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The Self-Model of Humanistic Supervision

Harvey Charles Peters¹ · Michele Rivas²

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Abstract The Self-Model of Humanistic Supervision (SMHS) entails the integration of humanist and postmodern epistemology and ontology into a model of clinical supervision. The SMHS offers five core-selves, five enactors of self, and the cyclical process of enactment as a working framework for supervisors and counselor educators. This model provides supervisors with a culturally responsive, holistic, co-constructed, and relational way to assist supervisees in personal and professional growth.

Keywords Humanistic supervision · Clinical supervision · Humanism · Postmodernism · Epistemology

Introduction

According to Vereen et al. (2014) there is a synonymic relationship between counseling and humanism, which emerged from the continued commitment professional counselors, educators, and supervisors placed upon development, empowerment, relationships, social justice, and wellness. As a result of the evolution of the counseling profession and its professional dispositions, professional counselors have a commitment to a philosophy derived from humanistic values (Hansen 2012; Hansen et al. 2014; Perepiczka and Scholl 2012; Scholl et al. 2012; Vereen et al. 2014). The integration and commitment to humanistic epistemology and ontology have been integral to the values of the counseling profession since its inception (Aubrey 1977; Gladding 2012; Perepiczka and Scholl 2012; Vereen et al. 2014). This includes a commitment to human growth and development, phenomenology, potentiality, irreducibility, relationality, and empowerment (Dollarhide and Oliver 2014; Hansen et al. 2014; Scholl et al. 2014).

✉ Harvey Charles Peters
hcpeters@syr.edu

¹ Department of Counseling and Human Services, Syracuse University, 440 Sims Hall, Syracuse, NY 13244, USA

² Department of Psychology, Marist College, 3399 North Road, Dyson Hall 319, Poughkeepsie, NY 12601, USA

These philosophical dispositions are used to inform how counselors, educators, and supervisors understand and engage persons within their professional context. For the purpose of this article, the authors briefly review current and relevant literature pertaining to supervision and humanistic-oriented psychotherapy-based supervision theories, which will be followed by a proposed humanistic supervision model grounded in the counseling literature. The authors use the humanistic literature to propose a model of clinical supervision that represents a more holistic, comprehensive, and postmodern perspective to humanistic supervision.

Clinical Supervision

Clinical supervision has been documented as a signature pedagogy that affords a critical space for the expansion of professional counseling abilities, skills, and conceptualizations, which are instrumental in the development of clinical abilities and professional identity (Auxier et al. 2003; Bernard and Goodyear 2014; Dollahide and Granello 2012; Goodyear et al. 2006; Reissetter et al. 2004; Scholl et al. 2012). The practice of clinical supervision is multidimensional, as it provides a space to explore a plethora of factors, issues, identities, and experiences that influence the supervisee, supervisory relationship, and the varied systems that interact within the supervision dyad (Bernard and Goodyear 2014). Due to the function, intended outcome, and value supervision has on professional counselors, clinical supervision has been mandated by multiple international counseling organizations and accrediting bodies (Goodyear et al. 2016). Included are organizations and accrediting bodies such as the American Counseling Association's 2014 *Code of Ethics* (American Counseling Association 2014); Asian Professional Counselling and Psychology Association's Aims, Objectives and Purposes (Asian Professional Counselling and Psychology Association, APCA 2016); Council for Accreditation of Counseling and Related Educational Programs' 2016 standards (CACREP 2016); and the European Association for Counselling's Training Standards, Accreditation, and Ethical Charter (European Association for Counselling, EAC 2015) as part of ethical training and practice for emerging counselors and supervisors. It is crucial to note also that the aforementioned examples are not an exhaustive list of international counseling associations and accrediting bodies. With that, it is important that counselor educators and supervisors are prepared to provide clinical supervision that is not only ethical, but accounts for professional and personal values in a variety of geographical contexts.

Within the counseling literature exists a variety of supervision models, interventions, and competencies that supervisors are expected to draw on when engaging in a supervisory relationship (Bernard and Goodyear 2014; Bernard and Luke 2015). Each model, theory, or intervention identifies a lens to enact an epistemological framework in the hopes of expanding the applicability and significance of supervision, as well as its congruence to the overall profession. Despite the profession's foundation in humanism (Gladding 2012; Hansen et al. 2014; Lemberger 2012; Vereen et al. 2014), there is an evident gap in the supervision literature focused on humanistic supervision at large, especially in regards to the multiplicity of models grounded in humanistic philosophy (Cain 2003; Farber 2012). Hence, the authors use this article to address the dearth of scholarship, practice, and advocacy related to humanistic supervision.

Humanism Grounded in Counseling Supervision Theory

Many authors have noted the parallels between specific theories or models of clinical supervision and humanism (Degges-White et al. 2013; Dollarhide and Granello 2012; Farber 2012; Guiffreda 2015; Hansen 2006; Vereen et al. 2014). While these theories or models have been noted for their similarities, they have a gap in accounting for the comprehensive and holistic nature of humanistic epistemology and ontology, especially as humanistic ideology continues to develop and expand (Lemberger 2012). Within the counseling profession, humanistic-oriented supervision has been linked to theories such as Person-Centered (Arbuckle 1972; Hamilton and Williams 2007; Patterson 1964; Raskin et al. 2008; Rice 1980), Constructivism (Guiffreda 2015; Mahoney 2005, 2006; Sexton and Griffin 1997), Gestalt and Experiential (Altfeld 1999; Farber 2012; Novack 2010; Resnick and Estrup 2000), Feminism (Degges-White et al. 2013; Kahn 2011; Serlin and Criswell 2001), and Postmodernism (Hansen 2016; Hansen et al. 2014; Peters 2017; Singh and Chun 2010).

Each of the aforementioned theories or models assist in the expansion and enactment of humanistic supervision. Humanistic-oriented supervision has been recognized for a variety of epistemological ways of being, such as its emphasis on empathic understanding, respect, genuineness, unconditional positive regard, and concreteness. These are seen as necessary and foundational elements that are essential for each and every relationship within humanistic supervision (Bugental 1964; Hamilton and Williams 2007; Rogers 1957, 1961). Within humanism, relationships are central to human-to-human alliances as well as the development of each person, whether that be the relationship with one's self, supervisory, therapeutic, or day-to-day relationships (Bugental 1964; Gergen 2015; Rogers 1957). In addition, humanistic-oriented supervision has been recognized for its commitment to the here-and-now, mutual trust and respect, and attending to the privilege and responsibility of free will (Arbuckle 1972; Bugental 1964; Farber 2012; Novack 2010; Raskin et al. 2008; Resnick and Estrup 2000; Rice 1980; Rogers 1957). It is important to acknowledge that these are not separate concepts, but elements that allow a supervisor to attend to a supervisee's developing self.

The philosophy and practice of humanistic supervision also requires reciprocity within the supervisory relationship, which involves exploration and growth of many areas, such as self awareness and reflexivity, phenomenology, intuition, irreducibility, social justice, meaning and value systems, holism, strength-based practices, and human growth and development (Dollarhide and Granello 2012; Dollarhide and Oliver 2014; Gergen 2015; Goldstein and Fernald 2009; Hansen et al. 2014; Lemberger and Lemberger-Truelove 2016). Due to the reciprocal nature of and relational needs within supervision, this requires a clinical supervisor to co-construct a space with a supervisee. This co-constructed space is important, as it functions as a 'relational vehicle' that supports a supervisee's necessary skills and conceptualizations needed for professional counselors and fellow mental health professionals to engage in humanistic, ethical, constrictive, and socially just practice (Dollarhide and Granello 2012; Gergen 2015; Goldstein and Fernald 2009; Hansen et al. 2014; Lambie 2006). Thus, it is crucial that a supervisor account for these humanistic epistemological and ontological ways of engaging in clinical supervision, as this involves not only operating within humanistic ideology, it includes modeling and assisting the supervisee in their development (Cain 2003; Farber 2012; Patterson 1964).

While the model or approach is important, it is also imperative to understand what a supervisee might learn and later enact in their own practice or process. Thus, documented within the humanistic literature is the recognition of its potential to uniquely develop personal

and clinical skills and/or abilities, which include expanding upon a supervisee's different ways of knowing and experiencing the world through assisting them in realizing and acting as active agents in making meaning of their lived experiences, communities, and phenomenological world (Guiffrida 2015; Mahoney 2005, 2006).

Authors have also indicated that humanistic-oriented supervision cultivates a supervisee's ability to be in contact with the present moment, which increases a supervisee's ability to be authentic, aware, engaged, present in the here-and-now, intentional, and creative in their relationships (Mintz 1983; Perls et al. 1951; Polster and Polster 1973; Resnick and Estrup 2000). Given the documented ideology of humanism, humanistic-oriented supervision has included the importance of utilizing and assisting a supervisee's creativity, such as through metaphors, imagery, experiments, intuition, writing, and play to facilitate growth and awareness (Altfeld 1999; Farber 2010, 2012; Perls et al. 1951; Polster and Polster 1973). Within the last two decades of humanistic-oriented supervision, counseling scholarship has acknowledged that humanism ideology requires that a supervisor attend to diverse identities, populations, and needs (Gentile et al. 2010; Ober et al. 2009; Porter 2010; Smith-Adcock et al. 2004).

The expanded attention to diversity is an important evolution within counseling humanistic scholarship and praxis, as humanism emerged within counseling and related mental health professions as a counter to the medicalized, positivistic, and reductionist epistemology and practices (Hansen 2006, 2012, 2016; Peters 2017). Due to its foundation and evolution, humanistic supervision does not seek to privilege certain medicalized practices, such as the conceptualization of clients through medicalized views that embrace psychodynamics, diagnostic labels, personality faults, and an overall marginalizing ideology at the cost of the client's personhood and experiential needs (Hansen 2016; Patterson 1964). However, despite the many acknowledged benefits of humanism, humanistic ideology has also historically included aspects of positivistic and reductionist practices. For instance, humanism was established during the enlightenment period by Western ideology, which operationalized truth and reality as constructs that could be discovered through direct and objective observations (Hansen 2006, 2016). This position is in large part contrary to the ideological position of postmodern epistemology. Thus, the inclusion of postmodern and social justice perspectives has been an important development within the continuum of humanistic ideology (Hansen 2016; Lemberger and Lemberger-Truelove 2016).

The current developing postmodern emphasis within humanistic ideology impacts the validation of narratives for at-risk and marginalized communities as well as those with majority statuses (Hansen 2016; Hansen et al. 2014; Ober et al. 2009; Porter 2010; Singh and Chun 2010; Smith-Adcock et al. 2004). Through the inclusion of postmodern forms of epistemology and ontology, humanistic supervision can better intentionally address and build upon the historic issues of invalidating and not accounting for the narratives, lived experiences, and knowledge that has emerged from marginalized communities and persons (Hansen 2016; Hernández 2004; Lemberger and Lemberger-Truelove 2016; Peters 2017; Singh and Chun 2010). Through the inclusion of its perspective, authors have acknowledged postmodernism for its ability to assist supervisors in addressing and cultivating issues of power, trust, diversity, privilege, marginalization, inclusion, and biases embedded within the supervisory and supervisee-client relationship (Degges-White et al. 2013; Gentile et al. 2010; Hernández 2004; Lemberger and Lemberger-Truelove 2016; Porter 2010; Smith-Adcock et al. 2004).

This postmodern emphasis has also been instrumental in recognizing the complex understandings of supervisees' intersecting identities and experiences in supervision, whether it be about the supervisee, supervisee's client, or the systems they interact with (Russo and Vaz

2001; Hernández 2004; Peters 2017; Singh and Chun 2010). These theoretical groundings are essential in the understanding of humanistic supervision. Without knowing the philosophy, utility, and potential implications for the supervisory relationship, a supervisor cannot intentionally embody and incorporate a holistic humanistic orientation in their work with a supervisee (Cain 2003). Therefore, it is important to develop an understanding and philosophical commitment before beginning to enact the responsibilities of a humanistic supervisor, noting that the vastness of humanistic supervision will continue to emerge as human beings continue to do the same (Hansen et al. 2014).

The authors used the aforementioned scholarship to situate and develop a proposed model of humanistic clinical supervision; a model the authors believe better accounts for the richness of and recent developments within the counseling humanistic scholarship and practice.

Self-Model of Humanistic Supervision

The Self-Model of Humanistic Supervision (SMHS) is a model of human wholeness, which is represented through the visualization of core dispositions embodied in humanistic supervision. The SMHS is depicted through five core-selves, 5-enactors of self, and the cyclical process of enactment. While some models of clinical supervision are more prescriptive and concretely detailed, the authors only outline and define the ideological underpinnings to guide the supervisor without prescribing the possibilities of what this model may look like, given the multiplicity, fluidity, development, and ideology of humanism (Hansen 2016; Peters 2017; Singh and Chun 2010).

Additionally, while the SMHS is presented in separate parts, this format is only used to foster understanding regarding each component of the SMHS, with each of its aspects being an equal and necessary part to the whole model. In order to ensure the essence and various levels of positionality, the authors situate each section of this model as interactive, responsive, and interwoven throughout the whole. Therefore, the SMHS is a living model that is fluid, adaptive, and evolves as it progresses and adjusts to the complex factors that influence the enactment and experiences of clinical supervision. This requires a supervisor to work with the inherent complexities of human-to-human supervision as well as to connect each section and piece, as they are a part of the whole. For example, a supervisor is likely to have multiple supervisees, each with their own supervisory, personal, clinical needs, cultural identities, and developments. Thus, similar to the fluid and ever-changing nature of a person (Rogers 1957, 1961), the authors assert that the SMHS should develop with the supervisor, supervisee, and their supervisory relationship. This will be documented in the presentation of the model. As a result, the authors propose the Self-Model of Humanistic Supervision (SMHS) (see Fig. 1).

Core-Selves: A Look into Humanistic Dispositions

Within SMHS, the core-selves represent the central integrative aspects of the human experience, which inform how the values of the profession are manifested within clinical supervision. Given the aforementioned importance and benefits of clinical supervision (Auxier et al. 2003; Bernard and Goodyear 2014), the five core-selves are used to understand and assist the person as a counselor. It is crucial that a supervisor understand that the five core-selves are omnipresent in the work of supervision, counseling, and the process of being.

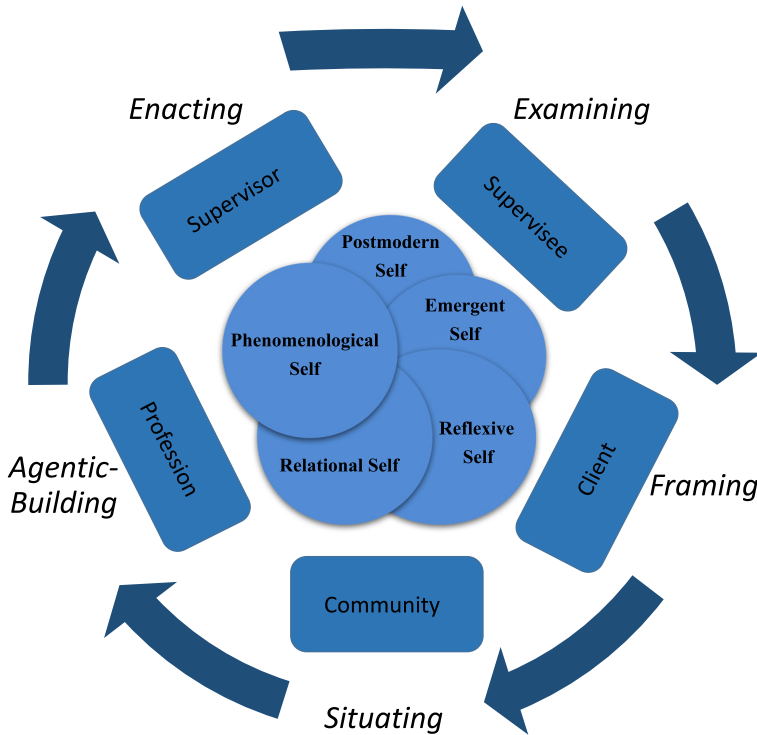


Fig. 1 Self-Model of Humanistic Supervision

In the following section the authors will describe each of the core-selves identified in this model: Relational, Phenomenological, Postmodern, Emergent, and Reflexive. In addition, the authors will offer instrumental descriptions of their intrinsic nature and manifestation within the SMHS. While the five core-selves will be deconstructed separately for the purpose of this article, they are in fact part of a whole and are presented separately to detail each part of the model. This will allow a supervisor to better understand each section individually and as a whole, in order to attend to a supervisee more holistically. Thus, it is crucial that a supervisor attend to, model, and understand the supervisee and their clinical work through each part, intersection, and the entirety of the five core-selves.

Relational-Self

The relational-self embodies an investment in the continuum of relationships, ranging from the self and supervisory relationship to the relational aspects within community and society. This is further outlined in Gergen's (2009, 2015) scholarship, as the author described relational humanism not only as crucial to humanistic ideology and the practice of counseling and supervision, but as a complex network comprised of all existing relational processes that enrich and sustain life and being. The relational-self is not only an important aspect of humanistic epistemology and ontology, it is documented as a professional value and expectation (Perepiczka and Scholl 2012; Vereen et al. 2014).

Similar to Hansen et al. (2014), the authors assert that relationships are inherent to the process of human connection, healing, and development. With that, intrinsic to the relational-self are the importance of nurturing and fostering authentic interactions and relationships, empathy and compassion, relational processes, and care. Relationality also extends into interpersonal neurobiology, as the brain is wired and develops through connections, relationships, and experiences (Fishbane 2007). Due to the importance of connection and belonging, it follows that the supervisor-supervisee, supervisee-client, and other relationships embedded within the supervision process are invaluable and need to be addressed throughout supervision.

Given the multiplicity of identities and cultural factors embedded in relationships and connection, it is important that a supervisor and supervisee explore and develop this together throughout their supervisory relationship (Farber 2012). This is imperative for the development of a supervisee's professional identity, their personal and counselor identity, and their future work with clients (Vereen et al. 2014). This development requires a supervisor to intentionally invest, commit to, and continually cultivate the various relationships that are inherent to the process of supervision and a supervisee's needs (Bernard and Goodyear 2014; Dollarhide and Granello 2012). Thus, for the purpose of the SMHS, the relational-self is cultivated through nurturing relationships that represent the commitment to connect through what is essentially human.

Phenomenological-Self

In the SMHS, the phenomenological-self embodies the complex consciousness of a person's meaning-making in regards to their reported subjective and/or objective experiences of knowing and being in the world (Husserl 1931, 1970). Given the multitudinous array of personal, social, cultural, and historical perspectives, this aspect self privileges the unique combination of factors that influence a person's (e.g., supervisor, supervisor, client) experience in the world (Hansen et al. 2014). Building upon such phenomenological notions, the authors shift from the modernist concept of an innate 'true self' (Hansen 2016) and consider people as fluid, ever-changing, and subjective beings. This requires a supervisor to commit to a supervisee's, or a supervisees-client's subjective experiences and consciousness.

In order to understand and attend to a supervisee's phenomenological-self, a supervisor must work to become aware of the variety of influences impacting a person's way of knowing and being, such as, thoughts, feelings, psychological reactions, identities, intuition, values, and experiences (Gergen 2015). Since supervision involves the process of bringing oneself to the *encuentro* (which in Spanish also represents a metaphorical and existential encounter with one another), supervisors must cultivate both their supervisee's as well as their own phenomenological understanding of those who influence the process of supervision (i.e., supervisee, supervisor, client, community, profession). This is especially important, as one's phenomenological-self influences their professional identity, theoretical orientation, clinical conceptualizations, relationships, and engagement in supervision (Bernard and Goodyear 2014; Dollarhide and Oliver 2014; Dollarhide and Granello 2012). With that, a supervisor must not only seek to understand a supervisee, but work to acknowledge, normalize, validate, and assist a supervisee in self-awareness and development (Hernández 2004). Through understanding this self, a supervisor and supervisee can work towards creating holistic meaning of their lived experiences. Thus, within the SMHS, the phenomenological-self necessitates a commitment to fostering holistic and subjective understandings of self.

Postmodern-Self

In this model, and in strong connection to the first two selves, the postmodern-self represents the recognition of one's social locations and how these are omnipresent and influence the process of clinical supervision (Hansen 2016; Singh and Chun 2010). Within SMHS, the authors assert that a person's way of knowing and being are influenced and informed by one's social, cultural, historical, political, and economic experiences and/or socializations (Chang et al. 2009; Gentile et al. 2010; Hernández 2004; Peters 2017). This stance involves engaging in discussions and actions that not only explore the multiplicity of positionalities and perspectives, but which contextualize and deconstruct social milieus in their relation to power, privilege, marginalization, and liberation (Hawes 1998; Hernández 2004; Peters 2017).

For instance, how a supervisor understands power, privilege, oppression, and intersectionality will define how the fluidity of knowledge is legitimized and/or enacted within supervision (Ober et al. 2009; Hansen 2016; Peters 2017; Porter 2010). Thereby, the supervisor will have a direct influence on how a counselor operationalizes, problematizes, or reifies power, privilege, marginalization, and socialized discourses, despite whether they are or are not problematic (Chang et al. 2009; Hansen 2016; Ober et al. 2009; Peters 2017; Porter 2010). Due to the inherent power the supervisor has within the supervisory relationship, it is crucial that the supervisor's power be intentionally addressed and managed throughout the process of supervision (Gentile et al. 2010; Hernández 2004). The same holds true when working to acknowledge and counter particular forms of power (i.e., reward power, coercive/punishment power, legitimate power, expert power, referent power) (French and Raven 1959) and marginalization (e.g., sexism, racism, ableism, heterosexism, religious/spiritual discrimination) (Chang et al. 2009; Gentile et al. 2010; Hernández 2004; Lemberger and Lemberger-Truelove 2016).

It is imperative that a supervisor find ways to intentionally, continually, constructively, and responsively attend to the influence of personal, social, cultural, historical, political, and economic power factors involved in the process of supervision (i.e., supervisee, supervisor, client, community, profession) (Gentile et al. 2010), as each of these have a direct role and influence on majoritarian or marginalized forms of epistemology and ontology that need to be addressed. In supervision, the values of multiculturalism, diversity, social justice, and advocacy are usually materialized through attention to social locations and defining the transactions of power for all parties directly or indirectly involved in the process of supervision (i.e., supervisee, supervisor, client, community, profession) (Chang et al. 2009; Hernández 2004; Lemberger and Lemberger-Truelove 2016; Ober et al. 2009). Thus, the postmodern self is constantly manifesting through counseling and supervision practice and pedagogy. In the SMHS, the postmodern-self emerges through a supervisor's commitment to human dignity that permeates to all areas of counseling practice and discourse.

Emergent-Self

Encapsulated within the SMHS, the emergent-self represents the future and transpiring essence of one's self. Given that people have the inner potentiality and natural disposition for growth and development, the enactment of the emergent-self requires a commitment to fostering who a person is and who they are working to become (Rogers 1957, 1961; Vereen et al. 2014). Thus, the inner disposition for growth informs

the manifestation of one's ability for hope, agency, and self-betterment as well as investing and trusting the process of becoming (Rogers 1957, 1961).

Due to the fact that change can be intentional in its directionality but still be unbeknownst to an individual's central awareness, a supervisor must demonstrate flexibility, trust, and a teleological position (Guiffrida 2015; Lemberger 2012; Mahoney 2005, 2006). Mahoney (2006) defined a humanistic teleological position as "movement that reflects directionality that is not determined by an explicit destination" (p. 390). This involves a supervisor co-constructing personal, supervisory, and clinical goals and/or directions with their supervisee, with the foundation being based upon a supervisee's desired direction (Guiffrida 2015; Lemberger 2012; Mahoney 2006).

Barring any major clinical, cultural, or ethical issues, the role of the supervisor is to act as a co-constructor or mentor when providing suggested advice, insight, or evaluation of a supervisee's emergent-self (Guiffrida 2015). The authors assert that the process of supervision is a continued investment in the emergent-self of a supervisor, supervisee, their relationship, and the profession of counseling. Thus, within the SMHS, the emergent-self is crucial as it frames the direction and commitment to a supervisee's inner potentiality and self-development within supervision and the supervisee's life in general.

Reflexive-Self

In this model, the reflexive-self is related to the human capacity of becoming aware of and building personal meaning around lived experiences and knowledge. The capacity for reflexivity is situated as a core disposition in the SMHS, as it is embedded in the supervisor's and supervisee's continual ability to create personal ways of knowing, which inform their clinical practice and roles within supervision and the counseling profession (Peters 2017; Rennie 2004). This self encompasses and moves beyond the traditional conceptualizations of reflecting to become more aware, which leads to broad insights of self and others (Bleakley 1999; Rennie 2004).

In the SMHS, the authors assert that this self entails the dialectical and continual process of knowing and becoming through recognizing, reflecting, deconstructing, and becoming aware of one's self, others, systems, and the processes and meaning that emerge (Hawes 1998; Rennie 2004). It is through one's reflexive-self that the individual not only continues to reflect, deconstruct, make meaning, and refine their knowledge or way of being, but also engage in necessary actions (Bleakley 1999; Hawes 1998; Rennie 2004). It is important to note that an action does not require a change or any observable action, as not changing, acting, or adopting a stance is in itself an action. Thus, within the SMHS, there is a central commitment to continually engage in the process of developing, deconstructing, and refining one's epistemological and ontological dispositions into action, which informs one's being as a supervisor, supervisee, counselor, and person.

With that, the relational, phenomenological, postmodern, emergent, and reflexive selves together make up the five core-selves in the model. The SMHS positions the five core-selves as the factors informing and nurturing the different enactors envired within professional counseling and supervision. In the following sections, the authors describe and define the five enactors of self (i.e., supervisee, supervisor, client, community, profession) and the cyclical process of enactment (i.e., examining, framing, situating, agentic-building, enacting) inherent in clinical supervision.

Enactors of Self

In the SMHS, the enactors of self represent the different persons that have the largest influence and impact on the process of clinical supervision. Given that the process of supervision involves multiple persons, systems, and obligations, the authors believe it is important to account for their influence, impact, and positionality within supervision. For the purpose of the SMHS, the authors have identified five enactors of self that influence the current state, obligations, and directionality of the core-selves and process of clinical supervision. Due to the fundamental process and purpose of clinical supervision, the following five enactors of self, identified within the SMHS are: supervisee, supervisor, client, community, and profession.

In the SMHS, the supervisee is defined as, a counselor-in-training, counselor, or mental health professional whose entire body of clinical work, professional identity, and self as a counselor is being overseen in a formal supervisory relationship by a trained and qualified professional counselor or mental health professional (ACA 2014). The supervisor is defined as a counselor or mental health professional who has received training to oversee the clinical work of counselors-in-training, counselors, or mental health professionals (ACA 2014). The client is defined as an individual, couple, family, and/or group seeking or referred to the services of a professional counselor or mental health professional (ACA 2014). Community is defined as a person's entire ecological system that impacts, supports, and guides human growth and development (e.g., department, classroom community agency, social/cultural community) (Bronfenbrenner 1979). Lastly, a profession is defined as the professional and educational realm that is dedicated to the growth and enhancement of the counseling practice or other related mental health professions (ACA 2014).

The authors assert that each enactor of self has a direct influence on the process of supervision as well as the five core-selves and, therefore, needs to be accounted for and intentionally brought into the process of supervision. Thus, it is important that the supervisor explore the impact, role, and relationship amongst the enactors of self in conjunction with the core-selves, in order to better understand one's personal, supervisory, and professional needs and obligations. Through understanding each enactor of self and their connections to one another, the authors propose a supervisor can better assist a supervisee in fostering a more holistic, developmental, socially just, and ethical practice. Therefore, each enactor has an investment and commitment towards growth and development of the 5 core-selves, as well as with one another.

The enactors of self represent an important mechanism to account for the multiple personal and professional people, systems, narratives, and obligations that influence the process of clinical supervision. While the counseling and supervision literature documents the important and unique factors and/or needs of supervisees, clients, supervisors, communities, and the counseling profession (Bernard and Goodyear 2014; Peters 2017), supervision models and theories have not intentionally grounded them within the models of clinical supervision (Bernard and Goodyear 2014; Ober et al. 2009; Singh and Chun 2010). As a result, the authors have intentionally positioned these different 'voices' that influence the process and outcome of clinical supervision in the SMHS. This provides a way to account for the multiplistic and complex systems, positions, and needs within the process of supervision (Bernard and Goodyear 2014; Chang et al. 2009; Hansen 2016).

For instance, if a supervisee is struggling to work with an international college age student who self-identifies as a queer woman, Indian, trilingual, and of the Hindu faith, the supervisor

could use the different enactors of self to assist the supervisee in their needed development (Cohen-Filipic and Flores 2014). By exploring the different enactors of self in this example, the supervisor can meet the supervisee where they are at, while beginning to address their values, client needs, and expectations in response to professional and ethical practice (Cohen-Filipic and Flores 2014).

While a supervisor and supervisee might be the only two persons in the supervisory room, they are not alone in the supervisory relationship (Gergen 2009), as the different enactors of self have a direct role and influence on the process of supervision and the cyclical process of enactment (Gentile et al. 2010; Hawes 1998; Hernández 2004). Hence, the enactors of self are positioned within SMHS as an important component of clinical supervision. Moreover, the SMHS approach accounts for a more pragmatic, systemic, and postmodern lens of the supervisory relationship, especially as there are differing needs, narratives, expectations, power differentials, and social locations, which can go unseen or unaccounted for within clinical supervision (Gentile et al. 2010; Hawes 1998; Hernández 2004; Peters 2017). Thus, the SMHS's enactors of self provide a safeguard and mechanism to assist the process of supervision in becoming more proactive, intentional, ecological, and socially responsive.

The Cyclical Process of Enactment

The last piece of the SMHS is the cyclical process of enactment, which is offered to inform the enactment of humanistic supervision, specifically pertaining to the 5 core selves and 5 enactors of self. This cycle is nonlinear, bidirectional, and acknowledges regression within the context of clinical supervision. This process provides a framework for supervisors to ground their work and framing of the supervisory process, not only for their own purpose, but for the needs of the supervisee. In the following section the authors describe each cyclical process of enactment identified in this model - Examining, Framing, Situating, Agentic-Building, and Enacting - and offer instrumental descriptions of their intrinsic nature and manifestation. Subsequently, the authors provide sample questions to assist in further conceptualizing the dynamic process of the SMHS. These questions are not structured or sequential, but can be used to further assist in the operationalization and enactment of the SMHS.

Examining

According to the SMHS, the supervision process entails the initial step of examining the counseling work of the supervisee by listening to the main components and implicit messages, while acknowledging the fundamental aspects of the work, reflecting on the supervisee's strengths and experiences, and validating the supervisee's areas for development and potentiality. Supervisors work to foster the development and enactment of the 5 core-selves through integrating guiding questions aimed at attending to each of the core-selves. Some possible questions include:

- How do you and the client experience the relationship? (*Relational*)
- What are the relational needs within the therapeutic alliance? (*Relational*)
- Who is the client? (*Phenomenological*)
- What is the story and needs of the client? (*Phenomenological*)
- What are the supervisee's identities? (*Postmodern*)

- How do the identities intersect between the supervisee and client? (*Postmodern*)
- What does the client want? What are the client's goals? (*Emergent*)
- What informs your understanding of the client? (*Reflexive*)
- How does your knowledge and experiences impact or influence the client? (*Reflexive*)

Framing

Following the process of examining, the supervisor will engage in the process of understanding the supervisee's decisions and clinical judgments made in the session. The supervisor will assist the supervisee in evaluating the impact of these decisions in regard to client care, prioritizing the areas for further exploration in terms of the supervisee's development; and will situate the client's presenting concerns and goals agreed upon in the supervisee-client relationship as the compass for supervisory interventions. Supervisors will frame the need for client care and supervisee development. Some possible questions include:

- With the knowledge you have, how can your relationship foster this? (*Relational*)
- How can your relationship better assist or hinder the identified advancement of the presenting concerns or identified goals? (*Relational*)
- How does your personhood influence your understanding and evaluation of the goals? (*Phenomenological*)
- In terms of the presenting concerns and goals, how do you understand the relationship or occurrences within the scenario? (*Postmodern*)
- How can you relate this to the specific goals in counseling? (*Emergent*)
- How were these goals negotiated? Are these the client's goals or yours? (*Emergent*)
- Are there personal aspects you can identify that are impacting your work as a professional counselor? (*Reflexive*)

Situating

As the supervisor obtains a better understanding of the conceptualizations and interventions of the supervisee in the session, the supervisor will work to ground this in meaningful conceptual frameworks for the supervisee. This will afford the supervisor the possibility of deepening the understanding of the supervisee's clinical judgment, skills, and conceptualizations. This will set the ground for the supervisee to link, clarify, challenge, and refine their body of work as a counselor. Supervisors will situate a supervisee's grounding of clinical work and self in the counseling profession. Some possible questions include:

- What were the critical incidents or moments in the session that account for the relationship that you have with the client? How were these incidents or moments navigated? (*Relational*)
- How were the stories in the session situated in the whole phenomenology of the client? (*Phenomenological*)
- How were the differences in cultural identities navigated during the session? How were they understood? (*Postmodern*)
- How was multiculturalism and social justice enacted in the narrative? (*Postmodern*)

- What was the goal for the session? How was that accomplished or not? What were the indicators for that and how did you and the client know? (*Emergent*)
- How did this session impact or relate to you personally? (*Reflexive*)
- How does this impact relate to your prior experiences as a counselor and human being? (*Reflexive*)

Agentic-Building

As a supervisor develops a better understanding of the supervisee's developmental needs and use of skills, they will work at fostering the supervisee's autonomy and agency in their work as a professional counselor. The supervisor will honor the supervisee's phenomenological experiences, normalize encountered challenges, and affirmatively validate growth-oriented dispositions. Supervisors will promote the agency and development of the supervisee. Some possible questions include:

- How is this relationship assisting the client in understanding and accepting themselves? (*Relational*)
- How did you address the tension in the room? If you did not address it, how could you use immediacy to navigate the tension in the room? (*Relational*)
- How do you validate lived experiences and legitimize them in terms of their entire narrative? (*Phenomenological*)
- How do you integrate historical and social factors in understanding the client within the relationship? (*Postmodern*)
- How was development and growth acknowledged and validated? (*Emergent*)
- How were you congruent about your own reactions in the moment? (*Emergent*)
- How do handle the impact of your own biases, values, or judgments in the moment? How was your clinical judgment influenced or impacted by that? (*Reflexive*)
- Have you experienced something similar? If so, how did you navigate and work through this experience? (*Reflexive*)

Enacting

As the final aspect of the cyclical and bidirectional process, the supervisor will evaluate the supervisee's developmental needs and will assist in the co-construction of action-oriented interventions aimed at addressing the 5 core-selves in the supervisee's work with the client. A pivotal aspect of enacting involves the supervisor evaluating the need to either re-address previous parts of the process or to continue on the cyclical process of enactment, in order to strengthen the supervisee's conceptualization and ability to intervene effectively and ethically. Supervisors will facilitate the supervisee's enacting of the cycle throughout their relationship. Some possible questions include:

- How can you continue to acknowledge and model this relationship as having the potential for collaborative work? (*Relational*)
- How did you understand and assist your client in their process based upon their lived experiences, identities, and decisions they have made? (*Phenomenological*)

- How did you validate, reflect, and move forward based on the historical context that defines the conditions for the client? (*Postmodern*)
- How did you encourage the client's agency for change while responding to their natural disposition for development? (*Emergent*)
- How are you modeling and enacting these things you are assisting your client to do? (*Reflexive*)

Limitations

While the authors believe the SMHS is an innovative and comprehensive model, its conceptual nature can represent challenges regarding the specifics of its utility within clinical supervision. Even though the authors recognize the associated challenges to the implementation of theoretical contributions to the practice of clinical supervision, they have intentionally designed this model to be implemented in a way that honors the particular marginalized and privileged identities within the supervisory relationship. The authors have offered guiding questions for the model's implementation process and believe that by offering these questions, it can further assist supervisors and counselor educators in utilizing the SMHS in their practice of clinical supervision. Due to the theoretical groundings and position of the model, the authors intentionally strayed from a more prescriptive approach, and offered these open questions in the attempt to facilitate its potential implementation while grounded in humanistic and postmodern foundations.

Additionally, from a postmodern perspective, prescriptive and best practice models could further perpetuate artificial and problematic ideas in regards to the process of learning and developing (Hansen 2016). The authors also view this limitation as an opportunity for further research development that examines the utility and applicability of this model within the supervision of counseling and other related mental health professions. Given the nature of the SMHS and its aims for humanistic engagement, complexity, and positionality, the authors believe that further research efforts in the direction of qualitative or subjectivity-aware quantitative methods (Balkin 2014) will afford opportunities to amplify its clinical utility (Bernard and Goodyear 2014; Singh and Chun 2010).

Another limitation impacting this model is the identified issues represented by the philosophy of humanism as an orientation in research and practice. Some scholars have documented humanist supervisors, practitioners, and educators' tendency to ignore the omnipresent cultural forces that shape human experiences (Gergen 2015; Hansen 2016). The authors believe that this model, specifically through its postmodern-self, grounds its relevance and applicability in the relational and resiliency-focused aspects of humanistic philosophy. Moreover, the postmodern-self facilitates the recognition and integration of cultural variables and forces that define the experiences of supervisees, supervisors, clients, community, and the counseling profession.

In addition, it has been noted that humanistic-oriented practices may be difficult for individuals who are in their earlier stages of cognitive and emotional complexity development, and for issues regarding evaluation, concreteness, gatekeeping, and crisis management within professional counseling (Bernard and Goodyear 2014). Though the authors recognize the potential challenges represented by the complexity of this model and its foundation in humanistic epistemology and ontology, they believe that the aforementioned limitations can be integrated in the model, specifically within the cyclical process of enactment.

Given the SMHS's philosophical grounding and focus, the authors believe that the cultivation of the supervisory alliance, collaboration, examination of power, and relational

emphasis can be used to address some of the acknowledged limitations of the model. The authors also understand the professional expectation and value placed on evaluation and hierarchy, which are always present within the supervisory relationship (Bernard and Good-year 2014; Degges-White et al. 2013; Peters 2017). Given a supervisor's professional responsibility, the authors believe that the model attends to this through its emphasizing a co-constructed space that fosters critical awareness of the social forces informing the supervision relationship, which even though time limited, is aimed to create long-lasting professional, socially just, and collaborative relationships.

Implications and Future Directions

The SMHS is founded on the synonymic nature of the counseling profession and humanism (Gladding 2012; Vereen et al. 2014); specifically the intersection of supervision and humanism. While this serves as the first model committed to the postmodern and comprehensive nature of humanistic ideology within supervision that is not based upon psychotherapy, there is a crucial need to expand upon the dearth of literature pertaining to humanistic supervision (Cain 2003; Hansen et al. 2014). Additionally, the development of the SMHS can be used as the foreground in the advancement of research, practice and training standards, and advocacy initiatives that combine clinical supervision and humanism in the counseling profession. The authors also believe that due to the focus and format of this article, this model can be used to help bridge the gap between clinical supervision in academia and the counseling practice of counselors. The authors believe that bridging this gap would require a commitment from counselor educators, supervisors, and clinicians to invest in the potentiality and benefits of the SMHS.

As scholars, the authors recognize the importance of the continued cultivation of postmodern humanist thought, specifically as it relates to supervision, research, and clinical practice. While that is embedded within the SMHS, the authors assert that more exploration, research, and enactment is needed. From this, an additional area for potential research is the examination of intersecting identities and various systems that impact the supervisory relationship and process. Given the increased recognition of multiculturalism and social justice as philosophical and political forces within the counseling profession (Chang et al. 2009; Vereen et al. 2014), the authors urge clinical supervisors and counselor educators to foster a continued investment in developing a continual body of research.

Conclusion

The SMHS provides a framework for humanistic supervisors to acknowledge the multiple cultural influences that interact with the process of clinical supervision (i.e., supervisee, supervisor, client, community, profession). This model challenges supervisors, supervisees, educators, and practitioners within the counseling profession to explore the intersections of multiple developmental and multicultural variables, as they interact with the different dimensions of the model and with the model as a whole. The SMHS offers a detailed, fluid, and ever-changing conceptual framework to assist supervisors and professional counselors in the advancement of self through its focus on relational, postmodern, and emerging ways of knowing, being, and engaging as a counselor, supervisor, and human being.

Compliance with Ethical Standards

Conflict of Interest The authors declared that they have no conflict on interest.

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