The Real Relationship in Psychotherapy Supervision

C. EDWARD WATKINS, Jr., Ph.D.

While the real relationship has long been addressed in psychoanalysis and psychotherapy, the matter of the real relationship in psychotherapy supervision has yet to receive any attention. Ample supervisory focus has indeed been given to the working alliance and transference-countertransference configuration (including parallel processes), but after a century of psychotherapy supervision, any mention whatsoever of real relationship phenomena is absent. In this paper, the following hypotheses are proposed: The real relationship (1) is a crucial component of the supervision relationship that has transtheoretical implications; (2) exists from the moment supervision begins until its end; (3) is the forever silent yet forever substantive contributor to supervisory process and outcome; (4) exerts a significant impact on (a) the development and establishment of the supervisory working alliance and (b) the unfolding and eventual utilization of the transference-countertransference experience in the supervisory situation; (5) consists of at least two dimensions in supervision—realism and genuineness—that vary along valence and magnitude continua (building on the works of Greenson and Gelso), and (6) deserves a place of eminence equal to the working alliance and transference-countertransference configuration if supervision theory, practice, and research are to be most fully informed. The possibility of using recent real relationship research in psychotherapy as a prototype to inform future research in supervision is presented, and two case examples are provided to illustrate the seeming power of real relationship phenomena in psychotherapy supervision.

KEYWORDS: real relationship; psychotherapy supervision; personal relationship; clinical supervision; realism; genuineness

INTRODUCTION

Over the course of the history of psychoanalysis, the real relationship has emerged as a meaningful yet puzzling concept, forever controversial yet

Department of Psychology, University of North Texas. **Mailing address**: 1155 Union Circle # 311280, Psychology, UNT, Denton, TX 76203-5017. email: watkinsc@unt.edu

forever enduring. Along with the therapeutic working relationship and transference-countertransference configuration, it has long been identified as a critical component of the psychoanalytic experience (Adler, 1980; Greenson, 1965, 1967, 1968; Greenson & Wexler, 1969). While Greenson can be credited with officially sanctioning the idea of "real relationship" (Frank, 2005), concern with that aspect of the analytic process—what has sometimes been referred to as the personal relationship—can actually be traced back to Freud's seminal case studies and some of his patients own published reports of their personal analyses with him (Couch, 1999). While one might expect a cool detachment and analytic neutrality to be what Freud's patients most remember, that does not appear to have been the case at all: Warmth, likability, personal attention, kindness, wit, and charm seem to have readily characterized their personal descriptions of him (see Blanton, 1971; Kardiner, 1977; Wortis, 1954). Although Freud (1911, 1912a, 1912b, 1913, 1914, 1915) identified and elaborated upon the rules of psychoanalytic technique (e.g., surgical detachment, anonymity), he does not appear to have implemented those rules in rigid, mechanistic fashion–absent attention to sensitivity, warmth, and respect for his patients under treatment.

As psychological treatment has evolved over the past century (Norcross, Vandenbos, & Freedheim, 2011), the concept of real relationship has not only maintained its place in psychoanalysis, but it also has been generalized more broadly to the practice of psychotherapy as a whole. Gelso (see Gelso & Hayes,1998), for example, has contended that: (1) all therapies involve a real relationship component, and (2) regardless of theoretical orientation, the real relationship is the forever silent, yet highly substantive contributor to the therapeutic exchange, perhaps even more fundamental than the alliance itself (Gelso, 2002, 2011). In the last decade, continuing dialogue about and research into the real relationship has seemingly escalated (Duquette, 2010; Frank, 2005; Gelso, 2002; Horvath, 2009; Wachtel, 2006), and some clear research directions and empirical findings have emerged (Gelso, 2009a, 2009b, 2011). The real relationship in psychotherapy and psychotherapy research has seemingly experienced a renaissance of sorts, due in large part to recent theoretical and empirical conceptualizations that have broken new ground (Couch, 1999; Frank, 2005; Gelso, 2009a).

While that renewed interest is evident, while concern with the personal relationship in psychological treatment has been in evidence since Freud, and while the "real relationship" (so designated) has been part of psychoanalysis and psychotherapy for about half a century, what we do not yet

have is any attention to or even any mention of the place of the real relationship in psychotherapy supervision. Theoretical, practical, and research material on the supervision alliance abounds (Bordin, 1983; Gill, 2001; Inman & Ladany, 2008; Ladany, 2004); consideration of transference, countertransference, and parallel process in supervision is readily available (Bernard & Goodyear, 2009; Frawley-O'Dea & Sarnat, 2001; Gill, 2001; Gordan, 1996; Lane, 1990). But after a century of supervision (Jacobs, David, & Meyer, 1995; Watkins, 2011a, 2011b), the real relationship in psychotherapy supervision has yet to be addressed in any way, and to my knowledge, the term has never even been applied to the supervisory relationship at all. In one sense, that seems odd. After all, if we have a wealth of material that deals with distortion in supervision (the transference-countertransference configuration), why would we not also have supervisory attention given to the nondistortion (or at least greatly minimized distortion) often associated with the real relationship?

In this paper, I would like to examine the potential significance of the real relationship for psychotherapy supervision. It is my contention that: (1) the supervision relationship consists of three interrelated, intersecting components—the supervisory alliance, the transference-countertransference configuration, and real relationship; (2) each of those three elements is a vital and pivotal piece of the supervision relational matrix, and (3) within that matrix, the real relationship has long been a much neglected facet. In what follows, I would like to (1) briefly review the real relationship concept in psychoanalysis/psychotherapy, (2) use that examination to provide a tentative definition of and fulcrum for considering the real relationship in psychotherapy supervision, and (3) provide some case examples to illustrate the potential importance of real relationship for supervisory conceptualization and practice. While I believe the concept of real relationship may always be somewhat problematic, I also believe its potential value makes it a concept that is well worth our struggle to examine and elucidate for psychotherapy supervision, and I would like to consider how that might be so.

THE REAL RELATIONSHIP

While Frank (2005) has argued that the real relationship concept has not achieved any consensual meaning, I believe there is certainly a consensual direction that has long been in evidence about that concept: The focus has typically always come back to the person-to-person (as opposed to technical, interpretive, or interventive) therapist-patient interactions or experiences and their impact on the treatment relationship (see A. Freud,

1954; Freud, 1937; Greenson, 1965; Menaker, 1942; Paolino, 1982; Stone,1961; Viederman, 1991)—that is the personal interactions, feelings, thoughts, and behaviors of both therapist and patient that can be conceptualized as separate from the working alliance and transference-countertransference configuration. For instance, in what is now regarded as a humanizing rendering (Couch, 1999; Frank, 2005), Greenson (1967) identified two important components of the real relationship: realism and genuineness. He defined realism as the transference-free or undistorted element of the analyst-patient relationship; genuineness was defined as authentic relatedness between analyst and patient.

> The term "real" in the phrase "real relationship" may mean realistic, reality-oriented, or undistorted as contrasted to the term "transference," which connotes unrealistic, distorted, and inappropriate. The word real may also refer to genuine, authentic, true in contrast to artificial, synthetic, or assumed. At this point, I intend to use the term real to refer to the realistic and genuine relationship between analyst and patient (Greenson, 1967, p. 217).

In Greenson's view, the real relationship was interwoven throughout analysis with the working alliance (devoted to the "work" of treatment) and transference-countertransference experience (the distortions and defensive projections of both patient and analyst), but it could and should be conceived as having unique, distinctive features that set it apart. ". . . . it is essential in all cases to recognize, acknowledge, clarify, differentiate, and even nurture the non-transference or relatively transference-free reactions between patient and analyst" (Greenson & Wexler, 1969, p. 27). Greenson vehemently maintained that belief because of the transcendent and supreme significance that he ascribed to real relationship: It existed from beginning to end, it was the bedrock upon which the entire analysis was built, and it operated silently but was powerful throughout. Furthermore, it gained increasing ascendance during the ending phase of treatment and augured the approach of analytic termination.

Couch (1999), while speaking favorably of Greenson's conceptualization, identified two aspects of the real relationship that he deemed most important: communication between analyst and patient and the personality of analyst and patient.

> Both aspects are part of the real relationship, which might best be described as the realistic communication between analyst and patient when they are functioning as their real selves, relatively free from transference or countertransference influences. The real relationship is effectively present

when both analyst and patient are talking to each other in reasonable ways as ordinary human beings (Couch, 1999, p. 131).

Like Greenson, Couch assigns a place of preeminence to the real relationship and accentuates its role in making or breaking treatment.

I share with many analysts the view that the real human relationship is not in conflict with our basic analytic principles but, on the contrary, has always provided the essential foundation—the *Analage*—for the full functioning of the analytic process" (p. 131) . . . . the analytic relationship is created out of a matrix of the real relationship. . . . (p. 165).

In his excellent exposition, Couch identified at least eight areas in which the real relationship has substantial analytic impact, for example, securing initial commitment, supporting the working alliance, and facilitating full emergence and eventual resolution of the transference neurosis (see pp. 163-164). Much like Greenson, Couch's perspective also seemingly reflects conviction that the real relationship is of transcendant and supreme significance in the psychoanalytic situation.

Gelso (2002, 2009a, 2011) has provided yet another recent vision about real relationship phenomena in psychotherapy, drawing from and complementing the earlier work of Greenson. While Gelso has built his research around the dimensions of realism and genuineness (Greenson, 1965, 1967, 1968; Greenson & Wexler, 1969), he, too, has added the elements of magnitude (how much realism or genuineness exists) and valence (how positive or negative are they) in an effort to begin quantifying the dimensions of real relationship. Gelso's views seem to nicely echo the perspectives of Couch and Greenson: The real relationship "exists from the first moment of contact between therapist and client," "operates silently," "is . . . a part of everything that transpires," and "either facilitates or impedes an effective working bond or alliance" (Gelso, 2002, p. 36). In conjunction with the Maryland Psychotherapy Relationship Research Program, Gelso and colleagues have developed reliable, valid measures by which to study the real relationship (Gelso et al., 2005; Kelley, Gelso, Fuertes, Maramorosh, & Lanier, 2010) and have conducted a series of informative empirical investigations into the workings of that relationship in psychotherapy (Gelso, 2009a, 2011). For the first time we have actual treatment data that elucidates some aspects of the real relationship (e.g., Fuertes, Mislowack, Brown, Gur-Arie, Wilkinson, & Gelso, 2007; Gelso, 2006), and with adequate instrumentation, we now have the promise of more such data possibilities.

While I find considerable value and substance in the Greenson-Couch-

Gelso explication of the real relationship and see it as potentially useful in also helping us at least begin to think about real relationship matters in psychotherapy supervision, there is, however, much controversy surrounding the term "real relationship" that bears mention before proceeding. As the term has received increasing attention over the past quarter century, the controversy seems to have only deepened. So much of the concern, dissatisfaction, and discontent appears to center around the use of the word "real" (Frank, 2005; Greenberg, 1994; Horvath, 2009; Wachtel, 2006). Some of that dissatisfaction arises from our increasingly relational, coconstructed, intersubjectivistic, comtemporary analytic vision that asks "What reality?" and "Whose reality?" But as Horvath (2009) has rightly explained, struggle with the word "real" is nothing new:

> This is a complex problem with a venerable history in the annals of philosophy going back more than 2,000 years. Concerns over what can be justifiably claimed as real did not arise recently nor are they unique to the postmodern world. Some arguably fine minds, from Plato to Nietzsche, had a go at what claims . . . may warrant the label "real" without being granted the final word . . . (p. 274).

Greenberg (1994) earlier conveyed a similar sentiment: ". . . there unfortunately is no such thing as a clear criterion of 'reality' in the domain of social phenomenology" (p. 307).

And a related dissatisfaction, even backlash, with "real" emerges more from what some might perceive as a moment of arrogance from our analytic history—where analysts were seen as the sole, infallible, and supreme arbiters of determining that which was real (and unreal) and patients were expected to be their willing, though oftentimes resistant janissaries. "The 'real' concept relies on an anachronistic philosophical assumption of a discernable 'objective' reality and positions the analyst as arbiter of the real and unreal aspects of the patient's experience" (Frank, 2005, p. 42). Frank, while mounting a case against the "real" in relationship, asserts the following:

> Today, virtually all analysts, including a group of contemporary Freudians, have come to agree that the personal relationship between analyst and analysand can act as a vehicle for healing above and beyond its role in transference analysis (p. 29) . . . . , every interaction of the analytic relationship, every analytic moment, can be usefully regarded as manifesting both past and present influences on both parties, and in that sense, at least, as being both real and unreal (p. 34) . . . . , instead of a model based on the patient's distorted view of objective reality versus the analyst's more accurate one, we would postulate a mutually perspectival, cocreated,

negotiated reality in which the distortion of an absolute reality has no place (p. 30).

That perspective, in my opinion, does not really seem to be out of step with Greenson's vision of the real relationship between analyst and analysand. After all, Greenson attempted to humanize the analytic relationship in multiple ways, for example, by encouraging analysts to dosage interpretations, accomodate to special circumstances in patients' lives, admit to any and all errors, offer procedural explanations to foster patient understanding, and to encourage patients to do some of their own interpretive work (see Greenson & Wexler, 1969, pp. 36-37). Frank's solution, however, is to replace the word "real" with "personal" (also preferred by Horvath, 2009) and "new" (in an effort to better capture the current relational zeitgeist within psychoanalysis). While "real" may not be the ideal term to employ, "personal" and "new" are not necessarily perfect solutions either (Gelso, 2009b).

Where does that leave us? I do not believe that we are any closer to resolving that which has gone unresolved for over two millennia. Some choose to retain and see value in the concept of real relationship (Couch, 1999; Gelso, 2011; Lyons-Ruth [and Boston Change Process Study Group], 1998; McCullough, 2009); others reject "real" for alternate, yet seemingly still problematic terminology (Frank, 2005; Horvath, 2009). But, again, the content provoking all this dialogue seems to hold constant: The more person-to-person (nontechnical) therapist-patient interactions or experiences and their impact on the treatment process and outcome. If we are to consider and examine the significance of the real relationship for psychotherapy and otherwise, it may well be that we have to deal with—while simultaneously striving to repair—some of the imperfectness of this term. Gelso (2009b) seems to capture this dilemma well:

> I think we shall just have to settle for the likelihood that there is no widely appealing term for what I refer to as the real or personal relationship. I suspect the field can live with this, while staying mindful of the idea that the substance or processes the term depicts are of far greater significance than the term itself (p. 278).

I think, if we are to in any way take up the matter of real relationship in psychotherapy supervision, we have (to some extent) "live with" the idea that we are extrapolating from a less than ideal term.

REFLECTING ON THE POSSIBILITIES OF REAL RELATIONSHIP IN PSYCHOTHERAPY SUPERVISION

It is an oddity to me that the matter of real relationship has not been considered before with regard to psychotherapy supervision. We have certainly had much attention given to the supervisor-supervisee relationship over the decades (Bernard & Goodyear, 2009; Inman & Ladany, 2008; Watkins, 2011b), but from my study of the supervision literature, the term "real relationship" has never been applied to the supervision experience itself. In large part, the supervision situation has been broadly conceptualized as a two-part process: supervision alliance and intervention (Bernard & Goodyear, 2009; Falender & Shafranske, 2004; Hess, Hess, & Hess, 2008; Neufeldt, 2007). Nowhere in all that conceptualizing will you find mention of a real relationship component. Where such matters have come to the forefront, they have in my observations typically been absorbed into explications of the alliance construct and not accorded singular status. For all intents and purposes, the real relationship has never crossed over from psychotherapy to psychotherapy supervision or, for that matter, from psychoanalysis to psychoanalytic supervision.

Why would that crossover not have occurred? Furthermore, if we do consider the need for such a crossover here, how would the real relationship be different in psychotherapy supervision as opposed to psychotherapy? It is difficult to pinpoint any one specific reason as to why the real (or "personal") relationship has not been addressed in supervision. Some of the possible reasons for that omission could be as follows: (1) the tendency in some cases to overemphasize the didactic in supervision, where the supervisor/teacher's primary role is seen as instructing, directing, and orchestrating, and supervision tends to be conceived as more an educational/business transaction than otherwise (e.g., as in a patient-centered approach to supervision; Schechter, 1995); (2) a lingering tendency on the part of some within the profession to see the learning of supervision as nothing more than "do one, see one, teach one" (Whitman, Ryan, & Rubenstein, 2001); or (3) the lingering belief that supervision is an activity for which one is fully prepared merely by having received psychotherapy training (Alonso, 2000; Rodenhauser, 1996). Each of those possible reasons in one way or another places a seemingly diminished accent on the relational aspect of supervision. While the relational, intersubjective nature of supervision has been increasingly emphasized over the last 15 to 20 years, much of what we saw before that shift was in my view a tendency to not give the relationship in supervision its due. Some of that neglect or

omission may largely be a function of the relative recency of supervision's coming of age. Although supervision has been around for a century (Watkins, 2011a), it has only been recognized as a substantive professional activity in its own right within the last 30 years (Hess, 2011); the empirical study of supervision is primarily a product of that same time period (Bernard, 2005). For that matter, the supervision alliance has only recently emerged empirically as a critical, pivotal, and integral component of the supervisory relationship (Inman & Ladany, 2008; Ladany, 2004). That the real relationship in supervision has not yet been considered perhaps becomes more understandable, but we appear to now be at a place where that lack of consideration need no longer be the case.

In attempting to think more specifically about the real relationship in supervision, how might it differ from the real relationship in psychotherapy? It may be that while the actual manifestations of the real relationship are not that different from one process to the next, the freedom and strength with which those manifestations are presented is indeed different. Furthermore, what may also be different is how some of the other components of the supervisory versus therapy relationship (e.g. transference-countertransference configuration) are affected and how they, in turn, impact real relationship phenomena. From my perspective, Lewis (1990, 2001) succinctly captures this whole matter quite well:

> The difference between analysis and supervision, and it is a crucial difference, is that in analysis the transference is encouraged to expand" .... In supervision, however, intense transferences can become an obstacle to learning. The success of supervision in facilitating learning will depend upon avoidance of intense transference, particularly the negative transference (Lewis, 1990, p. 124).

While transference-countertransference will inevitably happen in supervision and can be used effectively to foster supervisory insights (Frawley-O'Dea & Sarnat, 2001; Gill, 2001; Lane, 1990), the focus and emphasis in supervision is more on containment than expansion.

> The successful supervisor will be able to allay the anxiety of the supervisee and avoid the development of a negative transference by nipping these issues in the bud . . . Here you are not anonymous or abstinent. Here you are a real person. Here you show your warmth and openness and acceptance. Here you praise, support, encourage, and advise. Here you show your empathy to the vulnerability of a learner. Here you share your own experiences, your own mistakes. Here you share your own doubts and anxieties as a learner (Lewis, 2001, pp. 76-77).

That passage seems to nicely take some of the realism (sensitivity to the

learning needs of the supervisee) and genuineness (authentic relatedness) to which Greenson was referring and meaningfully apply them to the supervisory context.

The ways in which real relationship behaviors and experiences can become manifest in psychotherapy supervision are many and varied. Some useful examples that could readily be extrapolated from the psychotherapy literature would include: Greetings and salutations, parting comments, shaking hands, tact, courtesy, friendly interest, self-expression, warmth, liking, "clicking," trust, expressing feelings about events that impact the supervisee's life (e.g., birth of a child, death of a parent), and the genuine and appropriate feelings the supervisor and supervisee experience toward one another as a part of the supervisory process (e.g., sadness over supervision's termination, happiness over supervisee successes; cf. Couch, 1999; Duquette, 1997, 2010; Freud, 1937; Gelso, 2002, 2009a, 2011; Menaker, 1942; Sharp, 1930; Viederman, 1991). In my view, those examples capture a sector of the supervision situation that, while seemingly critical to the effective functioning of the overall relationship, has yet to be given any consideration as an important dimension in its own right. While it may be difficult to always easily separate real relationship phenomena from other components of the supervisory relationship (e.g., as with empathy experienced as part of the supervisory alliance versus extra-alliance empathy), that real relationship dimension would appear—as with psychotherapy—to have a place of significance and substance in psychotherapy supervision and be worth careful study and close scrutiny.

In thinking of the real relationship as a discrete, important dimension separate from the working relationship (supervisory alliance) and transference-countertransference configuration (including parallel processes), I believe that we could profitably draw upon the work of both Greenson and Gelso as we begin to define the parameters of the real relationship in psychotherapy supervision. Just as realism and genuineness have a place in defining the real relationship in psychotherapy, I am proposing that those two dimensions also occupy a place of equal importance in defining the real relationship in psychotherapy supervision. Realism, for our purposes, will be defined as: the relatively conflict-free, transference-free, undistorted interactions or experiences (internal and external) of supervisor and supervisee that occur by means of the supervisory relationship (cf. Greenson, 1967). That definition would take into account:

(1)   the supervisee's (a) relatively transference-free perceptions, cognitions, affects, and behaviors about the supervisor that occur during actual interpersonal transaction processes, supervisory or

otherwise, and (b) relatively transference-free fantasies or internal experiences about the supervisor that are inspired by the supervisory relationship but occur outside of it, and

(2) the supervisor's (a) relatively transference-free perceptions, cognitions, affects, and behaviors about the supervisee that occur during actual interpersonal transaction processes, supervisory or otherwise, and (b) relatively transference-free fantasies or internal experiences about the supervisee that are inspired by the supervisory relationship but occur outside of it.

Genuineness, for our purposes, will be defined as: authentic and true as opposed to artificial or synthetic relatedness manifested by supervisor and supervisee (cf. Greenson, 1967). That definition would take into account: (1) the supervisee's authentic relatedness manifested toward the supervisor in supervision and otherwise, and (2) the supervisor's authentic relatedness manifested toward the supervisee in supervision and otherwise. Such an understanding would also find an echo in the tradition of humanistic psychotherapy, where genuineness has long been identified as not only central to the therapeutic change process (Rogers, 1957) but as central to the supervision process as well (Patterson, 1997; see Rogers in Goodyear, 1982, tape series).

The two dimensions of realism and genuineness, when evidenced in the supervisory situation, can also be expected to each vary in terms of valence and magnitude (cf. Gelso, 2011). Valence would refer to the positive-negative continuum of experience. For example, where on that continuum does a particular supervisor expression of genuineness lie? How positive was it? How negative was it? Magnitude would refer to the strength (high to low) of those experiences in supervision. For instance, how strong was a particular supervisee's expression of realism about the supervisor? How high was it? How low was it?

By considering "a realism" by valence/magnitude interaction and genuineness by valence/magnitude interaction, we are provided with a conceptual map that allows us to think more broadly about real relationship phenomena in psychotherapy supervision and perhaps to even begin thinking about their quantification. Gelso's excellent and highly rigorous approach (2002, 2003, 2004, 2006, 2009a, 2009b, 2011) to studying the real relationship in psychotherapy provides us with a nice prototype to follow for studying the real relationship in psychotherapy supervision (see also Ain & Gelso, 2008; Fuertes et al., 2007; Gelso et al., 2005; Marmarosh et al., 2008). Furthermore, the empirical dialogue that his efforts have produced (Gelso, 2009b; Hatcher, 2009; Horvath, 2009; McCullough,

2009) could also provide guidance for such future psychotherapy supervision research. I believe, then, that we can profitably build on the real relationship work of Gelso as well as Greenson, use it to inform and expand our real relationship thinking accordingly, and viably apply it to the supervision domain theoretically, practically, and empirically.

As Duquette (2010) has nicely shown, the real relationship matters substantially in psychotherapy. I maintain that it matters every bit as much so in psychotherapy supervision. The real relationship endures; it exists for the entirety of the supervision relationship, from beginning to end; it is the silent but substantive contributor to the entirety of the supervision experience, touching, supporting, and strengthening the alliance and providing the safe container for and reality antidote to transference-countertransference manifestations. While the perspective that I have presented here is psychoanalytically informed, the real relationship in my view is of transtheoretical concern and, ultimately, may well be our most fundamental integrative construct across supervision approaches. The implications of realism and genuineness and their valence/magnitude for psychotherapy supervision are not bound by theoretical lines.

SOME CASE EXAMPLES

In the following, I present two case examples that in one way or another reflect the potential impact of real relationship phenomena on the psychotherapy supervision situation. The first example focuses on the initial meeting between supervisor and supervisee; in the second example, a chance (or perhaps not-so-chance) meeting of supervisor/supervisee that occurred apart from actual supervision is recounted.

CASE 1

The supervisor was a 40-year-old male clinical psychologist, the supervisee a 30-year-old male clinical doctoral student providing psychotherapy services in a community clinic. They met for their first supervision session and set about exchanging pleasantries and becoming acquainted. Their meeting proceeded favorably and there was an ease and comfort that emerged rather quickly between them. They meaningfully and mutually discussed supervision goals, expectations, and structure, and expressed looking forward to beginning the process together.

Shortly before their meeting was to end, the supervisee showed a bit of hesitation, began to stumble around verbally, and became anxious. The supervisor, noticing the definite emotional shift, asked the supervisee if there was anything else he wished to discuss. After further hesitation and

anxiety, the supervisee said that there was one matter that he wished to discuss but that it was a difficult subject to broach. The supervisor encouraged him accordingly, and after much angst, the supervisee explained that he wanted to bring up the matter of religion. He explained that his religion was very important to him, and he would like to at least have the opportunity to think about the intersection of religion and psychotherapy in their work together. He further added that he did not see his religion as something that he would want to incorporate into psychotherapy, that he was not there to proselytize anyone in any way, but he wondered if it would be all right to sometimes consider the religion-psychotherapy connection in supervision. He felt that other faculty had viewed him contemptuously because of his profession of faith, and they had, in no uncertain terms, let him know that he was not to even raise the issue of religion at all.

The supervisor listened attentively and gave his supervisee freedom to share his concerns. In one sense, the supervisee was clearly asking the supervisor at the outset "Do you accept me as I am, all of me? Am I alright with you?" He also was expressing a real life concern, wanted supervision to be a safe place where he could be open, and feared the possibility that it might be otherwise. The supervisor first let the supervisee know that he had been heard: that the supervisee was not about proselytizing but wanted the opportunity to entertain the religion-psychotherapy interface where appropriate. The supervisor then reassured him that supervision would be a place where he was accepted, religion and all, and that he was welcome to bring any matters whatsoever to supervision for review. Discussion of religion and psychotherapy was not off limits in supervision.

The supervisee's anxiety immediately dissipated, and he expressed relief and thanks to the supervisor. From that point forward, the supervisor and supervisee were able to easily establish a strong supervisory alliance that endured for the course of their work together. That initial moment of real relationship acceptance seemed instrumental in making that happen. The supervisee worked well with all of his clients, proved to be a good therapist, and if he talked about potential religion and therapy issues at any time, he only did so in supervision.

Comments

We have with this case a "clicking" that appeared present early. But we also see that as that first session neared its end, the supervisee felt the need to raise a real life matter that was of substantial personal significance to him. At one level, the supervisee's desire to consider religion and psycho-

therapy issues could be seen as testing out the openness and receptivity of the supervisor: "Will you allow me to at least bring this important part of me into supervision and, at times, reflect with you on its potential significance for psychotherapy?" At another level, however, the supervisor knew that faith and spirituality were significant to this supervisee, that one (perhaps two) of his supervisory colleagues did indeed have an openly negative attitude about religion, and that they would most probably not brook any possible psychotherapy-religion discussion at all. In that moment, the supervisor chose to accept the supervisee's request at face value, honor it, and monitor how events unfolded from there. As it turned out, the supervisee responded very positively to the supervisor's openness, a solid supervision alliance was established, supervision proved to be a good experience overall for both parties, and while the religion-psychotherapy interface was not often discussed, the supervisee was comforted to know that that door was always open and that that part of him was accepted in supervision.

Case 2

The supervisor was a 42-year-old male counseling psychologist who provided supervision for doctoral students in the counseling psychology program. The supervisee was a 25-year-old male, counseling psychology doctoral student in his first psychotherapy practicum and he had been seeing clients in the psychology clinic for several months. The supervisee had been doing well as a beginning therapist and was showing some nice progress in his treatment skill development. One day, as the supervisor was walking back to the clinic from an across-campus meeting, the supervisee stopped him and asked if he had a minute to talk. The supervisor responded affirmatively, and the supervisee began to recount his profound doubts about whether he had what it took to really be a therapist, shared his painful insecurities about being up to the task, and proceeded to tell the supervisor that he had been contemplating dropping out. The supervisor listened attentively, and as the conversation proceeded, the supervisee asked point blank, "Do you think I can do this?" The supervisor looked his supervisee squarely in the eyes and, with conviction, said "You can do this." While that moment in and of itself did not cure the problem, it clearly reflected a serious real relationship matter that was addressed as such.

Comments

Some years later the supervisee—having graduated, moved on, and established a successful private practice—saw his former supervisor at a

convention. They exchanged pleasantries, enjoyably caught up for a moment, and prepared to move on to their scheduled commitments. As the supervisor got ready to leave, the former supervisee asked him to wait. The supervisee brought up and clearly recounted the specifics of their impromptu campus meeting from many years back, stated that his supervisor's confidence in him (when he had so little in himself) had been an immensely powerful moment for him in his psychotherapist development, and in his view, had helped him make it through a dangerous crisis period and move forward to where he was now. The supervisor was understandably moved, but what had really happened in that meeting all those years ago?

This supervisor, having an understanding of the developmental struggles that often confront psychotherapists-to-be (e.g., working to establish a "therapist identity"), responded to this accordingly as both a developmental and real relationship matter, offering the needed encouragement and support to his then quite discouraged and demoralized supervisee. His response to the real relationship at that particular moment in time could be seen as facilitative of, if not the pivotal event that led to, the successful prosecution of their supervision relationship.

CONCLUSION

If we survey the last century of supervision literature, we find no mention of the real relationship. With this paper, I wished to consider the possibility that the real relationship does indeed occupy a place of significance in psychotherapy supervision. It was proposed that the real relationship is a central, eminently significant component of the psychotherapy supervision relationship, is present from the beginning to the end of supervision, is the silent yet highly substantive contributor to that relationship, and contributes to the development of the supervisory alliance and the utilization and eventual unfolding of the transference-countertransference configuration. Two case examples were presented to demonstrate how real relationship matters can potentially impact the supervision process.

The real relationship in supervision is seemingly a highly researchable subject, and in that matter we can profitably draw on and be informed by empirical work already conducted about the real relationship in psychotherapy. We do not have to begin from scratch. The dimensions of real relationship in psychotherapy—realism and genuineness—would also seem to apply readily to the supervision relationship, as would the elements of valence and magnitude. These would all be useful starting points

to consider as we begin to think about empirically exploring the real relationship in supervision.

In my view, the real relationship, though much ignored and neglected, is a most substantial and crucial variable for psychotherapy supervision. While material about the supervisory alliance and transference, counter-transference, and parallel processes have long been available, the missing link in our supervisory conceptualization remains the real relationship. I have hypothesized here that our most complete vision of supervision would be at least tripartite in nature—incorporating the supervisory alliance, transference-countertransference configuration, *and* real relationship.

REFERENCES

Adler, G. (1980). Transference, real relationship, and alliance. *International Journal of Psychoanalysis, 61,* 547-558.

Ain, S., & Gelso, C. J. (2008, September). *Chipping away at the blank screen: Self-disclosure, the real relationship, and therapy outcome.* Poster presented at the annual convention of the North American Society for Psychotherapy Research, New Haven, CT.

Alonso, A. (2000). On being skilled and deskilled as a psychotherapy supervisor. *Journal of Psychotherapy Practice and Research, 9,* 55-61.

Bernard, J.M. (2005). Tracing the development of clinical supervision. *The Clinical Supervisor, 24,* 3-21.

Bernard, J.M., & Goodyear, R.K. (2009). *Fundamentals of clinical supervision* (4th ed.). Upper Saddle River, NJ: Merrill.

Blanton, S. (1971). *Diary of my analysis with Freud.* New York: Hawthorn.

Bordin, E.S. (1983). A working alliance based model of supervision. *The Counseling Psychologist, 11,* 35-42.

Couch, A. S. (1999). Therapeutic functions of the real relationship in psychoanalysis. *The Psychoanalytic Study of the Child, 54,* 130-168.

Duquette, P. (1997). The role of the real relationship in long-term psychotherapy. *International Journal of Psychotherapy and Critical Thought, 4,* 11-20.

Duquette, P. (2010). Reality matters: Attachment, the real relationship, and change in psychotherapy. *American Journal of Psychotherapy, 64,* 127-151.

Falender, C.A., & Shafranske, E. (2004). *Clinical supervision: A competency-based approach.* Washington, DC: American Psychological Association.

Frank, K. A. (2005). Toward a conceptualization of the personal relationship in therapeutic action: Beyond the "real relationship." *Psychoanalytic Perspectives, 3,* 15-56.

Frawley-O'Dea, M.G., & Sarnat, J.E. (2001). *The supervisory relationship: A contemporary psychodynamic approach.* New York: Guilford Press.

Freud, A. (1954). The widening scope of indications for psychoanalysis: Discussion. *Journal of the American Psychoanalytic Association, 2,* 607-620.

Freud, S. (1911). The handling of dream-interpretation in psychoanalysis. In J. Strachey (Ed.), *Standard edition of the complete psychological works of Sigmund Freud* (Vol. 12, pp. 89-96). London: Hogarth Press.

Freud, S. (1912a). The dynamics of transference. In J. Strachey (Ed.), *Standard edition of the complete psychological works of Sigmund Freud* (Vol. 12, pp. 97-108). London: Hogarth Press.

Freud, S. (1912b). Recommendations to physicians practising psycho-analysis. In J. Strachey (Ed.), *Standard edition of the complete psychological works of Sigmund Freud* (Vol. 12, pp. 109-120). London: Hogarth Press.

Freud, S. (1913). On beginning the treatment (Further recommendations on the technique of

psychoanalysis I). In J. Strachey (Ed.), *Standard edition of the complete psychological works of Sigmund Freud* (Vol. 12, pp. 121-144.). London: Hogarth Press.

Freud, S. (1914). Remembering, repeating, and working-through (Further recommendations on the technique of psycho-analysis II). In J. Strachey (Ed.), *Standard edition of the complete psychological works of Sigmund Freud* (Vol. 12, pp. 145-156). London: Hogarth Press.

Freud, S. (1915). Observations on transference love Further recommendations on the technique of psychoanalysis III). In J. Strachey (Ed.), *Standard edition of the complete psychological works of Sigmund Freud* (Vol. 12, pp. 157-174). London: Hogarth Press.

Freud, S. (1937). Analysis terminable and interminable. In J. Strachey (Ed.), *Standard edition of the complete psychological works of Sigmund Freud* (Vol. 23, pp. 209-254). London: Hogarth Press.

Fuertes, J. N., Mislowack, A., Brown, S., Gur-Arie, S., Wilkinson, S., & Gelso, C.J. (2007). Correlates of the real relationship in psychotherapy: A study of dyads. *Psychotherapy Research, 17*, 423-430.

Gelso, C. J. (2002). Real relationship: The "something more" of psychotherapy. *Journal of Contemporary Psychotherapy, 32*, 35-40.

Gelso, C. J. (2003, August). *Measuring the real relationship: Theoretical foundation.* Paper presented at the 111th annual convention of the American Psychological Association, Toronto, Canada.

Gelso, C. J. (2004, June). *A theory of real relationship in psychotherapy.* Paper presented at the international conference of the Society for Psychotherapy Research, Rome, Italy.

Gelso, C. J. (2006, June). *Emerging findings about the real relationship in psychotherapy: Introductory remarks.* Paper presented at the international conference of the Society for Psychotherapy Research, Edinburgh, Scotland.

Gelso, C. J. (2009a). The real relationship in a postmodern world: Theoretical and empirical explorations. *Psychotherapy Research, 19*, 253-264.

Gelso, C. J. (2009b). The time has come: The real relationship in psychotherapy research. *Psychotherapy Research, 19*, 278-282.

Gelso, C. J. (2011). *The real relationship in psychotherapy: The hidden foundation of change.* Washington, D. C.: American Psychological Association.

Gelso, C. J., & Hayes, J. A. (1998). *The psychotherapy relationship: Theory, research, and practice.* New York: Wiley.

Gelso, C. J., Kelley, F. A., Fuertes, J. N., Marmorosh, C., Holmes, S. E., Costa, C., &Hancock, G. R. (2005). Measuring the real relationship in psychotherapy: Initial validation of the Therapist Form. *Journal of Counseling Psychology, 52*, 640-649.

Gill, S. (Ed.). (2001). *The supervisory alliance: Facilitating the psychotherapist's learning experience.* Northvale, NJ: Aronson.

Goodyear, R. K. (1982). *Psychotherapy supervision by major theorists* [Videotape series]. Manhattan, KS: Kansas State University Instructional Media Center.

Gordan, K. (1996). *Psychotherapy supervision in education, clinical practice, and institutions.* Northvale, NJ: Aronson.

Greenberg, L. (1994). What is real in the real relationship? *Journal of Counseling Psychology, 41*, 307-309.

Greenson, R. R. (1965). The working alliance and the transference neurosis. *The Psychoanalytic Quarterly, 34*, 155-181.

Greenson, R. R. (1967). *The technique and practice of psychoanalysis* (Vol. 1). New York: International Universities Press.

Greenson, R. R. (1968). The "real" relationship between patient and psychoanalyst. In M. Kanzer (Ed.), *The unconscious today* (pp. 213-232). New York: International Universities Press.

Greenson, R. R., & Wexler, M. (1969). The non-transference relationship in the psychoanalytic situation. *International Journal of Psychoanalysis, 50*, 27-39.

Hatcher, R. L. (2009). Considering the real relationship. *Psychotherapy Research, 19*, 269-272.

Hess, A. K. (2011). Psychotherapy supervision. In J. C. Norcross, G. R. Vandenbos, & D. K. Freedheim (Eds.), *History of psychotherapy* (2nd ed.; pp. 703-722). Washington, D. C.: American Psychological Association.

Hess, A.K., Hess, K.D., & Hess, T.H. (Eds.). (2008). *Psychotherapy supervision: Theory, research, and practice* (2nd ed.). Hoboken, NJ: Wiley.

Horvath, A. O. (2009). How real is the "real relationship"? *Psychotherapy Research, 19*, 273-277.

Inman, A.G., & Ladany, N. (2008). Research: The state of the field. In A.K. Hess, K.D. Hess, & T.H.

Hess (Eds.), *Psychotherapy supervision: Theory, research, and practice* (2nd ed., pp. 500-517). Hoboken, NJ: Wiley.

Jacobs, D., David, P., & Meyer, D.J. (1995). *The supervisory encounter: A guide for teachers of psychodynamic psychotherapy and analysis.* New Haven, CT: Yale University Press.

Kardiner, A. (1977). *My analysis with Freud: Reminiscences.* New York: Harper & Row.

Kelley, F., Gelso, C. J., Fuertes, J., Marmarosh, C., & Lanier, S. (2010). The Real Relationship Inventory: Development and psychometric investigation of the client form. *Psychotherapy, 47,* 540-553.

Ladany, N. (2004). Psychotherapy supervision: What lies beneath. *Psychotherapy Research, 14,* 1-19.

Lane, R.C. (Ed.). (1990). *Psychoanalytic approaches to supervision.* New York: Brunner/Mazel.

Lewis, W. C. (1990). Transference issues in cross-sex supervision. In R.C. Lane (Ed.), *Psychoanalytic approaches to supervision* (pp. 124-127). New York: Brunner/Mazel.

Lewis, W. C. (2001). Transference in analysis and in supervision. In S. Gill (Ed.), *The supervisory alliance: Facilitating the psychotherapist's learning experience* (pp. 75-80). Northvale, NJ: Aronson.

Lyons-Ruth, K. (and Boston Change Process Study Group). (1998). Implicit relational knowing: Its role in development and psychoanalytic treatment. *Infant Mental Health Journal, 19,* 282-289.

Marmorosh, C. L., Gelso, C. J., Markin, R. D., Majors, R., Mallery, C., & Choi, J. (2008). The real relationship in psychotherapy: Relationships to adult attachments, working alliance, transference, and therapy outcome. *Journal of Counseling Psychology, 56,* 337-350.

McCullough, L. (2009). The challenge of distinguishing figure from ground: Reaction to Gelso's work on the real relationship. *Psychotherapy Research, 19,* 265-268.

Menaker, E. (1942). The masochistic factor in the psychoanalytic situation. *The Psychoanalytic Quarterly, 11,* 171-186.

Neufeldt, S. A. (2007). *Supervision strategies for the first practicum* (3rd ed.). Falls Church, VA: American Counseling Association.

Norcross, J. C., Vandenbos, G. R., & Freedheim, D. K. (Eds.). (2011). *History of psychotherapy* (2nd ed.). Washington, D. C.: American Psychological Association.

Paolino, T. J. (1982). The therapeutic relationship in psychoanalysis. *Contemporary Psychoanalysis, 18,* 218-234.

Patterson, C. H. (1997). Client-centered supervision. In C. E. Watkins, Jr. (Ed.), *Handbook of psychotherapy supervision* (pp. 134-146). New York: Wiley.

Rodenhauser, P. (1996). On the future of psychotherapy supervision and psychiatry. *Academic Psychiatry, 20,* 82-91.

Rogers, C. R. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology, 21,* 95-103.

Schecter, R. (1995). Supervisory transference. *Issues in Psychoanalytic Psychology, 17,* 163-168.

Sharpe, E. (1930). *Collected papers on psychoanalysis.* New York: Hogarth Press.

Stone, L. (1961). *The psychoanalytic situation.* New York: International Universities Press.

Viederman, M. (1991). The real person of the analyst and his role in the process of psychoanalytic cure. *International Journal of Psychoanalysis, 39,* 451-489.

Wachtel, P. (2006). The ambiguities of the "real relationship" in psychoanalysis. *Psychoanalytic Perspectives, 3,* 17-27.

Watkins, C. E., Jr. (2011a). Celebrating psychoanalytic supervision: Considering a century of seminal contribution. *The Psychoanalytic Review, 98,* 325-342.

Watkins, C. E. Jr. (2011b). Psychotherapy supervision since 1909: Some friendly observations about its first century. *Journal of Contemporary Psychotherapy, 41,* 57-67.

Whitman, S.M., Ryan, B., & Rubenstein, D.F. (2001). Psychotherapy supervisor training: Differences between psychiatry and other mental health disciplines. *Academic Psychiatry, 25,* 156-161.

Wortis, J. (1954). *Fragments of an analysis with Freud.* New York: Simon & Schuster.