-a place in life where counselor self-efficacy can

potentially impact the career choices of these individuals and the clients they will be

working with on a daily basis. Demographic information was gathered for both the

experimental (Table 1) and control (Table 2) groups.

All students identified as potential research participants speak and read

English. One student had hearing difficulties but did not identify a need for extra

support in the educational setting. No other risk factors as outlined in the IRB as

potential risks to vulnerable populations were identified.

Table 1

Experimental Group Demographics

Demographics	*n*	*%*
Gender		
Female	7	80%
Male	2	20%
Ethnic Identity		
American Indian/Alaskan Native	0	0%
Hawaiian or Other Pacific Islander	0	0%
Asain or Asain American	1	10%
Black or African American	0	0%
Hispanic or Latino	0	0%
Non-Hispanic- White	8	90%
Level of Education		
Bachelors	9	100%
Masters Degree	1	11%
Doctoral Degree	1	11%
Year in Clinical Mental Health Counseling		
First year	0	0%
Second Year/ Graduating	9	100%
Number of Semesters in Internship with Supervision		
Second	4	44%
Third	5	56%
Mean Age	45.4 years	

Table 2

Control Group Demographics

Demographics	*n*	*%*
Gender		
Female	5	100%
Male	0	0%
Ethnic Identity		
American Indian/Alaskan Native	1	20%
Hawaiian or Other Pacific Islander	0	0%
Asain or Asain American	0	0%
Black or African American	0	0%

Hispanic or Latino	0	0%
Non-Hispanic- White	4	80%
Level of Education		
Bachelors	5	100%
Masters Degree	0	0%
Doctoral Degree	0	0%
Year in Clinical Mental Health Counseling		
First year	0	0%
Second Year/ Graduating	5	100%
Number of Semesters in Internship with Supervision		
Second	3	60%
Third	2	40%
Mean Age (two students did not give age)	57 years	

Note: Five students completed the pretest and demographic questionnaires

during week one, but only three students completed the posttest. The students

were assigned a number and filled the demographic forms out anonymously,

which prevented me from determining the demographics of the three students

who completed the whole study.

Data Analysis.

The data collected through the pre and post COSE was analyzed using a

Wilcoxon Signed Rack test. The demographics collected for this study provide

participant characteristics. Of those assessed, this study's participants are

representative of graduate counseling student proportion specific to gender (Digest of

Education Statistics, 2005).

Results

Five of the potential eighteen students in the control group responded to the pre

test and of the five, three provided responses for the post assessment. All nine

participants in the experimental group completed pre and post COSE administrations.

The Wilcoxon Signed Rank Test was chosen given the relatively small sample

size ($N=12$), and inability to assume normality of the distribution for a sample of this

size (Tomkins, 2006). Mean differences between the experimental and control groups

(Tables *3* and *4*). Indicate a significant difference does not exist ($t = -0.772$, $p = 0.46$).

Table 3

Wilcoxon Signed Rank Test of Experimental Group Differences Pre-Post

Student	Pre	Post	Difference	Abs Diff	Rank	Signed Rank	
1	164	185	21	21	7	7	
2	187	192	5	5	3	3	
3	176	154	-22	22	8	-8	
4	158	194	36	36	9	9	
5	169	185	16	16	6	6	
6	196	197	1	1	1.5	1.5	
7	170	178	8	8	4.5	4.5	
8	174	173	-1	1	1.5	-1.5	
9	164	172	8	8	4.5	4.5	
M	173.11	181.11	8		Sum	26	
SD	11.97	13.51	16.03		Sum Neg	-9.5	*t-*
					Sum Pos	35.5	*t+*

Note: The researchers would expect *t+* to be closer to *t-* and they are not, thus the Null
Hypothesis is retained.

Table 4

Wilcoxon Signed Rank Test of Control Differences Pre-Post

Student	Pre	Post	Difference	Abs Diff	Rank	Signed Rank	
19	168	176	8	8	2	2	
25	164	191	27	27	3	3	
28	213	217	4	4	1	1	
M	181.67	194.67	13		Sum	6	
SD	27.21	20.74	12.29		Sum Neg	0	*t-*
					Sum Pos	6	*t+*

Note: The researchers would expect *t+* to be closer to *t-* and they are not, thus the Null
Hypothesis is retained.

After analyzing the data it is evident that little difference resulted between the

pre and post Counselor Self–Estimate Inventory (COSE) for experimental and control

groups.

Discussion

Findings indicate no significant difference in counselor self-efficacy pre to post for the narrative reflecting team supervision intervention. In inspecting the data, a number of possible reasons present. This study's small sample size possibly makes determining the impact of NRTS on levels of self-efficacy for counselors in training difficult.

Upon post-hoc visual inspection of the pre-post data interesting to note: student 3 scored considerably lower (-22) post-test; and students 4 and 25 evidenced large gains in relation to group means (36; 27). Given this study's sample size, these outlying scores significantly influenced the results. Graphs at the end of this chapter display the impact of these outliers (see Figures *1-4*).

Several themes and issues arose throughout the research, which are important to note and to think about in preparation for future researcher. A very obvious theme, which continued to arise throughout the research, was the observation of the developmental stages of the counselors in training. It became evident that it was difficult to be with a new group for eight weeks, with very little time to build a strong sense of safety in the group. Students were asked to think about something in regards to their professional identity or their work with clients, which may feel like a struggle at times. Many of the students struggled with this idea and did not allow themselves to be vulnerable in the reflecting process.

Second, the consistency of the group became a challenge due to where everyone was in the program. Not each student needed all the hours during the eight

weeks, students had other commitments, and their attendance and timeliness to the group were a challenge. Due to the study being conducted at a separate University, very little time was permitted to get clear communication to the students. Often they were confused about when they should be there, that they needed to commit to the eight weeks, and be there on time. Due to their commitments to the mental health clinic some needed to leave a few minutes early.

Third, the pre assessments were delivered to the control group via email, which resulted in a poor response rate and even worse on the post assessment. Five out of eighteen potential participants responded to the pretest and only three of these responded to the post.

Finally, the cultural and professional backgrounds of the individuals in the experimental group presented challenges, which could have been better dealt with by having time to build strong rapport in the group and between the researcher and group. I believe a longer time frame with the intervention would greatly enhance these relationships. One student focused their professional identity struggle on cultural differences when they were being interviewed. The reflecting team immediately went into defensive mode around these differences versus being willing to be present to the reflection and the story of their cohort member. In addition, a few students with military and parole officer backgrounds were skeptical of the process and not willing to participate fully in the interviews and reflections. These students referred to the interview as the hot seat and set the tone for the group in regards to the interviewing process.

Limitations

There are limitations to the study, which warrant discussion. First, the sample size appeared to be the biggest limiting factor in this research. With such small sample any score that was significantly different had a large impact on the data results. These outlying scores could be absorbed in a larger sample and thus have less an impact than it did in this small sample study. Second, the time line of eight weeks appeared to limit the time to build rapport with the group and develop a relationship, which allowed for more vulnerability in the group. Third, limited access to the control group inhibited the ability to connect with these individuals and to make sure there was a setting for these individuals to be handed the pre and post assessment with time to fill out and return directly to me. The email process greatly limited the assessments, which were completed and returned. Finally, due to the small sample size, we felt the need to keep all participants involved versus eliminating the few who were not invested in the process.

Recommendations

Future studies are needed with larger sample sizes. I do not intend for these results to be a final picture of the effectiveness of Narrative Reflecting Teams in training programs. On the contrary, the limited and non-conclusive results call for further research in this area with the following recommendations:

Timing is potentially important. Specifically, it would be helpful for this process to be used at the beginning of a year for first and second year counselors in training. The self-estimate inventory should be completed at the outset of the program

studies and clinical supervision and the post assessment completed at the end of the first and second years of a program.
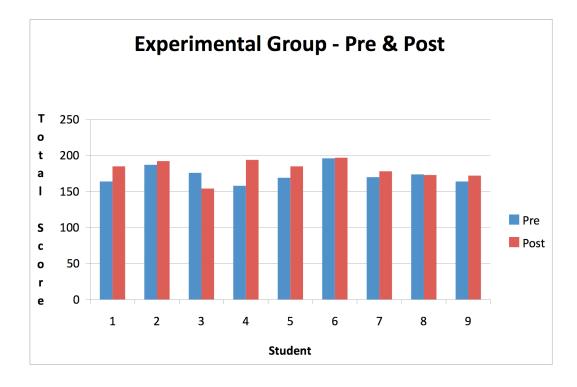
Next, I would recommend establishing an environment, which nurtures vulnerability as a place of growth and a willingness to explore what challenges us a new therapists. By having a consistent and long-term supervisor for the year trained in narrative and reflecting team practices, allows a safe environment for vulnerability to evolve.

Future research with numerous groups and sites could be beneficial in building a stronger and much larger sample size. The data would be less vulnerable to the extreme scores and more likely to absorb these differences and provide a more accurate picture of the change if any that has occurred between pre and posttests.

Finally, and most noticeably would be the use of qualitative research. Despite the limited results, small sample results, and research issues, I was enriched with observations and experiences, which could potentially be descriptive and rewarding qualitative work. Based on my background in Narrative and reflecting team practices, the stories, which unfolded in the team and between me and the interviewees were powerful, sensitive, eye opening and rich for follow up, interpretation, and reflection. I would recommend future qualitative work in this area around interviewing students about their experience in reflecting teams, the transformation of their stories, and exploring themes which arise in the interview processes

Conclusion

The literature points to the benefits of a reflecting team process, the importance behind a reflection process with supervisees, and the need for practices which build

and empower counselors in training as they prepare for a profession in counseling and supporting clients. Although the results of this study were not statistically significant enough to support the hypothesis, thy results do call for future and more refined research in this area. The researcher happened upon some significant information and experiences, which greatly inform future practices and follow- up research in this area.

Figure 1: Pretest Scores at week one and posttest scores at week eight for the experimental group.
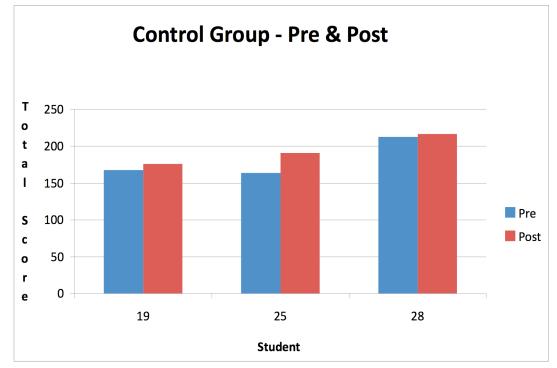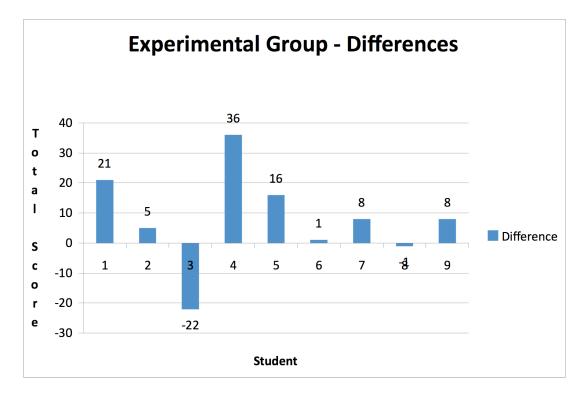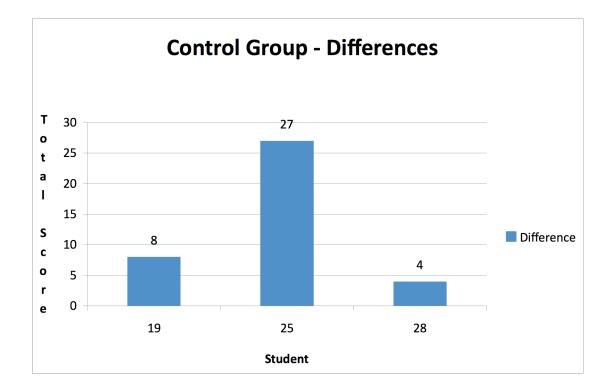
Figure 2: Pretest score week one and posttest score week eight for control group.

Figure 3: Differences in pre and post test score from week one to week eight for

experimental group

Figure 4: Differences in pre and post test score from week one to week eight for control group.

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Chapter 4: General Conclusion

This dissertation study created two manuscripts thematically linking together the use of narrative reflecting teams in supervision with counselors in training and an examination of self-efficacy. To understand these themes, I examined these constructs through a literature review and administered a pre and posttest to examine the impact a narrative reflecting team experience might have on self-efficacy in counselors in training. Reviews of literature pointed to the importance of reflection in practice and the need to build efficacious counselors. The study conducted did not produce the hypothesized results in the original statistical analysis; however, further analysis of the data eliminating the outlier did produce significant results. The study also provided information and results that call for a larger study and further examination of the intervention and process with counselors in training.

Practices in clinical supervision and the use of supervision in graduate counseling programs are worth focusing research and better practices upon. Graduate counseling students need to be involved in supervision practices which build their skills, empower their abilities, and address the areas they are feeling vulnerable in with clients and their professional identity as counselors. I understand this to be important for several reasons: (1) As counselors grow in their confidence and belief they are competent and helpful practitioners, their efficacy as counselors will begin to grow as well; (2) What counselors do and think greatly impacts the relationship they develop with their clients. As counselors grow in their own confidence the more the can share and bring this confidence and efficacy into the therapeutic space. This can be key as counselors

are often working with vulnerable and oppressed populations who are struggling to find their own efficacy in life, relationships, careers, and everyday experiences. As the counselor taps into their strengths and efficacy the room is filled with this and they too can help support building this in their clients. As previously noted in self-efficacy theory, the stronger the students' efficacy and belief that they can succeed the more this will come to fruition in their own lives; (3) The presence of vulnerability and challenges within counselors in training is a place from which to build and grow. I feel it is essential to create a safe, authentic, and supportive environment where new counselors can feel comfortable being honest and vulnerable about what worries them as professionals, what they struggle with in their client work, and their insecurities around practicing as counselors. When the profession only focuses on the deficits and mistakes of the work, there is little room for this important piece of vulnerability to have a place in supervision. Understanding the developmental levels of new counselors as eager to please, make few mistakes, and appear competent, the need to open up space for vulnerability is essential. I believe that when we allow for these stories to be shared with the group, we can then begin to really grow as counselors and address the deeper side of our efficacy as counselors.

The literature review in the first manuscript strongly supported the points I made here. The manuscript examined the literature describing the use of supervision, it's importance in supervision, and the value a narrative reflecting team process can bring to the supervision experience. Focusing on supervision from a storied or narrative perspective allows the supervisor and team better understanding of the stories our colleagues and supervisees bring into practice. A narrative approach allows the

supervisor to interview and support the supervisee from a non-judgmental, non-assumption filled place. By making room for supervisees' stories to come forth without judgment, room for vulnerability and growth can emerge more authentically.

The literature examined traditional practices in supervision and set the tone for rising to the occasion of looking for more supportive and empowering practices in supervision. The literature directs the field to examine how focusing on the deficits and mistakes of our counselors in training, breeds an environment of fear to make mistakes and grow from them. The literature guides us to the flaws in this approach and provides ideas for building stronger more competent counselors. The literature calls for more collaborative approaches between supervisors, supervisees and graduate colleagues in order to escape a competitive environment and make room for collaborative voices and storying new and more empowered counselor narratives. Finally, the need for safe and supportive communities of learning, are emphasized as a place where great knowledge, reflection and learning can unfold.

The first manuscript explores the shift needed in educational settings where greater reflection, self-stories, group stories, and personal knowledge have a use in the educational journey. The emphasis on stories and the importance of these stories in the development of knowledge, identity and efficacy are brought to the forefront. The literature, demonstrates a social constructionist approach to understanding how people (our students) come to story knowledge, make sense of experiences, and live by the discourses one's family, group, environment and educational setting reinforce. Deconstructing these stories through reflective practices is encouraged as a way to better understand one's story about their professional identity and to develop and

transform these stories into more preferred empowered versions. It is through the collaborative transformational process that all who participate are transformed.

 I chose to focus on this approach after many years studying narrative approaches in counseling. I believe and witness the power of transforming one's story can have on one's life. The idea to explore a narrative approach in supervision with a team reflective approach evolved through my experiences as a student, supervisor, mental health therapist, teacher and doctoral colleague. I noticed the stories my colleagues and supervisees were getting bogged down in about who they were as competent professionals. I wanted to explore the use of narrative approaches and reflecting teams in supervision as an opportunity to re-story these disempowering narratives. I wondered how this impacted the efficacy of counselors and I wanted to develop a practice, which could build and empower students entering the counseling field. There are often few chances to watch and understand ones work from a non-judgmental place. When our practices are viewed through this judging lens we enter a place where we must defend, feel ashamed, and shut down to new possibilities. I wanted a practice, which truly allowed vulnerability to emerge in order to grow and continually get better - for that is the path that ultimately allows the freedom to grow. When we are constantly viewing practice in terms of perfection, when we fail we shut down. Approaching our work in terms of a journey of growth allows us to truly see one's self on a continuum of always growing with a multitude of stories yet to come forth about who one is as a competent practitioner.

 The first manuscript provides a comprehensive look at narrative practices, narrative reflecting teams in supervision, and the role self-efficacy plays in our supervisees'

work. It provides a strong framework for understanding this specialty area and provides supportive information those who are new to the ideas. The second manuscript builds on this emphasis as well as adds a map and model for research in this area. The second manuscript addresses what needs to happen for follow up research in this area and tips for addressing the challenges and barriers, which came up in this research study.

Recommendations for Future Research and Practice

Further research is needed to look at the effectiveness this may have on counselors in training. I noted several ideas in manuscript two, which may aid in creating a stronger study. These include the following ideas: larger sample size, multiple universities study, assessing developmental stage in supervisees to address willingness to be more vulnerable, completing the study earlier in the graduate program, establishing stronger rules and guidelines for attendance with the participants, and building stronger connection and cohesion in the group.

Research in this area could potentially be beneficial with counselors who are recent graduates, new to the field, entering new work environments or looking for employment. I continue to notice in my supervision practices a strong theme of feeling incompetent, unsure what they can do with their degree, a sense of needing more education and experience to do the work they prepared for in graduate school. I recommend supervision groups looking at self-efficacy and incorporating the narrative reflecting team supervision approach to addresses these "insecurities" and post school doubts.

Finally, I recommend that this study could add strong qualitative research in the field of supervision and narrative practices. By exploring themes that arise in narrative reflecting teams and interviewing students about their experience in this type of supervision, a more in-depth understanding of the impact it may or may not have may be explored. The stories can evolve and the researcher can help make sense of these experiences and the potential these experiences may hold in the supervision and educational setting.

Summary

There is insightful literature which points to the benefits of examining supervision practices, incorporating reflection, and allowing stories to come forth and be transformed. The literature propels the profession to continue working towards supportive supervision practices and educational practices, which honor students. I am encouraged by the stories, which emerged through the process. These experiences and observations drive the need to develop more research possibilities in this area. It was the stories that unfolded that provided a transformational experience for me. For it was the stories that unfolded, which at times were rich and at times unwilling to be vulnerable, that propel me to continue connecting with practices which empower students to be better practitioners.

APPENDICES

APPENDIX A

Letter of Interest (Experimental Group)

Dear Practicum Students,

My name is Julie Prindle and I am a doctoral student under the supervision and direction of Dr. Kathy Biles, Ph.D. at Oregon State University in the Department of Counseling Education. I am conducting my dissertation on supervision practices with counselors in training. Specifically, I am interested in the use of Narrative Reflecting Teams in supervision with counselors in graduate programs and the potential impact it may have on counselor self-efficacy. The Institutional Review Board at Oregon State University has approved this study.

I am requesting your participation in my study. As a participant in this study you will be asked to partake in an eight-week supervision experience incorporated into your advanced internship. The experience will include: a pre and post counselor self-effiacy estimate (37 item-Likert scale assessment), a two week training on narrative reflecting teams; an interview by the supervisor around an area you may be struggling with in your client work or a struggle around your professional identity as a counselor in training; participation on a reflecting team for four of the eight weeks, and ending the eighth week with a debrief on your experience throughout this reflecting process. A Narrative Reflecting Team is a group reflective experience. Through a supportive, non-judgmental process, you will have the opportunity to explore an area that you may struggle with in your professional identity or with clients and get supportive feedback from the reflecting team (your cohort peers) in hopes of generating new possibilities for practice and identity.

Participation in this study is voluntary. At anytime you can choose to withdraw or not participate in the study with no penalty. Completing an informed consent will indicate your consent to participate. The results from this study may be published, but your name will not be used. There will be no way to identify you. Your participation in this study will contribute to the field of counseling education and supervision.

Please contact me if you have any questions concerning the research study, Julie Prindle at prindlju@onid.orst.edu. You may also contact my faculty advisor, Dr. Kathy Biles, by email at kathy.biles@osucascades.edu or by telephone at (541) 322-3111.

Thank you for your consideration,

Julie Prindle, LCSW

Oregon State University

Corvallis, Oregon

APPENDIX B

Explanation of Research Study

Dear Practicum Students,

My name is Julie Prindle and I am a doctoral student under the supervision and
direction of Dr. Kathy Biles, Ph.D. at Oregon State University in the Department of
Counseling Education. I am conducting my dissertation on supervision practices with
counselors in training. Specifically, I am interested in counseling trainees' efficacy as
they partake in supervision during their graduate studies. The Institutional Review
Boards at Northwest Christian University and Oregon State University have approved
this study.

I am requesting your participation in my study. Participating in my study will include
the completion of a pre and post test assessment (37-item Likert Scale). The pre-test
will be distributed and collected at the beginning of spring term and the post will be
distributed and collected eight weeks later. Your time commitment would include
these two assessments, which would take about 15 minutes each. Finally, your
participation would also include the completion of a general demographic
questionnaire at the time of the pre-assessment.

Participation in this study is voluntary. At anytime you can choose to withdraw or not
participate in the study with no penalty. Completing the pre and post Counselor Self-
Estimate Inventory will indicate your consent to participate. The results from this
study may be published, but your name will not be used. There will be no way to
identify you from the pre-post test. The minimal risks associated with your
participation in this study are:

- Potential discomfort with study questions
- We will ask members of the group to maintain the confidentiality of comments made during the reflections. However, there is still a risk that comments you make during the discussion may be shared outside of the group

Your participation in this study will contribute to the field of counseling education and

supervision.

Please contact me if you have any questions concerning the research study Julie Prindle at prindlju@onid.orst.edu. You may also contact my faculty advisor, Dr. Kathy Biles, by email at kathy.biles@osucascades.edu or by telephone at (541) 322-3111.
If you have questions about your rights or welfare as a participant, please contact the Oregon State University Institutional Review Board (IRB) Office, at (541) 737-8008 or by email at IRB@oregonstate.edu
Thank you for your consideration,
Julie Prindle, LCSW
Oregon State University
Corvallis, Oregon

APPENDIX C

CONSENT FORM

Project Title: Practices in Supervision: An Experimental Study

Principal Investigator: Kathy Biles, Ph.D., Department of Teacher and Counselor

Education

Student Researcher: Julie E. Convy Prindle, MSW, LCSW, Department of Teacher

and Counselor Education

Co-Investigator(s): Amy Ford, Ph.D.,

1. WHAT IS THE PURPOSE OF THIS FORM?

This form contains information you will need to help you decide whether to be in this study or not. Please read the form carefully and ask the study team member(s) questions about anything that is not clear.

2. WHY IS THIS STUDY BEING DONE?

The purpose of this study is to provide an alternative and empowering practice of

supervision with counseling trainees. The information in this research will be used in a

student dissertation and for future publication.

3. WHY AM I BEING INVITED TO TAKE PART IN THIS STUDY?

You are being invited to take part in this study because you are a graduate counseling

trainee who will be participating in supervision within your graduate school setting.

4. WHAT WILL HAPPEN IF I TAKE PART IN THIS RESEARCH STUDY?

As a participant in this study you will be asked to partake in an eight-week supervision experience incorporated into your advanced internship. The experience will include a pre and post self-efficacy assessment (37 item-Likert scale assessment).

Findings from this investigation will be reported in the researcher's dissertation, and may be used to generate articles for publication and for professional presentations. The manuscripts and presentations will include **no identifying information regarding participants.**

All data, including raw data, descriptions of participants, setting of the study, and study procedures will be retained and stored in a locked file in the offices of the Department of Teacher and Counselor Education for a minimum of six years upon completion of the project. Only researchers will have access to the files.

5. WHAT ARE THE RISKS AND POSSIBLE DISCOMFORTS OF THIS STUDY?

The study poses minimal risks including:

- Potential discomfort with study questions
- We will ask members of the group to maintain the confidentiality of comments made during the reflections. However, there is still a risk that comments you make during the discussion may be shared outside of the group.

In the event that the researcher and/or faculty advisor discover any unanticipated risks, research participants will be notified immediately and the study will be terminated. These risks will be reported to the Institutional Review Board within ten days of their discovery.

6. WHAT ARE THE BENEFITS OF THIS STUDY?

There are no known direct benefits to participating in this specific research study. The

indirect benefits to participation include contributing to the professions of counseling

and counselor education and supervision.

7. WILL I BE PAID FOR BEING IN THIS STUDY?

You will not be paid for being in this research study.

8. WHO WILL SEE THE INFORMATION I GIVE?

The information you provide during this research study will be kept confidential to the

extent permitted by law.   Research records will be stored securely and only the

researchers at NCU and OSU will have access to the data. Federal regulatory agencies

and the Oregon State University Institutional Review Board (a committee that reviews

and approves research studies) may inspect and copy records pertaining to this

research. Some of these records could contain information that personally identifies

you.

To help ensure confidentiality, we will retain all data, including raw data, descriptions

of participants, setting of the study, and study procedures in a locked file in the offices

of the Department of Teacher and Counselor Education for a minimum of six years

upon completion of the project. Only researchers will have access to the files. Dr.

Amy Ford will assign each student a number and they will be asked to put their

number on their pre and post-tests.

**9. WHAT OTHER CHOICES DO I HAVE IF I DO NOT TAKE PART IN THIS
STUDY?**

Participation in this study is voluntary. If you decide to participate, you are free to

withdraw at any time without penalty. You will not be treated differently if you decide

to stop taking part in the study. If you choose to withdraw from this project before it ends, the researchers may keep information collected about you and this information may be included in study reports.

10. WHO DO I CONTACT IF I HAVE QUESTIONS?

If you have any questions about this research project, please contact: Kathy Biles, Ph.D., Oregon State University Cascades, 541-322-3111, kathy.biles@osucascades.edu.

If you have questions about your rights or welfare as a participant, please contact the Oregon State University Institutional Review Board (IRB) Office, at (541) 737-8008 or by email at IRB@oregonstate.edu

11. WHAT DOES MY SIGNATURE ON THIS CONSENT FORM MEAN?

Your signature indicates that this study has been explained to you, that your questions have been answered, and that you agree to take part in this study. You will receive a copy of this form.

Participant's Name (printed):

_____

_____   _____

 (Signature of Participant)   (Date)

_____   _____

(Signature of Person Obtaining Consent)   (Date)

APPENDIX D

Demographic Questionnaire
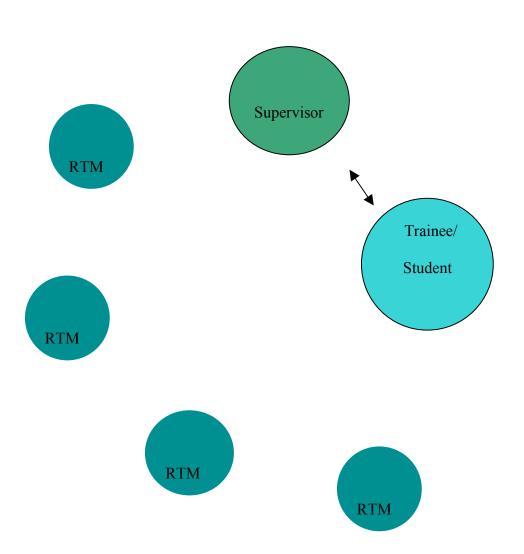
Gender: Female ☐ Male ☐ Transgender ☐

How do you describe yourself? (Please check the one that best describes you)

1. ☐ American Indian or Alaska Native

2. ☐ Hawaiian or Other Pacific Islander

3. ☐ Asian or Asian American

4. ☐ Black or African American

5. ☐ Hispanic or Latino

6. ☐ Non-Hispanic White

Age: _____

Level of Education:

Bachelors ☐

Masters Degree ☐   Degree _____

Doctoral Degree ☐   Degree _____

Year in the Clinical Mental Health Counseling Program

First Year ☐

Second year/ graduating ☐
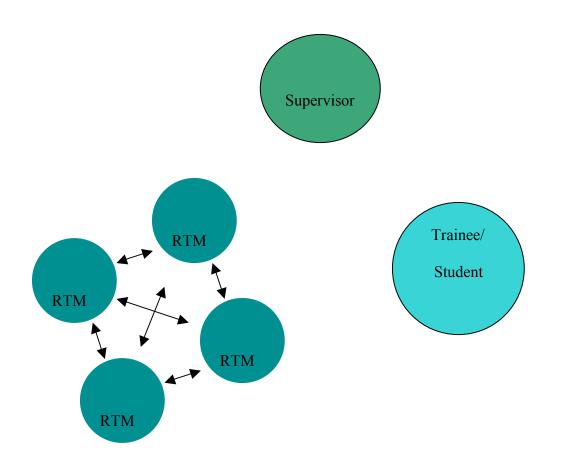
Number of semester in internship with supervision _____
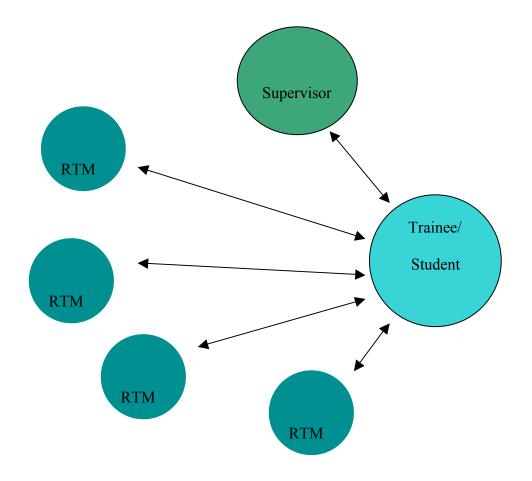
APPENDIX E

Stages of the Reflecting Team

Stage One: The Interview

Stage Two: The Reflective Conversation By Team Members

STAGE THREE: The Supervisor, Student and Team Reflect

APPENDIX F

Statement Regarding Measurement Scale

The Counselor Self-Estimate Inventory (COSE) was chosen as the scale of measurement for this study. I received permission from Dr. Lisa M. Larson, Ph.D. to use the scale she has developed to measure self-efficacy in counselors. She has asked that the scale not be reproduced in the dissertation document.