

Development of the Secure Counselor: Case Examples Supporting Pistole & Watkins's (1995) Discussion of Attachment Theory in Counseling Supervision

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The author clarifies key concepts and assumptions of attachment theory, emphasizing the importance of adult attachment relationships in counseling supervision. Case examples are presented of supervisee behaviors and subsequent supervision strategies used during a semester-long practicum. The case examples illustrate how the application of theoretical constructs described in attachment theory can foster productive supervisor and supervisee alliances.

The development of productive supervisor–supervisee relationships is important in counseling supervision (Carifio & Hess, 1987; Hess, 1987; Holloway, 1994; McNeill & Worthen, 1989; Ronnestad & Skovholt, 1993). One of the ways supervisors develop productive supervisor–supervisee alliances is by understanding “interpersonal characteristics” that both parties bring to the relationship (Holloway, 1994, p. 9). Attachment theory offers a useful explanation of how interpersonal characteristics affect supervision and how supervisors can work more effectively with supervisees (Pistole & Watkins, 1995).

Key Concepts and Terms of Attachment Theory

According to attachment theory, human beings have cybernetic behavioral systems, biologically imprinted before birth, that serve to fulfill the individual's need for security or safety. A person's behavioral system is activated or terminated depending on stimuli from the environment, particularly from other individuals (Ainsworth, 1969). Patterns of behavior derived from these systems are based on an individual's early interactions with his or her primary caregiver and the ability or inability of the infant to gain or regain proximity to the caregiver when feeling unsafe. Patterns of behavior are “activated especially by pain, fatigue, and anything frightening, and also by the mother being or appearing to be inaccessible”

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(Bowlby, 1988, p. 3). Periods of separation from or inaccessibility to the primary caregiver will activate specific behaviors, known as *attachment behaviors*, which the infant uses in an effort to regain proximity to the caregiver. An attachment behavior is described as a "fundamental form of behavior with its own internal motivation distinct from sex or nourishment but of no less importance because attachment behavior is based on survival" (Bowlby, 1988, p. 27). The early organization of a person's attachment behavior continues to influence an adult's life by shaping the way the individual "construes the world about him and on how he expects persons [to] whom he might become attached to behave" (Bowlby, 1988, p. 65).

Attachment behaviors become *patterns of attachment* when the individual consistently and preferentially exhibits the behaviors in an attempt to achieve security or safety. A pattern of attachment "once developed, tends to persist over time" so that an individual will tend to "impose it or some derivative of it upon new relationships such as with a teacher, a foster-mother, or a therapist" (Bowlby, 1988, p. 127). In effect, the individual develops a *working model*, an internal set of beliefs about his or her *self* and the primary caregiver, which affects how, as an adult, he or she establishes and maintains influential relationships. The working model operates in a twofold fashion by organizing the individual's beliefs and adaptive behaviors from childhood and influencing his or her later interactions with others (Lopez, 1995). For example, an adult who has a working model of others as inaccessible or unreliable will often generalize this model to future relationships "in the form of assumptions and expectations about self and others" (Searle & Meara, 1999, p. 148). Results from recent studies (Blustein, Prezioso, & Schultheiss, 1995; Kemp & Neimeyer, 1999; Kenny & Rice, 1995; Levy & Davis, 1988; Lopez, 1996; Simpson, Rholes, & Nelligan, 1992) that document the existence of attachment patterns in adolescents and adults support this claim.

Patterns of Attachment Behavior

In some cases (Kemp & Neimeyer, 1999; Pistole, 1999; Searle & Meara, 1999), patterns of attachment behavior are categorized differently depending on whether the individual is an adult or a child. Other writers (Levy & Davis, 1988; Lopez, 1996; Pistole, 1993; Simpson et al., 1992), whether referring to adults or children, adhere to three main patterns of attachment that are discussed by Bowlby (1982, 1988). For simplicity's sake, I discuss the three main patterns of attachment recorded by Bowlby (1988) in his early work. The first pattern, *secure attachment*, is characterized

by an individual's working model of help as accessible. Securely attached individuals present a positive view of exploration and challenge, regularly seek out help when needed, and generally believe help will be forthcoming when requested.

The second pattern of attachment, *anxious resistant*, is typified by an individual's working model of help as inconsistent or unreliable. Individuals who display anxious resistant patterns are uncertain about the availability or responsiveness of their attachment figures. They may experience anxiousness when faced with challenge or the need to explore, are often labeled clinging, and may suffer from repeated crises.

The third pattern of attachment, *anxious avoidant*, is characterized by a working model of others as inaccessible in times of crisis. Individuals who present anxious avoidant patterns of attachment tend to express no confidence that help is forthcoming. They expect to be rebuffed or ignored, and because of this, may attempt to be emotionally self-sufficient (Bowlby, 1988).

Influence of a Secure Base

Patterns of attachment exist as products of the establishment or absence of a secure base that the individual can readily access when feeling threatened or in danger (Bowlby, 1988). The secure base influences a person's influential relationships by determining how he or she, as an infant, child, or adult, behaves with the outside world. For example, secure infants and children display confidence exploring away from their primary caregiver, knowing the caregiver will be accessible upon return. As the child becomes older, his or her exploration expands "but a secure home base remains indispensable nonetheless for optimal functioning and mental health" (Bowlby, 1988, p. 122). In late adolescence and adulthood, existence of a secure base continues to influence whether the individual will exhibit confidence in seeking out help when needed, or in exploring "diverse new roles and settings" (Blustein et al., 1995, p. 417).

Because a secure relationship functions as the foundation of this base, supervisors, regardless of their theoretical perspective, may wish to remain cognizant of the benefits of establishing productive attachment relationships with their supervisees. For example, in cases where supervisors suspect the supervisee holds a working model of others as inaccessible or inconsistent, the establishment of a productive adult attachment relationship may benefit the supervisee. This is because working models and subsequent patterns of attachment are not static. Instead, "mental models are dynamic representations that may be altered in response to new information" (Collins & Read, 1990, p. 661). This means

that an individual's working model of self and others can "be modified through ongoing interpersonal relationships, increased self-understanding, and renegotiations of the balance between connection with others and independence" (Kenny & Rice, 1995, p. 437). Because relationships between supervisors and supervisees are often characterized by "important elements of attachment relationships" (Pistole & Watkins, 1995, p. 468), a secure supervision base may serve as a modifier for the supervisee's current attachment orientations. The following sections illustrate features of adult attachment relationships and their significance in counseling supervision.

Adult Attachment Relationships

Adult attachment involves a dyadic relationship "in which proximity to a special and preferred other is sought or maintained to achieve a sense of security" (West & Sheldon-Keller, 1994, p. 19). According to attachment theory, even well-functioning adults seek relational proximity to a particular person to promote, enhance, or restore a perceived sense of security. In a healthy adult attachment relationship, the bond between the individuals is regarded as between peers rather than between a caregiver and receiver. This kind of attachment is reciprocal because neither partner is considered "stronger or better able to cope than the other" (West & Sheldon-Keller, 1994, p. 18). Sometimes, one member of the relationship acts in either a careseeking or caregiving role; however, this lasts only for intermittent periods. An infant or child attachment relationship operates in a more complementary fashion in which caregiving by the parent figure is viewed as complementary to the child's careseeking (West & Sheldon-Keller, 1994). Relationships between supervisors and supervisees may be a combination of both reciprocal and complementary attachments.

The supervisor has some knowledge, skills, or background that the supervisee actively seeks. At the same time, one assumes that the supervisee is viewed as another adult with an ability to cope, an ability that a child has not developed. In any attachment relationship, what remains the same is the function or purpose of the relationship, that is, to achieve security (Ainsworth, Blehar, Waters, & Wall, 1978; Bowlby, 1988; Collins & Read, 1990; Lopez, 1996; West & Sheldon-Keller, 1994).

Relationship as a Secure Base in Counseling Supervision

A key assumption of attachment theory is that "the capacity to make intimate emotional bonds with other individuals, sometimes in the careseeking role and sometimes in the caregiving one is regarded as the principle feature of effective personality function-

ing and mental health" (Bowlby, 1988, p. 121). Attachment relationships established between supervisors and supervisees should, therefore, be considered both normal and productive. A secure foundation provides the supervisee with sufficient safety so that he or she feels confident addressing the supervisor in times of crisis. Consider a supervisee who may be working with his or her first suicidal client. When confronted with this kind of crisis, the individual with a working model of help as unavailable is less likely to seek support (Simpson et al., 1992) and is likely to be more mistrustful (Feeney & Noller, 1990) of others. Because the supervisee may lack confidence that help is forthcoming, he or she may exhibit reluctance in seeking out the supervisor's assistance. During the same stressful circumstances, the securely attached individual holds an internal model of help as available (Mikulincer, 1997) and presents greater levels of trust than his or her less securely attached peer (Simpson et al., 1992). A secure working model enables the individual to be confident in seeking assistance and confident that help will be forthcoming.

In their work with counseling supervisees, Pistole and Watkins (1995) found that the establishment of a secure supervisory alliance "serves to *ground* or hold the supervisee in a secure fashion" (p. 469). The function of the relationship provides supervisees with security or safety by letting them know (a) "they are not alone in their counseling efforts, (b) their work will be monitored and reviewed across clients, and (c) they have a ready resource or beacon—the supervisor—who will be available in times of need" (p. 469). Similar to Pistole and Watkins's (1995) discussion, the following cases illustrate specific patterns of attachment I have observed when working with counseling supervisees and illustrate how secure supervisor and supervisee attachments were established. The purpose of each of these relationships was to provide supervisees with a stable foundation on which they could base their learning. Although recent studies (Blustein et al., 1995; Feeney & Noller, 1990; Klohnen & Bera, 1998; Lopez, 1996; Simpson et al., 1992) have documented the connection between early childhood and adult attachments, each of these case examples was based on current observable behaviors during a semester-long practicum experience. At no time were the supervisees' early childhood experiences brought into the supervision context. Names and gender have also been changed to protect confidentiality.

Case Example 1: Secure Attachment

A securely attached person, when confronting a stressful circumstance, will be more likely to ask for help than an individual with

a working model of “help as unreliable or inaccessible.” William exemplified a pattern of secure attachment.

William was enrolled in a practicum course and was assigned to me for supervision. He was active in student organizations, studious, and genuinely interested in his clients. His practicum experience unfolded as a model semester until William was assigned two female clients. I noticed that William, while appearing oblivious of his mannerisms, interacted with these two clients in a condescending manner. We had developed an excellent supervisor–supervisee relationship earlier in the semester, due in a large part to William’s genuineness and openness to feedback. For example, William had approached me throughout the semester when unsure of his intervention strategies and counseling style. Our supervision sessions had progressed in an open and productive manner. When confronting William about my concerns regarding his relationship with his female clients, he initially seemed to be hurt; he then asked me to clarify. By reviewing his tapes and previous statements, we were able to pinpoint several instances of gender conflict during his sessions. Some of my feedback was not what William wanted to hear, but he remained open to correcting the problem.

In his following sessions, William addressed gender differences with his female clients, asking them for their impressions of previous meetings. This feedback helped William to rethink how he approached his female clients and to change some of his mannerisms and language to better facilitate the client–counselor relationship. William seemed to have a working model of help as accessible, which allowed him to seek extra supervision when it was needed. Moreover, when changes in his counseling style were warranted, he was open to exploring the changes that were needed and showed confidence in reshaping his role in the therapy room.

Case Example 2: Anxious–Resistant Attachment

An individual with a working model of “others as inconsistent or unreliable” may show anxious–resistant patterns of attachment, including dependency on attachment figures and fear when instructed to resolve crises. Another student, known here as Patty, exhibited some of these characteristics during her practicum experience. Patty was an older student who always seemed to be in competition with her academic colleagues. For example, she was known for directly asking other students what their grades were and frequently interrupted conversations between other students and professors. Her practicum began in crisis with Patty frequently expressing anxiety over her client’s presenting problems and her own performance.

Although Patty regularly asked for feedback about her sessions, she often became tearful or despondent. She sought out, at inopportune times, any and all previous instructors, repeatedly asking the same questions that she had posed earlier in supervision. I focused on establishing a supportive relationship with Patty. This included developing clear boundaries regarding appropriate disclosure in and out of supervision, what constituted an emergency, and my own time limitations. Initially, Patty expressed anxiety and frustration with these guidelines. For 2 months, I continued to provide her with our regularly scheduled supervision and also remained accessible throughout the week if she believed she had a real emergency. I noticed that as the weeks passed, Patty began to realize that my office hours remained stable and that she could easily reach me by telephone or e-mail. She also began to relax and focus more on her clients, ceasing to badger student colleagues and instructors with minor concerns.

Although I might have categorized Patty as a high-maintenance practicum student, eventually she was able to develop confidence in her own abilities and to be open to constructive feedback. Moreover, whereas Patty may have held a working model of "help as inconsistent," it is possible that the development of a stable relationship provided her with a foundation on which she could develop confidence in her supervisor and in herself as a professional. This hypothesis is consistent with the literature (Collins & Read, 1990; Kenny & Rice, 1995; Lopez, 1996) discussing the potential for modifying an adult's working model of self and others.

Case Example 3: Anxious–Avoidant Attachment

An anxious–avoidant pattern of attachment is based on an individual's belief that no assistance will be forthcoming in times of crisis. Whether or not he or she has the necessary skills and knowledge, an individual with this kind of working model may attempt to solve problems alone. One such person, known here as Helen, was a student who presented characteristics of this pattern during her practicum experience. Helen seemed to have few friends or academic colleagues. She rarely engaged in peer supervision except to state her opinion as the "right" way to proceed. Establishing a productive supervisor–supervisee relationship with Helen was a slow and painstaking process. She seemed closed to feedback of any kind, at one point snatching corrected progress notes from my hands, saying that I had "ruined" them. I let the incident pass, realizing that addressing her behavior would be useless until she learned to trust me. During the next few weeks, I refrained from constructive feedback regarding her use of empa-

thy in the therapy room, choosing instead to observe her sessions closely and to focus supervision on Helen's comfort level with the practicum itself. Gradually, Helen began to open up to me. One month after she had snatched the progress notes from my hand, she apologized for her behavior. By the end of the semester, Helen actively sought constructive feedback and worked outside of practicum hours to develop her empathy skills. She also began to take a genuine interest in listening to peer feedback. Although Helen was able to begin developing a productive supervisor-supervisee relationship, at the end of the semester she remained somewhat aloof from her student colleagues and seemed to be defensive when she received feedback from any supervisor other than me. It seemed to me that Helen held a working model of "help as inaccessible," which influenced her motivation to seek out the support she needed to develop her counseling skills.

Conclusion

Whether or not one accepts the tenets of attachment theory, phenomena described in attachment theory, such as the establishment of a secure base and the influence of working models, are worth considering when developing supervisory alliances. The emphasis of attachment theory on productive relationships is highly compatible with the nature of counseling. Moreover, attachment theory provides a description of how a secure relationship base meets the needs of developing counselors.

Consider the case of Patty, whose case was presented earlier in this article. Similar to observations discussed by Pistole and Watkins (1995), the development of a secure base was essential in helping to ground Patty and to assist her in developing confidence in her supervisor and her supervisor's feedback. Once grounded in a secure relationship, supervisees are freed to begin exploring the profession. This includes developing the courage to experiment with particular techniques, becoming more creative in session, or consulting with other professionals and colleagues (Pistole & Watkins, 1995).

Helen's case exemplifies how a grounded supervisor-supervisee alliance freed the student to begin developing her empathy skills and, tentatively, to begin consulting with student colleagues. The final function of a secure supervision base involves stimulating students to engage in self-examination and question their own role within the therapeutic context (Pistole & Watkins, 1995). William reminds me of a student who benefited from a secure base that encouraged him to question his role in the therapy room.

I have described key components of attachment theory, offering case examples of counseling supervisees' patterns of behavior and

interventions. Further investigation into the benefits and applicability of attachment theory in supervision is clearly warranted. Qualitative studies that document observable patterns of attachment behaviors throughout the supervision process and how these behaviors change therapeutic outcomes would further strengthen an argument for applying attachment theory in supervision. Case studies that focus on issues of parallel processing (McNeill & Worthen, 1989; Stimmel, 1995) is another fertile area of exploration. For example, do changes in the supervisor's patterns of behavior change supervisees' patterns of attachment behavior in session? It would also be useful to determine whether the development of a secure supervision base strengthens the development of core therapeutic conditions such as genuineness and trust within the therapy room. Of particular interest would be whether cultural and ethnic differences influence attachment behaviors and the development of supervisor-supervisee relationships. Finally, research in attachment theory with counselors outside of academia is an untouched area of investigation. Most studies in attachment theory have been completed with a research base of mainly college students (Bartholomew & Thompson, 1995). It would be interesting to determine whether establishing a secure supervision base provides benefits for seasoned counselors, and if so, in what ways.

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