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THE MUTUAL EFFECTS OF IDENTIFICATION PROCESSES IN THE
SUPERVISORY RELATIONSHIP ON PROFESSIONAL IDENTITY
DEVELOPMENT

City University of New York

PH.D. 1985

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**THE MUTUAL EFFECTS OF IDENTIFICATION PROCESSES
IN THE SUPERVISORY RELATIONSHIP
ON PROFESSIONAL IDENTITY DEVELOPMENT**

by

DANIEL ADLEY MOSS

A dissertation submitted to the Graduate Faculty
in Psychology in partial fulfillment of the requirements
for the degree of Doctor of Philosophy,
The City University of New York.

1985

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This manuscript has been read and accepted for the Graduate Faculty in Psychology in satisfaction of the dissertation requirement for the degree of Doctor of Philosophy.

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Abstract

THE MUTUAL EFFECTS OF IDENTIFICATION PROCESSES
IN THE SUPERVISORY RELATIONSHIP
ON PROFESSIONAL IDENTITY DEVELOPMENT

by

Daniel Adley Moss

Adviser: Professor Laurence J. Gould

The concept of identification in the psychoanalytic literature is reviewed with particular attention to the contexts in which identification--the process of becoming like another person with whom one has a meaningful relationship--may enhance or inhibit identity formation. The empirical studies of the relationship between these two variables are also summarized.

The role that identification plays in the development of a professional identity of therapists in training is described. Identification processes with supervisors may facilitate learning the techniques and values of psychotherapy. Also, to the extent that they are indiscriminating, identifications may support a defensive avoidance of delineating a separate, professional identity. And there are those whose sense of identity is so tenuous that they feel compelled to resist identification, sacrificing opportunities for learning and change.

An empirical study was conducted, surveying 171

psychotherapists and psychoanalysts in training about their experience with one current supervisor. Hypotheses were supported concerning: 1) the positive relationship between a trainee's tendency to selectively identify with a supervisor and the presence of a more advanced professional identity; and 2) the negative relationship between a supervisee's tendency to resist identification and his or her achievement of a professional identity.

Where identification with the supervisor was essentially imitative, there was no apparent association with professional identity development. The sense of adequacy in the clinical role is shown to affect these issues. Other factors, including the role of gender, are examined.

This study points to the importance of distinguishing two types of positive identification, imitative and selective. It is the quality rather than the quantity of identification processes that matters when considering the mutual effects of identification on professional identity development. Whether a supervisee is open to the influence of the supervisor, and how he or she is open, depends partly on the level of professional identity achieved. The implications for professional training and for personal development, particularly in the psychotherapy situation, are indicated.

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The following doctoral programs in clinical psychology provided access to their students for this study: The City College of CUNY, Long Island University, New York University, and The Institute for Advanced Psychological Studies at Adelphi University. Subjects were also recruited from the doctoral program in school psychology at New York University, and from the Jewish Board of Family and Children's Service where Dr. Linda Schoeman was most helpful.

The directors of the following psychology internship programs gave permission to seek subjects from among their interns: St. Luke's Hospital (thanks to Dr. Adam Munz),

Montefiore Hospital, Roosevelt Hospital, Gouverneur Hospital, Bronx Psychiatric Hospital, Bronx Municipal Hospital, Manhattan Psychiatric Hospital, King's County Hospital, Beth Israel Hospital, Downstate Medical Center, Psychiatric Institute, Bellevue Hospital, St. Vincent's Hospital, and Bronx V. A. Hospital.

The following psychoanalytic institutes provided assistance in recruiting subjects for this study: The Manhattan Institute for Psychoanalysis, National Institute for the Psychotherapies, Institute for Psychoanalytic Training and Research, and National Psychological Association for Psychoanalysis.

I wish to express my appreciation to my dissertation committee for their efforts and interest in bringing this enterprise to completion. I offer special thanks to Dr. Larry Gould, who has served me so constructively as a mentor during my tenure at the City College clinical program, always available and responsive to my ideas, whether tentatively articulated or more completely developed. I feel a special affinity for Dr. Irwin Hirsch who, as my first psychotherapy supervisor, respectfully initiated me into the complexities of psychotherapy training and specifically introduced me to the issues related to identification processes and identity development. I thank Sy Slovik, who helped me think through the dynamics of the supervisory relationship that I

hoped to identify empirically, and who sensitized me to the contributions that social workers have made over the years to the study of psychotherapy supervision. Drs. Herb Nechin and Rosalea Schonbar graciously joined my committee during the final stages of my work, and I offer my appreciation to them for taking the time to read and respond to my dissertation.

The long road to the conclusion of this work began with many, many small steps within the library of the New York Psychoanalytic Institute, where an abundant collection and helpful staff facilitated the eventual choice of a topic and the subsequent research of the literature.

Dr. Marc Glassman made a substantial contribution through his able and sophisticated consultation on the statistical requirements of the research. His buttressing of the statistical design enhanced the legitimacy of this enterprise considerably.

There are a number of very special people who directly or indirectly enabled me to complete this dissertation. My parents, Hy and Tova, have responded to the mysteries of my personal and professional development with love and patience. My close friends and colleagues, Drs. Robert Sherman and Gerry Kestenbaum, have provided a sensitive ear and eye throughout the preparation of this thesis. Peter Geffen has long been a cherished mentor and friend, who ushered me into the computer age; this put the writing and

revision of the text firmly in my control. Dr. Arthur Feiner has played a special role in my struggle to make sense of the dynamics of many kinds of relationships, personal, therapeutic, and supervisory. The love and support of my wife, Sandy Divack, helped transform a sometimes lonely and frustrating experience into one filled with meaning and hope. I appreciate the sensitivity and encouragement of all the members of the Divack family.

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CHAPTER ONE

INTRODUCTION

"Identification" is a process, and the outcome of a process, by which an aspect of one person becomes like that of another person to whom he or she is related in a meaningful way. From the infant's oral mode of contact with the environment through the adult's achievement of a mature identity based on healthy identifications with significant people, an actual or fantasied "taking in" from the external world is a basic activity that seems to foster individual development. The role of identification in the development of a person's psychic structure, autonomy, interpersonal relationships, character, and identity, as well as psychopathology, has been described in the psychoanalytic literature.

A clinical and conceptual dilemma remains concerning the effect of identification on the achievement of identity. That is, how do identifications, which may enrich identity yet which imply the adoption of external models, become integrated into a unique identity based on internal standards?

Empirically, there are scant studies of the relationship between identification and identity. Most of the findings to date have demonstrated a positive correlation between the presence of positive identifications with parents, usually the same-sexed parent, and higher scores on measures of identity achievement. Some isolated results, however, have indicated

limitations in the contribution of identification to identity formation.

Identification processes have been associated with intense learning experiences that involve mentoring relationships, such as the supervisory relationship for the psychotherapist or psychoanalyst in training with his or her supervisor. This dissertation will examine the supervisory relationship in order to delineate the nature of a supervisee's identifications with supervisors and to demonstrate their relevance to the neophyte therapist's development of a professional identity. This approach will differentiate various modes of identification that continue in adulthood as responses to the impact of new models, and will clarify their function in enhancing or constricting identity formation.

The thesis of this thesis is that identification is a necessary but not sufficient process in psychological and professional development. In other words, the achievement of a differentiated and cohesive self, in the personal or professional spheres, is inevitably influenced by the models of others and also requires discriminating uses of these models. Identification may spur individual exploration, leading to personal affirmations of experience and meaning. Identification may also serve as a substitute for such personal elaborations. Even such defensive identification may be problematic for persons with severe

differentiation problems, and these individuals may opt for withdrawal from, or opposition to, models. These three trends--selective identification, imitative identification, and resistance to identification--are probably evident to some extent in all people in different situations. The capacity to integrate various identifications into a personal whole or identity depends on the degree to which one has differentiated oneself, which involves psychological risk-taking, the acquisition of knowledge and experience, and other factors.

This dissertation will review the psychoanalytic literature on identification in psychological development and will then focus on the role of identification in the professional development of the psychotherapist (for reasons of economy, "psychotherapist" will signify also "psychoanalyst"). An empirical study will attempt to document the relationships among the various identification tendencies and the achievement of identity in the context of the supervisory relationship and the professional development of the therapist in training. It will be shown that the quality as well as the quantity of identification processes significantly vary depending on the supervisee's sense of professional identity.

CHAPTER TWO

THE REVIEW OF THE LITERATURE

THE ROLE OF IDENTIFICATION IN PSYCHOLOGICAL DEVELOPMENT

In the psychoanalytic literature, the process of identification has been ascribed a crucial role at various stages of individual development. It has been characterized as the key mechanism in the normal formation of psychic structure and in the autonomous development of the ego and the self. It has also been described as a major obstacle to the achievement of autonomy and unique individuality. The goal of this review of the theoretical literature on identification is to clarify under what conditions identification may serve to promote development or, on the other hand, to maintain the status quo.

The review of the literature on identification is complicated by the variety of contexts in which it has been applied. In general, the concept refers to phenomena in which individuals consciously or unconsciously adopt characteristics that are modeled after another person, based on their perception of that person. Some authors consider it to be equivalent with any internalization process from infancy onward. Others hold that identification is constituted only by those identifications which qualify as "selective," based on the establishment of a differentiated self.

Many psychoanalytic writers have attributed a defensive function to identification. Partly in response,

others have questioned if identification ultimately constricts rather than facilitates identity development. However, anxiety is not the only situation that is thought to motivate identification. Identification has also been associated with autonomous strivings for mastery and loving relatedness, and is therefore deemed growth-promoting.

In addition to the issues introduced above concerning the nature and quality of identification processes, there is also discussion in the literature of the absence of normal identification processes, specifically the resistance to them, or other extreme tendencies including totalistic identifications. These are consistently related to abnormal development, the lack of a well-defined sense of identity, and a defensive effort to create or maintain some, albeit diffuse, sense of self. Thus an individual's pattern of identifications may represent the interaction between how the person experiences himself or herself (i.e. identity) and how he or she mediates the influence of others.

Implicit in most, and explicit in some, of the discussions of identification are questions related to the qualities and personality of the model for identification and how these aspects affect the identification process.

The presence of identification processes in the analytic process or therapeutic situation, where many of the insights about this subject have been developed, is a

related issue that will be dealt with only briefly here.

Identification and the Development of Psychic Structure

From the point of view of classical psychoanalytic theory, the development of psychic structure, emerging from intrapsychic conflict, is a critical process in normal development and identity formation (Andresen, 1980).

"Psychic structure" refers to the three agencies of the mind that Freud defined--id, ego, and superego--and the grouping of similar functions and aims within each agency (Schafer, 1976). According to Freud (1923, 1924), the resolution of the Oedipal phase is necessary in order to promote the differentiation of the ego from the id and the establishment of the superego system. He described the essential role of identification in this process. Meissner (1970) summarized Freud's contributions which emphasized identification as a primary mechanism for structuralization.

Freud's Conception of Identification

Freud (1921) called identification "the earliest expression of an emotional tie with another person" (p. 105) prior to the establishment in the child's mind of the distinction between oneself and another person. This process is based on the infant's predominantly oral, incorporative mode of relating to the world (1917). Following the achievement of "object-relationships," the child's development, particularly of the ego, is promoted

through identifications which serve as substitutes for abandoned infantile attachments (1923). Freud (1921) observed that the ego is "enriched" with the properties of the lost object or person (p. 113). In this way, the child can successfully traverse the conflict-laden Oedipal phase, and the "super-ego...the most important and decisive portion" of the ego's character, is formed (1933, p. 91). Incestuous desires are transformed, the sexual character is consolidated, and a guiding conscience is installed. The source of this explanation of a critical stage in childhood was Freud's observation that depressed adult patients reproached themselves as if they themselves were the loved person that had been lost (1917). Freud termed this a "narcissistic identification," and his conception of identification in superego formation was based on the prototype of the "primary identification" which precedes object-cathexis.

The essential point concerning the development of psychic structure is that identification facilitates the relinquishment of infantile ties, and that through identification, the object is internalized, particularly the parents' superego which serves as a model for the child's superego. (For additional summaries of Freud's view of identification, see Andresen, 1980; Koff, 1961; Schafer, 1968).

Regression or Progression?

One important issue that emerged from Freud's approach to identification processes is whether or not identification, particularly in later, adolescent and adult, development is a regressive phenomenon. Fairbairn (1952) suggested that it is when he defined identification as essentially a narcissistic, infantile process which precludes independence and mature relationships. Meissner (1970) disagreed that these later identifications need be regressive, citing the essential difference between the primary identification which precedes object relationships and is objectless, and the secondary identifications which, although narcissistic, occur as a function of an object relationship (e.g. following a loss or separation). Meissner noted that Freud did not distinguish between these two forms of identification.

Internalization Processes and Structure Formation

Several authors have attempted to define and differentiate several related processes, or concepts, which involve a "taking in" from the outside world with resulting changes in the person (Koff, 1961; Meissner, 1971; Schafer, 1968). Identification has been subsumed among the class of "internalization" processes, reflecting a relatively advanced stage of development. It is distinguished from, yet also involves, its conceptual relatives, "introjection" and "incorporation" (Schafer, 1968). According to Schafer,

introjection refers to a process by which an external object becomes an inner presence set apart from the subjective self, whereas in identification, the self changes to resemble the object. Incorporation was defined as a wishful set of ideas rather than an internalization process per se, involving the fantasy of a relationship with an object based on its internalization.

Prior to the capacity for object-relationships, during the stage of the undifferentiated ego-id of infancy, internalization processes (and externalizations) are "boundary-creating" processes (Loewald, 1962) that promote the differentiation between "inner" and "outer," between "self" and "object" (Klein, 1932, 1959; Meissner, 1971; see also Andresen, 1980).

Selective Identification and Object Relationships

In addition to facilitating detachment from infantile objects, Jacobson (1964) indicated that identification enhances new kinds of relationships. Freud (1923) had noted, with little elaboration, that relationships might also be conserved at the same time that an identification occurs. This may be what he had in mind in terms of an "hysterical identification" that occurs in the transference neuroses, where love is represented by the patient's experience of having something in common with the analyst (1917, p. 250). Jacobson carried this point further, making a distinction between the narcissistic identifications of

the pre-Oedipal, undifferentiated period and the "selective identifications" of the Oedipal period. The latter are not regressive, do not replace object relationships, and require the prior establishment of object and self constancy. Whereas the earlier process is linked to primitive fusion with love objects, the partial identifications are focused on rivals and involve more aggressive feelings, such that "the totality of other persons and of the self can be experienced" (p. 66).

Schechter (1968) stated that identification, by definition, implies increasing structural differentiation, even if the process involves a temporary re-fusion. Balint (1947) described identification as a bridge from narcissism to object love. Hendrick (1951) pointed out that even though it is initiated by conflict, identification contributes resources to the individual, including the capacity for relationships, tenderness, and giving.

Jacobson (1964) wrote that infantile ego formation rests upon the identifications which "originate in the enduring psychobiological dependency of the child on the parents" (p. 172). The internalization of the "good object" helps the young child cope without the mother (Mahler, Pine & Bergman, 1975). "Selective identifications" with the parents during the rapprochement subphase help resolve conflicts between the child's wishes

and parental prohibitions, leading to individuation, secondary narcissism, the development of psychic structure, and some independence for the toddler, if ambivalence is not too great (McDevitt, 1979; McDevitt & Mahler, 1980). Here "identification" is used to describe an early, pre-Oedipal process that primarily affects the ego.

Later Identifications and Structural Change

Identification processes continue throughout the life cycle, and they play an important role during adolescence when they alter the ego system and particularly the "ideal ego" (Freud, 1917, p. 429). The superego is modified by "the influences of those who have stepped into the place of parents--educators, teachers, people chosen as ideal models" (Freud, 1933, p. 63). Jacobson elaborated on the further development of psychic structure in adolescence that modifies the superego and promotes the development of a realistic "ego ideal." Freud (1933) wrote that identifications with "later parents" primarily affect the ego and character formation; "they no longer influence the superego, which has been determined by the earliest parental imagos" (p. 64).

Jacobson (1964) observed that identification with parents and authority figures is a primary mode of adaptation in adolescence rather than the use of "direct and immediate contact" (p. 172). New identifications with parents as sexually active persons facilitate adolescent

sexual behavior. On the other hand, according to Jacobson, identifications with peers diminish the influence of parental identifications and "lead to the final establishment of ego and superego autonomy" (p. 182). She described the gradual integration into the ego of "selective enduring, consistent identifications" which contribute to secondary ego autonomy and identity (p.86).

Erikson wrote that "introjection, identification, and identity formation (are) the steps by which the ego grows in ever more mature interplay with the available models" (1968, p. 159) and that only the ego "could accomplish the selective accentuation of significant identifications throughout childhood and the gradual integration of self-images in anticipation of an identity" (1959, p. 147). Identification continues to play a role beyond adolescence in the development of personality, particularly in the assumption of parental and professional roles (Erikson, 1959; Jacobson, 1964).

Identification as a Defense

Andresen (1980) cited numerous psychoanalytic authors who followed Freud's model and have associated processes of identification with experiences of loss and conflict. They have focused on the defensive function of identification in coping with frustration and anxiety.

Fenichel (1945) elaborated Freud's idea of identification as a primitive process involving

introjection that is akin to swallowing, an "affirmation of instinctual satisfaction, not a defense against instincts;" only with the discovery that such an expression of "love" destroys objects "as independent things in the external world" does the process come to serve also destructive and defensive aims (p. 147).

Sadistic impulses in the infant create anxiety which is defended against through identification with a giving object, according to Klein (1929; see DeSaussure, 1939). The toddler protects himself or herself from the anxiety stemming from the dawning awareness of separateness by internalizing the good object and re-creating a symbiotic union with mother (Mahler et al., 1975). During the Oedipal period, unacceptable sexual and aggressive feelings and thoughts are repressed and transformed via identificatory processes, in Freud's formulation (1923). A. Freud (1946) termed "identification with the aggressor" for the child's handling of rivalrous feelings and the fear of retaliation during the Oedipal phase.

Koff (1961) attempted to present a precise definition of identification, partly based on Freud's ideas, that a "true identification" is a result of a "'true' object-relationship, with a renunciation of that object in the external world" (p. 369). Therefore, in his view, where identification occurs during the course of a relationship, it acts as a defense against the

relationship, denying the separate existence of the object. He acknowledged that it may also be serving as a preliminary attempt to form a relationship.

In early development, identification defends against frustration and "solves" anxiety situations (Hendrick, 1951). Jacobson (1964) asserted that the superego and the ego ideal, and their underlying identifications, are "solutions" for conflicts of ambivalence. She observed that to the degree that identifications acquire defensive functions they help the child to tolerate frustration and loss. Schafer (1968) wrote that ambivalence is intimately related to concerns about loss and that all identifications involve ambivalent feelings, reinforcing the connection between loss and identification. Schechter (1968) described the specific case in which identification with the parenting function to cope with traumatic separations leads to "pseudo-independence."

In adolescence, identification defends against role or identity confusion (Erikson, 1959, 1968). Brenner (1973) summarized various motives for identification, characterizing the adolescent's tendency toward idolization as an attempt to assert an identity through identification with another who is perceived as powerful and admirable.

With the exception of the situation described by Schechter, the defensive function of identification has been considered an aspect of normal development by the

authors cited. However, the defensive use of identification is also evident in neurotic and psychotic processes. Schecter (1968) distinguished between the primitive, narcissistic identifications which involve dedifferentiation and the essentially progressive identifications which may involve a temporary re-fusion yet ultimately result in the further differentiation of the self. Meissner (1971) described the regressive process as identification without internalization that is found in "as-if" characters. Deutsch (1944) wrote that the weaker the child's ego, the more it resorts to identification with adults in its adjustment to the world.

Such defensive, pathological identifications have been highlighted in the treatment situation. Lampl-De Groot (1956) depicted the magical features of such narcissistic identifications, by which the analyst is alternately idealized and devalued; the grandiosity of the patient is maintained in this way. Beres (1981) also wrote of the patient's need to merge, to identify with others, to lose himself or herself in others, which is achieved through idealization of the therapist.

Identification and Autonomous Development

The function of identification processes in the autonomous development of the individual is a second general way in which the effect of identification on identity development has been discussed. From this point

of view, identification is not motivated by conflict; rather it reflects an innate drive towards growth that enhances independence and ego functioning. This line of thinking has been pursued mainly by ego psychological theorists; it can be traced also to some of Freud's ideas.

Jacobson (1964) differed from Freud when she asserted that it is not the object, but certain aspects of the object, which are renounced in normal identification, particularly during the Oedipal period. Schechter (1968) built on this notion, and on Freud's (1923) statement that identification and object relationships can occur simultaneously, in order to characterize identification as distinct from object loss, growing out of conflict-free, individuating processes. He added that regardless of origin, conflictual or autonomous, identification facilitates separation and independence. Schechter called identifications "the building blocks of identity," relatively stable psychic structures, the results of identification processes in the ego or self with emotionally significant others (p. 49). He noted that these need to be integrated in identity formation.

Pine (1979) emphasized this process in development, highlighting that "healthy identification" depends on the cognitive achievement of self-other differentiation. He wrote that the child "individuates largely by taking into himself characteristics of significant others in his life,

from whom he has differentiated" (p. 226). Pine remarked on the apparent "conceptual irony," and he explained that individuation "involves becoming a differentiated self and not simply being different from" (p. 239).

Others have discussed the role of identification in autonomous development. McDevitt (1979) emphasized that early identification with the father is a critical factor in facilitating the development of autonomous behavior. Schachtel (1959) discussed how imitation, which may reflect identification processes, expresses the drive to seek new experience, to master, and to be responsive. Meissner (1972) distinguished identification from introjection, the former reflecting conflict-free tendencies of the ego toward "self-integration and meaningful relatedness" and consistent with the development of mature object relations, and the latter involving "instinctual energies" with defensive purposes (p. 241). Kernberg (1966) wrote that personal life is enriched by the internal presence of selective, partial identifications representing people loved and admired in a realistic way without indiscriminate internalization. Erikson linked the identifications of adolescence with "free role experimentation" that facilitates identity formation (1959, p. 111; 1968, p. 156).

From a different perspective, Thompson (1964) articulated the contribution that identification can make to the development of autonomy. She noted that "critical

(i.e. discriminating) attitudes" naturally develop, particularly in the context of numerous identifications, conflicting ideologies and attitudes. Schonbar (1967), following this tradition, discussed the autonomous integration of identifications in terms of the self.

Identification and Learning

Brenner (1973) indicated that identification processes are a normal part of the process of learning basic skills. Identification as a means toward learning and mastery has been distinguished from identification as a mechanism of defense (Fenichel, 1945; Hendrick, 1951; Koff, 1961). Hendrick (1951) suggested a close correspondence between identification and the learning process, noting that maturational abilities are developed through identification with cathected objects. He underscored the permanence of personality attributes which are assimilated in "ego-identification" that result from the pleasures of imitation and reflect the impact of other people. Koff (1961) also pointed to the similarity of learning and identification. He distinguished two types of learning, one involving a "genuine modification of capacities," and the other, imitation of external aspects of the object (p. 368).

While noting the absence of an adequate psychoanalytic theory of learning for adults, Zabarenko and Zabarenko (1974) suggested that identification is a primary mode of learning. However, a "narcissistic regression" may be

necessary in order to activate this natural tendency (p. 342). According to Levinson et al. (1972), identification with mentors is necessary for individuation in mid-life, and such significant relationships tend to end in separation, which enhances the process of internalization.

Recent Views of Identity Development

Interpersonal Perspective

There are a number of psychoanalytic theorists who have criticized the central place accorded identification in the classical, and even the ego psychological, model of development. These have generally followed an interpersonal orientation to development.

Singer (1965) raised important questions about such a framework which links individual development with the adoption of external norms: "Even though Freud (1909) had commented earlier that the emancipation of the child from parental authority is necessary for the achievement of personal growth he insisted that the renouncing of instinctual impulses proceeded precisely through identification with the culture and its most potent transmitters" (p. 161). Singer wrote that identification limits the articulation of a personal point of view. Schonbar (1967) echoed this critique, asserting that the traditional conflict- and defense-related view of identification is based on a drive-reduction, homeostatic model which stresses self-maintaining measures and which

overlooks the potential of identification for self-enhancement. She cited Rogers (1951) who focused on the traditional emphasis on superego identifications and cautioned that these prevent contact with other models and thus inhibit the possibility of separateness.

Fromm (1941) was among the first to write from this point of view. He described how identification processes may serve the flight from the anxieties associated with freedom and responsibility. He stressed the importance of developing a "spontaneous relationship...that connects the individual with the world without eliminating his individuality" (p. 30). Wolstein (1972) underscored the articulation of one's personal experience as the key to identity development.

Gruen (1968) characterized identification as a barrier to the growth of the self. It may serve as a defense against authenticity, in order to achieve strength, at the expense of internal strivings. He specified that good social and occupational behavior is insufficient proof of ego integration. Grotstein (1982) emphatically wrote that all identifications with an object are usually pathological and crippling of the potentialities of the self; they are a "defensive, temporary scaffolding of internalized objects which ultimately must be jettisoned" (p. 74-75). Idiosyncratically, he suggested that good objects are not identified with; instead good objects give good

experiences.

Reservations about Identification: More Traditional Viewpoints

The authors cited above who highlight the limitations of identification on identity development come mainly from an interpersonal orientation that emphasizes the development of the self. Others, however, with a classical or ego psychological psychoanalytic framework, have also indicated the constricting effect of identification, particularly in terms of the loss of autonomy.

Freud's view of identification acknowledged the absence or loss of personal freedom as the cost of mature development: "Each individual...is bound by ties in many directions, and he has built up his ego ideal (superego) upon the most various models...and he can also raise himself above them to the extent of having a scrap of independence and originality" (1921, p. 129). Brenner (1973) agreed that superego identification helps the ego at the cost of subordinating the self to one's parents, resulting in a loss of autonomy. Although the ego, over time, becomes less "feeble" and more resistant to the influences of superego identifications, Freud (1923) concluded that "the mature ego remains subject to its domination" (p. 28).

Kohut (1971, 1977) stated that the persistence of gross identifications is equivalent to the presence of a "foreign self." Rappaport (1958) warned of the dangers of

identification, asserting that opposition to gross identification is an important ego function. Erikson (1959) portrayed the overidentification with the heroes of cliques and crowds in adolescence which may lead to a loss of identity. Schechter (1968) distinguished between passive-submissive identification with an authoritarian model (e.g. the therapist) and growth-promoting identifications. A. Balint (1947) emphasized that identification is a derivative of narcissism and thus is a primitive method of recognizing external reality; she added that love and understanding are the more adaptive ways to enter into relation to reality.

Singer (1965) conceded that, increasingly, those from the more traditional schools of psychoanalytic thought have paid greater attention to autonomous development and the limitations of identification. He specifically credited Erikson with placing the achievement of a personal identity at a stage beyond that of successful identification, although he found that Erikson continued to stress identification as a means toward resolving identity questions. Erikson (1959) wrote that "identity formation...begins where the usefulness of identification ends" (p. 113), and he also described a process of identity formation which emphasizes reciprocal recognition with society, rather than the achievement of uniqueness: "to resynthesize childhood identifications in a unique way, and

yet in concordance with the roles offered by some wider section of society" (p. 112).

Identification and the Enhancement of Identity

To many of the adherents of the interpersonal viewpoint, the development of unique individuality is the central task of development. Schonbar (1967) called it the "self-enhancing" model, and she distinguished healthy from unhealthy identification. The value of identification is not negated altogether, but its limitations are defined. The transformation of the superego structure is considered one of the essential goals of psychotherapy, and it may occur through identification (with the "analyst's benign superego attributes"), according to Schechter (1979), who differentiated the "loving superego" in opposition to the "persecuting superego" (p. 364).

Searles (1965, 1966) made explicit the possibility and desirability of identity-enhancing identification. His ideas synthesize two major theoretical trends: identification as a mechanism in structure formation and as an autonomous process which promotes self-enhancement. According to Searles, if "a symbiotic relationship with a predominantly loving mother" is internalized, then "the more structured aspects of identity (i.e. identifications) develop not primarily as imposed restraints...but facilitate the release of energies and capacities" (1965, p. 42). This "symbiosis-based identity" is marked by openness of

perception and experience, and by engagement (1966, p. 70).

Kohut's major works (1971, 1977) contain the author's theory of development, particularly in relation to persons with narcissistic disorders. These emphasize the role of identification processes in the formation of a "firmly cohesive nuclear self (which) will give us the conviction that we will be able to maintain the sense of our enduring identity...." (1977, p. 182). He wrote that the Oedipus complex cannot be resolved without "the presence of a previously consolidated self" (p. 239). The two main conditions for such an achievement involve the child's relationship with his "self-objects" (p. 173); that is, "adequate mirroring from the mother" (p. 60) and the "father's tolerance of idealization" (p. 19). The latter idealization facilitates the child's ability "to acquire (i.e. to integrate into his own self) certain of his father's abilities" (p. 11). "Attainment of psychological self-sufficiency (results from) transmuting internalization of the functions of the idealized father" (p. 44). Kohut emphasized that "optimal frustrations" precipitate de-idealization and enhance self-esteem, which seems related to Freud's linking of identification with loss, and the resulting spur to growth.

Object Relations Theory

M. Klein introduced the concept of "projective identification" in 1946. She noted both a connection and a distinction between introjection and identification in Freud's (1917, 1923) discussions. She asserted that there are "projective mechanisms which are complementary to the introjective ones" (1955, p. 142). These involve "splitting off" aspects of the self and projecting them "into" the object. In infancy the projection of good and bad aspects of the self and then their re-introjection serves several functions, according to Klein. They are an ego defense against anxiety, particularly in relation to persecutory fears. They enhance the integrative capacity of the ego and improve object relations, thanks especially to the interplay of loving feelings. These processes may also weaken aspects of the ego if projections, of good or bad aspects of the self, are excessive.

Ogden (1979) also ascribed a communicative purpose to the "induction" aspect of projective identification by which the object comes to experience feelings similar to those being projected by the individual. If the object can "mirror" or model the handling of these aspects, this may facilitate the self's re-internalization of the projected parts in a more integrated manner. Whether the parts of the self which are re-internalized are poorly integrated and introjected as a foreign presence or genuinely modify the

person's "motives, behavior patterns, and self-representations" through mature identification depends on the person's maturational level (Ogden, 1979, p. 367). "The process of splitting off parts of the self and projecting them into objects are thus of vital importance for normal development as well as for abnormal object relations" (Klein, 1946, p. 9).

Projective identification is a complex process that involves an interaction between the intrapsychic and the interpersonal realms of experience. Ogden (1983) traced the development of the "British School," beginning with the work of Klein and the ideas she derived from Freud, and continuing with the elaborations of Fairbairn (1952), Winnicott (1965), and Bion (1959), in articulating the concept of internal object relations. He differentiated their approach from the classical model of Jacobson (1964) and others whose ideas of object relationships are focused on self and object "representations." He described these "representations" as fantasies that lack the dynamic impetus of the "internal objects" of the British school of object relations.

Klein (1955) noted that the process by which people identify with others because they have attributed their own qualities to them had not been examined previously. She emphasized the "narcissistic nature" of infantile, introjective and projective processes because when loving or

hateful parts of the self are projected into another person, the latter is responded to largely in terms of the self's qualities not the other's independent attributes (1946, p. 13). Ogden (1979) depicted the individual's subjective experience of connection in projective identification and noted the blurring of boundaries between the self and the object. Referring to Winnicott (1975), Ogden described this situation as a "transitional form of object relationship" (p. 363).

In other words, according to this viewpoint, identification is not simply a "taking in" of the qualities of others that are seen as desirable or as defensively necessary. Rather, it is a process which originates with the self, involves positive and negative aspects that are projected and re-internalized, and has defensive as well as self-enhancing potential depending on many factors, notably the intensity of the early splitting processes and the quality of the model's responses. This object relations perspective supports the view that identification represents a complex phenomenon or set of phenomena, and that it is not a substitute for mature identity or relationships although it may help to prepare for their achievement.

The Inability to Identify

The absence of identification has been linked with serious psychopathology. The "negative identity" (Erikson, 1959, 1968) or "the struggle against identification" (Greenson, 1954) reflect processes characteristic of individuals who seem unwilling or unable to identify, especially consciously, because it seems too threatening to their tenuous sense of identity. In addition to oppositional or negativistic attitudes, such people alternately effect "totalistic," if transient, identifications to compensate for their diffuse identity or lack of self-delineation (Erikson, 1959, 1968). These are evident in persons with "as-if" and other borderline conditions (Deutsch, 1942, 1944); Schechter (1968) called these "pseudo-identifications" (p. 74). Cult phenomena may also be relevant to this point.

Where self-delineation is missing, patients resist forming an identity and fear identification. What appears to be a conscious identification with the opposite of what one's models (e.g. parents) would approve of tends to reflect an unconscious positive identification because of the underlying structural likeness (Schechter, 1968). The negative identity represents an effort to "stamp out" parental influence through the struggle against identification and emotionality (Greenson, 1954; Schafer, 1973), which only reinforces the adolescent's experience of

emptiness (Erikson, 1959). Erikson depicted the adolescent's "total identification with a negative identity" (1959, p. 132; 1968, p. 176). He also described "identity resistance" in connection with fear of the analyst's influence.

The presence of hostile introjects prevents identifications from taking place which promote independence and a sense of identity (McDevitt & Mahler, 1980). Jacobson (1964) stated that it is specifically masochistic identifications which are struggled against, interfering with ego development and identity formation (p. 86). Kernberg (1966) wrote that extreme affects in early development cause splitting to occur, which inhibits identification with an object. Jacobson (1964) described the dilemma of such persons who, because of an excess of aggression, regress to states of fusion, causing the loss of identity. In such patients, she stated, likeness is feared because it threatens to destroy the self and difference is feared because it may destroy the object (p. 69).

Blos (1962, p. 190) quoted A. Freud (1955, p. 176) concerning late adolescence when the revolt against parents and the rejection of identification with them may lead to "reversals of superego and ego attitudes." This highlights Erikson's point that "conflicting identifications" (1959, p. 133) are at the heart of the "identity crisis" of

adolescence and that these must be integrated into an ego identity (1959, pp. 118-127).

The Quality of the Model for Identification

Implicit in the discussion of the effect of identification processes on development, in identity formation, and in psychoanalytic treatment, is the significance of the qualities of the model to be identified with. The "good-enough" mother (Winnicott, 1965) exemplifies this. Mahler and McDevitt (1980) emphasized the importance of the quality of the maternal representations. Brenner (1973) noted that excessive frustration or overindulgence inhibits identification. Searles (1958) has written that the parental model must be admirable and must be capable of tolerating and "welcoming" the child's admiration (p. 232). In a related vein, Kohut's (1971, 1977) developmental views highlighted the mother's mirroring capacity and the father's idealizability, and he similarly stressed these qualities in connection with the analyst's position towards the analysand. He cautioned that idealization in the treatment situation should not be sought because this leads to gross identifications. Frank (1961) also described the importance of the patient's belief in the healer's powers, as well as the healer's own self-confidence.

In addition to allowing for the child's experience of closeness through mirroring and idealization, Searles

(1966) emphasized the role of "identification with the parent's courage to be an individual" (p. 58). Searles' approach thus encompasses the dual and dialectical importance of relatedness and separateness as they are reflected in identification processes in the course of identity formation.

Identification and Identity: Empirical Studies

Among the first studies which examined the relationship between identification processes and identity achievement in late adolescence, most found a significant relationship between the presence of positive identifications with parents, usually the same-sexed parent, and higher scores on various measures that indicate identity achievement. For example, low identification was related to maladjustment in two studies: Deitz (1969) found that delinquent males are less identified with their parents than non-delinquents; and Klein and Gould (1969) demonstrated that low-alienated women identified more with their mothers than their fathers, and that alienated women identified with neither parent. Howard and Kubis (1964) reported findings that ego identity is positively related to maternal identification, in females. Allen (1976) held that her study partly confirmed Dignan's (1965) results showing a positive correlation between identification with the mother and the achievement of identity, in late adolescent women.

One of the evident shortcomings in this research is the relative dirth of documentation of male trends. More importantly, while those empirical studies have supported the hypothesis that positive identification is related to healthy identity formation, little attempt was made to demarcate the limits of identification in its contribution to identity development, as has been indicated in the theoretical literature. Allen (1976) did note that "the theoretical literature would not predict a direct relationship between the degree of parental identification and identity achievement in late adolescence" (p. 22). In fact, in an isolated finding, Dignan (1965) observed that moderately identified subjects had higher identity scores while subjects at the two extremes of identification had lower identity scores.

Identification and Independence

Singer (1965) reported several studies which he felt lend support to his ideas about the detrimental effects of identification on the development of identity or unique individuality. In one, Eimer (1964) compared the variables, "independence" and "identification," to determine which one had a more powerful effect on a person's perceptual and conceptual abilities. Subjects filled out a questionnaire (Hirsch & Singer, 1961), describing social conflict situations, without enough information to make a meaningful decision about which

character in the story was reasonable. Subjects who refused to choose were thought to reflect an independent identity, and those who sided with one or the other characters in the story were assumed to be demonstrating a tendency toward identification. For Eimer, the measure of identification was also based on the degree of similarity between subjects' responses and how they thought their same-sexed parent would respond.

Independence proved to be the stronger factor in its effect on both capacities. Whereas high identification seemed useful for the accomplishment of the more sophisticated concept formation task, it was of little importance in the more basic perceptual task. Subjects who "rejected the identification...on the basis of an independent choice" did very well perceptually and moderately well conceptually, and those who "blindly identified" did poorly on both tasks (pp. 60-61). Eimer assumed a strong relationship between perceptual and social independence. He suggested that identification is useful because it provides a "stable framework" from which to judge, but autonomy and independence are the basis of separate relatedness (see also Schachtel, 1959).

Identity Status Studies

There is a large body of research on ego identity achievement, primarily in late adolescence, that has been tied to the Identity Status Interview developed by Marcia

(1966, 1967) and Marcia & Friedman (1970). The major criteria for identity achievement are evidence of "crisis" and of "commitment." In other words, persons who have actively questioned their options concerning career, ideology, religion, and sexual relations have experienced "crisis," and those who have subsequently taken a firm position on these issues have made a "commitment." The four identity statuses have been related to numerous personality variables. The outcome of a few studies bear directly on this examination of identification processes.

Josselson (1973) conducted a clinical interview with college senior women in order to gather, among other information, "identification histories." The subjects were also grouped according to their identity status. The "foreclosures," who have made a commitment in the absence of crisis, were "unique in forming positive, unambivalent identifications with their mothers" (p. 45). The identity "achievers" and "moratoriums," who have defined or are seeking to define a unique identity, revealed ambivalent identifications with their mothers. Finally, the identity "diffusion" group was marked by a "failure of identifications...plagued by punitive introjects" (pp. 45-46).

Allen (1976) determined identification on the basis of the profile similarity between her female subjects and their mothers, both groups filling out the Interpersonal

Adjective Checklist (Laforge & Suczek, 1955). Her results were somewhat different from Josselson's. Again, the diffusion group scored lowest on identification. The identity achievers scored highest here on the identification measure, with foreclosures and moratoriums in the middle range. Allen concluded that identification is necessary for identity attainment, and a disruption of identifications occurs in those who are in the process of forming an identity (the moratorium group) which must ultimately be re-integrated.

In Williams (1980), identification was measured on the basis of a self-reported awareness of similarity. Identity achievers identified more with liked teachers than non-achievers; and identity achievers identified more with peers and with teachers than they identified with their parents. Also, those who did not achieve an identity identified most with their mothers and with peers. These results are in line with the theoretical and clinical discussions that, as people develop, parental identifications are replaced by new identifications.

The research on the interaction of identification with identity has followed two patterns. In one, the presence of identification has been positively related to indicators of healthy development. In the other, the dissolution of previously held identifications, and other manifestations of independence, have been associated with maturation. Most

of the measures of identification have been designed to determine the degree of similarity between the subject and his or her parent(s). Thus, the study of the relationship of identification tendencies with identity formation has been focused on the current status of the late adolescent's early identifications.

IDENTIFICATION PROCESSES IN PROFESSIONAL DEVELOPMENT:THE INFLUENCE OF THE SUPERVISORON THE PSYCHOTHERAPIST IN TRAINING

Becoming a psychotherapist is a complex process that involves more than learning a set of skills, or a technique, because the work draws considerably from the personality, and depends heavily on the personal health, of the practitioner. Thus, book learning and practical experience alone are not considered adequate for the preparation of this demanding professional role. In addition, two kinds of relationships are instrumental in the development of the professional self of the psychotherapist: the psychotherapeutic and the supervisory.

Many of the issues that have been raised in the theoretical literature on identification processes in psychological development also pertain to an examination of professional development, particularly that of the psychotherapist. The consensus in the literature on the development of a professional identity in beginning therapists is that identification processes (with supervisors) are inevitable, useful, and necessary for the learning of the techniques, values, and goals relevant to the role and profession of the psychotherapist. The absence of identification may signify a resistance to the influence of the supervisor, inhibiting learning and

change. However, identifications that involve indiscriminating imitation may only constrict the outcome of the supervisory experience. Importantly, not all the factors which bear on the identification process are "located" in the beginning therapist's personality or stage of professional development; the personality needs of the supervisor, and his or her specific capacity to be an appropriate model for identification, critically affect the supervisee's identificatory responses. Openness to the influence of various models and the capacity to selectively identify with, and to integrate, them are critical components in the development of a unique, professional identity.

Barnat (1980) called the supervisory relationship ideal for the study of identification. What follows is a survey of theoretical, phenomenological or anecdotal, and empirical explorations of the supervisory situation, the identification processes that occur for the therapist in training in relation to individual supervisors, and the role that these play in the development and articulation of a professional identity.

Purposes of Supervision

Hess (1980) defined psychotherapy supervision as a relationship in which one person's skills in conducting therapy are enhanced by the interaction with another person, effecting cognitive and experiential changes in the

former. According to Langs (1979), the objective of supervision of the psychotherapist (or psychoanalyst) is primarily educative--to teach the basic techniques of therapy directly and to expose the supervisee to useful literature.

The technical requirements for the trainee involve integrating theory and practice so as to utilize understanding of human behavior to facilitate change (Burgum et al., 1958), acquiring a "special human attitude" in order to optimally respond to patients (Grotjahn, 1949), and increasing self-awareness and refining one's self "as an instrument with which to treat the patient" (Gaoni & Neumann, 1974). Wolstein (1972) believed that the "freedom to experience" is a necessary attribute of the well-functioning therapist, beyond the perfection of technique. Langs (1979) asserted that secondary goals of supervision should be the promotion of the student's desire to do clinical work and the encouragement of a "constructive introjective identification with a well-functioning supervisor" (p. 83).

DeBell (1963) noted that in addition to a simple didactic mode of supervision, some approaches emphasize the patient, the patient-therapist process, or the therapist (which, in the extreme case, approximates therapy for the therapist). Ekstein and Wallerstein (1958) identified both a range of "learning problems" for beginning therapists in

their work with patients, and a host of "problems about learning" in their work with supervisors. One of the tasks of supervision is to address the feelings of the student where personal needs and anxiety are interfering with the learning process or the therapeutic process (Burgum et al., 1958).

Achieving a sense of professional identity and responsibility, defining a set of values that direct one's work, are learning issues for all professions (Towle, 1954; Weiner & Kaplan, 1980). Ekstein and Mayman (1957) characterized the experience of being in training for the psychotherapeutic profession as a "professional moratorium" during which the student may explore and experiment with various possibilities for the role of clinician with the goal of consolidating a set of skills, concepts, and values within that role. Developing one's independence and capacity to think for oneself are related goals (Burgum et al., 1958).

Personal Issues in Professional Identity Development

Doehrman (1976) portrayed the process of professional development of the psychotherapist as ultimately related to personal growth: "The student of psychotherapy is not just learning a set of skills removed from the core of his identity; rather, he is evolving a professional identity that is intimately connected to his personal identity" (p. 10). Langs (1979) stated that the curative factors of

psychotherapy rest on the therapist in both his or her knowledge of technique and self-knowledge such that the therapist's own analysis along with supervision are considered the most significant modes of professional development. Frijling-Schreuder (1970) placed greater weight on the "integrity" and "personal health" of the analyst in training than on his or her "giftedness." Gaoni and Neumann (1974) emphasized the development of the therapist's "self-awareness" and concluded that there is a major difference in the supervisee depending on whether or not he or she has been or is involved in a personal analysis. Weiner and Kaplan (1980) also stressed the role of self-awareness, along with sensitivity to how patients experience the therapist's behavior, that foster professional identity development and "the expressive style that best integrates treatment technique with personal authenticity" (pp. 42-43).

Ekstein and Wallerstein (1958) highlighted the acquisition of a "professional identity" as one of the important training goals, considering it a "higher form, later acquisition than the self concept." What can be achieved is a "psychologic amalgamation of the person with the function he is to perform" (p. 66).

Danger Situations in Supervision

The supervisory experience typically arouses anxiety for the supervisee that has various sources. Change--the modification or relinquishment of familiar attitudes, behaviors, and loyalties, as well as one's ideas and work, and the acquisition of new ones as the student becomes immersed in the new culture of professional life--is generally experienced as threatening (Kadushin, 1968; Towle, 1954). However, alterations of one's professional identity do not always require major personality changes in the therapist since techniques for managing a patient's particular problem may be learned even if the same problem remains unresolved for the therapist (Ekstein & Wallerstein, 1958; see also Schlessinger, 1966).

Abramowitz and Abramowitz (1976) discussed gender-linked, sex-role related anxieties related to assuming clinical responsibilities, involving decision-making and risk-taking, and they observed the reluctance of females in particular to give up the passive, dependent mode of classroom functioning for the more independent role of therapist. On the other hand, the dependence on a supervisor who provides guidance in the assumption of the therapist role can also be experienced as a threat to one's independence and autonomy (Kadushin, 1968).

Various authors have described the possibility that

the supervisor is perceived as a therapist by the supervisee, and that the dependence on the supervisor along with the supervisor's evaluative function may evoke the parent-child relationship in the student's mind, causing anxiety associated with this early relationship (DeBell, 1963; Kadushin, 1968; Levy, 1979; Nemiah, 1970; Peltz, 1952).

Almost universally mentioned in the various essays on the training experience of the new therapist is an exaggerated sense of inadequacy (Gilmore & Perry, 1980; Klagsbrun, 1967) or "anxious self-doubt" (Barnat, 1977). Kadushin (1968) explained that the threat to the feeling of competence is based on the necessity of admitting ignorance in supervision, the potential failure to meet the supervisor's expectations in conjunction with overidealization of the supervisor, and the fact that "so much of self is invested in and reflected by one's work" (p. 24). Burkett (1974) focused on the ambiguous nature of self-evaluation and the early reliance on supervisors and patients in the construction of a professional identity which recedes in importance as "evaluative cues which originate from the self become more significant (p. 7401)." Klagsbrun (1967) recalled the doubt and "loss of omnipotent expectations" which marked the early stages of his professional development. Sharaf and Levinson (1964) interpreted the "quest for omnipotence" which involves the

fantasy that the supervisor possesses such power and stems from the beginner's lack of experience and feeling of inadequacy (see also Levy, 1979).

Nemiah (1970) described the countertransference or "echoing" responses of the student therapist to the feelings, fantasies, and irrational activity of the patient which complicates the process of learning technique and which places an added strain on the supervisory task. Ekstein and Wallerstein (1958) first examined the "problems about learning" typical of beginners, and they offered a process-centered model of supervision which highlights the "parallel process" between the learning problems in supervision and the clinical problems in the therapy (see also Caligor, 1981; Doehrman, 1976; Searles, 1955). Burgum et al. (1958) also made the point: "Supervision necessarily works with the student's feelings both in the relationship with the supervisor, where he may show learning blocks, and in his relationship with the patient, where his own anxiety and personal needs may interfere with his effective functioning as a therapist" (p. 357). Langs (1980) referred to the supervisee's "fear of the patient's and of his own inner mental world" (p. 113).

Identification Processes in the Supervisory Relationship
Identification and Learning

The contribution that identification makes to the learning process, particularly in the supervisory setting, has been discussed frequently. Ekstein and Wallerstein (1958) wrote that while an external process of being viewed as a therapist by the lay public and by other professions plays some part, an "inner professional identity" is achieved mainly through an "inner process of identification with the teachers of therapy" (p. 77-78). Among the first psychoanalytic authors to study the process of professional development, Ekstein and Wallerstein presented various meanings of identification representing stages that different students may pass through depending on their personality needs and learning styles. These variations include the wish to emulate the teacher, to be completely like him or her, and to be his or her devoted follower. There may be an attempt to imitate and absorb fully his or her patterns of working, and to be dependent to the point where the supervisee's individuality is forgotten.

Towle (1954) described three directions in which identification is a "vital means" to learning in the helping professions: 1) it lowers the anxiety of, and provides support to, the student coping with the stress of the demands of the work; 2) it facilitates the personality growth which the profession demands; and 3) it fosters the

adoption of the methods and values of the profession.

Frijling-Schreuder (1970) described the "working alliance" that facilitates learning and professional growth. Wallerstein (1981) termed the "learning alliance" for the kind of relationship that is necessary in order for optimal professional growth to occur without undue resistance on the supervisee's part to the student role or unproductive attempts to impress favorably the supervisor.

Identification and the Sense of Inadequacy

In his discussion of the trainee's self-doubt, Barnat (1977) explicitly linked internalization processes in personal development with identification processes in professional development. He associated the uncertainty and unreasonable expectations of students with a "critical, devaluing introject" (p. 307) and "the superordinate negative identification that rendered me vulnerable" (p. 309). And he found that internalization of aspects of the character style of supervisors with a more "secure therapeutic identity" who have resolved such conflicts contributes to the development of "feelings of professional identity" (p. 307). Barnat (1974) also stated that trainees may imitate their supervisors in order to feel supported with a patient.

Langs (1979) stated that "through offering ourselves as examples allowing positive identification with our own work" (p. 43), the therapist in training comes to consider

the supervisor's contributions non-defensively. He added that the identificatory processes strengthen the ego in general, and Barnat (1980) indicated how for inexperienced therapists, identification with a supervisor may alter "some troubling misalignment in themselves" (p. 65). Nemiah (1970) likened the supervisory process to the therapy situation and noted the changes in the personality structure of the supervisee as he or she identifies with the teacher and adopts the latter's attitudes and values.

Promotion of a Realistic Ideal and the Capacity for Empathy

Kohut (1962) discussed the influence of the teacher's personality on the psychoanalytic candidate's self-image and ideal image in the "solidification of a psychoanalytic identity" (p. 155). Arlow (1963) considered identification to be "the most effective influence, pedagogically, in the supervisory situation" (p. 590), because it corrects distortions of the image of the "professional ego ideal" and increases the therapist's capacity to empathize with the patient. Frijling-Schreuder (1970) asserted that identification is a "precondition for every learning process," enhancing the therapist's empathy and technical skill (p. 369). Barnat (1977) stated that helpful identifications with supervisors let "students reidentify with their own empathic skills and integrate new character elements into working meaning" (p. 307). Some identification with supervisors promotes a sense of being a

competent professional (Weiner & Kaplan, 1980; see Halleck & Woods, 1962).

The therapist identifies with the supervisor's accepting and understanding attitude through which he learns to respect his own patients as individuals (DeBell, 1963; see Wagner, 1957). "Respect for the clinical material" is the attitude that Frijling-Schreuder believed is the most important to transmit to students with which to identify. Grotjahn (1949) wrote that "the psychiatric attitude," including patience, empathy, respect, tact, and honesty, is best acquired through identification by the student with his or her teacher. The "analytic attitude"--respectful, interested, and empathic--may be adopted through identification with one's supervisor, according to Moldawsky (1980).

Detrimental Effects of Identification

The fundamental problem associated with identification processes in learning is the possibility of their leading to imitation and dependency (Emch, 1955; Meerloo, 1952; Weiner & Kaplan, 1980). Ekstein and Wallerstein (1958) described a pattern of "learning by submission" which involves imitation of the "external trappings of the supervisor's presumed directions without the truly effective learning that comes from the growth of insight and the internalization of the at first externally perceived learning dilemma" (p. 143). Towle (1954)

cautioned against this mode of identification, often stemming from ignorance, which may serve as a defense against anxiety; the result of defensively submitting to, rather than actively acquiring, knowledge is that "learning may not be incorporated" (p. 152).

A related difficulty in the process of identifying with a supervisor is the trainee's perceived or actual loss of individuality or identity. Ackerman (1953) discussed various problems in supervision, and specifically warned of the dangers of overidentifying and submerging one's individuality as the trainee acts out a projected image of the omnipotent and omniscient analyst with his or her patients. Wallerstein (1981) elaborated on the potential for identification to serve as a "resistance" to learning and particularly to the development of the supervisee's "independence" (p. 35).

Towle (1954) underscored the threat to one's identity which is perceived by supervisees as a consequence of their identification tendencies and their ambivalence over being dependent on the supervisor, in contrast to "the young child (who) learns largely and comfortably through identification" (p. 142). She described a problematic identification thus: "The introject remains a foreign body within the ego and is reacted to with the same ambivalence as prevailed toward the original love object" (p. 74). Barnat (1977) wrote that borrowing from a therapeutic

identity more secure than one's own risks the feeling of being an impostor.

Klagsbrun (1967) characterized a defensive process of identification by which the beginning therapist takes flight into a theoretical structure, to identify with a theory, in order to allay doubts and to cope with the loss of omnipotent expectations.

Selective Identification and Integration of Professional Identity

Langs (1976) highlighted the supervisee's conscious and unconscious "selective introjection" of the supervisor's communications which "exerts a significant influence on the supervisee's work with his patient" (p. 335). The introject can be "integrated into his self-representation and ego-functioning" or it can be felt as "ego-alien...and not experienced to any significant extent as part of the supervisee's representation and own capacities" (pp. 335-336). Grotjahn (1949) stressed that the capacity for identification, both in relation to patients and to teachers, is important for a therapist's development, so long as it is a "partial and testing" identification. He distinguished the "reality" identification--"practical, realistic, changeable, testing, progressing, and adjustable"--which is an important means of learning and can be integrated, from identification as a "transference phenomenon"--involving imitation, submission or negativism--which may block learning (p. 143). If

identification is temporary and involves experimenting with new ways of working, it is a normal phenomenon (Wallerstein, 1981). Meerloo (1952) wrote of the "partial and selective" identification which avoids the dangers of dogmatism.

Barnat (1980) noted the necessity for the supervisee to differentiate from identification models and the struggle to do so. Healthy identifications that promote professional independence center more on professional issues than personal qualities. Ekstein and Wallerstein (1958) distinguished between identification with the teacher as a person and identification with the teacher as a "carrier of a method and function," the latter especially contributing to professional development (pp. 78-79). Towle (1954) made a similar distinction, stating that "influential relationships" allow for "identification with the profession rather than dependence on mentors, an educational experience which lays the groundwork for emancipation from mentors, in order that the professions's learning may be advanced and its practices changed" (p. 176).

Feiner (1979) considered "the anxiety of influence" with which analysts must contend, both in relation to patients and to models (e.g. Freud). Patients seek to impose non-analytic roles on them. The impact of mentors may seem to obscure their independence. Yet the inherent

struggle to maintain an independent identity in the "act of interpenetration" fosters change (p. 124).

Towle (1954) determined that "ego-superego integration," involving a minimum of conflict concerning dependency and authority, provides for "the integrative capacity" which allows for healthy kinds of identification to occur (pp. 71, 144). Ekstein and Mayman (1957) summarized these challenges for the developing professional: "There are many identity-models in the psychologists's professional and scientific heritage...it places a burden on the integrative capacities of us all" (p. 60).

Throughout the literature on the development of the psychotherapist, the ultimate goal is agreed to be independence or individuality, integrating what is learned into a unique framework and personal style. "Mature professional independence as an analyst," by which the therapist can define his or her own learning needs in supervision and the ways to meet them, is how Wallerstein (1981) envisioned the outcome of successful supervision. Towle (1954) emphasized "professional self-reliance" (p. 142) and the "freedom to make new experience his own" (p. 93) (see also Wolstein, 1972). Klagsbrun (1967) pointed out the necessity of individual synthesis of values and theories in order to authentically affirm one's work. Frijling-Schreuder (1970) discussed the personal

integration that must follow the identification process with the supervisor.

The Struggle Against Identification

Resistance to learning from a supervisor is akin to opposing identification with him or her, and it may be expressed variously: feigned compliance, competition, negativism, or detachment (Bush, 1969; Doehrman, 1976; see also Gustin, 1958, and Wolberg, 1951, for other defense mechanisms). The "struggle against identification" of the therapist in training was succinctly put by Robinson (1936): "The more the self is involved, the more fearful the individual will be of the invasion of the other and the greater will be the necessity to maintain his own control and his own integrity" (p. 47; see also Doehrmann, 1976).

Ekstein and Wallerstein (1958) referred to the typical dilemmas experienced by inexperienced therapists as "learning patterns" and "problems about learning." One pattern is "learning by vigorous denying," and its primary purpose is to diminish the impact of the supervisory encounter. One method of doing so is by reducing everything to the familiar. Rather than becoming meaningfully involved, the supervisee insists on maintaining a psychological distance for the ostensible purpose of objectivity.

Many authors have linked anxiety about change to feelings of loyalty to previous identification models which

therapists in training may be reluctant to reject (Kadushin, 1968). Competing identifications include previous teachers, parents, valued peers, patients, one's analyst, and especially other supervisors.

Frijling-Schreuder (1970) wrote of loyalty conflicts in psychoanalytic candidates concerning training analysts as "an extreme hindrance to the identificatory processes which are so important in supervision" (p. 365). Ackerman (1953) described a process of rebelling against one's supervisor or analyst through overidentification with a patient's pathology. Levy (1979) noted that the influence of various supervisors can be confusing or enhancing, depending on one's capacity to integrate the different points of view. Emch (1955) added that it is easier to synthesize divergent perspectives when disagreements among supervisors are in the open.

The pattern of "learning by submission" is an imitative process which precludes effective internalization of the supervisory experience. The "mea culpa attitude" is also motivated by a defensive wish to block change, in which supervision is experienced as an assault which is deflected by quick and magnified confessions of personal failings (Ekstein & Wallerstein, 1958). A related defensive maneuver involves transforming the supervision into therapy for the therapist. A supervisee may consciously or unconsciously feel helpless to isolate areas of difficulty

in his or her work as a therapist, suggesting a magical expectation of being spoon-fed. Also, the neophyte may express skepticism about the efficacy of therapy as another defense against engagement in the learning process.

Idealization and Devaluation

The novice's sense of inadequacy has a major effect on the identification process in supervision. It gives rise to a defensive attitude of either overidealization or devaluation. Barnat (1977) noted the disparagement of the supervisor which was often in response to the student's self-doubt. Overidealization hinders the process of identification in those who feel they need permission to identify because they cannot think of themselves as colleagues of their supervisor. Even with encouragement, such persons are likely to "devalue" the teacher, indicating a lack of self-acceptance and problems in the function of a personal and professional identity (Ekstein & Wallerstein, 1958). Langs (1980) observed a tendency of supervisees toward either idealization or hostile attacks. Sharaf and Levinson (1964) discussed the "quest for omnipotence" of the novice who feels incompetent and attributes magical qualities to the supervisor which the former hopes to have "bestowed" upon him (i.e. an incorporation fantasy). This pursuit inevitably leads to disappointment. Gilmore and Perry (1980) interpreted that "nihilism" and "omnipotence" are common in the early stages

of professional development and that the articulation of more reasonable self expectations permits an appreciation of one's own work as well as that of others with which to identify.

The tendency of supervisees to have transference reactions or neurotic attitudes toward their supervisors, generally related to issues of dependency and authority, has been described often (Grotjahn, 1949; Kadushin, 1968). Lower (1972) connected the learning problems of supervision to a "negative transference" to the supervisor which stimulates various means of excluding the latter, limiting any meaningful effect on the supervisee's work. In this vein, Ackerman (1953) wrote that resistances to learning are comparable to disturbances in feeding, deriving from ambivalent attitudes (p. 286n). Towle (1954) also noted the ambivalence which identification evokes in adults because of anxiety related to being dependent, and she stressed that the stronger the underlying wish to be dependent, the more anxiety there will be in the relationship that reactivates early dependency-authority tensions. Doehrman (1976) concluded that neurotic attitudes toward authority are evoked by feelings of dependency, fear of judgment, wish for approval, a sense of subordinateness, and the evaluative function of the supervisor.

The Effect of the Model's Orientation and Personality

The process of professional development, and the kinds of identifications that a supervisee makes, do not occur in a vacuum. There are numerous methodological approaches to supervision that emphasize different aspects of the therapeutic and supervisory situations (Caligor, 1981; DeBell, 1963; Ekstein & Wallerstein, 1958; Langs, 1976; Levenson, 1982; Schlessinger, 1966; Tarachow, 1963). The particular qualities of the supervisor have a significant effect on these processes. The supervisor's contribution to the emotional climate of the supervisory relationship and its consequences for the nature of a supervisee's identifications have been a focal concern in many phenomenological accounts and in several empirical studies.

Ackerman (1953) stated that the dynamics of the supervisory relationship depend heavily on what the supervisor brings to the situation--one's grasp of the subject, personal problems, competitiveness with teachers, and attempt to impose one's prejudices on the student. "Supervisor counter-transference" has received considerable attention (Lower, 1972); DeBell (1963) called it the most "significant deleterious influence," particularly where identification on the part of the supervisee is virtually demanded by the supervisor (p. 568). Towle (1954) also warned that if a supervisee feels compelled to identify in response to the supervisor's needs then this will inhibit

the definition of the student's identity. For example, if the supervisor insists on focusing on the student's feelings, this may cause either fearful withdrawal or increased dependency which will limit the usefulness of identification (see also Benedek, 1954). M. Balint (1954) stated that inexact and premature interpretations can pressure the trainee to swallow whole the supervisor's ideas.

Supervisors may be narcissistically searching for disciples (Meerloo, 1952), needing to be emulated (Cohen, 1980, Emch, 1955, Lower, 1972). Their demand for conformity may be motivated by a poor tolerance of the supervisee's assertiveness or autonomy (Lower, 1972; Marshall & Confer, 1980). Many argue that it is useful for the supervisor to serve as a model for what he or she would do in the clinical situation and in how he or she responds to the student's material (Grotjahn, 1949; Langs, 1979; Wallerstein, 1981). However, if a supervisor, consciously or unconsciously, seeks a "total identification" with himself or herself, or if he or she defensively assumes the role of authority, the student is likely to struggle against such identification (Ekstein & Wallerstein, 1958; Lower, 1972).

Frijling-Schreuder (1970) cautioned supervisors to avoid patronizing, authoritarian, or infantilizing attitudes toward supervisees, which can be elicited easily

by the overly dependent or ungifted novice. Such reactions can stimulate identification by the therapist in training which then gets expressed toward the latter's patients.

Rosenblatt and Mayer (1973) described four kinds of supervisory attitudes that students objected to:

1)overinvolved and constrictive; 2)amorphous; 3)unsupportive; and 4)therapeutic. Burgum et al. (1958) endorsed the following attributes for supervisors: respect for the student, realistic evaluation of the supervisee's abilities, acceptance of his or her ideas and tolerance of disagreement, avoidance of omnipotent attitudes, and encouragement of the trainee to think independently and to express doubts. Cherniss and Egnatios' (1977) study of different supervisory styles demonstrated that supervisees were more satisfied with "didactic-consultative," "insight-oriented," and "feeling-oriented" approaches than with "laissez-faire" or "authoritarian" methods (see also Marshall & Confer, 1980).

Phases in Supervision and Professional Development

A number of authors have described a sequence of stages in the development of the psychotherapist which are reflected in the relationship of the student with his or her supervisor and in the nature of the novice's identification with the latter. Ekstein and Wallerstein (1958) asserted that "one can learn with almost any pattern, although with more or less difficulty" (p. 144).

At the early stages of professional development, an "inner process...of identification" (p. 78) seems particularly difficult and can only follow "a stage on the way to learning...a stage before the individual is able to accept the posed dilemma as his own, but must experience it as something external, arbitrarily imposed by the supervisor" (pp. 143-144). Arlow (1963) summarized the professional development of the analyst or therapist in training in terms of the necessity of "working through" the neurotic reactions to the role of therapist and to the process of empathy.

Because of feelings of insecurity, helplessness, and incompetence, beginning therapists tend to depend on their supervisor to be responsible for their patients. They may uncritically accept or submit to their supervisors' point of view, or they may defensively be oppositional. In the early period of training, one's professional identity relies mainly on one's supervisors and patients (Burkett, 1974), and the emphasis in supervision is on understanding the patient (Gaoni & Neumann, 1974).

According to Frijling-Schreuder (1970), the working alliance between supervisor and supervisee develops as the student derives security from what has been learned and understood with experience. She described a personal process of initially closely following different supervisors' advice that allowed for trying out different

styles of analyzing, and gradually a "critical sense" developed by which she decided which aspects to include and which to reject in "finding my own style of working" (pp. 364-365).

Overridealization of the supervisor, and self-aggrandizement and magical expectations for cure and admiration may eventually lead to disappointment and despair (Gilmore & Perry, 1980; Klagsbrun, 1967). Optimally, the focus of supervision shifts to the therapist's self-awareness. More reasonable expectations and limitations are accepted and the trainee can begin the work of integrating the positive aspects of his or her work, and the ideas and methods of supervisors and others with which he or she has identified. Gaoni and Neumann (1974) discussed a process "over the years," in which the identifications that the student makes with his or her supervisors become increasingly selective and integrated into an independent "therapeutic personality" that is spontaneous, responsive, and original (p. 112). Thereafter, supervision becomes a mutual consultation involving an exchange of opinions and experience between equals although one is more experienced than the other.

Empirical Studies on Identification in Supervision

The central issues that emerge in the review of the literature on identification processes in the development of a psychotherapist's professional identity are:

- 1) the importance of the supervisory relationship in the development of a professional identity;
- 2) the role of identification processes in the supervisory relationship in the shaping of a professional identity;
- 3) the distorted self- and ideal images evoked by inexperience and the anxieties of becoming a therapist, and their effect on identification and learning;
- 4) the vicissitudes of these images corresponding to the phases of professional development; and
- 5) the effect of the supervisor's personality and working style on the supervisee's professional development.

Most of what has been written on professional identity development of the psychotherapist has been inferential, based on one's own or other's experiences, often tied to psychoanalytic concepts. There have been few controlled studies which attempt to document or refine the issues under consideration. Those that touch on these matters will be discussed below.

The significance and quality of the novice's

relationship with his or her supervisor was explored by Gale (1976) who had psychiatric residents rate their supervisor of the previous six months on various items that related to rapport and to teaching quality. The results were mixed: good rapport predicted a good teaching rating, although poor rapport did not predict teaching quality.

There have been virtually no attempts to empirically examine identification processes in supervision. Rubinstein (1979) investigated the effect of the gender of the student and supervisor on the quality of the supervisory relationship. One of the author's conclusions, based on interviews with the participants of the study, was that men were more frequently considered "high-impact" supervisors than women, despite the common belief of the subjects that gender was not an important variable.

Lambert (1980) summarized several studies that tested the hypothesis that the student therapist's capacity for empathy towards patients is related to the empathy or other "facilitative conditions" offered by the supervisor to the student. Pierce, Carkhuff and Berenson (1967), and Pierce and Schauble (1970, 1971) found support for this idea. Pierce, Carkhuff and Berenson (1967) considered the supervisor variable to determine the effect of various qualities in the supervisor (e.g. empathy, respect, genuineness, concreteness, self-disclosure) on the development of these qualities in counselors-in-training;

they found a positive relationship. Lennon (1972) showed that different levels of empathy and respect affected the level of self-exploration of the student. Other studies (Lane, 1974; Payne & Gralinsky, 1968) found no significant changes in the supervisee based on supervisor empathy or other "facilitative" conditions.

None of these studies directly considered the possible role of identification processes in the effect of supervisor empathy or other therapeutic qualities. However, the effects were discussed in terms of modeling. Gardner (1980) reviewed the "little empirical data" on modeling techniques, distinct from didactic instruction, in the supervisory process (pp. 496-498). He noted the general importance for all learning attributed to modeling by Bandura (1969). Porter (1979) demonstrated that modeling is effective in supervision for teaching proper attitudes and effective techniques when the supervisory relationship has "therapeutic" qualities, based on the supervisor's attitudes and behaviors.

Research on supervision that has attempted to define the effects of modeling tends to use live or videotaped models in actual therapy interactions, displaying different degrees of empathy or other "therapeutic behaviors." Changes in empathic responses of the student are then assessed based on a rated role-play interview. The results have varied, some showing the effects of modeling

alone and others showing the effects of modeling combined with instruction (Lambert, 1980). Lambert (1980) suggested that the role-play situations used to quantify training outcome may foster experimental control but seem to be poorly related to actual clinical performance.

Several studies examined the changes in self-evaluation that are a function of time and experience. Perlman (1972) used the Q-Sort method to determine beginning therapists' self-concept and ideal self-concept. He found that the discrepancy between the two types of self-image diminished with experience, and that the change was due primarily to changes in the self-concept. Burkett (1974) interviewed psychiatric residents and discovered the ambiguous nature of their self-evaluation as therapists; only over time did self-determined "evaluative cues" become useful in their construction of a professional identity. Approaching the issue of professional self-concept from another end, Pemberton (1976) interviewed five "mature, successful" therapists and found that they had commonly achieved a level of self-awareness and self-acceptance for their strengths and weaknesses which allows them to maintain clarity and independence--"presence"--in their work.

In their study of the early stages of training of psychiatric interns, which they termed "professional adolescence," Gilmore and Perry (1980) delineated four

phases in the evolution of their subjects' self-worth toward a realistic appraisal of themselves and others. Reynolds (1980) attempted to define developmental levels in the training of therapists and to determine different supervisory needs based on stage of training; the results were inconclusive.

Differences in supervisors' personality or personal health have received some systematic attention in explaining the influences on trainees' professional development. Abramowitz, James and Weitz (1974), in a very small study, found that a supervisor's "deviant" self-concept had an adverse effect on the self-concept of the supervisee. Supervisee satisfaction in response to various styles of supervision was studied by Cherniss & Equatios (1977), as discussed in an earlier section. In Vickers' (1974) investigation, she found a "striking absence of supervisor's influence on the therapist's theoretical orientation" (p. 2453).

Lambert (1980) noted that there has been very little research investigating the interaction of the personal characteristics or supervisory styles of supervisors with the personal qualities of supervisees. He suggested that trainee variables worth exploring include level of experience, anxiety level, open-mindedness, defensiveness, cognitive flexibility, and locus of control. In the study to be undertaken here, some of these qualities will be

considered through an examination of supervisee identification styles in professional identity development.

Aim of the Study

It is apparent from the review of the literature on identification processes in psychological development that the concept has been applied to various phenomena such that the meaning of the term is neither singular nor obvious. This, of course, complicates any attempt to operationalize it. In order to facilitate understanding, it is necessary first to clarify the theoretical and descriptive contexts in which it is used, and then to determine the specific clinical nature, and possible implications, of an individual's identification tendencies.

The meanings and motives of identification have been outlined in the terms of various schools of psychoanalytic theory. The role of identification has been cited through all stages of development, with special emphasis in childhood and adolescence. With the emergence of the concepts of "identity" and "self," the significance of identification has been increasingly manifest in late adolescence and adulthood.

To comprehend fully the history and enduring significance of an individual's identifications--the evolution of early, childhood identifications, and the formation of subsequent, adolescent and adult, identifications--would require an intensive study that

perhaps only a clinical psychoanalysis could provide. However, it is possible to clarify the role of identification in more general terms.

The overriding definition of identification to be used here is that it refers to changes in one person--apparent in his or her behavior, thought, or feeling, conscious or unconscious to that person--that are a result of a relationship with another person in which the former becomes more like the latter. Any evidence that such a change has occurred, be it temporary or permanent, will be considered an identification, or the result of a process of identification.

A basic assumption of this work, implicit in many of the writings cited, is that personality development or identity formation, at every stage of the life cycle, involves a partially differentiated person, with additional potential for self-expression and self-definition, interacting through introjective and projective processes with an environment. The outer world may range from constructive to destructive to the person's identity development. Assuming that the "object" is "facilitating," the individual may be open to its influence and identify with it to expand the self, or the person may experience such influence as a threat to the self's integrity and so act to neutralize its impact through a form of either opposition or submission. For some, yielding relatively

indiscriminately to another's influence may be in the service of later differentiation, or it may persist as an avoidance of articulating a self. If the environment is indeed dangerous, then resisting identification and defending against another's impact may be the healthiest choice available.

The empirical literature, with some noteworthy exceptions, has tended to show a positive correlation between identification and healthy identity development, and correspondingly, an inverse relationship between a lack of identification and normal development. However, these studies made no effort neither to differentiate the qualities of the identifications under consideration, nor to consider the possible limitations of positive identification on identity development.

In view of the frequent close linking of identification processes with object relationships (both internal and external) in the theoretical literature, a novel approach, conceptualizing identification in interpersonal terms as a mode of relatedness, is proposed here. Identification, in this light, can be considered a reflection of how an individual experiences and mediates another person's influence. Based on the literature on psychological development, and evident as well in the literature on the supervisory relationship, three basic identification tendencies--selective (self-enhancing) identification,

imitative (self-maintaining) identification, and resistance to (negative) identification--have been delineated.

Thus, positive identification may represent a readiness to be influenced by others for the purpose of change and growth, or it may signify a resistance to change through mechanical imitation of the other. And the absence of identification continues to indicate psychic disability, except where the model might be considered dangerous or inappropriate.

In this study, the relationship between the psychotherapist or psychoanalyst in training and his or her supervisor will serve as the context in which to examine the interaction of identification processes and identity development. From the literature on supervision, it is apparent that identification is a process that is active in the supervisory relationship. It may take several forms in the trainee's effort to learn the therapist role and to develop a professional identity. In this study, both the quantitative and qualitative aspects of identification will be accounted for: the extent of the supervisor's effect on the student therapist's development of a professional identity, and the degree to which that influence is internalized or integrated in a personally authentic way.

The assumption to be tested here is that the extent to which a therapist in training has differentiated himself or herself professionally (i.e. his or her professional

identity) will vary according to the nature of his or her identifications with a current supervisor (supposing that the supervisory model is optimal).

Through this approach, the study of the impact of models can be expanded to include more current influences, beyond parental identifications. It also permits the examination of identification and identity development as processes that continue in adulthood. And it recognizes the complexity of identification in identity development.

An important component of this effort is the development of a methodology that can differentiate modes of identification that are manifest in the supervisory relationship and that can relate these to the formation of a professional identity which is based on a sense of independence from the supervisor, competence in the therapeutic role, and involvement in professional activities.

Hypotheses

The overall hypothesis to be tested here is that the supervisee's level of Professional Identity is associated with the nature of his or her Identifications with a current supervisor. This proposition will be tested in two ways. First, the occurrence of three discrete identification modes will be documented, and their respective relationships to professional identity will be investigated. Also, the patterns of interaction of the

three identification tendencies as they relate to professional identity development will be analyzed.

Assuming a developmental process in the formation of a professional identity, a resistance to identification with a supervisor is likely to be accentuated in trainees not only with an undefined professional identity, but who also have personal identity difficulties such that any experience of influence may feel overwhelming. (The involvement of personal identity issues in the dynamics of professional development is a basic assumption that is not being directly tested here; it would be a valuable focus of future research.) If imitative identification with a supervisor does indeed serve as a transitional stage from a dependent to a more autonomous sense of oneself as a therapist, then this process will be more evident also in the early stages of professional identity development and should diminish in scope as professional development advances. Selective identification is seen here to be a process which succeeds imitative identification in ascendance in the supervisory relationship, as professional identity development advances. Finally, since the qualities of the supervisor may have an important effect on the nature of a supervisee's identifications, irrespective of the latter's professional identity status, an independent measure of the supervisor's attributes will be obtained in order to account for the influence of this factor as well.

The specific predictions follow:

- 1) there is an inverse relationship between Negative Identification and Professional Identity;
- 2) there is a positive relationship between Selective Identification and Professional Identity;
- 3) there is an inverse relationship between Imitative Identification and Professional Identity.

As a partial test of the validity of the Identification modes, one additional measure will be obtained, with the following predictions:

- 4) the Self-Ideal Self discrepancy for Personal Style will correlate directly with Self-Maintaining Identification and with Negative Identification, and inversely with Selective Identification and with Professional Identity.

Since there are three different Identification modes, it is possible that they occur together in certain patterns that correspond to different levels of Professional Identity. No specific predictions are being made here.

Demographic information will be obtained in order to account for several additional factors. The influence of Age, Experience, and Gender on Identification trends will be examined. The relevance of the supervisee's own therapy or analysis to the quality of his or her professional identity development will be included in the interpretation of the results.

CHAPTER THREE

METHOD

The hypotheses that were developed in the previous chapter were tested by obtaining the responses of psychotherapists and psychoanalysts in training to a set of questionnaires, most of which were devised for this study. The method that was employed is described below.

Subjects

Of the 490 questionnaires that were distributed to students of doctoral programs in psychology (mainly clinical, some school and professional, psychology) and to candidates of psychoanalytic institutes in the New York metropolitan area, 171, or 35%, were returned completed. Eligible subjects were any persons who were currently practicing psychotherapy or psychoanalysis and who were being supervised on an individual basis.

One hundred ten, or 64%, of the responses came from women, and 61, or 36%, came from men.

The ages of these trainees spanned from 22 to 60 years old, and the mean age was 33 years old.

In this sample, 56 subjects had some analytic training (54 were candidates, 2 were graduates) and 111 subjects had no analytic experience. This latter group was comprised mainly of the 100 students who were enrolled in a doctoral program in psychology. The frequency of graduate degrees achieved was: 41 Master's in Social Work, 13 Doctorates in Psychology, 72 Master's of Psychology; and there were nine subjects who had other, non-clinical, graduate degrees.

There were 35 subjects who had no advanced degree.

The extent of clinical experience ranged from less than one year to 20 years seeing patients in either psychotherapy or psychoanalysis, or both. The mean amount of experience was slightly less than four years, and the mode was two years.

Subjects were asked to indicate their own experience as patients in psychotherapy or psychoanalysis, specifically the duration of their treatment and the frequency of sessions. Seven members of this sample had had no such professional contact. Among the vast majority who had been, or were presently, in treatment, the length of the treatment reached as high as 20 years and the mean was close to five years. Their intensity ranged from once to five times per week, with the most common frequency being three times per week.

There are several inherent limitations in the scope and generalizability of this study. There is a possibility of an unaccounted for sampling bias because of the lack of random selection of subjects; those who completed and returned the questionnaires may share certain qualities that are not being controlled for here and so may not be representative of the population as a whole. Also, as a study of professional development, only psychoanalytically oriented psychotherapists or psychoanalysts in training are being considered. This is a deliberate choice because of

the special nature of training for psychoanalytically oriented treatment in which the supervisory relationship is relatively more personal, confidential, and protected than is usually the case with training in other psychotherapeutic modalities.

Instruments

Several paper-and-pencil questionnaires were utilized in order to determine the relative presence, in a current supervisory relationship, of the various identification trends discussed above. These have been partially formulated on the basis of the critical issues and themes that are described in the literature on supervision. They also derive from discussions with individuals who have had experience either as supervisees or supervisors, or both. A pilot study was previously conducted in order to obtain a preliminary indication of the validity of these measures.

The Identification Type form has been developed to obtain a measurement of each of the three modes of identification. Subjects are asked to rate from 1 to 5 the degree to which various statements are true of their experience as therapists in supervision with a current supervisor. Imitative, or self-maintaining, identifications are reflected in statements of positive feelings toward the supervisor and tendencies to adopt his or her working style or personal manner with little evidence of independent activity on the part of the

supervisee. Selective, or self-enhancing, identifications are manifest in statements depicting openness to the supervisor's model which is applied in a discriminating manner. Resistance to identification, or negative identification, is evident in statements about a closed, defensive experience, in which the supervisee ignores or actively resists the influence of the supervisor.

The Personal Style form is also a self-report measure, designed to provide additional information about similarities and differences between supervisees and their supervisors. The Personal Style form yields a score which reflects the discrepancy between a supervisee's professional self-image and his or her ideal image of a therapist.

The Professional Identity form provides a measurement of the trainee's level of professional development. It is based primarily on two factors: 1) his or her own evaluation of therapeutic adequacy and independence; and 2) the supervisee's degree of involvement in professional activities in addition to the conduct of psychotherapy and beyond the requirements of his or her training program.

The quality of the Supervisory Environment was measured using a form created by Doehrman (1976). This series of questions, which she believed tapped the "affective climate" of supervision, provides an important

context for understanding the trainee's experience of the supervisor's influence; i.e. his or her identifications with the supervisor. This measure allows for a comparison of subjects' identification styles, controlling for the possible contamination based on disparate supervisor quality.

Miscellaneous Information was obtained to provide more qualitative information about the supervisory experience. This form includes questions about the style of supervision, the way the particular supervisor was selected or assigned, and it addresses other matters related to the supervisee's development as a clinician.

In addition to the limitations described above on the generalizability of this study, there are two other constraints on the interpretation of the data that deserve mention. Since in many, if not most, training programs, a therapist in training has considerable input on the choice of a supervisor, the self-selection process may influence the responses supervisees give in this study in ways that are not being controlled for here. Also, since all responses are from the point of view of the supervisee, the external validity of these instruments is weakened; whether subjects are responding in a discriminating way or are, if unconsciously, attempting to be consistent or predictable, cannot be determined. More specifically, the attempt here to account for variations in the quality of the supervisor,

using the Supervisory Environment form, is potentially less valid than another means which does not rely on the supervisee's subjective perspective.

Procedure

The directors of doctoral programs in clinical psychology (and one clinically oriented school psychology program), of psychology internship programs based in hospitals, and of psychoanalytic institutes were contacted in order to obtain permission to distribute the questionnaires to their student therapists and analysts in training. Access was provided to all seven doctoral psychology programs contacted, of which five were used in the study. Fifteen of the 18 internship directors supported the effort to recruit subjects, and all of these opportunities were exploited. From among the psychoanalytic training programs, seven institutes opened their doors, and four of these were pursued.

Once approval was received from the program director, the questionnaires were either mailed directly to the trainee or they were brought to the site of the program where the director took responsibility for presenting the materials to the potential subjects. A cover letter informed them of the general nature of the study. Subjects were assured of the confidentiality of their responses. They were also invited to provide their names and addresses so that follow-up might be possible, and to permit the

reporting of a summary of results to those who desired it. A stamped envelope was furnished with the questionnaires in order to facilitate their return.

The fundamental instruction to subjects was to reflect on their experience with one current supervisor of psychotherapy or psychoanalysis; if there was more than one, subjects were directed to focus on the one with whom they have worked the longest.

CHAPTER FOUR

RESULTS

The results of this study support the view that the identification tendencies of psychotherapists and psychoanalysts in training, in their relationships with their individual supervisors, are constituted of three kinds--selective, imitative, and negative--and that a study of the mutual effects of positive identification on identity development is enhanced by the differentiation of selective from imitative processes.

Among these three identification modes, there was moderate empirical support for the predicted, direct relationship between selective identification and professional identity development, and for the hypothesized inverse relationship between resistance to identification and professional identity development. The nature of the association between imitative identification and professional identity development was ambiguous in this study; the hypothesis concerning the relationship between imitative identification and professional identity was not supported by the data.

The data from this study were consistent with the hypotheses concerning the association between a student therapist's professional self-image and the magnitude of his or her individual identification tendencies, and also the level of his or her professional identity.

The results of this research also indicated that certain distinct patternings of the three identification

modes were associated with different levels of professional identity.

The Validity of the Identification Measure

A factor analysis was performed on the 27 items of the Identification Type form to determine if the responses to the questions designed to detect three discrete modes of identification--selective, imitative, and negative--in fact, did reveal these three dimensions. The results of this analysis support the assertion of three types of identification processes. The factor analysis sustains the validity of this measure, with some modifications to be described below, in determining the relative presence of these tendencies in supervisees.

The total number of factors elicited by the factor analysis was eight. However, a close examination of the content of the questions grouped together shows that the strongest five factors essentially represent the three identification modes that were posited.

The factor with the strongest weighting is composed of six items that address the readiness of supervisees to be open to the views of their supervisors. They suggest a supervisee's eagerness to adopt, as his or her own, the supervisor's knowledge and technique, and reflect an attitude of idealization toward the supervisor. One can infer a relatively undeveloped professional self-image in those who scored highest on these questions. The

correlational analysis of Imitative Identification with Professional Identity was designed, in part, to test this assumption.

Of the six questions that loaded together on this first factor, four were originally conceived as indicating imitative identification, one was thought to tap selective identification, and one, which correlated negatively, was aimed at eliciting a tendency to resist identification. This last item, in its negative sense, does also address the dimension of imitative identification and, more specifically, an openness to identification.

The second most significant factor includes four more questions, three from the original Imitative Identification series, and again one question that had been thought to represent selective identification. What appears to distinguish this group of questions from those in the first factor is that the openness to the supervisor is in the context of managing anxiety or difficult situations, and thus has a regressive, clinging quality.

The third factor contains four questions, all from the Selective Identification measure.

Two of the original Selective Identification questions correlated negatively with one "resistance to identification" question. They are all concerned with the supervisee's sense of integrity and flexibility in relation to the supervisor. Considering the two Selective

Identification questions in their negative sense, these three items reflect interference with the supervisee's capacity to constructively identify with the supervisor because of the former's difficulty defining his or her boundary.

The fifth factor contains three items, all from the original Negative Identification group. The specific nature of these questions is that they indicate a tendency to actively resist in the service of protecting a fragile personal or professional boundary.

Thus, by combining factors 1 and 2 together as Imitative Identification, and factors 4 and 5 together as Resistance to Identification, a revised Identification Type form emerges with 20 items that have empirical support in isolating the three identification modes conceived of here. Reliability coefficients were obtained for each of the revised Identification variables with the following results. For the 10 Imitative Identification items, alpha = +.76. For the 4 Selective Identification Items, alpha = +.66. And for the 6 Negative Identification items, alpha = +.66. Whereas a coefficient of .80 is considered the minimum sufficient for measures that have been used previously, .60 - .70 is deemed adequate when formulating original measures (Nunnally, 1978).

The original Identification Type form, the category

that each of the items was thought to reflect, and the alterations derived from the factor analysis are available in the Appendix.

Profile of Supervisors

This study examined processes that involve two people, a therapist or analyst in training, and his or her supervisor. Thus, in addition to reporting biographical information about themselves, subjects were asked to include demographic information about the one current supervisor that they focused on in responding to the issues raised in the study. The following is a summary of data about the supervisors.

In contrast with the sample of supervisees, the group of supervisors was predominantly male; 62% were men, and 38% were women. Their ages ranged from 32 to 65, and the mean age was 45 years old. The largest group of supervisors, 87%, had a Ph.D. in Psychology; 8% were Social Workers, 2% had M.D.'s, 1% had a Master's in Psychology, and 2% had other professional degrees. The majority, 68%, had graduated from a psychoanalytic institute, 12% were candidates at an institute, and 14% had no psychoanalytic training.

The amount of experience supervising ranged from less than one year up to 30 years, and the mean duration was about 10 years.

The length of time that supervisee and supervisor had

worked together extended over one month to 50 months, and the most common period of collaboration was seven months.

Controlling for Supervisory Quality

In order to understand individual tendencies toward identification with supervisors, it was necessary to control for the effects of unsatisfactory experiences of supervisors. The Supervisory Environment form was included to obtain a measure of supervisee satisfaction. The range of scores on this measure was from 21 to 75, and the mean score was 59.4. Consequently, a lower limit of 59 was used in order to analyze the identification processes that occur when "good-enough" supervision is available. Thirty-eight per cent of the sample was thus removed from consideration, leaving 105 subjects who rated their supervisors as 59 or higher.

The Level of Professional Identity

The level of professional identity was based on two components contained in the Professional Identity form. A subjective part was based on the supervisee's rating of his or her sense of competence and consistency in the clinical setting. An objective part derived from a description of extra-curricular professional activities, including membership in professional organizations and study groups, attendance at professional lectures and conferences, and various reading commitments (journals subscribed to and read, books bought, and membership in

book clubs).

An individual's score on Professional Identity was determined in the following way: A score for "objective" professional identity was based on a combination of breadth and depth of activity. Depth was figured by summing the number of activities in each category and multiplying them by a factor that the author assumed a priori would account for the relative importance of each of the categories in measuring professional identity. (The weightings assigned are displayed in the Appendix.) The number of books reported bought in the previous year was excluded from this procedure because it seemed to be overly intertwined with program curricula. The breadth of professional activity was determined by summing the number of categories (including "books bought") in which any degree of involvement was indicated. The depth and breadth factors were then standardized and summed. The supervisee's rating of "subjective" professional identity was also standardized. A factor of 100 was added to each of these normalized scores, and they were then added together, yielding the final Professional Identity score.

The correlation between the "subjective" and "objective" scores of the Professional Identity measure was small and not significant, $r = +.153$, $p > .05$. Whereas all subjects had completed the subjective part of the Professional Identity questionnaire, 17 subjects from the

attenuated group of 105 subjects did not completely answer the questions on objective professional activities; therefore, the results that follow are based on the 88 cases where information is complete.

The Major Hypotheses

The Relationship between Mode of Identification and Professional Identity

The hypothesis of a negative relationship between Resistance to Identification and Professional Identity was confirmed by the data, $\underline{r} = -.306$, $\underline{p} = .004$. This represents a moderate, reliable association between a high level of professional identity development among therapists in training and diminished tendencies to avoid identifying with their individual supervisors.

The hypothesis of a positive relationship between Selective Identification and Professional Identity was supported by the data, $\underline{r} = +.353$, $\underline{p} = .000$. In other words, the empirical data here indicate that the achievement of professional identity for trainees corresponds moderately to the process of selective identification with mentors.

The hypothesis that Imitative Identification is negatively correlated with Professional Identity was not confirmed, $\underline{r} = +.041$, $\underline{p} > .05$. Thus, the supposition that a tendency to identify in an indiscriminating manner with one's supervisor is most evident at the early stages of

professional development, and that its importance decreases steadily as one's professional identity becomes more defined, was not upheld by the data.

The hypothesis of particular correlations between the size of the Self-Ideal Self disparity on the Personal Style measure with the Identification components, and with the Professional Identity measure, was consistently supported. There was thus some evidence that as the discrepancy between a trainee's professional self-image and ideal image increases, he or she resorts more to negative identification and imitative identification and less to selective identification, and that this tendency is more associated with lower scores on measures of professional identity development.

Specifically, there was a direct, and small, relationship between Self-Ideal Self disparity and Imitative Identification, $\underline{r} = +.152$, $\underline{p} = .061$. There was a stronger, positive correlation between Self-Ideal Self disparity and Negative Identification, $\underline{r} = +.309$, $\underline{p} = .001$. There was a small, significant, inverse relationship between Self-Ideal Self disparity and Selective Identification, $\underline{r} = -.183$, $\underline{p} = .031$. Lastly, there was a comparable, predicted relationship between Self-Ideal Self disparity and Professional Identity, $\underline{r} = -.196$, $\underline{p} = .034$).

An additional way of examining the relationship

between the Identification modes and Professional Identity was employed to see if there are discrete patterns among the three identification tendencies in their relationship with Professional Identity. A three-way analysis of variance was performed, and the presence of certain patterns across identification modes was mildly supported by the data.

The scores of subjects on Resistance to Identification and Selective Identification were divided at their respective means, forming two groups within each category reflecting high and low scores. The scores of subjects on Imitative Identification were grouped three ways--low, middle, and high. The highest mean scores on the Professional Identity measure were obtained by those who scored in the upper half of the Selective Identification group, in the lower half of the Negative Identification group, and in the middle range of the Imitative Identification scores. At the other end of the spectrum, the lowest mean scores on Professional Identity were achieved by those who ranked in the lower half of the Selective Identification group, in the upper half of the Negative Identification group, and in the lowest third of the Imitative Identification scores.

The range of differences among these groups is not dramatic, such that any interpretation of the data must be made cautiously. Still, these patterns are consistent

with the findings reported above concerning the respective relationships of Selective Identification and Negative Identification with Professional Identity. The particular clusters of identification modes also lend support to the idea that some degree of imitative identification is associated with professional identity achievement, and that a relative absence of imitative identification corresponds with a relatively low level of professional identity.

Other Factors Affecting Identification Processes and
Professional Identity Development

The responses of the entire sample of supervisees were analyzed to determine the effects of various factors on their modes of identification and on their level of professional identity.

Gender

A t-test was performed on the entire sample of supervisees to determine if there were any differences between male and female trainees in their Identification type and in their Professional Identity. Women did tend to positively identify with their supervisors more than men did, imitatively, $t(169) = 2.41, p = .009$, and selectively, $t(169) = 2.46, p = .008$. The actual difference between the mean scores of men and women, on Imitative Identification and on Selective Identification, was not very dramatic, so that while the differences reached statistical significance, their clinical meaning is modest.

There were negligible differences between men and women in their Resistance to Identification scores and in their level of Professional Identity.

As previously described, the group of supervisees was predominantly female and the group of supervisors was predominantly male. Nevertheless, women in training were more likely to be working with another woman as a supervisor than were male trainees. Among female supervisees, 46% of their supervisors were female and 54% were male. Among male supervisees, 27% of their supervisors were female and 73% were male.

Given this "preference" for male supervisors among male trainees, the effect of the supervisors' gender on identification tendencies was examined. The gender of the subjects' supervisor did not appear to play neither a statistically significant nor a clinically important role in the extent to which supervisees identified, imitatively, selectively, or negatively, with their mentors.

There was also no statistically significant interaction effect between the gender of the supervisee and the gender of the supervisor in the nature and degree of identifications that subjects reported. In other words, both male and female supervisees imitatively and selectively identified more with male supervisors than they did with female supervisors; this difference did not, as noted above, reach statistical significance.

An additional way of assessing the role of gender in the supervisory relationship was through examining subjects' ratings of their supervisors on the Supervisory Environment form, which yields a measure of supervisory quality. There was no meaningful relationship between the gender of the supervisor and the rating he or she received.

In addition, an analysis of variance was performed to test for an interaction between the gender of the supervisee and the gender of the supervisor in relation to supervisory quality. There was no significant interaction found. However, there was a significant effect in the gender of the supervisee on the rating of supervisors, whereby males consistently rated their supervisors lower than females did, $F(1,169) = 4.086, p = .045$. Also, whereas there were no differences in the way females tended to rate their supervisors, regardless of their gender, male supervisees rated their female supervisors lower than they rated their male supervisors. Table 1 shows the scores on these variables.

Table 1

Supervisee evaluations of the Supervisory Environment, by Gender. Mean = 59.41. Number of subjects per category in parentheses.

		Supervisee	
		Female	Male
Supervisor	Female	60.26 (50)	54.60 (15)
	Male	60.57 (60)	58.53 (45)

Age

As a part of the pattern of attributes which contribute to professional identity development, the age of the supervisee proved to be relevant. A Pearson correlation coefficient revealed a moderate association between Professional Identity and Age of Supervisee, $r = +.3412$, $p = .000$. The older a therapist in training was, the more advanced his or her professional identity tended to be.

There were weak relationships suggested between the specific Identification types and the Age of Supervisee. That is, supervisees did not tend to identify in a particular mode based on their age. There was also little

effect on identification tendencies in supervisees due to the age of the supervisor.

Experience

The effect of a subject's professional background on his or her identification tendencies and level of professional identity was considered. An analysis of variance showed no significant differences among the groups of supervisees with a degree in Social Work or a doctoral degree in Psychology or without any professional degree.

For the purposes of statistical analysis, the sample was divided into two groups, one comprised of analytic candidates and the other containing students in doctoral psychology programs. There were no differences between the analytic candidates and the doctoral students in terms of their scores on the three Identification measures. A t-test on the level of professional identity of these two groups did reveal a statistically significant difference, $t(139) = 2.35$, $p = .020$. Thus, the group involved in analytic training had a somewhat higher average Professional Identity score than did the doctoral level group without analytic training.

Whether a subject was participating in an analytic or doctoral psychology program, the length of time he or she was involved with a training program influenced these processes. The level of professional identity increased with advancing years in a trainee's program, $r = +.349$,

$p = .000$. There was also a very moderate, negative association between Resistance to Identification and Year in Program, $r = -.269$, $p = .000$.

An additional way that Professional Identity was examined was in relation to the number of years the supervisee had worked with patients in psychotherapy or psychoanalysis. A Pearson correlation coefficient was obtained which indicated a direct correspondence between professional identity development and clinical experience, $r = +.382$, $p = .000$.

Whether or not a supervisor had an analytic background was of some consequence in the kind of identifications that a supervisee made. This was assessed in terms of the rating supervisees gave their supervisors on the Supervisory Environment form. A Pearson correlation coefficient between supervisory quality and analytic experience was derived, $r = +.149$, $p = .030$. Therefore, there was a slight tendency on the part of supervisees to rate higher the quality of their supervisors with analytic training than those without analytic training.

The extent to which a supervisee had worked with a supervisor affected the identification processes that occurred. Resistance to identification diminished as duration of collaboration increased, $r = -.164$, $p = .016$. And the tendency to selectively identify increased over time, $r = +.239$, $p = .001$. Also, the continuing

involvement with one supervisor corresponded to increasing levels of professional identity, $r = +.215$, $p = .005$.

The amount of experience that a supervisor had doing supervisory work seemed unrelated to the identification processes of the supervisees.

Supervisory Style

Six different styles of supervision were schematically described, and supervisees were asked to indicate which, if any, were characteristic of their own supervisor. There was a tendency toward imitative identification among those who reported that their supervisor addressed countertransference issues in the supervisee, exploring his or her personal issues to promote self-awareness, $r = +.258$, $p = .000$. There was a slightly milder tendency toward selective identification among supervisees whose mentors relied on a metapsychology or theoretical position to guide clinical intervention strategies.

The Supervisee as Patient

The amount of time a supervisee had spent in his or her own therapy or analysis was mildly associated with Professional Identity, $r = +.209$, $p = .006$.

The frequency of a supervisee's therapy was also tested for its effect. It was most strongly associated with Selective Identification, $r = +.226$, $p = .002$. Milder correlations were recorded with Imitative Identification, $r = +.164$, $p = .018$, and with Negative Identification,

$\underline{r} = -.158, \underline{p} = .022.$

Sameness vs. Difference

It was supposed that trainees might differ in the extent to which their theoretical orientation and clinical style is modeled closely after specific mentors, or whether there appears to be a tendency to be involved with mentors with different approaches. Subjects' responses on this issue were analyzed to determine if such trends might correspond to specific identification tendencies.

Subjects were asked to note whether they tend to seek out supervisors whose theoretical approach is similar to their own or if they are interested in learning from those whose approach is different. The average response was equidistant from these two poles, and there was no linear relationship between this tendency and Identification Type.

Subjects were also asked to indicate to what degree they feel their clinical work is modeled after their own therapist's or analyst's style, or is different. On the whole, the tendency was somewhat more like their therapist than different. Again, there was no association between this tendency and the type of identification made with their supervisor.

Initiative

Some measure of the amount of involvement in the choice of supervisor was addressed in this questionnaire. Among the statistically significant findings, supervisees who requested a specific person based on his or her orientation tended to identify imitatively with that person, $\underline{r} = +.253$, $\underline{p} = .001$. And among those who requested an individual because someone else had recommended him or her, there was also a tendency to identify imitatively, $\underline{r} = +.245$, $\underline{p} = .001$.

Conscious Identification

Subjects were asked directly to indicate the extent to which they consciously felt "identified" with their supervisor's 1) personal manner, 2) theoretical orientation, and 3) working style. These simple ratings correspond well with the results on the Identification Type form. Table 2 records the Pearson correlation coefficients between these two groups of variables. It is apparent that the strongest relationship is between the conscious rating of identification, especially on the professional dimensions, and a tendency to identify imitatively.

Table 2

Pearson correlation coefficients: Identification modes, by Conscious rating of Identification with Supervisor's Personal Manner, Theoretical Orientation, Working Style, and Cumulative rating. (significance level in parentheses)

	Conscious Identification			
	Pers.	Theo.	Work.	Cum.
Imitative	+.390	+.504	+.535	+.610
	(.000)	(.000)	(.000)	(.000)
Selective	+.345	+.199	+.353	+.385
	(.000)	(.005)	(.000)	(.000)
Resistant	-.258	-.148	-.211	-.265
	(.000)	(.026)	(.003)	(.000)

CHAPTER FIVE

DISCUSSION

Statement of the Problem

The purpose of this dissertation study is to develop further insight into the nature of identification processes in professional and personal development. The specific context in which these processes were considered is the experience of the therapist or analyst in training, in his or her relationship with an individual supervisor.

In psychoanalytic theory, identification is conceived of as both a process of becoming like another, and the result of that process. Previous research on identification has tended to define identification in terms of similarities between the subject, usually a late adolescent, and his or her parents. This isolates identification as a result of identification processes. Past studies of psychotherapy supervision have attempted to demonstrate a "modeling" phenomenon, ignoring differences among supervisees in their responsiveness to models.

The method undertaken and described here is based on a conceptualization of identification as a process with several key aspects that vary from individual to individual. These aspects are: 1) the openness or resistance of the therapist in training to the point of view of the supervisor, and 2) the "selectivity" or lack of discrimination applied while identifying with (i.e. acting like; thinking like; feeling like) the supervisor. The empirical design elicited the presence of identification

processes along three dimensions--imitative identification, selective identification, and resistance to identification. The extent to which these various identification modes were in evidence was analyzed as a function of different levels of professional identity development among psychotherapy trainees.

This dissertation attempts to address the question of whether identification contributes to, or impedes, identity development. This matter has been mainly at issue concerning personal development, as was described in the review of the literature. The seeds of this debate were contained in two of the primary senses that Freud introduced and developed the concept of identification. In one, identification represents infantile attachment, the absence of personal boundaries, and a fantasy of oneness with the "object" (Freud, 1917, 1921). In the other sense, it represents the means toward developing a separate identity, the substitution of healthy identifications for incorporative longings, and is based on the achievement of a differentiated self (Freud, 1923). If identity development or the differentiation of the self are seen as ongoing processes and relative phenomena, and since "mature" identifications still contain aspects of the person with whom one identifies, then the possibility exists that identification may limit personal freedom or inhibit the articulation of a unique identity (see Schonbar, 1967;

Singer, 1965).

Basic Assumptions

As discussed in Chapter Two, there is a close interplay of personal and professional issues in preparation for the "helping professions," and the principles that apply to growth in the personal/psychological realm contribute to an understanding of development in the professional sphere. The hypotheses that were elaborated and tested here emerged from this relationship, and the results will be discussed and interpreted in the same light.

Derived from the literature on personal development, a fundamental assumption of this work is that there is a dialectical relationship between identification processes and identity formation. The differentiation or articulation of the self can be facilitated by experimentation with ideas, actions, and roles that are "borrowed" from another. However, partial or selective identification is not possible if the identification is extremely imitative and is substituted totalistically, in an unintegrated way, for a diffuse or confused sense of identity. Also, if the individual's sense of self is too frightened or fragile to allow for real contact with another person, then any kind of positive identification may be inhibited.

It makes sense to refer to the concept of "boundary"

when discussing the relationship between identity and identification, because the optimal relationship seems to require a combination of clarity or firmness, and flexibility or permeability, of the "identity boundary;" within such a context, self-enhancing identifications should be prominent.

Principal Findings

The results of this study of the mutual effects of identification processes in the supervisory relationship on professional identity development are consistent with these assumptions. In this dissertation study, a large sample of therapists in training provided information about their experience with one current individual supervisor. The impact of this relationship was assessed in terms of three modes of identification--selective, imitative, and resistant.

Two of the major hypotheses concerning the relationship between these identification types and a supervisee's level of professional identity were supported by the data. The greater the occurrence of selective identification among trainees, the more defined was their professional identity. Also, a higher level of professional identity was associated with diminished evidence of resistance to identification. The predicted relationship between professional identity and imitative identification was unsupported; there appeared to be no

differences in the extent of imitative identification present depending on a supervisee's level of professional identity. The set of hypotheses linking a trainee's sense of adequacy in the clinical role with the identification types and with professional identity was consistently, if modestly, supported by the data.

Previous findings have repeatedly indicated that the relative absence of, or resistance to, identification corresponds with impediments to identity development. This phenomenon was demonstrated again here. It has been less clear if the presence of positive identification necessarily is related to advanced stages of identity development. The empirical results of Dignan (1965), Eimer (1964), and Josselson (1973), and the observations of Singer (1965) and Allen (1976) cautioned against the conclusion supported by other studies (e.g. Deitz (1969), Howard and Kubis (1964), Klein and Gould (1969), and Williams (1980)) that there is a simple, linear relationship between identification and identity achievement.

Josselson (1973) found that among college senior women, the highest identification scores were obtained by those whose identity was "foreclosed;" these were people who adopted their parents' views without questioning them. Dignan (1965) reported that a moderate amount of identification was associated with the highest identity scores in her study. Eimer (1964) determined that concept

formation and perception were aided when identification was accompanied by independence.

The results of the current study dovetail with those immediately above. Processes of selective identification involve changes in the subject toward increased similarity with the model as well as the subject's assertion of his or her individuality, and these phenomena were associated with the more advanced levels of professional identity among the supervisees responding in this research. By contrast, there was no meaningful association between identification processes that were imitative in nature and professional identity development. Thus it is the quality of identification processes that is of greater consequence than simply the quantity or extent of identification when considering their contribution towards professional identity development.

Defensiveness and the Tendency to Resist Identification

As noted in the review of the literature, a sense of inadequacy is prevalent among therapists in training. Defensive operations designed to avoid the influence of the supervisor, who can be perceived as overly critical because of the projection of one's own doubts and self-criticalness, are common. Resistance to identification may serve as the general rubric under which various defensive operations occur in those who feel particularly insecure about themselves professionally. Although the process may

consciously be experienced as an attempt to limit the supervisor's impact because he or she is perceived as inadequate, there may be an unconscious grandiose component which defends against the perception of one's own inadequacy.

Since there was no measure of personal identity in this research, it is impossible to know to what extent diffusion of the personal boundary contributed to the lack of professional identity and the greater necessity for resistance to identification. (This remains fertile ground for further research.) Self-image clearly was involved; the results demonstrated that among the subjects whose professional identity seemed weakest and who tended to resist identification with their supervisors, there was a greater discrepancy between how they viewed themselves with their patients and how they would prefer to be.

One of the remedies for the assertion of negative identification seems to be increased involvement with one's training program or longer experience with one's supervisor. There is evidence from this study that the longer one has worked with a supervisor, the stronger is one's professional identity. This may in turn reduce the pressure to resist identification. It may also be possible that the increased familiarity itself that accompanies such longevity, in relation to a supervisor or a training program, reduces the oppositional tendency without

significantly affecting the sense of professional identity.

Imitative Identification: Transitional and Defensive

It was predicted that trainees whose professional identity is weak would not only show a propensity to resist identification, but also, perhaps ironically, would tend to identify imitatively. A person with a diffuse boundary is also likely to be receptive to another who is perceived as capable of infusing him or her with an identity (as in the typically adolescent propensity for "idol worship"). In the literature on professional development, it appears that positive identification may promote professional development by facilitating experimentation with another's ideas and techniques, or it may serve to keep the supervisee from developing his or her own modus operandi and professional self concept.

It was thought by this writer that by differentiating selective identification from imitative identification that the tendency toward growth in identification might be contained in the former process and that the tendency toward maintaining the status quo through overidealization and overidentification might be contained in the latter process. Whereas the assumption about selective identification was upheld, the hypothesis that evidence of imitative identification would diminish as supervisees showed improved levels of professional identity was unsupported by the data. Neither was imitative

identification more likely to occur when a trainee's professional identity was relatively well articulated. There was no clear-cut trend in the extent to which imitative identification contributed to, or was affected by, a supervisee's level of professional identity.

The more dissatisfied a neophyte's image of himself or herself in the clinician's role, the more he or she tended to identify imitatively with his or her supervisor. This was anticipated because the defining qualities of imitative identification--the tendency to idealize the supervisor and to adopt his or her model especially when experiencing difficulty--imply a lack of self-confidence and a propensity to locate externally the attributes of a well-functioning therapist. This appeared as a very mild trend in the empirical data, although the pattern of results linking self-image with identification types and with professional identity suggests that imitative identification may have largely defensive properties. In other words, those supervisees in this study with poorer self-images as clinicians tended more to identify imitatively and to resist identification, to rely less on selective identification, and they seemed to have a less articulated professional identity.

That the hypothesized inverse relationship between imitative identification and professional identity did not materialize is not altogether surprising. According to

some of the psychoanalytic theorists and authors on supervision cited, identification (even without a great deal of independence, or selectivity) can be a transitional process that facilitates movement from preoccupation with one's own inner processes toward a clearer perception of external reality (e.g. the therapy patient). Therefore, subjects whose position was primarily defensive as well as those who may be ready to differentiate themselves professionally may have displayed equivalent tendencies toward imitative identification, for different reasons.

The theoretical model that underlies this dissertation would indicate that distinguishing those for whom imitative identification is transitional from those for whom it is defensive can be accomplished on the basis of the relative presence of selective identification. To more validly establish the basis of this difference empirically, it is probably necessary to interview subjects about their motives for imitative identification.

It should be emphasized that this sample, despite the range of experience among the subjects, was entirely comprised of therapists in training. All of these trainees are struggling with the demands of clinical work which can stimulate doubts about one's competence, deepening the reliance on the supervisor. Idealization of, and dependency on, the supervisor may extend throughout the training period, and it may be among those who have been

able to achieve greater professional independence that selective identification--the internalization of the aspects of the identification in terms of the self--becomes a more prevalent response to the supervisor, in addition to imitative identification.

Differentiating Selective from Imitative Identification

It is where a professional boundary has been clearly drawn that identification--becoming like another--may represent an expansion of the self, in terms of the self. Among the therapists and analysts in training that were sampled in this study, there was a distinct tendency for those with apparently more defined professional identities--those who most saw themselves as competent, independent clinicians, and who tended to be involved with various activities related to their profession--to identify selectively with their supervisors.

Therefore, two forms of positive identification have been discussed and their differing relationship to professional identity has been shown empirically. When subjects were asked directly about their tendency to "identify" with their supervisor, by far the highest correlations were recorded with the imitative identification mode; the associations with selective identification were in the same direction, and significant, but not as powerful. One explanation of this is that identification may typically be thought of as meaning

"similarity" or "imitation," without paying attention to the degree to which the self retains its unique position. In this study, the questions on the Identification Type form which addressed imitative identification focused on a tendency toward similarity. It is the selective identification dimension which includes at once a readiness to imitate along with a capacity to differentiate.

This distinction between selective identification and imitative identification has not been made previously in studies of these processes. The readiness to identify is clearly of a different nature in imitative identification than it is in selective identification. When a supervisee simplistically follows the prescription of a supervisor, or mechanically imitates the way the latter behaves with him or her or with patients, the openness to the supervisor's influence is apparent only on a conscious level. The surface identification may belie an unconscious fear of, and resistance to, change. Identity develops as new possibilities for the self are attempted, primarily in terms of one's self.

The Development of Professional Identity

The sense of professional identity represents a kind of boundary of the professional self. The results of this study indicate that professional identity appears to develop with increasing clinical experience, with advancing age of the trainee, with additional time in a training

program, with experience in a psychoanalytic institute, with personal experience in therapy or analysis (both in terms of the duration and frequency of the treatment), and with increasing involvement with one individual supervisor. Self-image problems tend to recede as professional identity develops; the findings of the present study parallel those of Perlman (1972) and Burkett (1974) who observed improvement in the professional self-concept of trainees with time and experience. These outcomes from the empirical procedure which indicate an association between various forms of "experience" and professional identity enhance the construct validity of the measure of professional identity--the Professional Identity form--beyond its original face validity.

Other Aspects of Identification in Professional Development
Gender Issues in the Supervisory Relationship

Among the interesting outcomes of this study are issues related to gender. A striking feature is simply the composition of the sample of supervisees in contrast to that of their supervisors. Whereas men appear to have been dominating the clinical field in the past, given their much greater numbers among the supervisor group, the future of the clinical domain seems to be marked by the emergence of women as the larger group. One caution about this outcome is necessary: the supervisors came overwhelmingly from the field of clinical psychology, and the supervisees included

many social workers (drawn from the analytic institutes). Therefore, what seems like inroads made by women may also reflect the growing influence of social workers in the clinical field. The demographics of this study may also be a function of a sampling bias.

Given the fact that the pool of available role models was largely male, it is interesting to consider the consequences of this fact from the responses to this study. There was only a slight tendency in the direction of Rubinstein's (1979) findings that male supervisors had a greater impact on student therapists than female supervisors did.

The more significant results involved gender differences among the supervisee group. Women seemed to be more open to identification processes than men. Men in general seemed to be more critical of their supervisors than women. They seemed, in particular, to have greater difficulty accomodating themselves to female models. They tended to avoid them, and when they worked with women, they tended to rate them lower than they rated their male supervisors. It may be that male trainees feel more threatened by the mentoring of women than of men. There was a slight tendency for women to identify more with their male supervisors than with their female supervisors, like the male supervisees, although they rated the two groups similarly. Whether this trend of male criticalness or

distancing is significant (or unique to this sample), and what it may signify, is an issue that merits further study.

The Adequacy of the Supervisors as Models

The evaluations that supervisees gave their supervisors through the Supervisory Environment form deserves some attention. As noted in Chapter IV, there was a broad range of ratings of the supervisor, and 38% of the subjects considered their supervisor as less than "above average" compared to other supervisors they had had. Six percent of the trainees rated their supervisors as worse than average. It is unlikely that these were entirely objective assessments, uninfluenced by the supervisees' anxieties and identity conflicts, both personal and professional. Nevertheless, an attempt was made to identify situations where a supervisor might not be an appropriate model for positive identification. The analysis of identification phenomena in situations where the supervisor was considered at least "above average" ensured that the model was suitable for identification, so that differences among trainees in their identification styles could validly be considered representative of the trainee. Other methods for controlling for variations in the quality of the supervisor, should be contemplated in future studies of these issues.

Identification Forever?

Although selective identification was shown to be more present in trainees with a more defined professional identity, the question remains whether this process retains its usefulness throughout professional development. It may be assumed that among those who graduate from training institutions, and who no longer feel they require supervision, many in fact can rely on themselves such that learning to manage clinical problems no longer requires any kind of active identification in a mentoring relationship. It may be that "direct and immediate contact" (Jacobson, 1964, p. 172) with a patient's experience and with the therapist's own experience, or "creative relatedness with the outer world" (Searles, 1966, p. 70) are available to those whose personal and professional identities have been significantly differentiated, in large part due to previous relationships where identifications, imitative and selective, fostered such positive developments.

Implications of this Study

One practical implication of the current work is a caution to psychotherapy supervisors. What seems like a supervisee's readiness to learn from a supervisor may indeed be defensive. Imitative identification does not correspond with professional identity development as selective identification does. If a trainee does not demonstrate some initiative in conjunction with applying

the suggestions of the supervisor, or otherwise seems overly dependent on the supervisor's direction, it may be fruitful to encourage the supervisee to risk and make mistakes on his or her own rather than continually to try to reproduce the supervisor's point of view. Or if a supervisee seems to repeatedly frustrate the supervisor's attempts to have some influence over the former's work, the supervisor should first consider whether he or she has had some special need to be emulated, and barring that, should direct the supervisee's attention to such resistance so that the supervisee might consider consciously, in his or her treatment or otherwise, the perceived necessity for such obstacles to learning and changing.

What is true of the supervisory situation may well be true of the therapeutic or analytic situation. The significance of identification processes in the treatment situation deserves systematic attention although the collection of data about the patient's or analysand's experience is considerably more complicated. Nevertheless, how the influence of the therapist is experienced or identified with by a patient as he or she struggles to assert a separate identity seems to be a central phenomenon of the therapeutic process.

An Evaluation of this Research

The results of this study should be considered with some qualification. Because of the lack of randomness in the sampling procedure, it is not possible to reliably generalize to the population as a whole from patterns of responses of the subjects in this study. One useful way to confirm the trends identified here is to have the study replicated in different locales.

A comment is in order about the method employed in this study. The use of a questionnaire format has the advantage of reaching more subjects than is possible by other methods, such as interviewing. Eliciting rated responses facilitates the scoring and analysis of the results. Considerable care went into the design of these questionnaires and their distribution in order to elicit serious, meaningful responses to clearly stated questions. It is believed that since the empirical instruments were developed on the basis of ideas contained in the literature, thoughts of colleagues, and personal experience, and tested in a pilot study, that the results of this study do reliably and validly address the issues raised here. However, while breadth of feedback is important, there is no substitute for in depth knowledge of individual experiences. While replications of this study would likely bolster its conclusions about the nature of identification processes and their association with

professional identity development, a method that employed clinical interviews would provide an important complement to the work that has begun here.

One final recommendation for future research has been indicated earlier and deserves emphasis. The issues addressed here are fundamentally related to personal processes of development. Studies that concern themselves with identification processes either in psychological development or in professional identity formation can be greatly enhanced by an effort to assess subjects' personal identity because this may well be the critical dimension that most affects all other variables.

Concluding Remarks

This dissertation has focused on identification processes in professional development. It has documented from the literature and through an empirical study that the supervisory relationship has a significant impact on the development of a professional identity for therapists in training. This impact has been shown to be mediated through identification processes that may take three different forms--selective, imitative, and resistant. This study shows that a sense of insufficiency or inadequacy is more present in trainees whose professional development is less advanced, and that a trainee's level of professional identity is tied to various aspects of experience.

The correspondence between selective identification

and higher levels of professional identity achievement indicates that identification and identity development are mutually sustaining when the self is differentiated and identification processes are marked less by imitative and resistant qualities than by selective ones. That imitative identification may also contribute to professional identity development was suggested by its ubiquitous presence, but this relationship remains unclear.

It is in the experience of significant relationships that a blurring of boundaries inevitably occurs, and one's feeling, thinking, and acting may change to become more like the other person. Through this act of identifying with the other, one may discover who one is or create who one can be. Such a discovery may be too terrifying or painful for those struggling with severely negative introjected self-images. Alternatively, this experience may be turned not into an opportunity for self-enhancement but a pseudo re-creation of oneself as the other. Still, as long as the other is engaged, the possibility of risking change is present.

APPENDICES

APPENDIX A

RESEARCH PROTOCOL
(QUESTIONNAIRE TITLES IN PARENTHESES)

Thank you for taking the time to contribute to this dissertation research. Identifying information will be coded so that all responses will remain confidential. If you would prefer not to include your name, feel free to leave it off. Providing it will allow for the possibility of follow-up. If you do not wish to provide your name and would like to receive a summary of the results, send the mailing address slip separately.

PROFESSIONAL DEGREE(S): _____

HAVE YOU GRADUATED FROM A PSYCHOANALYTIC INSTITUTE? ____

NAME OF CURRENT PROGRAM OR INSTITUTE, IF ANY: _____

YEAR IN PROGRAM OR INSTITUTE: ____

CLINICAL EXPERIENCE -- YEARS PRACTICING:

PSYCHOTHERAPY NOT PSYCHOANALYSIS ____
 PSYCHOANALYSIS NOT PSYCHOTHERAPY ____
 PSYCHOANALYSIS AND PSYCHOTHERAPY ____

AGE: ____ GENDER: ____

ARE YOU, OR HAVE YOU BEEN, IN PSYCHOTHERAPY OR PSYCHOANALYSIS? ____
 YEARS ____ SESSIONS PER WEEK ____

NAME: _____

ADDRESS: _____

PHONE: _____

(WOULD YOU LIKE AN ABSTRACT OF THIS STUDY MAILED TO YOU? ____)

This study will explore how people function in the supervisory situation. You will be asked to reflect on your experience as a therapist- or analyst-in-training with a supervisor of psychotherapy or psychoanalysis whom you are currently seeing. If there is more than one, focus on the one with whom you have worked the longest. Please fill in the factual data about the supervisor whom you will be considering.

FACTUAL DATA:

- 1) Age of supervisor: _____
- 2) Gender of supervisor: _____
- 3) Professional degree(s) of supervisor: _____
- 4) Psychoanalytic graduate? _____
- 5) Psychoanalytic candidate? _____
- 6) Name of psychoanalytic institute: _____
- 7) How many years has supervisor been supervising? _____
- 8) Months you have worked with this supervisor: _____

(IDENTIFICATION TYPE FORM)

Please proceed to the list of questions. Try to answer them as honestly as you can, rating how closely each one accurately reflects your experience. Give a rating between 1 and 5, as follows:

1=NOT AT ALL, 2=SLIGHTLY, 3=MODERATELY, 4=A LOT, 5=VERY MUCH

- 1) Does supervision seem to be a process of learning what you don't know? _____
- 2) Do you readily accept your supervisor's recommendations? _____
- 3) Do you feel reluctant to accept for yourself the model of a therapist/analyst which your supervisor represents? _____
- 4) Do you openly criticize or attack what your supervisor says or does? _____
- 5) Do you consider your supervisor's suggestions or ideas about your work, incorporating some and discarding others depending on how compatible they seem with your personality and working style? _____
- 6) Are you interested in emulating your supervisor's way of thinking and working? _____
- 7) Is your work with your patient(s) influenced by your desire for your supervisor's approval? _____
- 8) Do you reject input from your supervisor without evaluating it because it does not conform to your ideas? _____
- 9) When your supervisor makes a suggestion, do you tend to ignore it? _____

(1=NOT AT ALL, 2=SLIGHTLY, 3=MODERATELY, 4=A LOT, 5=VERY MUCH)

- 10) Do you feel comfortable making your own mistakes with your patient(s) and then examining them with your supervisor? ____
- 11) Do you use your supervisor's perspective to help sharpen your own thinking, as in areas about which you have doubts or questions? ____
- 12) Do you tend to avoid responsibility for your work by seeking to imitate your supervisor? ____
- 13) How comfortable are you agreeing with your supervisor? ____
- 14) When faced with a difficult situation with a patient that you have discussed with your supervisor, do you tend to repeat errors, disregarding your supervisor's ideas? ____
- 15) Have you found that new aspects of your personality have become integrated into your working style as a consequence of your work with your supervisor? ____
- 16) Do you have a tendency to mimic, voluntarily or involuntarily, aspects of your supervisor's manner, including gestures, postures, favorite words or phrases, or attitudes? ____
- 17) When you feel uncertain about what to do with a patient, do you search for what your supervisor might do? ____
- 18) Do you allow yourself to become meaningfully involved with your supervisor in such a way that you are receptive to his or her point of view and actively consider how it was arrived at?

- 19) When your supervisor is responding to a piece of work which you have presented, do you tend to feel the urge to correct his or her observations, to justify what you have done? ____
- 20) Does agreeing with your supervisor's ideas tend to feel threatening to the development of your own working style? ____
- 21) When faced with a difficult situation with a patient that you have discussed with your supervisor, do you tend to apply his or her ideas? ____
- 22) Do you believe that your supervisor knows what therapy or analysis is about, and that the process of supervision involves learning or taking in what your supervisor knows? ____
- 23) Do the problems in your work which are highlighted by your supervisor seem to be related to who you are so that you can develop meaningful insight about them? ____

(1=NOT AT ALL, 2=SLIGHTLY, 3=MODERATELY, 4=A LOT, 5=VERY MUCH)

24) To what extent do you feel the need to disagree with your supervisor's comments and criticism? ____

25) Do you feel invaded by your supervisor's observations such that you feel conflicted as to how to act? ____

26) To what degree do you feel able to maintain a sense of your value and individuality as a person and aspiring professional in your supervisory relationship? ____

27) How comfortable are you disagreeing with your supervisor?

(PERSONAL STYLE FORM)

You will be asked below to indicate 1) how you perceive your supervisor (in relation to you), 2) how you perceive yourself (in relation to your patient(s)), and 3) how you would like to be.

Choose between the two descriptive items, and write the appropriate letter for each category. Indicate which of the two items is more characteristic of 1) your SUPERVISOR, 2) yourSELF, and 3) your IDEAL SELF.

1) A) Dresses casually, B) Dresses formally.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

2) A) Warm/friendly, B) Cold/distant.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

3) A) Speaks abstractly, B) Speaks concretely.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

4) A) Active, B) Passive.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

5) A) Self-confident, B) Tentative.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

6) A) Animated, B) Impassive.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

7) A) Gestures when speaking, B) Sits still.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

8) A) Looks away, B) Makes eye contact.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

9) A) Allows for silence, B) No silence.
SUPERVISOR ____ SELF ____ IDEAL SELF ____

(SUPERVISORY ENVIRONMENT FORM)

In this section, with a rating of 1 - 5, please compare your current supervisor to other supervisors you have had in the past (if this is your first supervisor, compare him or her to your own expectations or standards of supervisory behavior), with respect to the following:

- 1) Your comfort with him or her. (1=LEAST, 5=MOST) ____
- 2) His or her empathy, understanding of you. (1=LEAST, 5=MOST) ____
- 3) His or her empathy, understanding of your patients.
(1=LEAST, 5=MOST) ____
- 4) His or her sensitivity and willingness to satisfy your more personal needs; e.g. need for reassurance, need for specific feedback about how you are doing. (1=LEAST, 5=MOST) ____
- 5) His or her interpersonal warmth versus distance.
(1=DISTANT, 5=WARM) ____
- 6) His or her task orientedness. (1=LEAST, 5=MOST) ____
- 7) His or her defensiveness versus nondefensiveness.
(1=DEFENSIVE, 5=NONDEFENSIVE) ____
- 8) His or her constructiveness versus destructiveness to your self-esteem as a therapist. (1=DESTRUCTIVE, 5=CONSTRUCTIVE) ____
- 9) Your openness versus resistance to learning from him or her.
(1=RESISTANT, 5=OPEN) ____
- 10) Your openness with your supervisor; i.e. the extent to which you admit your mistakes, share your anxieties and positive or negative feelings about your patients and their therapies, and discuss your relationship with your supervisor.
(1=LEAST, 5=MOST) ____
- 11) His or her competence in teaching or conveying therapeutic skills. (1=LEAST, 5=MOST) ____
- 12) His or her overpermissiveness ("anything goes") versus his or her controlling authoritarianism (pressure to see things the supervisor's way). (1=MOST OVERPERMISSIVE, 3=NEITHER OVERPERMISSIVE NOR AUTHORITARIAN, 5=MOST AUTHORITARIAN) ____
- 13) The specificity versus overabstractness of the supervisor's suggestions. (1=OVERABSTRACT, 5=SPECIFIC) ____
- 14) How stimulating are the supervisory sessions?
(1=LEAST, 5=MOST) ____
- 15) How satisfying are the supervisory sessions?
(1=LEAST, 5=MOST) ____

(MISCELLANEOUS INFORMATION)

In the following 4 questions, various possibilities will be presented regarding several issues pertaining to supervision. Check all, if any, that apply to you concerning your present supervisor.

- 1) Below are described various ways that supervisors come to be assigned to supervisees.
 - A) I asked for a specific person because of his or her orientation. _____
 - B) I asked for a specific person because someone else suggested him or her. _____
 - C) I was not permitted to have any input into the selection. _____
 - D) I did not understand the options or have clear enough ideas in order to make a choice. _____
 - E) The assignment was made in line with my request. _____
 - F) The assignment was made despite my request. _____

- 2) In what form do you present case material to your supervisor?
 - A) sequential process notes _____
 - B) summaries of process of sessions _____
 - C) impressionistic remarks about the patient, the treatment, etc. _____
 - D) Other (please describe) _____

- 3) How would you characterize the nature of your supervisor's input?
 - A) dynamic formulations about the patient _____
 - B) identification of countertransference difficulties _____
 - C) clarifications of general principles of treatment _____
 - D) illuminations of clinical or other theories of psychoanalysis or psychotherapy _____
 - E) citations of relevant literature _____
 - F) Other (please describe) _____

- 4) The following are representations of styles of supervision. Check which one(s), if any, applies to your current supervisor:
 - A) Provides little structure. Speaks rarely. Intervenes mainly when trouble arises. Therapist or analyst left to define own style and to discern movement of therapy. _____
 - B) Explains patient in terms of own metapsychology or theoretical formulation. Therapeutic interaction follows automatically. _____
 - C) Similar to (B) in that therapeutic interaction is explained in terms of predictable series of steps. Unlike (B) in that such predictions are not based on a metapsychology. _____
 - D) Works with countertransference of supervisee, delving into personal issues in order to help therapist expand his or her self-awareness. _____
 - E) Confrontative. Creates atmosphere of "creative disorganization." Supervisee pressured to give up preconceptions. _____
 - F) Models what he or she would do in situations that therapist describes. Parallel process tends to be evoked with supervisee playing out interaction as patient and supervisor as therapist. _____

5) Does your supervisor discuss your personal life with you in relation to your work as a therapist? ____

6) With those supervisors who have been influential in your professional development, what effect has the termination of the working relationship had on your experience of their impact? (please check one)

Strengthened sense of influence ____ Weakened sense of influence ____
 No change in sense of influence ____

The last 3 questions in this section require a rating of 1 - 5, as specified:

7) To what degree (1=NOT AT ALL, 5=VERY MUCH) do you feel identified with:

- A) your current supervisor's personal manner ____
- B) your supervisor's theoretical orientation ____
- C) your supervisor's working style ____

8) In the course of your professional development, are you inclined to seek out supervisors whose theoretical perspective is similar to your own, or are you interested also in learning from supervisors whose theoretical approach is different? (1=SIMILAR, 5=DIFFERENT) ____

9) Please rate the extent to which you think your functioning as a clinician is modeled after your own therapist or analyst, or is different? (1=SIMILAR, 5=DIFFERENT) ____

(PROFESSIONAL IDENTITY FORM)

1) Are you a member of any professional organizations? ____
If so, please name them.

2) Do you ever attend professional lectures or conferences? ____
If so, how many did you attend in the past 12 months:
Lectures? ____ Conferences? ____

3) Do you belong to any professional book clubs? ____

4) How many professional books have you bought in the past 12 months? ____

5) Do you subscribe to any professional journals? ____ If so, which one(s)?

6) Do you regularly read any professional journals? ____ If so, which one(s)?

7) Are you a member of any study, peer supervision, or other professionally-oriented groups other than those officially organized by your program or institute? ____ If so, please describe.

For the next five questions, you will be asked to give a rating, as follows:

1=NOT AT ALL, 2=SLIGHTLY, 3=MODERATELY, 4=A LOT, 5=VERY MUCH

8) Rate to what degree you feel that your ideas are elaborated in your mind as to how to be a competent therapist/analyst? ____

9) Rate to what degree you feel that you define or formulate for yourself what are the goals and issues in the treatment with your patient(s). ____

10) To what degree do you feel you possess the resources necessary to understand problems with patients and to manage them effectively? ____

11) To what degree have you established, and do you consistently maintain, the "basic ground rules" in your work (e.g. policy regarding fees, session length and frequency, attendance, vacation)? ____

12) To what degree do you, rather than your current supervisor, identify the issues in supervision that need to be examined?

APPENDIX B

IDENTIFICATION TYPE FORM SCORING KEYORIGINAL QUESTIONNAIRE

IMITATIVE IDENTIFICATION QUESTIONS:

1, 2, 6, 7, 12, 13, 16, 17, 22

SELECTIVE IDENTIFICATION QUESTIONS:

5, 10, 11, 15, 18, 21, 23, 26, 27

RESISTANCE TO IDENTIFICATION QUESTIONS:

3, 4, 8, 9, 14, 19, 20, 24, 25

REVISED QUESTIONNAIRE

IMITATIVE IDENTIFICATION QUESTIONS:

FACTOR 1: 1, 2, (-)3, 6, 22, 23

FACTOR 2: 7, 16, 17, 21

SELECTIVE IDENTIFICATION QUESTIONS:

FACTOR 3: 10, 11, 18, 27

RESISTANCE TO IDENTIFICATION QUESTIONS:

FACTOR 4: (-)5, 25, (-)26

FACTOR 5: 19, 20, 24

EXCLUDED QUESTIONS:

4, 8, 9, 12, 13, 14, 15

APPENDIX C

PROFESSIONAL IDENTITY FORM:

RELATIVE VALUES ASSIGNED TO "OBJECTIVE" ACTIVITIES

PROFESSIONAL ORGANIZATIONS	- 5
LECTURES	- 1
CONFERENCES	- 5
BOOK CLUBS	- 1
BOOKS READ	- 1
JOURNAL SUBSCRIPTIONS	- 2
JOURNALS READ	- 4
GROUP MEMBERSHIP	- 5

References

- Abramowitz, S. I., & Abramowitz, C. V. Sex role psychodynamics in psychotherapy supervision. American Journal of Psychotherapy, 1976, 30, 583-592.
- Abramowitz, S. I., James, C. R., & Weitz, L. J. Supervisor self-concept and self-concept deterioration among psychotherapy trainees. Journal of Clinical Psychology, 1974, 30(3), 300-302.
- Ackerman, N. Selected problems in supervised analysis. Psychiatry, 1953, 16, 283-290.
- Allen, J. Identity formation in late adolescent women: an object-relations approach (Doctoral dissertation, City University of New York, 1976). Dissertation Abstracts International, 1976, 37(3-B), 1423.
- Andresen, J. J. Conflict and the origins of identification. Psychoanalytic Review, 1980, 67(1), 25-44.
- Arlow, J. A. The supervisory situation. Journal of the American Psychoanalytic Association, 1963, 11, 576-594.
- Balint, A. Identification. The Yearbook of Psychoanalysis, 1947, 1, 317-338.
- Balint, M. Analytic training and training analysis. International Journal of Psycho-Analysis, 1954, 35, 157-162.
- Bandura, A. Principles of behavior modification. New York: Holt, Rinehart and Winston, 1969.
- Barnat, M. R. Some characteristics of supervisory identification in psychotherapy. Psychotherapy: Theory, Research and Practice, 1974, 11(2), 189-192.
- Barnat, M. R. Spontaneous supervisory metaphor in the resolution of trainee anxiety. Professional Psychology, 1977, 8(3), 307-315.
- Barnat, M. R. Psychotherapy supervision and the duality of experience. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Benedek, T. Countertransference and the training analyst. Bulletin of the Menninger Clinic, 1954, 18, 12-16.

- Beres, D. Self, identity, and narcissism. Psychoanalytic Quarterly, 1981, 50, 515-534.
- Bion, W. Experiences in groups. New York: Basic Books, 1959.
- Blos, P. On adolescence: a psychoanalytic interpretation. New York: The Free Press, 1962.
- Brenner, C. An elementary textbook of psychoanalysis. New York: International Universities Press, 1973.
- Burgum, M., Durkin, H., Gondor, L. H., Miller, S., Pfeffer, B. B., & Zucker, L. Therapeutic implications of supervision. Paper presented at the annual meeting of the Postgraduate Center for Mental Health, New York, 1958.
- Burkett, G. L. The self in professional socialization: self-evaluation in a psychiatry residency. (Doctoral dissertation, University of Illinois at Chicago Circle, 1974). Dissertation Abstracts International, 1975, 35(11-A), 7401.
- Bush, G. Transference, countertransference, and identification in supervision. Contemporary Psychoanalysis, 1969, 5, 158-162.
- Caligor, L. Parallel and reciprocal processes in psychoanalytic supervision. Contemporary Psychoanalysis, 1981, 17, 1-27.
- Cherniss, C., & Egnatios, E. Clinical supervision in community mental health. Social Work, 1978, 23, 219-223.
- Cohen, L. The new supervisee views supervision. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- DeBell, D. E. A critical digest of the literature on psychoanalytic supervision. Journal of the American Psychoanalytic Association, 1963, 11, 546-575.
- Deitz, G. A comparison of delinquents with non-delinquents on self-concept, self-acceptance, and parental identification. Journal of Genetic Psychology, 1969, 115(2), 285-295.
- De Saussure, R. Identification and substitution. International Journal of Psycho-Analysis, 1939, 20, 465-470.

- Deutsch, H. Some forms of emotional disturbance and their relation to schizophrenia. Psychoanalytic Quarterly, 1942, 11, 301-321.
- Deutsch, H. The psychology of women, a psychoanalytic interpretation. New York: Grune & Stratton, 1944.
- Dignan, M. H. Ego identity and maternal identification. Journal of Personality and Social Psychology, 1965, 1, 476-483.
- Doehrman, M. Parallel process in supervision and psychotherapy. Bulletin of the Menninger Clinic, 1976, 40(1), 1-104.
- Eimer, E. Perception and concept formation: variables of independence and identification. Unpublished M. A. thesis, School of Education, City College of the City University of New York, 1964.
- Ekstein, R., & Mayman, M. On the professional identity of the clinical psychologist. Bulletin of the Menninger Clinic, 1957, 21, 59-61.
- Ekstein, R., & Wallerstein, R. S. The teaching and learning of psychotherapy. New York: Basic Books, 1958.
- Emch, M. The social context of supervision. International Journal of Psychoanalysis, 1955, 36, 298-306.
- Erikson, E. H. Identity and the life cycle. Psychological Issues Monograph, 1959, 1.
- Erikson, E. H. Identity, youth and crisis. New York: W. W. Norton & Company, 1968.
- Fairbairn, W. R. D. Psychoanalytic studies of the personality. London: Routledge & Kegan Paul, 1952.
- Feiner, A. H. Countertransference and the anxiety of influence. In L. Epstein, & A. H. Feiner (Eds.), Countertransference. New York: Jason Aronson, 1979.
- Fenichel, O. The psychoanalytic theory of neurosis. New York: W. W. Norton, 1945.
- Fleming, J., & Benedek, T. Psychoanalytic supervision. New York: Grune & Stratton, 1976.
- Frank, J. Persuasion and healing: a comparative study of psychotherapy. Baltimore: Johns Hopkins Press, 1961.

- Freud, A. The ego and the mechanisms of defense. New York: International Universities Press, 1946.
- Freud, A. Mutual influences in the development of ego and id. Psychoanalytic Study of the Child, 1952, 7, 42-50.
- Freud, S. 1909. Family romances. Standard Edition, 9, London: Hogarth Press and the Institute of Psycho-analysis, 1959.
- Freud, S. 1917. Mourning and melancholia. Standard Edition, 14, London: Hogarth Press and the Institute of Psycho-analysis, 1957.
- Freud, S. 1921. Group psychology and the analysis of the ego. Standard Edition, 18, London: Hogarth Press and the Institute of Psycho-analysis, 1955.
- Freud, S. 1923. The ego and the id. Standard Edition, 19, London: Hogarth Press and the Institute of Psycho-analysis, 1961.
- Freud, S. 1924. The dissolution of the oedipus complex. Standard Edition, 19, London: Hogarth Press and the Institute of Psycho-analysis, 1961.
- Freud, S. 1933. New introductory lectures on psycho-analysis. Standard Edition, 22, London: Hogarth Press and the Institute of Psycho-analysis, 1964.
- Frijling-Schreuder, E. C. M. On individual supervision. International Journal of Psycho-analysis, 1970, 51, 363-370.
- Fromm, E. Escape from freedom. New York: Holt, Rinehart, & Winston, 1941.
- Gale, M. S. Resident perception of psychotherapy supervision. Comprehensive Psychiatry, 1976, 17(1), 191-194.
- Gaoni, B., & Neumann, M. Supervision from the point of view of the supervisee. American Journal of Psychotherapy, 1974, 23, 108-114.
- Gardner, L. H. Racial, ethnic, and social class considerations in psychotherapy supervision. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Gilmore, M. M., & Perry, S. W. The psychiatry internship and the development of professional identity. American Journal of Psychiatry, 1980, 137(10), 1206-1210.

- Greenberg, L. Supervision from the perspective of the supervisee. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Greenson, R. R. The struggle against identification. Journal of the American Psychoanalytic Association, 1954, 2, 200-217.
- Grotjahn, M. The role of identification in psychiatric and psychoanalytic training. Psychiatry, 1949, 12(2), 141-151.
- Grotjahn, M. Problems and techniques of supervision. Psychiatry, 1955, 18(1), 9-15.
- Grotstein, J. Newer perspectives on object relations theory. Contemporary Psychoanalysis, 1982, 18, 43-91.
- Gruen, A. Autonomy and identification: the paradox of their opposition. International Journal of Psycho-Analysis, 1968, 49, 648-655.
- Gustin, J. C. Supervision in psychotherapy. Psychoanalysis and the Psychoanalytic Review, 1958, 45(3), 63-72.
- Halleck, S. C., & Woods, S. M. Emotional problems of psychiatric residents. Psychiatry, 1962, 25, 339-346.
- Hendrick, I. Early development of the ego: identification in infancy. Psychoanalytic Quarterly, 1951, 20, 44-61.
- Hess, A. K. Training models and the nature of psychotherapy supervision. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Hess, A. K. Summing up and moving forward in psychotherapy supervision. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Hirsch, I., & Singer, E. Adolescent dependence and rebelliousness. American Psychologist, 1961, 16, 353.
- Howard, L., & Kubis, J. Ego identity and some aspects of personal adjustment. Journal of Psychology, 1964, 58(2), 459-466.
- Jacobson, E. The self and the object world. New York:

International Universities Press, 1964.

- Josselson, R. L. Psychodynamic aspects of identity formation in college women. Journal of Youth and Adolescence, 1973, 2(1), 3-52.
- Kadushin, A. Games people play in supervision. Social Work, 1968, 13(3), 23-32.
- Kernberg, O. Structural derivatives of object relationships. International Journal of Psycho-Analysis, 1966, 47, 236-253.
- Klagsbrun, S. C. In search of an identity. Archives of General Psychiatry, 1967, 16(3), 286-289.
- Klein, E. B., & Gould, L. J. Alienation and identification in college women. Journal of Personality, 1969, 37(3), 468-480.
- Klein, M. 1929. Personification in the play of children. In Contributions to psychoanalysis 1921-1945. London: Hogarth Press and the Institute of Psycho-Analysis, 1948.
- Klein, M. 1932. Early stages of the oedipus conflict and of superego formation. In The psycho-analysis of children. Delacorte Press/Seymour Lawrence, 1975.
- Klein, M. 1946. Notes on some schizoid mechanisms. In Envy and gratitude and other works 1946-1963. Delacorte Press/Seymour Lawrence, 1975.
- Klein, M. 1955. On identification. In Envy and gratitude and other works 1946-1963. Delacorte Press/Seymour Lawrence, 1975.
- Klein, M. 1959. Our adult world and its roots in infancy. In Envy and gratitude and other works 1946-1963. Delacorte Press/Seymour Lawrence, 1975.
- Koff, R. A definition of identification: a review of the literature. International Journal of Psycho-Analysis, 1961, 42, 362-370.
- Kohut, H. The psychoanalytic curriculum. Journal of the American Psychoanalytic Association, 1962, 10, 153-163.
- Kohut, H. The analysis of the self. New York: International Universities Press, 1971.

- Kohut, H. The restoration of the self. New York: International Universities Press, 1977.
- Laforge, R., & Suczek, R. The interpersonal dimension of personality: III. An interpersonal checklist. Journal of Personality, 1955, 24(1), 94-112.
- Lambert, M. J. Research and the supervisory process. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Lampl-De Groot, J. The role of identification in psychoanalytic procedure. International Journal of Psycho-Analysis, 1956, 37, 456-459.
- Lane, R. G. The influence of supervision on the trainee's development of facilitative skills in counseling. Unpublished doctoral dissertation, Arizona State University, 1974.
- Langs, R. The supervisory experience. New York: Jason Aronson, 1979.
- Langs, R. Supervision and the bipersonal field. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Lennon, W. J. A study of the effects of counseling practicum supervisor offered conditions on self-exploration. Unpublished doctoral dissertation, University of Florida, 1972.
- Levenson, E. A. Follow the fox: an inquiry into the vicissitudes of psychoanalytic supervision. Contemporary Psychoanalysis, 1982, 18, 1-15.
- Levinson, D. J., Darrow, C. M., Klein, E. B., Levinson, M. H., & McKee, B. The psychosocial development of men in early adulthood and the mid-life transition. In D. Ricks, A. Thomas & Mr. Roff (Eds.), Life history research in psychopathology (Vol. 3). Minneapolis: The University of Minnesota Press, 1974.
- Loewald, H. Internalization, separation, mourning and the superego. Psychoanalytic Quarterly, 1962, 31, 483-504.
- Levy, J. S. Factors bearing on role definition and dilemmas of therapists in training (Doctoral dissertation, City University of New York, 1979). Dissertation Abstracts International, 1980, 41(1-B), 356.

- Lower, R. Countertransference resistances in the supervisory situation. American Journal of Psychiatry, 1972, 129(2), 156-160.
- McDevitt, J. B. The role of internalization in the development of object relations during the separation-individuation phase. Journal of the American Psychoanalytic Association, 1979, 27, 327-343.
- McDevitt, J. B., & Mahler, M. S. Object constancy, individuality, and internalization. In S. I. Greenspan & G. H. Pollock (Eds.), The course of life: psychoanalytic contributions toward understanding personality development (Vol. 1). NIMH, 1980.
- Mahler, M. S., Pine, F., & Bergman, A. The psychological birth of the human infant. New York: Basic Books, 1975.
- Marcia, J. E. Development and validation of ego-identity status. Journal of Personality and Social Psychology, 1966, 3, 551-558.
- Marcia, J. E. Ego identity status: relationship to change in self-esteem, 'general maladjustment,' and authoritarianism. Journal of Personality, 1967, 35, 118-133.
- Marcia, J. E. & Friedman, M. L. Ego identity status in college women. Journal of Personality, 1970, 38, 249-263.
- Marshall, W. R., & Confer, W. N. Psychotherapy supervision: supervisees' perspective. In A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Meerloo, J. A. M. Some psychological processes in the supervision of therapists. American Journal of Psychotherapy, 1952, 6(3), 467-470.
- Meissner, W. Notes on identification: I. Origins in Freud. Psychoanalytic Quarterly, 1970, 39, 563-589.
- Meissner, W. Notes on identification: II. Clarification of related concepts. Psychoanalytic Quarterly, 1971, 40, 277-302.
- Meissner, W. Notes on identification: III. The concept of identification. Psychoanalytic Quarterly, 1972, 41, 234-260.
- Moldawsky, S. Psychoanalytic psychotherapy supervision. In

- A. K. Hess (Ed.), Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Moulton, R. Multiple dimensions in supervision. Contemporary Psychoanalysis, 1969, 5, 146-150.
- Nemiah, J. C. Supervision--teaching or psychotherapy. Based on material presented to 50th Annual Meeting of Ontario Psychiatric Association, Toronto, 1970.
- Nunnally, J. C. psychometric theory., 2nd ed. New York: McGraw-Hill, 1978.
- Ogden, T. H. On projective identification. International Journal of Psycho-Analysis, 1979, 60, 357-363.
- Ogden, T. H. The concept of internal object relations. International Journal of Psycho-Analysis, 1983, 64, 227-241.
- Payne, P. A., & Gralinsky, D. M. Effects of supervision style and empathy upon counselor learning. Journal of Counseling Psychology, 1972, 15, 517-521.
- Peltz, W. Transference in psychoanalytic case supervision. Bulletin of the Philadelphia Association for Psychoanalysis, 1952, 6, 467-470.
- Pemberton, B. K. The presence of the therapist (Doctoral dissertation, Georgia State University, 1976). Dissertation Abstracts International, 1977, 38(1-B), 373-374.
- Perlman, G. Change in self- and ideal self-concept congruence of beginning psychotherapists. Journal of Clinical Psychology, 1972, 28(3), 404-408.
- Pierce, R. M., Carkhuff, R. R., & Berenson, B. G. The effects of high and low functioning counselors upon counselors in training. Journal of Clinical Psychology, 1967, 23, 212-215.
- Pierce, R. M., & Schauble, P. G. Graduate training of facilitative counselors: The effects of individual supervision. Journal of Counseling Psychology, 1970, 17, 210-215.
- Pierce, R. M., & Schauble, P. G. Study on the effects of individual supervision in graduate school training. Journal of Counseling Psychology, 1971, 18, 186-187.
- Pine, F. On the pathology of the separation-individuation

- process as manifested in later clinical work: an attempt at delineation. International Journal of Psycho-Analysis, 1979, 60, 225-242.
- Porter, M. The effects of the nature of the supervisory relationship on participants' ability to give accurate descriptions of the client. Unpublished doctoral dissertation, University of Detroit, 1979.
- Rappaport, D. The theory of ego-autonomy: a generalization. Bulletin of the Menninger Clinic, 1958, 22, 13-35.
- Reynolds, R. S. Effective psychotherapy supervision as perceived by psychology interns (Doctoral dissertation, The American University, 1980). Dissertation Abstracts International, 1981, 41(12-B), 4684-4685.
- Robinson, V. P. Supervision in social case work: a problem in professional education. Chapel Hill: The University of North Carolina Press, 1936.
- Rogers, C. R. Client-centered therapy. Boston: Houghton-Mifflin, 1951.
- Rosenblatt, A., & Mayer, J. E. Objectionable supervisory styles: students' views. Social Work, 1975, 20, 184-189.
- Rubinstein, K. E. 1979. Identification processes in psychotherapy supervision: the effect of sex of student and supervisor (Doctoral dissertation, University of Massachusetts, 1979). Dissertation Abstracts International, 1980, 40(8-B), 3964.
- Schachtel, E. G. Metamorphosis. New York: Basic Books, 1959.
- Schafer, R. Aspects of internalization. New York: International Universities Press, 1968.
- Schafer, R. Concepts of self and identity and the experience of separation-individuation and adolescence. Psychoanalytic Quarterly, 1973, 42, 42-59.
- Schafer, R. A new language for psychoanalysis. New Haven: Yale University Press, 1976.
- Schechter, D. E. Identification and individuation. Journal of the American Psychoanalytic Association, 1968, 16, 48-80.
- Schechter, D. E. The loving and persecuting superego. Contemporary Psychoanalysis, 1979, 15, 361-379.

- Schlessinger, N. Supervision of psychotherapy: A critical review of the literature. Archives of General Psychiatry, 1966, 15, 129-134.
- Schonbar, R. A. Identification and the search for identity. Contemporary Psychoanalysis, 1967, 3(2), 75-95.
- Searles, H. F. The informational value of the supervisor's emotional experience. Psychiatry, 1955, 18, 135-146.
- Searles, H. F. 1958. Positive feelings in the relationship between the schizophrenic and his mother. In Collected papers on schizophrenia and related subjects. New York: International Universities Press, 1965.
- Searles, H. F. 1965. Identity development in Edith Jacobson's The self and the object world. In Countertransference and related subjects. New York: International Universities Press, 1979.
- Searles, H. F. 1966. Concerning the development of an identity. In Countertransference and related subjects. New York: International Universities Press, 1979.
- Sharaf, M. R., & Levinson, D. J. The quest for omnipotence in professional training. Psychiatry, 1964, 27, 135-149.
- Singer, E. Identity vs. identification: a thorny psychological issue. Review of Existential Psychology and Psychiatry, 1965, 5, 160-175.
- Tarachow, S. An introduction to psychotherapy. New York: International Universities Press, 1963.
- Thompson, C. Identification with the enemy and the loss of the sense of self. In M. R. Green (Ed.), Interpersonal Psychoanalysis. New York: Basic Books, 1964.
- Towle, C. The learner in education for the professions, as seen in education for social work. Chicago: University of Chicago Press, 1954.
- Vickers, K. H. Supervisory effects on novice therapists' therapeutic style and orientation (Doctoral dissertation, Adelphi University, 1974). Dissertation Abstracts International, 1974, 35(5-B), 2452-2453.
- Wagner, F. F. Supervision of psychotherapy. American Journal of Psychotherapy, 1957, 11, 759-768.

- Wallerstein, R. S. (Ed.). Becoming a psychoanalyst: a study of psychoanalytic supervision. New York: International Universities Press, 1981.
- Weiner, I. B., & Kaplan, R. G. From classroom to clinic: supervising the first psychotherapy client. In A. K. Hess (Ed.) Psychotherapy supervision. New York: John Wiley & Sons, 1980.
- Williams, P. Adolescent identification and academic achievement: reporting the awareness of similarity to role models. Journal of Youth and Adolescence, 1980, 9, 315-321.
- Winnicott, D. W. (1956) Primary maternal preoccupation. In Through Paediatrics to Psychoanalysis. New York: Basic Books, 1975.
- Winnicott, D. W. The maturational process and the facilitating environment. New York: International Universities Press, 1965.
- Wolberg, L. R. Supervision of the psychotherapeutic process. American Journal of Psychotherapy, 1951, 5(2), 147-171.
- Wolstein, B. Supervision as experience. Contemporary Psychoanalysis, 1972, 8, 165-172.
- Zabarenko, L. M., & Zabarenko, R. N. Psychoanalytic contributions to a theory of instruction. In Annual of Psychoanalysis, 1974, 2, 323-345.