

Post-degree supervision: Existing and preferred practices

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This is the peer reviewed version of the following article:

Borders, L. D., & Usher, C. H. (1992). Post-degree supervision: Existing and preferred practices. *Journal of Counseling & Development, 70*, 594-599.

which has been published in final form at <https://doi.org/10.1002/j.1556-6676.1992.tb01667.x>. This article may be used for non-commercial purposes in accordance with [Wiley Terms and Conditions for Use of Self-Archived Versions](#).

Abstract:

A survey of National Certified Counselors (NCCs) was conducted to (a) document existing supervision practices and (b) determine the type of supervision these counselors preferred at this point in their careers. Descriptive statistics and chi-square analyses were conducted for the total sample (N=357) and subgroups classified by work setting, counseling experience, degree level, and hours of post-degree supervision. Results indicated that existing practices varied, with school-based respondents receiving the least supervision. A majority of respondents said that they currently were being supervised by noncounseling professionals. Almost every respondent wanted some supervision, and most preferred a supervisor who had additional training in supervision.

Keywords: counselor supervision | professional development | counseling | mental health professionals

Article:

Current supervision models characterize counselor growth as a continuous and lifelong process requiring different supervision interventions at various stages of development (e.g., Blocher, 1983; Loganbill, Hardy, & Delworth, 1982; Stoltenberg, 1981). From this perspective, the need for supervision does not end when a counselor receives a degree, although the supervision approach needed to facilitate additional growth would change. Recent empirical evidence has supported this view, indicating that counselor development is related to supervised, but not unsupervised, counseling experience (e.g., Wiley & Ray, 1986). In fact, counselors' skill levels may even decline after graduation (e.g., Meyer, 1978; Spooner & Stone, 1977).

Despite the demonstrated importance of supervision for continued growth, some writers believe supervisory support beyond graduation is not a common practice (Barrel & Schmidt, 1986; Remley, Benschhoff, & Mowbray, 1987). Others have asserted that existing supervision is less than adequate. Supervisors of school counselors may be administrators who have no counseling background (American Association for Counseling and Development [AACD] Task Force, 1989; Schmidt & Garret, 1983), and supervisors in mental health settings may be preoccupied with administrative duties (Harvey & Schramski, 1984; Remley et al., 1987).

If these assertions are true, major reforms in the supervision of practicing counselors are indicated. Currently, however, there is little documentation concerning these beliefs about post-degree supervision. As a result, it is unclear what supervision is being provided and what types of supervision programs should be created. To make informed decisions about post-degree supervision, existing practices first need to be described. In addition, knowledge of practicing counselors' supervision preferences would be instructive, because the success of any new program depends, in part, on counselors' receptivity to supervision. In an initial attempt to provide this information, a national survey of practicing counselors was conducted to (a) document existing supervision practices and (b) determine the type of supervision that these counselors preferred at this point in their careers.

METHOD

Participants

To gather information from a varied population of counselors, we surveyed a random sample of National Certified Counselors (NCCs). We chose to survey NCCs for several reasons: (a) the NCC is a national credential for practicing counselors, (b) NCCs have some uniformity in counselor preparation and professional identity, and (c) NCCs include counselors in diverse work settings. The sample was drawn from the population of 17,406 NCCs as of July 1989, based on a listing provided by the National Board of Certified Counselors (NBCC). This population primarily consisted of master's-level practitioners (82%) who had degrees in counseling (65%). The sample was stratified on two variables: (a) geographic region (indicated by zip codes) and (b) date highest degree was received. Because of low frequencies, listings of NCCs in foreign countries and those who had received their degrees prior to 1960 were deleted. A computer-generated list of 729 NCCs constituted the final sample.

Of the 729 surveys mailed, 35 (5%) surveys were returned (e.g., no forwarding address). Of the 694 NCCs remaining in the sample, 248 (35.7%) responded to the first mailing; an additional 109 (15.7%) responded to the second mailing. A total of 357 usable surveys yielded a final response rate of 51.4%.

Instrument

A five-part survey questionnaire was constructed. In this article, responses to the 28 items in the first three parts are reported. In the first part, respondents gave demographic information (i.e., age, sex, ethnic group, work setting, counseling orientation, and years of professional counseling experience) and estimated the total number of hours of post-degree face-to-face supervision that they had received. In the second section, respondents described the supervision they were receiving in their current counseling position. On seven multiple-choice items, respondents indicated the frequency of supervision (e.g., weekly, monthly); supervisory format (e.g., individual or group); characteristics of current counseling supervisor (e.g., credentials, professional identity, and sex); and reason(s) for receiving supervision (e.g., work setting or credentialing requirement, professional development). For these items, respondents checked the most appropriate answer(s) from a list of possible responses. They also indicated the percentage

of time that various methods were being used during their current supervision (e.g., self-report, audiotape or videotape review, live observation, live supervision, co-counseling).

In the third section, respondents answered similar questions concerning the kind of supervision they preferred at this point in their careers. They indicated the frequency of preferred supervision (e.g., weekly, monthly) and primary goal for that supervision (e.g., learn skills and techniques, learn to work with particular type(s) of clients, develop conceptualization skills, develop greater self-awareness, receive professional support, avoid burnout). They rank ordered their answers on several other items: (a) preferred supervisory approaches (e.g., self-report, live observation), (b) preferred supervisor's credentials (e.g., NCC, licensed psychologist), and professional identity (e.g., counselor, counseling psychologist). Two additional items concerned preferences for supervisor's sex and for on-site versus off-site supervision. Space for comments was provided on several items.

Procedure

A cover letter, survey questionnaire, and stamped, preaddressed return envelope were mailed to the 729 NCCs in early November 1989. The cover letter described the purpose of the study, defined counseling supervision (as differentiated from administrative or program supervision), requested the respondent's participation, and stated that the respondent's answers would remain confidential. A reminder letter was sent 2 weeks after the initial packet was mailed. A second complete packet of materials was sent to nonrespondents in early January 1990.

Data Analysis

Several procedures were used to analyze the data. First, descriptive statistics (e.g., frequency counts, percentages, and means, as appropriate to the response format) were calculated for each item for the total sample. For current supervision items, the same descriptive statistics were determined for four work setting subgroups (i.e., schools, college counseling centers, community mental health agencies, and private practice). For preferred supervision items, the same descriptive statistics were determined for subgroups based on (a) work setting, (b) counseling experience, (c) highest degree received, and (d) total hours of post-degree supervision. The latter three subgroups were suggested by a review of the supervision literature. (Determinations of these subgroups are described in subsequent sections.)

We conducted chi-square analyses (as appropriate to the response format) to explore differences within the various subgroups. These analyses usually were conducted with data collapsed to account for low frequencies in some cells and with "other" responses dropped. An experimentwise alpha level of .05 was set for each series of chi-square analyses. Where indicated, we used correlation coefficient and one-way analysis of variance (with Tukey's HSD used for follow-up multiple comparisons, experimentwise error rate of $p < .05$).

Some respondents (e.g., retirees) did not answer each item. There seemed to be no reason to eliminate their remaining information, so it was retained for the various analyses. As a result, frequencies for each item can be expected to vary.

RESULTS

Results for the three parts of the survey are reported in the following sections. Because of space limitations, only summaries and significant findings are included. A more complete listing of the results is available from the authors.

Respondent Characteristics

The typical respondent was a White (88%), female (66%), 40-to 49-year-old (44%), master's-level (62%) NCC who was working full-time in a counseling position (83%). Most master's-level respondents had counseling degrees (84%). Those at the educational specialist and doctoral levels had degrees in counseling (57%, 54%) and a variety of other fields (e.g., educational administration, counseling psychology).

Respondents' characteristics were compared with a demographic chart provided by NBCC. Percentages of women (66%) and men (34%) in our sample were similar to those in the NBCC data bank (63%, 34%, 3% unidentified). Our sample, however, seemed to include more NCCs with terminal degrees beyond the master's (38% versus 16%). Comparisons of ethnic background were limited because of the large percentage of NCCs who had not reported this information to NBCC (43%). Our sample may have included slightly more non-White respondents as compared with the NBCC population (e.g., 8% versus 5%, Black; 3% versus 1%, Hispanic).

Respondents' work settings included schools (39%; elementary, 8%; middle, 12%; high school, 19%), private practice (19%), college counseling centers (11%), higher education offices (3%), community mental health agencies (9%), hospitals (2%), business and industry (2%), and other settings (15%; e.g., vocational rehabilitation agencies, combination of settings). Two orientations characterized respondents' predominant approaches to counseling: eclectic (41%) and person centered (18%). Other predominant orientations mentioned with low frequencies included cognitive-behavioral (8%), family systems (8%), behavioral (5%), psychodynamic (4%), cognitive (4%), reality therapy (3%), gestalt (1%), existential (.8%), and transactional analysis (.6%).

Months of counseling experience. Respondents' total months of counseling experience ranged from 3.25 to 363 ($M=133.28$, $SD=78.89$). School counselors reported more total months of full-time experience ($M=168.34$, $SD=73.29$) than did counselors in college counseling centers ($M=159.40$, $SD=84.61$), community mental health agencies ($M=100.61$, $SD=73.25$), or private practice ($M=108.37$, $SD=73.70$). Respondents in school settings and college counseling centers reported significantly more months of counseling experience than did respondents in community health agencies and private practice, $F(3, 208)=10.59$, $p<.0001$.

Hours of post-degree supervision. Respondents estimated the total number of hours of face-to-face counseling supervision received since completing their counseling degree. Estimates ranged from 0 ($n=82$, 28%; modal response) to 1,200 ($n=1$), with a median of 40 hours and a mean of 125.24 hours. The actual figures, however, may have been higher. Another 72 respondents gave no estimate of post-degree supervision hours, which may have indicated 0 hours. In addition, written comments suggested that some respondents may have been referring to administrative

oversight, case management, and/or evaluation conferences when describing their current counseling supervision.

School-based respondents reported significantly fewer hours of post-degree supervision than did respondents in community mental health agencies and those in private practice, $F(3, 180)=6.98$, $p<.0002$. Of 92 (45%) school-based respondents, 41 reported they had received no post-degree supervision.

Current Supervision

In the second section of the survey questionnaire, respondents described the counseling supervision that they were currently receiving. Responses are summarized first for the total sample followed by differences in responses by work setting. Total sample. Of the total sample, 95 respondents (32.1%) indicated that they were receiving no supervision at their current counseling position. A similar number (34.8%), however, reported receiving supervision at least once a month.

Respondents described their current supervisors on four items. On the first, a majority said that they were being supervised by a man (62%). Second, more current supervisors had doctoral degrees ($n=89$) than master's ($n=66$) or bachelor's ($n=6$) degrees. On the third item, respondents indicated their supervisors' credentials. (Because more than one credential could be checked, only frequencies are reported.) Most often, respondents were being supervised by a licensed psychologist ($n=53$), state credentialed counselor (e.g., licensed or certified) ($n=45$), or person with other credentials, typically a psychiatrist or social worker ($n=39$). Finally, respondents indicated their current supervisor's primary identify. The most frequent responses were "other" (i.e., principal, administrator) (38.0%), "counselor" (23.1%), and "counseling psychologist" (9.5%) or "clinical psychologist" (13.1%).

Several items were designed to determine how respondents' current supervision was being conducted. A majority reported that they were receiving individual supervision ($n=181$); fewer were in supervised groups ($n=69$) or peer groups ($n=35$) (multiple responses were possible). On-site supervision by an administrator or colleague was more frequent than was supervision (on-site or off-site) by a person contracted to provide supervision.

Respondents also indicated the percentages of time that seven methods were being used during supervision. The most predominant method was self-report of counseling sessions; more than half ($n=91$) said this method was the only one used. Another 14 respondents indicated that live observation with the supervisor present in the session was the only method used. Other methods (e.g., review of audiotapes or videotapes) typically were used for 10% of the supervisory time.

The last item concerning current supervision allowed respondents to indicate their reason(s) for receiving supervision (multiple responses were possible). Respondents most often said that supervision was required by their work setting ($n=110$) or that they sought supervision on their own for professional development ($n=101$). Others were meeting requirements for various counselor credentials (e.g., state licensure, NCC) ($n=65$) or had sought out supervision because personal issues were affecting their professional functioning ($n=12$). Respondents who wrote in

individual responses said that supervision was part of their evaluation (n=11), was required for third-party payment coverage (n=2), or was necessary for ethical reasons and quality control (n=3).

Work setting. Chi-square analysis indicated significant differences in frequency by work settings, $\chi^2(9, N=192)=56.762, p<.0001$. School counselors were more likely to be receiving no supervision; community mental health counselors and private practitioners were more likely to be receiving supervision at least once a month.

Master's-level supervisors were more typical in schools and community mental health agencies, whereas doctoral-level supervisors were more typical in college counseling centers and private practice. School counselors were least likely and private practitioners were most likely to be receiving supervision from a licensed psychologist, $\chi^2(3, N=161)=38.956, p<.0001$. School counselors described their supervisors as principals or administrators (64.9%) who had no counseling background. A larger percentage of community mental health counselors (52%) were participating in supervised groups than were counselors in the other three work settings (19% for schools, 25% for college counseling centers, and 30% for private practitioners). The largest number of private practitioners (n=20) had established supervision contracts on their own outside their setting.

Little variation in methods was reported by work setting. Live observation with the supervisor present in the session was a more frequent method for school counselors (n=36); co-therapy was relatively more frequent for private practitioners (n=9), although it typically was used for 10% or less of the supervisory time.

School-based counselors' most frequent reason for receiving supervision was that it was a requirement of the work setting (n=58); for college counselors (n=13) and private practitioners (n=32), their desire for professional development. Community mental health counselors endorsed these two reasons fairly equally (n=12 and 13).

Preferred Supervision

In the third section of the survey, respondents described the counseling supervision that they would like to receive at this point in their careers. Responses were calculated for the total group and for subgroups based on work setting, counseling experience, terminal degree, and total hours of post-degree supervision. The four work settings were the same as those identified in the previous section: (a) schools (n=106), (b) college counseling centers (n=31), (c) community mental health agencies (n=25), and (d) private practice (n=53).

Frequency counts were used to determine the other subgroups. The three levels of counseling experience were (a) 0-5 years (n=74), (b) 5-10 years (n=125), and (c) 10+ years (n=161). The two levels of terminal degree were (a) master's (n=213) and (b) educational specialist and doctoral (n=132). The three levels of post-degree supervision hours were (a) 0 hours (n=82), (b) 1-100 hours (n=114), and (c) 101-1,200 hours (n=96).

In the following sections, responses first are summarized for the total sample, followed by those given by counselors in the four work settings. Significant results are then presented for the varying levels of counseling experience, degree level, and amount of post-degree supervision.

Total sample. A majority of respondents (63.1%) indicated that they preferred at least monthly supervision sessions; only 21 (6.2%) wanted no supervision at all. A significant correlation ($r=.128$, $p=.048$) between the frequency of current supervision and preferred supervision was found. Respondents who were receiving more frequent supervision tended to prefer more frequent supervision.

Overwhelmingly, respondents' primary goal for supervision at this point in their careers was to receive professional support ($n=101$ first-choice rankings). Skill-oriented goals (e.g., specific techniques, particular client groups, conceptualization skills) also were relatively frequent first choices.

A large majority (82%) indicated no preference for a male or female supervisor. In written comments, respondents said competency was more important than sex. Most also said that they preferred a supervisor at the doctoral level (66%). Respondents also rank ordered their preferences for a supervisor's credentials. The most frequent first choice ($n=137$) was a credentialed counselor who had additional training in supervision. Licensed psychologist was the second choice ($n=65$). Finally, respondents ranked the professional identity that they preferred in a supervisor. Although the top choice overall was counselor ($n=128$, first preference), a number of respondents indicated that they would like to be supervised by counseling ($n=75$) or clinical ($n=38$) psychologists.

In rankings of preferred supervision methods, self-report was the most popular choice ($n=146$, first-choice rankings). Other relatively frequent first preferences included those with the supervisor observing ($n=73$) or participating as a co-therapist ($n=37$).

In describing their ideal supervisory situation, respondents said they preferred (a) supervision provided by their employers (74%) rather than individually contracted supervision, (b) supervision on-site (81%) rather than off-site, and (c) individual (56%) or a combination of individual and group supervision (39%) rather than group supervision only (5%). They were more varied in their preferences for (a) on-site supervision by a person in the agency who was at a higher job level (32%), (b) on-site supervision by an outside consultant on contract with the agency (24%), (c) on-site supervision by a colleague/peer counselor (22%), (d) off-site supervision by an outside consultant on contract with the counselor himself or herself (19%), and (e) off-site supervision by an outside consultant on contract with the agency (3%).

Work setting. A significant difference by work setting was found for preferred frequency of supervision, $\chi^2(9, N=195)=59.962$, $p<.0001$. School counselors wanted supervision less frequently than did those in other settings; community mental health counselors were most likely to prefer weekly supervision.

School counselors were less likely to prefer a licensed psychologist as a supervisor, whereas community mental health counselors and private practitioners were more likely to prefer a

licensed psychologist, $\chi^2(9, N=162)=25.923, p<.002$. In regards to the preferred supervisor's professional identity, school counselors were more likely to prefer a counselor as a supervisor, whereas respondents in the other work settings were more likely to prefer a psychologist (counseling or clinical), $\chi^2(3, N=148)=22.157, p<.0001$. In descriptions of the ideal supervisory situation, counselors in the various work settings responded similarly, except that private practitioners more frequently indicated a preference for individually contracted supervision rather than that provided by employers (70%).

Counseling experience. Significant differences for preferred frequency of supervision also were found for levels of counseling experience, $\chi^2(6, N=316)=22.707, p<.001$. More experienced respondents tended to prefer supervision less frequently but were not more likely to prefer no supervision at all.

In regards to preferred characteristics of supervisors, the only significant difference found by counseling experience was for professional identity, $\chi^2(2, N=240)=10.602, p<.005$. More experienced respondents were more likely to want a counselor as a supervisor.

Degree level. Respondents' primary goal for supervision was found to be significantly related to degree level, $\chi^2(5, N=278)=23.658, p<.0001$. Master's-level respondents were more likely to want professional support, whereas respondents with advanced degrees were more likely to want supervision as a means of avoiding burnout. The counselor's degree level also was related to degree preference for supervisor, $\chi^2(1, N=301)=26.685, p<.0001$. Respondents were more likely to prefer a supervisor at their own educational level.

Amount of post-degree supervision. Significant differences were found for levels of post-degree supervision hours on preferred frequency of supervision, $\chi^2(6, N=264)=56.323, p<.0001$. Respondents who had received more supervision indicated that they preferred more frequent supervision. Almost half of the "most supervised" respondents (101+ hours) wanted weekly sessions.

Chi-square analysis for supervision hours approached significance, $\chi^2(10, N=244)=21.469, p<.018$ ($p<.0125$ required for experiment wise alpha of .05). The "no supervision" group tended to prefer focusing on learning skills and techniques, whereas the most supervised group tended to prefer focusing on learning conceptualization skills.

Post-degree supervision also was found to be related to preferred degree level of supervisor, $\chi^2(2, N=262)=14.714, p<.001$. The no supervision group was more likely to prefer a supervisor at the master's level; the most supervised group was more likely to prefer a supervisor with an advanced degree. The most supervised group also was more likely to want a licensed psychologist as a supervisor, $\chi^2(6, N=219)=17.224, p<.008$. Finally, amount of post-degree supervision was related to preferred supervision methods, $\chi^2(6, N=258)=23.973, p<.001$. The no supervision group was more likely to prefer direct methods of supervision (i.e., live observation and supervision, co-therapy), whereas the most supervised group was more likely to prefer self-report or audio/videotape review.

DISCUSSION

This survey represents the first national study of post-degree supervision of counselors. Results indicated that existing practices varied and that preferences are related to counselors' work setting and background variables. Response patterns, implications for the profession, and limitations of the study are discussed in the following sections.

First, results of this study provide some empirical support for the belief that counselors, particularly school counselors, receive little supervision after graduating from their counseling program. In addition, school-based respondents were more likely to report being supervised by an administrator who had no counseling background, a practice also found by Schmidt and Barret (1983) in a survey of school counselor supervisors in North Carolina. The more frequent use of live observation in this setting suggests that administrators (principals) may have been observing counselors conducting classroom guidance sessions. Comments of school counselors also indicated that they were sometimes referring to end-of-the-year evaluation sessions as "supervision." Regrettably, these results lend support to an AACD Task Force's (1989) conclusion that "proper supervision of school counselors is lacking at best, non-existent at its worst" (p. 20).

In contrast with current practice, almost every respondent indicated a desire for supervision; a majority wanted meetings at least once a month. Most respondents also agreed on the type of person they wanted as a supervisor: a credentialed counselor who had additional training in supervision.

One implication of the strong preference for a trained supervisor is that opportunities for supervisor training need to be expanded. Few current supervisors have had such training (Hart & Falvey, 1987; Holloway, 1982) and few in-service training programs currently exist (Harvey & Schramski, 1984). Although more counselor education programs are adding supervision courses to their curricula, most are offered only at the doctoral level (Borders & Leddick, 1988). Results of this survey indicate that additional, innovative programs are required to meet the training needs of supervisors in the various counseling work settings.

Existing practices had some influence on preferred practices. In particular, respondents tended to prefer supervision at the same frequency as current supervision. Non-school respondents indicated stronger preferences for regular, ongoing supervision than did their school-based counterparts. This finding may be explained in several ways. First, differences in preferred frequencies may reflect differences in respondents' job descriptions. School counselors' responsibilities are varied, including counseling, program development, and administrative tasks. As a result, school-based respondents' preferences may have reflected a desire for varied types of supervision, only one of which was counseling supervision (cf. Barret & Schmidt, 1986). In contrast, non-school respondents may have been expressing a greater need for counseling supervision because a larger percentage of their work is clinically oriented.

Second, the positive relationship found between current and preferred frequency may be relevant, because non-school respondents were receiving more frequent supervision. These results may suggest that the "habit" of supervision needs to be encouraged from the first day of employment. Counselors who regularly receive supervision may come to value and expect it on

an ongoing basis. Otherwise, it may become difficult for counselors to recognize or "admit" a need for supervisory support and input.

Respondents' current and preferred supervisory method was self-report. The preference for self-report raises some concern, because self-reports may be unreliable, if not biased, accounts of counseling sessions (Bernard & Goodyear, 1992; Borders & Leddick, 1987; Holloway, 1988). Respondents may have considered other methods (e.g., live observation, videotaping) to be too inconvenient, intrusive, or threatening. Overreliance on self-reports, however, jeopardizes the objectivity and effectiveness of supervision.

Of the various background variables, post-degree supervision hours seemed to have a greater effect on preferred supervision practices than did degree level or counseling experience. Of perhaps greatest interest was the finding that those who had received the most supervision since graduation now preferred more frequent supervision.

Two other differences by amounts of post-degree supervision hours reflected changes outlined in developmental models (e.g., Loganbill et al., 1982; Stoltenberg, 1981). The no supervision group's goal was to learn skills and techniques through more direct supervision methods (i.e., live observation and live supervision), whereas the most supervised group wanted to focus on conceptualization skills by using more indirect methods (i.e., self-report and tape review). Based on the models, these preferences are developmentally appropriate: supervision approaches become less direct across developmental stages, and conceptualization skills are considered more advanced than counseling behaviors. The results also provide some additional support for Wiley and Ray's (1986) conclusion that supervised, but not unsupervised, counseling experience contributes to counselor development. As previously suggested by Worthington (1987), counselor growth may depend on "systematic analysis of a counselor's behavior from a different viewpoint" (p. 203).

A majority of respondents reported that they were being supervised by noncounseling professionals, including administrators, psychologists, psychiatrists, and social workers. In addition, a number of respondents, especially those in non-school settings, indicated that they preferred to be supervised by a psychologist. These results are particularly salient in light of ongoing debates about distinct identities and interdisciplinary relationships between the various helping professions (e.g., Gerstein & Brooks, 1990; Ivey & Goncalves, 1987; Robinson, 1990; Steenbarger, 1990; Van Hesteren & Ivey, 1990).

Cross-profession supervision also is relevant to the socialization function of supervision (Bernard & Goodyear, 1992). Bernard and Goodyear believe that the supervisory dyad should be members of the same profession. They cautioned that when two different disciplines are represented, the supervisee incorporates the perspective of the supervisor's discipline. In their view, this process has an adverse impact on the supervisee's development of a professional identity. Any such effects cannot be surmised from this study. This, however, seems to be a fruitful area for future investigations.

Limitations of the Study

Generalization of the results of this study is limited to the extent that NCCs are representative of the population of counselors. In our sample, non-school counselors may have been underrepresented. We have reported results by work setting in an attempt to clarify differences, but some groups were represented by a relatively small number of respondents. A moderate return rate (51.4%) also should be noted. Additional studies are needed to gain a more complete picture of supervision practices in the diverse settings that characterize the counseling profession.

Results only reflect perceptions of the counselors (versus the supervisors) and are based on self-report. They also represent only the views of those counselors who chose to respond to the survey. It is unknown how nonrespondents' current and preferred supervision practices would compare with those reported in this study. In addition, the various data analyses were based on responses to individual items. Such single-item measures may be less reliable than are composite scores.

Finally, it should be noted that some subgroup results may have been confounded. For example, both school-based respondents and more experienced respondents wanted a counselor (versus psychologist) as a supervisor, but school-based respondents also were the most experienced group. Similarly, community mental health counselors and private practitioners were the least experienced but the most supervised groups. Distinct characteristics of counselors in different work settings need to be considered by future researchers.

CONCLUSION

The results of this national survey indicate that most practicing counselors want supervision on a regular basis, as an integral part of their employment, and from a counselor who has had specialized training in counseling supervision. Many of the counselors' preferences, however, do not reflect their current reality. Practicing counselors' "desired outcomes" will depend on the profession's efforts to influence existing practices and to create innovative opportunities for supervisor training.

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