

Review of *Mindfulness and Compassion in Integrative Supervision* by Maša Žvelc and Gregor Žvelc, Routledge, 2024

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Mindfulness and Compassion in Integrative Supervision is a highly accessible and comprehensive guide that will be a valuable resource for both experienced clinicians with years of providing supervision as well as those who are beginning to expand their scope of practice into this area. This model provides a structure that can be applied to the supervisory relationship within most theoretical paradigms, particularly those that are relationally focused and value working with the intersubjective through incorporating many universal themes related to change and growth in human relationships.

In their approach to supervision, Gregor Žvelc and Maša Žvelc describe and model a collaborative stance, not presenting themselves as experts with all the right answers. This empowers supervisees to become more confident in their own intuitions and assessments of what the client needs in order to grow and move through their challenges in therapy. In reading how they work, I know that supervisees would be in safe hands in terms of managing feelings of shame, inadequacy, self-criticism, and vulnerability, which are common, particularly when new to the field. The authors also model presence and involvement (Erskine et al., 1999) through sharing their own intuitions, taking risks to be vulnerable, and conveying their compassion for both supervisees and the clients they present.

To set the stage for supervision, the rights of supervisees are discussed, along with the importance of clear boundaries and contracting how the supervision will be done (M. Žvelc, 2015, 2017). The supervision model applies to work done individually and in group contexts where the dynamics between group members adds richness and complexity. One gets the sense the authors genuinely adhere to the Buddhist precepts of humility and beginner's mind as they approach their work. The foundation of mindfulness principles ties together the theory and practice of this style, and the reader is left confident with the authors' capacity to provide a safe, respectful, and emotionally transparent environment to create the best possible outcome for both the supervisees and the clients they present for consultation.

The first half of the book introduces readers to the guiding principles underpinning this approach. There is an excellent review of the various models that have influenced the authors' thinking, which is refreshing in its clear writing style, concise, and avoids excessive jargon. This includes elements from their own research (M. Žvelc, 2013; Žvelc & Žvelc, 2021) as well as drawing on relationally oriented integrative psychotherapy (Erskine, 2015, 2020; Erskine & Moursund, 2011; Erskine et al., 1999), acceptance and commitment therapy (Hayes et al., 2012), memory reconsolidation (Ecker, 2015, 2018; Ecker et al., 2012), polyvagal theory (Porges, 2011, 2017), and other models. Those who have been trained in the integrative psychotherapy model will be familiar with the practice of attending to the four realms of affect, cognition, behavior, and body in their work. Also familiar will be the "keyhole" model of therapy that illustrates the complex interconnectedness of the methods of inquiry, involvement, and attunement (Erskine et al., 1999).

Practicing psychotherapy can challenge us on a deeply personal level, activating unresolved issues and evoking strong, sometimes painful emotional states. Being sensitive ourselves, we may also resonate with the distressed emotional and physiological states in our clients and experience them as our own. Chapter 4 addresses the importance of emotional and physiological regulation as a key supervisory function and also addresses the concepts of parallel process and physiological synchrony. Being in our observing self can be a powerful tool in managing distress that emerges in a conscious way that incorporates the seven attitudes association with mindfulness described by Kabat-Zinn (1990). Attending to the intersubjective (Stolorow, 1994) is

also recognized as an important part of the supervision process, both in the supervisee/supervisor and supervisee/client relationships. The authors address the reality that dynamics are cocreated and that much is communicated nonverbally that can be made explicit and therefore available for dialogue and reflection. When done skillfully, this kind of dialogue adds in-the-moment potency to the process, which is beneficial for building open-hearted connection, a deeper sense of being seen, and creating the experience of the “I-Thou” described by the existential philosopher Martin Buber (1999).

On a technical note, Žvelc and Žvelc have come up with detailed labels, diagrams, and flow charts that describe their process of supervision. The charts and diagrams, used throughout the book, are helpful in their clarity and ability to capture the essence of practicing supervision. For example, Figure 2.1, “The Diamond Model of the Observing Self,” is an elegant diagram that sets the stage early on for how fundamentally important the state of mindfulness is in the initial phase of treatment planning as we decide in which realm clients are most open to engage with us. An example of a useful flow chart is Figure 8.1, “The Basic Protocol of the Mindful Processing Method in Supervision.” This chart breaks down the step-by-step progression used to process psychodynamic material in supervision and illustrates how paying attention to moment-to-moment detail leads to a more complete resolution of the issue at hand, thereby enhancing the learning for the supervisee, which in turn benefits the client. There is a sense of not leaving any stone unturned as supervisees are coached in working through this material.

The second part of the book is focused on the methodology of delivering supervision. It gradually unfolds a logical sequence that offers a well-organized and structured approach to the complex dynamics of supervision that is disciplined and consistent. The clinical vignettes, which include transcripts, provide an extra dimension by illustrating the processes described earlier in the book as they are modeled in real-life practice. This helps emphasize and anchor awareness of principles introduced earlier and provides a context in which they are applied. It is instructive to read the shifting back and forth between phenomenological experience and observing a metaperspective on the dynamics at play. It offers an opportunity to both experience and describe dynamics such as physiological synchrony (Bar-Kalifa et al., 2019; Marci & Orr, 2006), parallel process (Watkins, 2012), and forms of countertransference. It also offers a way out of being stuck in dysregulated states and experiencing greater self-compassion.

In this approach, it is clear that priority is given to building confidence for the supervisee, and at each step of the way their existing skill and resourcefulness are supported and validated. The collaborative nature of the supervision contract supports building trust and safety, which encourages supervisees to take more risks in bringing up things such as boundary confusion, therapeutic errors, or disturbing countertransference feelings. Likewise, the transparency and vulnerability of the supervisor in being introspective and expressing their own felt sense during the process again equalizes the power balance. Personal disclosures by the supervisor help normalize the experiences of confusion, self-doubt, and distress that can emerge while doing therapy. They also offer good role modeling of when appropriate disclosure can support therapeutic process rather than distract from it. In such an accepting environment, it is easier to bring up problematic issues that may emerge around things such as ethics and standards of practice, which are crucial to address and can be done in a constructive way rather than through criticism. Žvelc and Žvelc also approach repair of relational ruptures that occur in the supervision in a similarly respectful way.

Referencing polyvagal theory (Hill, 2015; Murison, 2016; Porges, 2011, 2017) helps put into the context the phenomena of hypo- and hyperarousal both for clients and therapists and how integration and resolution of trauma responses require discovering a firm grounding in the optimal level of emotional and physiological arousal. It is good to see both hyper- and hypoarousal being acknowledged equally as impediments to growth and change because I think hypoarousal states,

such as affective numbing or dissociation, are more often missed and neglected than those that are more overtly emotionally charged.

Recognizing the mechanism of coregulation between supervisee and supervisor helps remind us how this is a powerful dynamic that we can intentionally harness to benefit both parties in building a stronger sense of connection (Žvelc & Žvelc, 2021). It is a reminder of an important part of our basic nature as social beings and helps create a loving, safe environment in which to develop self-regulation skills. It also models a stance that supervisees can replicate with their clients. Committing to engaging in dialogue about the intersubjective dynamics in supervision is another important skill to model for the supervisee, which they can then introduce into the therapeutic relationship with their clients.

I appreciate the way the authors emphasize self-care as an essential part of clinical practice and supervision. The discipline of self-reflection also comes up in many ways, whether in relation to examining countertransference dynamics or creating time and space for accessing inner feelings and bodily states of the supervisee so they can be examined, expressed, and honored. Through encouraging insight, self-regulation, self-compassion, and maintaining an optimal level of involvement, the overall emotional burden on the therapist is reduced. This helps reduce the drain on our emotional reserves and provides an antidote to compassion fatigue and burnout (Felton et al., 2015; Mohammed et al., 2018; Shapiro et al., 2007; Yip et al., 2017).

Reading this book has given me a new appreciation for the power of mindful presence and compassion in supervision and the potential to incorporate more elements of this into my own practice. It is refreshing to learn something that I believe can enhance my own delivery of both therapy and supervision as I approach 45 years of working in the helping professions. *Mindfulness and Compassion in Integrative Supervision* has inspired me to be more systematic in my approach, to give more emphasis to self-regulation within myself and my clients and supervisees, and to create more space for the exploration of the intersubjective.

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