Aligning Existentialism with Developmental Supervision:

Embracing the Psychological Instant

Antony R. White and Tarrell Awe Agahe Portman

Antony White is an assistant professor in the Department of Counseling Psychology and Community Services at The University of North Dakota. Tarrell Portman is an assistant professor in the Division of Counseling, Rehabilitation and Student Development at The University of Iowa. Correspondence regarding this article should be sent to Antony White, 109a Gllette Hall, Grand Forks, ND 58202 or email antony.white@und.edu.

Abstract: Despite the readily available discussion on counseling supervision models for over a quarter of a century, there is little attention in the literature with respect to how developmental supervision models align with existential philosophy. One model, The Integrated Developmental Model (IDM), is a robust and well-accepted model of supervision with embedded undertones of existentialism requiring scholarly discussion. The primary goal of this article is to emphasize the parallels between the IDM and Sartre's philosophical principles of existentialism thereby creating a meaning making framework for supervisors to enhance developmental growth of their supervisees.

Existential philosophy has a long and rich history as an effective theoretical basis for a variety of clinical psychotherapies (Bugental, 1965; Frankl, 1959; Keen, 1970; May, 1960; Ososkie, 1998; Van den Berg, 1955; Van Kaam, 1969; Yalom, 1980). However, these models typically employ a generalist approach. This approach has consisted of extracting broad tenants of existentialism from an amalgam of distinct philosophies and then interweaving select concepts into a single psychotherapeutic model. While such a method often runs the risk of applying specialized concepts out of context (Yegdish, 2000), models of existential psychotherapy are generally recognized as an effective means of assisting individuals to achieve positive therapeutic change. Indeed, a majority of counselor education programs currently incorporate training in existential therapy as part of core coursework in both group and individual psychotherapy. Moreover, a growing number of counselors identify existentialism as their primary theoretical orientation, a finding that makes sense considering that the existential perspective is frequently cited by counseling students as most closely aligned with their personal views regarding psychological health and mental illness (Yalom). Despite the popularity of existentially oriented clinical approaches, existential models of clinical supervision have received very little attention within the counseling literature. Consequently, supervisors currently

have limited access to models of supervision that explicitly incorporate existential concepts from which to guide the professional development of existentially oriented clinicians.

The Integrated Developmental Model of Stoltenberg, McNeil and Delworth (1998) has been considered to be among the most robust and comprehensive models of supervision yet to be developed (Bernard & Goodyear, 1998; McNeil, Stoltenberg, & Romans, 1992; McNeil, Stoltenberg, & Pierce, 1985; Stoltenberg, Pierce, & McNeil, 1987; Wiley & Ray, 1986; Winter & Holloway, 1992). While the IDM is anchored in developmental theory, the Structured Developmental Model (SDM) of Maki and Delworth (1991), a derivative of the IDM originally pioneered for use in rehabilitation counseling, acknowledges existential theory as an inherent element of both the IDM and SDM. However, the exact nature and degree of existential tenants found in the IDM have yet to be comprehensively evaluated and clearly articulated.

Towards accomplishing these tasks, the present article describes the Integrated Developmental Model (IDM) of counselor development as developed by Stoltenberg, McNeil and Delworth (1998) and establishes theoretical links with the existential philosophy of Jean Paul Sartre. The article is expected to provide a more specific articulation of the existential elements embedded within the IDM than has previously occurred within the philosophical counseling literature and to provide clinical supervisors with a more informed approach to providing existentially based supervision with supervisees. The first section summarizes key concepts of Sartre's existential philosophy. Section two provides an overview of the IDM, and describes the three main developmental levels as posited by Stoltenberg et al. (1998). Section three integrates behavioral characteristics exhibited by counselor trainees at each developmental level with main concepts of Sartre's theory of existentialism and briefly discusses factors that might be considered in providing existentially based supervision. Figure one illustrates a crosswalk of the three levels of counselor development as proposed in the IDM and corresponding concepts of Sartre's theory of existentialism.

Sartrean Existentialism

Clinical supervision is generally accepted as a relational process involving the direct interactions between supervisors and supervisees. In addition, direct relationships exist between the supervisee (counselor) and the client. Interestingly, the indirect relationship between the supervisor and the client can be extremely important in the supervision process. The interpretation of client responses, behaviors, and attitudes by the supervisor may unconsciously influence the supervisee's perceptions of the client/counselor relationship. This could be called "the infliction of inference" or meaning by the supervisor. Sartre, however, posits individuals are fully functioning conscious beings. There is no unconscious, but rather, degrees of consciousness that are accessible through pure reflection (Sartre, 1943/1956). We call this process of pure reflection, supervision in counseling.

Jean Paul Sartre, a French philosopher, novelist and playwright, is credited with having coined the term, "existentialism" and has been regarded as the "father of existentialism" (Schilpp, 1981). While Sartre has written extensively about existential psychotherapy, (Sartre, 1936/1962; Sartre, 1943/1956; Sartre, 1944/1955; Sartre, 1946/1947; Sartre, 1948/1955; Sartre, 1959/1961) surprisingly few psychotherapy theorists have directly referenced his work. Nonetheless, elements of Sartre's philosophy can easily be found in many of the more popularly recognized existential works in counseling (e.g. Bugental, 1965; Frankl, 1959; Kockelman, 1967; Yalom, 1980). In this respect, Sartre's philosophy has had a wide reaching, albeit sometimes indirect, effect on the evolution of both existentialism and existential psychotherapy (Cannon, 1998). Given the impact of Sartre's work on the existential movement and the scope of his theory, his existential philosophy provides a complete and general form on which to base comparisons to the developmental supervision of the IDM.

A comprehensive overview of Sartre's theory of existentialism is well beyond the scope of the present article. Therefore, the discussion will be limited to only the most general concepts of Sartre's theory. The present section summarizes several main concepts drawn from Sartre's existential philosophy.

Existentialism from Sartre's perspective is one of individual freedom. Sartre based his approach on a grouping of interdependent main tenets that are illustrated throughout his novels, plays, and philosophical works. For example, pure reflection opens the mind to varying degrees of consciousness. Through pure reflection, one can become increasingly knowledgeable regarding the contents of one's consciousness including motives underlying one's approach to living, a notion Sartre terms the "fundamental project" (Sartre, 1943/1956). Accordingly, we all have a fundamental project by which to guide our behaviors and through which to filter our interactions with others. Similar to Snyder and Higgins (1997) concepts of reality negotiation and self-theory in which individuals selectively attend to their environments in order to construct and subsequently maintain their self-theory, one's fundamental project represents a design for living.

Therefore, for Sartre, the process of development across the life span entails two mediating components namely, "bad faith" and "good faith" (Sartre, 1943/1956). Over the course of the developmental process, people may distort certain information. Information that people find discomforting, anxiety provoking and/or emotionally stressful may become distorted in a way they perceive to be less subjectively unpleasant or painful. Because it relies on distorting reality, Sartre considers such a process to be akin to lying to oneself and thus, termed it as bad faith. In contrast to bad faith, a person can choose to be honest and take full responsibility for their situation in life come what may. Sartre views this type of life to be based on truth and thus, should be considered as being in good faith. Sartre uses the concepts of bad faith and good faith in varying ways in different contexts; however, the underlying premise, that bad faith represents self-deception and should be avoided whereas good faith represents true perception and is a preferred mode of being as it embodies authenticity, is a central theme throughout his works.

Another major theme in Sartre's philosophy revolves around human development. According to Sartre, other people can have a profound effect on an individual's overall development. For example, our conceptions of self and the way we live in the world can be

significantly influenced by how we perceive other people. In specific, the degree to which we perceive other people as subjects or as objects of our perceptions can profoundly influence our fundamental projects as well as aspects of our personality. In fact, Sartre believed that other people can "fix our being" in a specific mode of living or as a particular personality type thus, potentially undermining our freedom to choose (Sartre, 1943/1956).

Sartre discusses the influence that other people have on personality development in his major philosophical work Being and Nothingness (1943/1956) where he describes "the look." Sartre offers as an illustration the example of a person spying through a keyhole to view whatever lies beyond in the next room. In and of itself this act may contain no inherent meaning. Only when the act has been revealed, as when the person is caught in the act by another, does it come to bear any real significance (Sartre). Sartre further posits that it is through "the look" that we become cognizant of the loss of our status as subject and that we are now but an object in the eyes of the other (Sartre). Experiencing other people as subjects presumably forces the realization that our possibilities, and our freedom to choose, must be limited by virtue of our object status in the eyes of others (Sartre). Here, bad faith consists of the internalized appraisals of others (Cannon, 1998) especially pervasive, Sartre claims, are the appraisals of powerful others (i.e., parents, bosses, or supervisors). Sartre's famous statement: "Hell is other people!" vividly illustrates the concepts of bad faith and the potential for other people to influence our self-concept and style of living.

According to Sartre, the concepts of "transcendence" and the "psychological instant" are the keys to being in good faith and achieving authenticity, the most desired mode of being. Sartre describes the process of overcoming bad faith as one of transcendence, while the psychological instant is a moment in time that catalyzes transcendence (Sartre, 1943/1956). In the novel Nausea (1938/1964), Sartre describes transcendence as a state of confusion and turbulence. A fundamental element of transcendence is first coming to accept the full impact of personal freedom as well as taking responsibility for finding meaning in life as a result of the choices one makes. From a Sartrean perspective, who one is boils down to the choices one makes. For many,

thoughts of accepting the freedom associated with self-determination and assuming complete responsibility for the choices one makes can not only provoke anxiety and feelings of estrangement but can also lead to a sense of being hopelessly overwhelmed. Therefore, the crux of Sartre's philosophy lies in striving for authenticity through transcending being in bad faith, a process largely determined by one's ability to engage in pure reflection. Honesty begets authenticity and living authentically means that one is more accepting of life since one accepts the responsibility associated with being both author and actor.

Integrated Developmental Model of Counselor Development

Models of supervision can be divided into two distinct camps, those based primarily in clinical theory and those derived independently from pre-established psychotherapeutic theories (Benard & Goodyear, 1998). The former approach interprets the relationship between supervisor and supervisee as one that mirrors the counselor and client relationship. Within this view, supervision consists of an extrapolation of methods of interpretation and intervention from clinical theory. Such models tend to focus on the dynamic relationship between supervisor and supervisee formed over the course of supervision much the way therapy focuses on the client/counselor relationship (Kugler, 1995). The latter approach focuses less on extrapolation from clinical theory to supervision technique and more on the overall growth or development of counselor trainees. Within developmental models of supervision, counselor trainees are viewed from a process-oriented perspective incorporating context variables, the trainee's level of past experience, and formal training. As such, counselor trainees' professional development is viewed in terms of an ongoing progression through specific developmental stages. Each of these stages contains specific cognitive and behavioral markers indicating the growth process. Distinct supervisory interventions are used within each stage to facilitate trainee growth and development from lower stages to more advanced stages (Chagnon & Russell, 1995).

The IDM outlines a model of supervision that describes the development of counseling trainees with respect to three general areas including awareness, motivation, and autonomy. These areas are used to assess a trainee's progress across eight specific competency domains.

The eight competency domains include professional ethics, individual differences, assessment techniques, client conceptualization, theoretical orientation, treatment plans/goals, intervention skills competence, and interpersonal assessment (Stoltenberg et al., 1998). Supervisors who use the IDM are able to measure counselor development by assessing an individual's status in each of the eight competency domains with regard to the three general areas. Clinical supervisors can use the IDM to conceptualize the professional development of supervisees' into four distinct levels each of which is characterized by a unique set of domain specific, structural descriptors and associated supervisory interventions. Achieving competency across domains and transitioning to more advanced levels is the primary focus of the supervision process (Stoltenberg et al.).

Level 1

Level 1 of the IDM is a time of high motivation and information seeking (Stoltenberg et al. 1998). Individuals at this level are often new to the profession or have little formal experience with counseling or supervision. Level 1 counselor trainees tend to be highly focused on aspects of their own clinical performance and knowledge leading many to experience problems regarding treatment planning and case conceptualization. Level 1 counselor trainees exhibit a high degree of dependence on their supervisor in an effort to gain clinical skills and to increase their level of comfort with the unfamiliar role of counselor. Paradoxically however, many Level 1 counselors simultaneously experience significant distress at the thought of being evaluated whether by supervisors, peers, or clients. In an effort to ease performance anxiety and tension, Level I trainees often feel driven to learn as many new techniques as possible in their hopes of learning the "right way" to interact with clients (Stoltenberg et al.). The high focus on skill development and personal performance exhibited by Level 1 trainees has the potential to create substantial developmental barriers. For example, the ability to share their clients' perspectives or to realistically evaluate personal emotions and thoughts in response to client interactions can become obscured or altogether lost (Stoltenberg et al.). During Level 1, the motivation to

perform professionally and to act competently runs high. Elevated anxiety and fear of evaluation can result in Level 1 trainees becoming hypersensitive to thoughts of potential failure and the inevitability of supervisor criticism and disapproval. However, with the passing of time and experience coupled with appropriate supervision, Level 1 trainees often begin to feel more confident. The troublesome anxiety and self-focus begin to wane with no significant decreases in motivation (Stoltenberg et al.). Toward the end of Level 1, self-confidence begins to blossom and may even escalate to a point of overconfidence that others may interpret as "cockiness" (Stoltenberg et al.).

Level 2

A renewed sense of efficacy stimulates Level 2 counselor trainees to seek emancipation from the safe haven they formerly found in their dependence on the supervisor during Level 1. Nevertheless, Level 2 can be a time of great instability and change for trainees. Motivation tends to fluctuate widely from day to day finding trainees beaming with confidence and enthusiasm one day only to be plunged back into a state of self-doubt and anxiety the next (Stoltenberg et al. 1998). While Level 2 counselor trainees exhibit an enhanced ability for emphatic understanding and case conceptualization, they may experience considerable difficulty with establishing appropriate professional boundaries and may feel overwhelmed by the perceived complexity and vastness of the psychotherapeutic process (Stoltenberg et al.).

In contrast with Level 1, supervisees may now begin to sympathize with clients to the extent of becoming enmeshed in their clients' worldview (Stoltenberg et al. 1998). Whereas Level 1 trainees tend to distance themselves from their clients as a result of focusing on issues related to personal performance, technique, and clinical theory, Level 2 trainees often show a loss of objectivity and a marked tendency to over identify with their clients. Level 2 counselor trainees may hold "strong beliefs in the veracity of the client's subjective reporting of …concerns, a desire to advocate strongly for the client in various realms, (and often share) the client's position regarding attitudes toward significant others" (Stoltenberg et al., p. 67), including the clinical supervisor. Stoltenberg et al., (1998) maintain that counselor trainees'

diminished objectivity and their tendency to over identify with clients evident during Level 2 may be coupled with significant resistance to participating in supervision. Accordingly, Level 2 trainees may come to view supervision as a threat to the unique therapeutic relationship established with clients or to their perceived clinical skills and competencies. Consequently, clinical supervisors who structure supervision around the IDM evaluate the extent to which trainees can establish and maintain appropriate professional boundaries, as well as trainees' views regarding supervision. Supervisors utilize such information as a means to gauge trainees' developmental level and to inform supervisory interventions.

Level 3/3i

With continued supervised clinical experience, many trainees eventually transition to the more advanced, master or expert status known as Level 3/3i. Those reaching Level 3/3i are able to focus on the client while maintaining professional objectivity. At this level, counselors posses a wide range of finely tuned clinical skills in combination with a reality-based capacity for self and other awareness (Stoltenberg et al. 1998). Level 3/3i counselors have developed an enhanced clinical awareness that enables an effective and balanced implementation of both theory and therapeutic techniques. Level 3/3i master counselors have a solid grounding in the use of clinical skills necessary to draw out the client and focus on essential information while discarding irrelevant information (Stoltenberg et al.). The capacity for encouraging clients in self-exploration is now well developed, and both the timing and intensity of interventions are well conceived in terms of meeting the needs of the client (Stoltenberg et al.).

Level 3/3i clinicians exhibit enhanced skills in case conceptualization, self-reflection, and third-person assessment. Furthermore, Level 3/3i clinicians are skilled in assessing the impact that countertransference and personal past history has on the therapeutic situation (Stoltenberg et al. 1998). Unlike Level 1 trainees, who are highly self-focused and theory driven, Level 3/3i counselors are comfortable in communicating with clients on a more personal level. Due to a greater capacity for making third-person inferences regarding the therapeutic process combined with an enhanced capacity for freely sharing with clients while maintaining their professional

objectivity, Level 3/3i counselors are able to make more accurate decisions and clinical choices relative to Level 2 trainees (Stoltenberg et al.). The clinical practice of Level 3/3i counselors is further enhanced both by their desire and ability to engage in meaningful periods of reflection and continued supervision. Periods of reflection and supervision tend to be a highly valued means of enhancing clinical skill through clarifying interactions with clients and processing associated complexities. Consequently, Level 3/3i counselors are able to utilize supervision more effectively and tend to view supervision much more positively than do Level 1 or Level 2 trainees (Stoltenberg et al.).

Aligning Existentialism and the IDM

Aligning each of the developmental stages and corollary behaviors of the IDM with related existential tenets is a logical method of framing professional development within existentially oriented clinical supervision. Sartre's philosophy consists of a variety of specific concepts that could be useful in conceptualizing the developmental process described by the IDM from an existential perspective. For example, placed in the context of Sartre's existential philosophy, behaviors often exhibited by Level 1 and 2 trainees might be explained through the concept of bad faith. Sartre's notion of bad faith rests on his fundamental rejection of determinism in human development and his insistence on personal freedom. Sartre believed that as individuals, behavior is largely a function of our own intentionality and ability to choose our unique "fundamental project," a term Sartre uses to refer to individuals' personality or "mode of being in the world" (Sartre, 1943/1956). According to Sartre, each of us has a fundamental project or particular way of being in and looking at the world and by which we pattern our lives. Sartre further believed that individuals are completely free to determine their unique mode of being.

In this way, individuals are fully responsible not only for their actions, past, present, and future but for their very identities hence, according to Sartre, "man (sic) makes himself" (Sartre, 1943/1956). In other words, Sartre believed that life is both an ongoing pursuit for meaning and a process of self creation; our possibilities are limited only by our subjective interpretations of

different experiences (Cannon, 1998). However, through bad faith, individuals are able to escape the possible anguish associated with responsible freedom (i.e. self-determination). As previously indicated, Sartre conceptualized bad faith as "a lie to one self" intended to shield individuals from the possible anguish associated with accepting full responsibility for self-determination (Sartre). Sartre illustrates being in bad faith through several famous examples including the serious man and the waiter in his book Being and Nothingness (1943/1956) as well as the learned man in his novel Nausea (1938/1964). In these works, Sartre describes bad faith as a process of distorting reality whereby the self comes to be viewed as a fixed object, much like we may view an ink well as a constant, unchanging thing. In bad faith, individuals may often attempt to define themselves through a particular social role (i.e. waiter, scholar, policeman, thief etc.,) or personality type (i.e. pompous, extraverted, shy, cowardly, etc.) and may consider such aspects as impervious to change.

Such concepts could be useful in existentially oriented developmental supervision to help supervisees expand their self awareness and maximize their clinical potential. Supervisees who have developed rigid conceptualizations of personal traits or attributes may inadvertently limit their potential to make changes necessary to transition to a higher developmental level. For example, during Level 1, trainees' behavior is frequently driven by a desire to emulate theory. Level 1 trainees typically spend considerable time seeking information that describes counseling techniques and theories of personality. Indeed, beginning counselors often steep themselves in psychotherapy theory, attend many educational workshops, and often are highly dependent on supervisors for guidance in their attempt to apply theory to practice (Stoltenberg et al., 1998).

According to Stoltenberg et al., (1998) supervision should recognize that trainees at Level 1 may choose to focus their clinical behaviors toward actualizing the conception of an ideal therapist possibly at the expense of adequate self-exploration. However, a lack of self-exploration may function to limit continued professional growth. Indeed, competent practice requires counselors to possess awareness of personal values, and to become knowledgeable about how such values and beliefs may influence their work (Cottone & Tarvydas, 2007, Teyber,

2006). From a Sartrean perspective, lack of self-exploration could be considered to represent an extension of being in bad faith in which trainees strive to substantiate themselves as a fixed object namely, the "ideal psychotherapist" as opposed to actualizing their own unique clinical identity which they choose to express within the context of psychotherapy; a process achieved through exercising free-will and that fosters authenticity.

A possible intervention that supervisors might use in existentially oriented supervision could be to discuss concepts such as the role of self-determination in establishing supervisees' fundamental project with respect to counseling. In specific, supervisees could be helped to clarify their perceptions regarding the possible influence that other people; such as model psychotherapy theorists, clients, colleagues, and supervisors; might have on their chosen mode of being. Supervisees may also benefit from discussing how such perceptions might impact aspects of professional development including awareness of individual differences, the ability to utilize empathic understanding, as well as the degree to which they are able to both develop and utilize an authentic personal approach to counseling. In addition, introducing supervisees to the concept of bad faith and discussing how it might be used as a means to escape the possible anxiety associated with self-determination may enable supervisees to better frame the developmental process and empower them to take a more active stance in developing an authentic clinical approach.

Another factor to consider, also in bad faith, is the intense "evaluation apprehension" that may occur during Level 1. Defining one's clinical approach solely through synthetic means (e.g. theory, supervisor directive, peers, etc.,) could constitute a mechanism supervisees might employ to shield their authentic self from the stress of evaluation and potential criticism. From a Sartrean perspective, one might contend that Level 1 culminates with trainees experiencing a growing sense of indecision between their developing awareness that effective counseling necessitates authenticity and their fear of criticism from supervisors, peers, or even clients. According to Stoltenberg et al., (1998), such indecision may reflect developmental progress. It may also represent a shift in one's fundamental project, what Sartre calls the "psychological instant"

(Sartre, 1943/1956). According to Sartre, the psychological instant signals those moments when major life changes occur. In fact, it is the psychological instant that catalyzes one's transition from being in bad faith to being in good faith (Cannon, 1998). Such major changes occur when we become increasingly aware that the inauthentic self we formerly sought to create will never become actualized, thus causing us to modify our thoughts and behaviors to be more aligned with our sense of authenticity (Cannon). Resistance to change, according to this view, is regarded as fear of facing the anguish of our freedom to create ourselves while simultaneously accepting responsibility for the self that we have chosen to create.

A central goal of developmental supervision is to facilitate supervisees' progress through each level of development. This process often necessitates significant self-reflection in order to identify barriers to continued development. The realization that individual differences render the goal of becoming the "ideal psychotherapist" impossible or that an authentic counseling style can be achieved only through self-exploration coupled with on-going evaluation, may contribute to feelings of anguish, confusion, and resistance. Developmental supervision involves increasing trainees' capacity for self-awareness as well as helping them to develop an authentic approach to counseling that integrates theory with individual differences. Supervisors who are cognizant of elements that both hasten and inhibit the psychological instant with respect to their supervisees may be in a better position to foster professional competency and the likelihood that supervisees will transition to higher developmental levels.

As with Level 1, Level 2 can also be viewed from a Sartrean perspective. According to the IDM, Level 2 can represent a time of "crisis" in which trainees experience an "autonomy-dependency conflict" (Stoltenberg et al., 1998). During this phase in development, trainees experience a characteristic shift in clinical focus. In sharp contrast to the focus on developing basic counseling skills evident in Level 1, supervisees respond to the "emotional storm" of Level 2 through an intense focus on the client. From a Sartrean perspective, such a shift in perspective may be interpreted as a type of reaction formation, less the Freudian determinism, kindled by the prior stress experienced in Level 1.

At this level in development, trainees recognize the value of establishing a therapeutic relationship with their clients but may lack the knowledge and skills to navigate potential boundary issues that could diminish their clinical objectivity. According to Stoltenberg et al., (1998), a potential indicator of movement from Level 1 to Level 2 is when trainees begin to exhibit an over identification with their clients. In fact, many supervisees at this stage of development may actually view supervision as an undesirable invasion into their relationships with clients (Stoltenberg et al.). From a Sartrean perspective, such attitudes may represent an extension of supervisees' need to shield the authentic self from outside evaluation and invalidation as previously experienced during Level I. In other words, over identification may represent supervisees' reluctance to develop an authentic counseling style. In terms of Sartre's existential philosophy, this would represent another example of being in bad faith wherein supervisees choose the project of achieving a substantiated self by way of defining self through use of the client as "Other." Discussions that address trainees' views of authenticity within the therapeutic and supervisory relationships provide ample content to be explored during existentially oriented developmental supervision. Such discussions could assist existentially oriented supervisees to develop a framework from which to understand the developmental process based on concepts that may more closely align with their personal worldview.

Certainly, interpreting the dynamics involved with therapeutic and supervisory relationships can be a highly complex endeavor that often involves many alternative explanations of behavior. For example, supervisors might also consider that loss of objectivity and resistance to supervision may in fact be a manifestation of the directives of the supervisor during Level 1, a stage dominated by conformity, for increased independence. In other words, the resistance characterizing Level 2 trainees may, in fact, be in response to the supervisor's directives during Level 1, and thus, might constitute continued dependence in a reciprocal type of way. Psychoanalysts term the root of such behavior as an ego defense consisting of reaction formation, whereas Sartre would emphasize the free choice to establish a future substantiated self.

Supervisors should utilize interventions designed to clarify the factors that may underlie both over identification with the client and resistance to supervision during Level 2. Nonetheless, consistent with both the IDM and a Sartrean perspective, the final interpretation of these issues would of course, be left to the individual supervisee. Although the IDM views supervision as a joint relationship, the locus for change resides in the individual supervisee.

Be this as it may, surpervisees' behavior during Level 2 appears to represent a clear illustration of Sartre's notion of resistance to the "psychological instant" (Sartre, 1943/1956). The autonomy-dependency conflict described in the IDM can be a substantial source of confusion regarding one's abilities as a counselor to navigate professional role boundaries (Stoltenberg et al., 1998). Nevertheless, the turmoil supervisees experience during Level 2 is considered as a developmental milestone and is thus to be embraced (Stoltenberg et al.). Similarly, Sartre describes the task of existential psychoanalysis as "being aware of the possibility of radical change and even cultivating it" (Cannon, 1998, p. 76). This change can, and often does take the form of significant indecision, strong affect, and varying motivation, all elements associated with Level 2 (Stoltenberg et al.). With pure reflection, Sartre regards such a crisis as indicative of transcendence to a state of authenticity. Sartre's novel Nausea (1964) illustrates the struggle to accept responsibility for creating meaning and an authentic being. Indeed, there are times when the main character in the novel, Roquintin, exhibits many of the prototypical behaviors associated with Level 2 as outlined in the IDM.

Transcendence for Sartre equates to a shift in one's project from the pre-reflective to the pure reflective consciousness. As mentioned above, life consists of a value making process known as the fundamental project. In bad faith, the process of substantiating the self as object is mediated by the pre-reflective consciousness and leads to a denial of one's freedom to choose. Such a project limits one's possibilities and, according to Sartre, may lead to an inauthentic existence. The process is upset by the psychological instant that signals a shift in one's worldview to one that is both reality-based and affirms the responsibility associated with freedom and self-determination. In contrast to being in bad faith, this process is mediated by pure

reflection and the recognition that one is uniquely responsible for creating meaning in life through the choices one makes. Authentic existence then, is a project that affirms existence on all possible levels including both anguish (or pain) as well as joy and success since every person is, in the end, fully responsible for the manner in which they choose to live their life (Sartre, 1943/1956).

The final stage of development in the IDM is Level 3/3i. At this level clinicians experience a revised worldview much like that experienced only through pure reflective consciousness. With their advanced clinical skills, Level 3/3i clinicians are more likely to recognize the therapeutic benefits associated with authentically interacting with others including both supervisors and clients. Having experienced both the self-focus of Level 1 and, on the opposite extreme, the client focus during Level 2, Level 3/3i clinicians have developed a personal style that balances the two extremes. Their advanced skills and insight allow for greater personal expression with less fear associated with invalidating the self via supervisor, and/or client, evaluations. In terms of Sartre's existential philosophy, one might contend that Level 3/3i counselors are able to achieve a balance between an awareness of their status as an object for others and their sense of self as subject or desire for self-creation. Level 3/3i counselors have learned through supervision that professional competency requires on-going self-evaluation and self-creation. Existential concepts such as the fundamental project, bad faith, pure reflection and transcendence, could be discussed in supervision with counselors as a means to assist them with continuing to accept full responsibility for the task of self-development and professional growth.

Level 3/3i counselors are also aware that personal development includes both caustic and comforting experiences. They are able to empathize with clients while still being able to exercise objective decision making. Level 3/3i counselors posses advanced skills in interpersonal assessment and utilize their awareness of how individual differences might impact self-awareness, and influence personal choices. From an existential perspective, one could argue that Level 3/3i counselors have developed an approach that is far more personally meaningful since it incorporates structures of their own freedom and authentic self rather than being based

exclusively on cold theory or supervisors' suggestions alone. In this way, Level 3/3i clinicians draw upon the knowledge derived from experience and their awareness of the developmental process to continue their personal and professional development.

As this article has demonstrated, augmenting the IDM with concepts derived from Sartre's philosophy of existentialism provides a possible framework from which to further understand counselor development that supervisors could use in their work with existentially oriented trainees. While there are some fundamental differences between the two theories, such a framework not only provides insight into the developmental process but also a meaningful way to stimulate supervisees' understanding of the personal investment involved in providing effective counseling services. However, while competent supervisors must remain open to discussing the personal and professional struggles experienced by counselor trainees in clinical work, supervisors must also be ready to identify instances in which supervision has ceased and therapy begun so as to prevent a blurring of the two. Research within supervision emphasizes this point.

For example, Jones (1998a) offers a review of the supervision literature and discusses, within a Heideggerian framework, the existential concepts of lived experience and authenticity. Here, supervision is viewed in terms of the "boundary experience," a concept Heidegger uses to describe times of transition between life stages common to all human beings (Jones, 1994a). Relying on Jaspers' (1951/1954) use of crises as a powerful impetus for change, Jones (1994a) argues that episodes of crisis experienced in life may represent such boundary experiences and may serve as windows of opportunity for growth and development. Jones (1994a) observes that such boundary experiences (crises and the like) can frequently manifest in supervision. Openly addressing such issues in supervision allows for an appraisal of personal values and recognition of how these values may influence one's taking responsibility for past and present behaviors (Jones, 1998a). Such recursive analysis is requisite to ethical practice as well as what it means to live an authentic life. Furthermore, through a case study presentation, Jones (1998b) illustrates a means of providing supervision that incorporates a modified version of Inskip and Proctor's

(1994) "framework of the helping professions." Again, the model includes elements of Heidegger's (1927/1962) "existential-phenomenological" method to aid in the supervision of nurses working with terminal patients. Jones (1998b) structures the approach around Egan's (1994) model of problem management.

While Jones (1998a, 1998b) makes significant progress toward integrating philosophical existentialism with clinical supervision, the models have some potentially serious drawbacks. For example, Yegdish (1999), also writing of supervision in nursing, warns that Jones' (1998b) model not only represents a misapplication of terms but also flagrantly over-steeps the boundaries between supervision and therapy. Yegdish (1999) criticizes the model for displacing the client-centered focus inherent to definitions of supervision in place of a therapist-as-patient focus. Furthermore, she argues that Heidegger's philosophy should not be applied to the "everyday problems" experienced by health providers since Heidegger, as implied by Yegdich (2000), was relatively unconcerned with the plight of the individual. In summarizing the logical inconsistencies lodged against Jones (1998b), Yedgich (2000) further charges that an existentially oriented model of supervision is basically over reliant on the subjectivity of the supervisor in forming inferences and orienting supervisory interventions to be of practical use.

Criticisms raised by Yegdich (1999; 2000) have practical merit. The boundary between supervision and personal psychotherapy must be maintained to ensure quality care is being provided to clients. However, this fundamental aim should not come at the expense of neglecting the lived experience of counselors in supervision. Rather, discussing counselors' personal struggles and insights regarding the counseling process can be a primary means of enhancing both professional development and quality of care. Supervisors who structure supervision from a developmental framework and who incorporate existential elements as a means to facilitate supervisee growth must not only ensure that client welfare stays central to the supervisory relationship but that supervisees both have access to, and participate in, outside therapy when issues related to professional impairment become obvious.

Taken as a whole, this article demonstrates that there are numerous parallels, and

differences, one can draw between Sartre's theory of existentialism and the Integrated Developmental Model of Stoltenberg, McNeil and Delworth (1998). In general, these similarities fall into three main domains including: (a) both the IDM and Sartrean existentialism view individuals on a developmental continuum which is (b) contextual through an emphasis on the influence of other people in one's progress, or stagnation, through (c) certain developmental stages that are demarcated by periods of pronounced growth occurring at certain points in the process. This developmental process, under favorable conditions, may culminate in a higher order state of existence (counseling competency) in which being is the integration of prior stages. The main argument of this article is that addressing the various existential struggles supervisees may experience during supervision might be a significant method by which to facilitate this process.

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IDM	Sartre
Level 1	
Dependent on Supervisor	Pre-reflective consciousness/accessory reflection
Highly self-focused	Substantiated self/self as object
Theory driven-no use of therapeutic self in sessions	Inauthentic self
Unaware of personal strengths/weaknesses	Bad faith
Performance anxiety/evaluation apprehension	

IDM	Sartre
Level 2	
Confusion, despair & vacillation	Nausea/psychological instant
Dependency-autonomy conflict	Transcendence/re-evaluation of fundamental project
Highly client focused/may become enmeshed	

IDM	Sartre
Level 3/I	
Aware of personal strengths/weaknesses	
Autonomous	Reflective consciousness/pure reflection
Focus is on client, process & self	Authentic self
Uses therapeutic self in sessions	
Monitors impact of personal on professional life	

Table 1

[Insert Table 1 Title Here]

Figure Caption

Figure 1. [Insert Figure 1 Caption Here]