**Countertransference**

Countertransference is a term broadly applied to the personal reactions of a therapist as a result of interaction with a client in therapy. Countertransference is difficult for the novice clinician to deal with because it garners an emotional, if not visceral, internal response. “The [novice] therapist does not possess the means of understanding the clients beyond their own emotionally colored perceptions. Responses to the client, may be outside immediate awareness,” (Falender & Shafaranske, 2004, p. 84).

**Novice Therapist**

The novice therapist’s sense of self may be bound up in the need to feel competent as a therapist. The novice therapist may feel considerable discomfort if the reactions to the client threaten this self-ideal. Feelings of failure and/or subsequent anger may arise from the shame inherent in perceived failures. The novice therapist must recognize that countertransference will develop with every client treated. It is essential for the novice therapist to detect, understand and deal with these uncomfortable reactions in supervision (Van Wagoner, 2000).

**Resistance**

Resistance occurs when the goals of the therapist and client are not aligned (Tobin & McCurdy, 2006). Countertransference feelings of the novice therapist are not necessarily problematic. However, when the novice therapist avoids addressing these feelings resistance may occur in supervision (Crowell, 2007).

**Addressing Issues in Supervision**

The supervisor’s behaviors may range from the healthy, positive anticipatory curiosity to more problematic. Secure attachment idea (Bennett, 2008). “The nature of the transference and corresponding countertransference responses change and develop during the course of supervision.” (Wiener, 2007).

Supervisor: be aware of “Always/Never” as a signal of a countertransference response.

- **Always** - trainee always talks about a client’s sexual problem when presenting problem isn’t sexual
- **Never** - trainee never talks about the client’s sexual problem when it is presenting problem (Book, 1985)

**Supervisory Tools**

- **#1 Countertransference Index, developed by Hayes, Riker & Ingram, (1997)**
  Measures supervisor’s rating of the extent a therapist’s behavior in a counseling session reflect some areas of unresolved conflict

  Allows supervisor to help trainees assess learning process, determine the nature & source of reaction, and examine the full range of their reaction to the clients’ issues. (Dubé & Normandin, 2007).

- **#2 Countertransference Factors Inventory ~ (CFI)**
  Measures Therapist:
  - **Self-insight:** awareness of personal feelings,
  - **Self-integration:** intact, healthy structure and ability to differentiate self from other
  - **Anxiety management:** possess the internal skill to control and understand
  - **Empathy:** put one’s self in the other’s shoes

  Conceptualizing ability: grasp the client’s dynamics (Gelso & Hayes, 2001)

- **#2a** “The CFI-R examines relationship between therapist factors thought to facilitate countertransference management and actual countertransference behavior.” (Hayes, 2004)

- **#3 The Inventory of Countertransference Behaviors (Friedman & Gelso, 2000)** completed by supervisors who rate therapist behavior during session on Likert scale
  - Three scores are obtained: positive & negative countertransference behaviors and a total score

**Supervisor Responsibilities**

**Parallel Process**

- **Parallel Process**
  - The supervisor must look beyond the material presented by the trainee in supervision (content) and recognize the similarities of the experiences in supervision to the trainee’s experience in treatment (Friedlander, Siegel & Brenock, 1989).
  - The supervisor must bring these similarities to the attention of the trainee (McNeill & Worthen, 1989).

  In order to understand the dynamics of the case, the supervisor helps trainee resolve blockages that prevent clear recognition of the client (Crowell, 2007)
  - The supervisor provides the student with new skills to use in treatment with the client.

  As supervisor intervenes with student - the student will mirror techniques with the client (Friedlander, Siegel & Brenock, 1989).

**Take Away Points**

- **Failure to recognize/process emotional responses hampers effectiveness, and negatively influence client (Agass, 2002)**
- As professionals, our responsibility is to process our personal reactions to our clients.
- As supervisors, we challenge trainees to work through their emotional responses to the client. (Baker 2005):
  - Parallel process occurs in supervision & therapeutic relationship in tandem. The trainees guided by the supervisor to unmask the countertransference occurring in both (Falender & Shafaranske, 2005).

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