

Commentary on "Who's Teaching Whom"

"Who's Teaching Whom" by Kelly Berglund and Stacey Peyer appeared in Volume 4, Number 2 of *Reflections* in our "Special Series on Teaching and Learning" (Spring 1998, pg. 45).

by
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In the narrative "Who's Teaching Whom" (*Reflections*, Spring 1998, Special Series: Teaching and Learning, pg. 45), two social workers reflect upon what they, as a supervisor and a 22-year-old student intern, learned from a professional intervention to facilitate positive change in an involuntary 15-year-old client. The two change agents are Caucasian females. The client is an African-American institutionalized male who was abandoned by his parents and was left with no informal support system.

All three have a sense of "unfulfilled neediness." In their respective roles of differential power, they seek each other out to fulfill their unmet needs. Over a period of eight months, their weekly interactions provide an opportunity for each to develop self-awareness, to grow personally, and to heal emotionally. At the end, the two social work practitioners come to view their struggle for acceptance, connectedness, and validation as an "incredible journey."

The narrative is beautifully written: it evokes the reader's empathetic understanding of each player's internal turmoil. The co-authors articulate their practice dilemmas, their ambivalence and pain, and their

rewards and gains in a most effective manner. There is, however, a profound element of subjectivity that permeates the decisions that they make and the interpretations that they give to both their individual and collective experiences. In their description of how their journey unfolds, the authors present the reader with selective disclosures, self-justification, and practices that defy standard social work dicta. The experiences that so deeply touched the players in this helping-and-change drama can become practice traps for the novice social worker.

I write this commentary from the vantage point of a seasoned social work practitioner and educator. I entered micro-social work practice more than 30 years ago, and have been in academia for over 20 years. I continue my concurrent involvement with both.

The intent of my critique is not to challenge the subjective meaning of the experience to the three protagonists. It is, instead, to use my professional wisdom and acumen to draw out of the narrative material for useful lessons that can serve to safeguard sound and ethical professional practices. These lessons include, but may not be limited to, the



areas of worker-client relational goodness-of-fit; the worker's degree of unfulfilled neediness and countertransference; the dual role of the supervisor; the client's role in the process of goal setting; and termination.

The Relational Goodness-of-fit

A goodness-of-fit between the worker and the client is essential in order for the therapeutic intervention to be productive. This is secured with a basic screening that requires careful consideration of client needs and worker skill. In this case, the intern's interest in the prospective client stemmed from his resemblance to "a composite of people" in her life – people that she had been drawn to and whose "hard exterior" she had yearned to break through. The client's expressed and presumed needs, rather than the intern's educational objectives and healing of emotional hurts, must remain the central focus of every therapeutic relationship. An inexperienced student intern who seeks acceptance and validation from an emotionally wounded adolescent client raises doubt about her effectiveness in helping him, especially when she is provided with "emotionally charged supervision." In the narrative, even the client questions the appropriateness of this match when he asks the supervisor why, given his issues with abandonment, she had assigned him an intern.

The Worker's Degree of Unfulfilled Neediness and Countertransference

It has been said that mental health professionals are wounded healers. The severity of the wound and the professional's capacity to contain the pain so that it does not contaminate the therapeutic process separate the effective wounded healer from the ineffective one. The privilege to enter the lives of the vulnerable individuals who become our clients affords us unique opportunities for personal growth. At the same time, this privilege places upon us the responsibility to seek fulfillment of our own emotional needs in other relational contexts.

When the intern finds herself "consumed" with thoughts of the client and comes to care about the client more than anyone else in her life, she risks becoming an ineffective, perhaps even dangerous, healer. Helping her develop insight into her thoughts and feelings is not enough. She needs guidance and information about how to make emotionally satisfying contacts outside of the therapeutic relationship. At this point, the supervisor's assurance to the intern that it is behavior, rather than thoughts and feelings, that risks affecting a therapeutic alliance adversely is not convincing. Given that Cognitive Behavioral Therapy Attributes manifest behaviors to one's thoughts and feelings, it is difficult to accept the claim that "only behavior matters" as the final word.

The intern's fear that the client might get and stay angry with her and push her away "for good" compromises her professional competence. The 15-year-old client "dances to his own tune," but also to the tune of his therapist. He senses her vulnerability; with what she labels "pulling in and pushing away" behavior, he controls the direction of the process. By making use of a "countertransference journal," the intern comes to better understand her thoughts and feelings, but her emotional attachment to the client remains strong. So strong, indeed, that long after termination she continues to look for him in "his old neighborhood" or in places she imagines "he would hang out."

Countertransference, the therapist's conscious and unconscious emotional reactions to the client, can be a countertherapeutic phenomenon in the worker-client relationship. The intern's sometimes desperate need to be accepted and validated by her 15-year-old male client, whom she sees as a guy she would have a "huge crush on" if she met him in her personal life, provides a warning of countertherapeutic effects. When the young client tells the intern that he loves her, and when she expresses concern to her supervisor that their work focuses "too much" on his relationship with her, the supervisor ought to give consideration to the possibility that the client ought to be transferred to a more experienced and less emotionally needy worker. While at the time of termination the client gives evidence that he has al-

lowed himself to love and to connect, the presence of a more mature, 'parental' figure for his transference might have made his journey of treatment less turbulent.

The Dual Role of the Supervisor

The supervisor is the single most significant presence in an intern's development of a professional self. The supervisor is also the ultimate evaluator of the intern's performance in the field placement. The differential responsibilities and entitlements of each are defined by their respective institutions: an agency and a university.

It is difficult to define the boundaries between educational and therapeutic content in supervision. While it is part of the supervisor's task to look out for possible emotional upheavals experienced by an intern during her field placement, to discuss them with her, and to offer support and guidance, the undisputed fact remains that the supervisor is not the intern's therapist. The NASW code of ethics delineates different responsibilities for each.

A supervisor who reads an intern's countertransference journal introduces therapeutic content in supervision. Thus, she engages in a dual relationship. Dual relationships, micro and macro, in professional practice are treacherous; they have the potential to produce misunderstandings and abuse. Therefore, the countertransference journal might better be suggested to the intern as a tool for her

own use or for use in her work with her own therapist.

The supervisor's confessed abandonment issues and her own need to find connectedness in relationships color her professional judgment. Thus, instead of discussing her concerns about the intern's countertransference with her colleagues or with the consultant that is available, she suggests that the intern keep the countertransference journal. If her group supervision colleagues do not know the existence of the journal, then she practices selective disclosure, another behavior that has the potential to introduce misunderstanding and conflict and which also risks jeopardizing her role as a model for the intern.

The Client's Role in the Process of Goal Setting

Contemporary theory and empirical studies have challenged the efficacy of an earlier practice in which workers set treatment goals unilaterally. In today's paradigm of practice, the client is invited to participate in both the setting of treatment goals and an ongoing evaluation of treatment outcome. The client in the narrative demonstrates insight when he tells the intern that he did not want to care about her because she would be leaving. However, we do not hear him express his problems or aid in the definition of his treatment goals. Instead, the supervisor and the intern outline his needs, and the two proceed to set primary and secondary treatment goals for him.

Termination

Planned terminations include a beginning, a middle, and an ending phase of the therapeutic process. Client and worker tasks differ in each of the three phases. In addition, the intensity of each player's emotional involvement changes from one phase to the next. In a planned termination, highly intense emotions of an earlier phase ought to weaken progressively so that both the client and the worker can part with a sense of accomplishment, rather than with a feeling of loss.

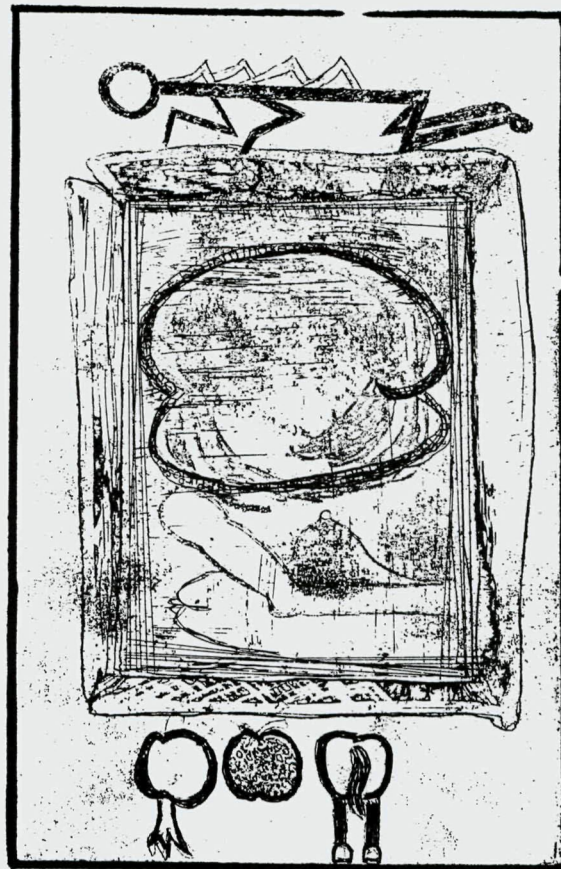
In the narrative, the termination is planned, but also forced, due to time constraints. The supervisor, the intern, and the client know, from the time of their first meeting, the date of their last session, the day of the "good goodbye." The fact that this day finds them emotionally unprepared for the event is not surprising. Their struggle for connectedness and emotional fulfillment continues to the very end; when time forces them to say goodbye, they are left with a sense of "tremendous pain," and, on the part of the intern, with a desire to take the client along "to continue to take care of him."

As for the client, the last one in the group to whom the intern says goodbye, he finds himself so overwhelmed with emotions that he has difficulty uttering the words that he wishes to say. When he is finally able to speak, he expresses gratitude and love, not only for the intern, but also for one of his peers. This emotional vulnerability,

according to the co-authors of the narrative, is a sign that their long-term intervention has had a successful outcome.

The termination of relationships evokes diverse emotions in the involved parties. When mental health practitioners accept their presence in a client's life as a single, purposeful, and time-limited incident, however, terminations are less emotionally charged. I felt uneasy when I read that the difficulty the parties had in saying goodbye was a sign of "how deep our connection had been and that each of us would continue to be a part of the other."

Every human experience has a subjective aspect. The bearer of that experience, far more than anyone else, is able to grasp its depth and feel its impact. An outsider's attempt to question what is personal and owned can be futile. It is with sincere respect for the co-authors' bold bravery in making public a private experience that I venture to extract lessons that I believe can be learned from their narrative. □



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