

Intersectionality in the Construction of Authority: A Systemic Supervisor's Perspective

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Abstract

In this study I explore how ethnicity, gender and class are implicated in the construction and performance of authority in the supervisory relationship. Authority is a concept that is used as one of the competences and stances to take as a systemic psychotherapist and systemic supervisor but its meaning has not been enough explained nor deconstructed in the systemic literature. Twelve participants were recruited for the study. The chosen methodology was Grounded Theory. The key findings can be summarised as follows. First, authority is constructed by systemic supervisors upon dominant social constructions in a hierarchical relationship that is gendered, classed and racialised. Second, this study highlights that gender, class and ethnicity are intersectionally implicated in the constructions and performance of authority, rather than operating separately. Third, supervisors use theoretical concepts such as the domains of action in their conceptualization of authority, in order to manage the nuances between holding multiple perspectives and the assertion of their authority. In conclusion, Authority is a gendered, racialised and classed-based construct and thus shapes the influence of how knowledge and expertise is conveyed and received in the supervisory relationship. This construction of authority is embedded in power relationships, which privilege those supervisors that belong to the most hegemonic groups of society: white male middle class; and discriminate minority supervisors accordingly to their intersectionality.

Words: Authority, Intersectionality, Race, Ethnicity, Gender, Social Class, Power Relations.

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Chapter 1. Introduction

This dissertation will explore how the intersections of ethnicity, gender and class are implicated in the social construction of authority in the supervisory relationship how this authority is maintained and managed in the intersectionality of ethnicity, gender and class, and what has helped or constrained supervisors to ascertain their authority.

In this study, I will focus on the main social markers of ethnicity, gender and class as they take into consideration some of the visible markers for systemic supervisors in Britain. Are these social markers implicated in the construction of authority? Authority is a concept that is used in a variety of ways in the systemic literature. It is employed to mean something that could belong or can be developed by the supervisor in the therapeutic or supervisory relationship, as part of the supervisors' competence (Brecelj-Kobe and Trampuz, 2010). It is also conveyed as a stance that the supervisor takes in that relationship, a stance of expertise, knowledge and experience (Bertrando and Gilli, 2010). It is also viewed as synonymous with power and privilege, a concept that we need keep in check in order to minimise it, assuming that the power of the supervisor is ever-present in the supervisory relationship (Inman, 2016, Falender et al, 2014). This latter assumption stems largely from the hierarchy present in the supervisor/supervisee relationship, especially when the supervisor has the power to assess and evaluate the supervisee. So when we talk about authority in supervision, there is not always a straightforward answer.

It is also accepted in systemic psychotherapy that social markers such as ethnicity, gender and class are mediating social relationships. Issues such as racism, classism and sexism are social discourses that prejudice and oppress certain groups whilst they concede power and privilege to others (Falender et al 2014). Gender, ethnicity and class have been widely explored in the social sciences over the last 40 years. The systemic literature has focused on

issues of diversity of ethnicity, gender and class in relation to people who access public services and in particular those who are referred to systemic psychotherapy. However, it has largely omitted and neglected diversity in terms of the therapist and particularly the supervisor.

The lack of literature in this area does not allow professionals to assess the complexity of these relationships and the ways in which these professionals are supported in their training and work agencies. Its invisibility assumes that therapists and supervisors, regardless of their social markers, encounter the same privileges and power relationships in their professional relationships. By ignoring these specific issues in systemic supervision, we run the risk of further discrimination against minority voices, particularly women and ethnic minority groups.

The concept of authority is embedded in cultural practices, it is important to take these into consideration as Britain is a nation comprised of many different cultures, and these cultures influence the type of clients that state organisations serve and the professionals that these services employ. Multiculturalism originally tried to convey the emergence of narratives regarding the struggle due to perceived differences such as femaleness, ethnicity and gay rights, this term has been used mainly to denote the ethnic diversity of society (Modood, 2013). Multiculturalism in Britain has acquired a more circumscribed meaning, referring to the movement of people and in particular the movement of non-white people into mostly white countries (Modood, 2013) and therefore the most widely used term to describe these struggles is diversity. Diversity and multicultural competence in supervision means awareness and understanding of the social markers that shape our clients' and supervisees' identities and contexts. It also describes awareness of the therapist and supervisor's own identities and the ways they affect their practice and thinking (Vasquez, 2014). I would argue that these diversity issues are implicated in the supervisor's construction and performance of authority.

In this research, one of my main hypotheses is that authority is constructed relationally and located in a particular social context. Authority further develops through stories linking personal narratives of privilege, oppression and discrimination. Consequently, the process of constructing authority may become a much more complex process of ambivalence and disentanglement for minority groups, which in this study focuses on women, ethnic minority and working-class supervisors.

I shall begin this dissertation by reviewing the available literature, in particular investigating the historical meaning of authority, in systemic psychotherapy and systemic supervision. I shall highlight links between the therapeutic and the supervisory process where appropriate.

In the following chapter, I shall describe the methodology and the participants involved in this research. I shall describe the analysis of the data and present the findings using grounded theory. I shall then present the findings and the discussion of these data in relation to the main social discourses that emerge from this study on the construction of authority in the supervisory relationship.

Chapter 2. Literature Review

2.1 Introduction

The purpose of this review is to position my research in the context of existing literature. The literature on systemic supervision and authority is limited, so I have also reviewed literature outside the systemic field. This study is framed by the use of the grounded theory methodology (Charmaz, 2006), which requires a comprehensive review of the literature both before and after the collection of data and my subsequent analysis.

2.2 The concept of authority

I shall look at the concept of authority from the major theoretical contributions made in relation to the current meanings of authority. The concept of ‘authority’ has had different meanings throughout history. The Oxford Dictionary (2016) attributes the origins of the word to the Old French word ‘*auctorité*’, originally from the Latin ‘*auctoritas*’ (‘invention, advice, opinion, influence, command’), from *auctor* (‘master, leader, author’) with the following meanings:

1. The power or right to give orders, make decisions, and enforce obedience.
2. The right to act in a specified way, delegated from one person or organization to another.
3. Official permission; sanction
4. A person or organisation having political or administrative power and control.
5. The power to influence others, especially because of one’s commanding manner or one’s recognised knowledge about something.
6. A person with extensive or specialised knowledge about a subject; an expert.

7. A book or other source able to supply reliable information or evidence.

The current conceptualisation of authority with all its different meanings brings complexity and ambiguity. These meanings are also viewed only from a Western cultural perspective. Authority as embedded in cultural practices acquires different meanings, but unfortunately the concept has not been culturally revised in any available literature.

Authority is a concept that, from its origin, has been given ambiguous and contradictory meanings. Furedi (2013), in his historical exploration of the meaning of authority, describes difficulties defining authority within a particular context since the word was first used. It was in the Roman Republic that the word *auctoritas* was first coined and it seems to have been a concept that played an important role in public life in ancient Rome (Arendt, 1954; Furedi, 2013).

When investigating the origins of the word *auctoritas* in the Roman Empire, one must begin with an attempt to distinguish authority from power. Furedi (2013) cites Cicero's writing in his attempt to separate the meaning of power (*potestas*) and authority (*auctoritas*). Cicero claims that authority resides with the State and implies the possession of a highly moral attribute. *Auctoritas* was used to convey the personal quality of individuals who have the authority to speak and have a moral authority. The meaning of the Latin word was to have the capacity to create and initiate. These meanings have continued to be expressed in the words of 'author' and 'authorise', which is expressed as a form of leadership that gives an individual the right to initiate. It is noteworthy that authority, from its origins, describes the individual possession of some personal moral quality which gives the person the right to speak.

Sociologists have attempted to theorise the concept of authority and they concur that the use of *auctoritas* in the Roman Empire was broad and not well defined but conveyed more than personal leadership and individual

competences and the capacity to preserve the tradition of Rome. Furedi cites the document *Res Gestae Divi Augustini* (“*The achievements of the deified Augustus*”) as the text in which Augustus presents himself as a moral authority (see translation in Appendix 1), as someone above human standards. This meaning of *auctoritas* is still present in modern Europe in political and religious writing. This Roman document has been central to the constructions of authority from antiquity to the present day.

2.2.1 Max Weber and the typology of authority

From a sociological studies perspective, the first and most relevant references to authority are rooted in Weber’s work (1947). He was interested in the legitimacy of power which he called authority. He defined power and authority thus: ‘power is the ‘probability that one actor within a social relationship will be in a position to carry out his own will despite resistance, regardless of the basis on which this probability rests’ (p152). Imperative control or Authority (*Herrschaft*), is ‘the probability that a command with a given content will be obeyed by a given group of persons’ (p152). In the distinction of power and authority, Weber also defines ‘discipline’ as ‘the probability that by virtue of habituation a command will receive prompt and automatic obedience in stereotypic forms, on the part of given group of persons’ (p152).

Weber makes the distinction between power and authority by declaring that power is linked to the personal characteristics of individuals or groups, whereas authority is always tied to social positions or roles. This distinction leads Weber to note that power is a fact while authority is a legitimate relation of domination and subjection. Power therefore does not need to be consensual, but authority does. Thus, in Weber’s view, authority is legitimate power.

Weber identifies a criterion for recognising authority is a minimum of a voluntary submission and therefore an interest in obedience. Obedience, Weber argues, can go from simple habituation to the purely calculation of advantage, but the central element in authority is the belief in legitimacy.

Weber (1947) presents three types of authority:

1. Traditional authority is the one that can be maintained by customs, traditions and conventions. People recognise this type of authority as ‘have always existed’, so that the person or people that exercise it are nominated according to traditionally transmitted rules. He identifies patriarchy and gerontocracy as examples of traditional authority.

2. Charismatic authority is the authority that can be sustained by the force of the leader’s personality. Weber (1968) argues that this kind of authority is usually connected with the supernatural and that it is by its very nature unstable.

3. Relational-legal authority is how a political order is seen as legal in the eyes of the population. He recognised this type of authority as the typical form of authority in modernity (Coleman, 1997). He states that the validity of this type of authority is ascertained by the belief of rational values. This type of authority is extended to the people that are administering these in rational commands. The people, who obey this authority, do it in terms of their capacity to be a member of a corporate group, such as the church or a territorial state.

From this typology, Weber is interested above all in Charismatic Authority. He defines charisma (‘the gift of grace’) as a personal quality that sets a person apart from ‘ordinary men’ [sic] and treated as possessing supernatural powers or exceptional qualities. These qualities afford him the position of leader. This type of authority is not permanent as it can change depending on the needs of the social group. This kind of authority is close to the Roman description of authority. Weber (1968) differentiates patriarchal authority from charismatic authority, arguing that patriarchal authority is part of traditional authority and in this way patriarchal authority

is what he refers to as “the natural leader” (p18). This is a personal authority that differs to legal-rational authority. Westwood (2002) points out that in Weber’s legal-rational authority there is an implicit recognition of the power exercised through bureaucratic forms. This authority depends on the development of vast networks that could end up alienating the individual.

Weber (1947) also identifies the relational aspect of authority between command and obedience, arguing that the command aspect is established in the meaning of authority but also the ways in which this is internalised and accepted, i.e. the conditions in which authority becomes socially accepted. This is an important distinction - authority does not happen in a vacuum, you cannot have authority outside a relationship where authority has been already internalised at some level.

The level of abstractions of this typology has been criticised by some sociologists mainly due to not questioning the amount of conflict and resistance present in any authority system or questioning the ambiguity of any type of authority. It is claimed that authority in all its forms can also be illegitimate. Authority is then understood as a subset of power rather than a legitimate relationship as Weber ascertained (Blau, 1963, Coleman, 1997).

Ralph Dahrendorf (1958) in his theory of social conflict highlights that authority is a central concept if one wants to understand how organisations function. He uses Weber’s definition of authority to clarify the different elements of authority (p.176):

1. Authority denotes a relation of supra and subordination.
2. The supra-ordinated side prescribe to the subordinated one certain behaviour in the form of a command or a prohibition.
3. The supra-ordinated side has the right to make such prescriptions; authority is a legitimate relation of supra and subordination; authority is not based on personal or situational chance effects, but rather on an expectation associated with social position.

4. The right of authority is limited to certain contents and to specific people.
5. Failure to obey the prescriptions is sanctioned; a legal system (or a system of quasi-legal customs) safeguards the effectiveness of authority.

The identification of these two positions, supra and subordinate, is key to understanding the nature of conflict within an organisation, according to Dahrendorf. This conceptualisation of authority has been criticised as being too simplistic as it establishes a dichotomy without taking consideration of the multiple hierarchies on which authority can be based (Smith, 2002).

Weber's meaning of authority as legitimate power is still present in today's constructions of authority and further developed by Parsons' definition of authority.

2.2.2 Parsons' rational authority

Talcott Parsons has been a central figure in developing a 'social systems theory' (Wearne, 2013) and was heavily influenced by Max Weber. The social system refers to the cultural system, defined as an organised system of norms, values and symbols (Segre, 2012). Parsons translated Weber's seminal book *The Protestant Ethics and the Spirit of Capitalism* and remained influenced by Weber's main ideas, in particular the problems associated with capitalism. Parsons criticises Weber's ideas of the legal-rational authority and proposes that this kind of authority should be divided into bureaucratic and professional authority (Bower, 1971, Guzman, 2008). His work in the late 1930s, declares that *professional or expert authority* offer the right model for capitalist social organisation. This type of authority is an impersonal authority that could provide the basis for social order and contributes to the development of a well-integrated society that could contain the pursuit of individual interests present in modern capitalism

(Furedi, 2013). He proposes the theory of professional or rational authority, which is the term most often employed in therapy. Parsons explains that this kind of authority is based on technical competences which are limited to a particular focus and a particular field, such as in the medical profession where a doctor only has authority in one area and not in others that involve a different form of expertise (Guzman, 2008).

Another requisite to this kind of authority is that it is based on universal standards, so authority is strengthened by impersonal, scientific and objective criteria. The relationship between the therapist and the client in this expertise is based on trust in the expert's knowledge, rather than on coercive methods. According to Furedi (2013), Parsons is not simply endorsing scientific knowledge, but also connecting technical competence and moral integrity. I would argue that this is one of the main meanings of authority constructed in systemic supervision: the authority of expertise. This authority serves as the organisational duty for the development of impersonal institutions that balance personal and subjective interests. Parsons noted how medical doctors had high levels of influence on their patients without having to implement coercive sanctions.

2.2.3 Authority and the questioning of obedience

The ending of WWII and the fall of authoritarian regimes, especially the Nazi regime, as well as the Holocaust in Europe led to a number of different studies that questioned the legitimacy of authority (Fromm, 1941). This context provoked a questioning of obedience and the effect that it could have on society and the development of more democratic relationships between the State and citizens, institutions and citizens and between parents and children (Van Nijnatten, 2000). Milgram's (1974) work becomes central in showing how obedience to authority could be dangerous and dysfunctional. He questions the people's readiness to **obey authority** figures even when it means causing pain to others. He states that anybody in a subordinate

position can be a mass murderer. Thus, obedience to authority is something to be cautious about. It is not personal attributes that make somebody a figure of authority but their position in a social structure acting as a 'legitimate authority' (Hollander, 2016).

Milgram (1974) also identifies some of the conditions that predispose individuals to obey authority: familial experiences, the general social setting built on an impersonal system of authority, and extended experience with a reward structure where compliance is rewarded and failure to comply is punished. It is the socialisation of people into a particular social hierarchy and cultural norms, which dictate if an individual, will comply with authority. Milgram distinguishes legitimate authority as 'someone who is perceived to be in a position of social control within a given situation' (Furedi, 2013, p380). The willingness to obey authority thus becomes a social problem in Milgram's definition of authority.

Adorno develops this idea in the concept of the authoritarian personality (1951) as a way of avoiding a repeat of the nightmare of Auschwitz; stating that people need to believe in a strong authority in childhood, which creates the demand for authoritarian domination. These discourses against the obedience of authority mark a shift and a progressive decline in the trust in Parson's professional authority.

In contrast to these positions, Hannah Arendt (1954), a German academic, invites us to appraise the concept of authority after the collapse of traditional authority in post-war Europe. Arendt herself escaped the Nazi regime in Germany and settled in America. In her interest in analysing totalitarian governments, she proposes that authority always demands obedience, which precludes the use of coercion or violence and the use of persuasion through argument. In other words, the use of persuasion or force means the loss of authority. Her definition of authority is based on the concept of obedience. Arendt also makes the distinction between power and authority. Power is owned by those who give the authority to others to represent them, like the

Roman Senate. She acknowledges the difficulties in having power without the need of coercion and violence, but she emphasises that power comes from the collective will and does not require violence, as there is voluntary agreement. It is only when the governmental institutions lose their power that they begin to incite violence and promote the rise of totalitarian regimes. This perspective on authority has a more positive representation of obedience, as it trusts the decisions of the collective, however, it has been highly contested in relation to the separation of power and violence. Many now believe that power and violence are intimately linked so power without violence is practically unattainable (Breen, 2007).

2.2.4 Michel Foucault - Power and Knowledge

Foucault (1972) proposes an analysis of power and authority that it is difficult to relate to previous conceptualisations (Gaventa, 2003). He is interested in the ways that power is part of a struggle and how it is resisted. He focuses on the person who is consenting or giving power and authority to others. Foucault uses the concepts of power and authority as interchangeable, as it is not the authority of a person that is important but rather the power which resides in the knowledge that the person holds. He proposes that power can be exercised when a person is subject to the State and the effect this has on others. Foucault explains that the mechanism whereby people become subjects is due to division, scientific classification and subjectification. This latter concept alludes to the process of self-formation, self-understanding and the way that conformity is achieved. He points out the ways that people define themselves as normal, and their need to 'fit in' with what is socially expected for their positions. His interest is centred on the connections between power and knowledge. In reviewing historical medical documents, he notices that what is accepted as 'normal' and 'abnormal' changes over time; for instance, concepts such as madness and illness (Fillingham, 1993). Abnormality is what defines normality, so it

is abnormality that needs to be studied and to be under the gaze of a society represented by what Parsons called rational authority. This knowledge of abnormality is one of the ways that power relations are established in society – the power between the normal and the abnormal. This is a direct critique of Parsons' rational authority; for Foucault, rational authority is a particular kind of knowledge that promotes the exclusion of certain people from society, of those that we consider 'abnormal'. The abnormal are not able to provide knowledge, as society has already determined that their knowledge is irrelevant (Fillinham, 1993; Oliver, 2010). Authority is thus seen as a benign mask of power over people.

Discourse is one of the central themes in Foucault's writings. By looking at the history of different ideas, Foucault declares that each historical time defines discourses that change over time. It is in his observation of the prison system that Foucault elaborates more centrally the role of discourses in power relations (Foucault, 1991). He proposes that discipline is a modern way to punish people, a process that creates docile bodies that do not question the system. The prison is an institution that serves as an example for other institutions that have the same aim of producing docile bodies, such as schools, the military and hospitals (Foucault, 1991; Zamora and Behret, 2016). According to Foucault (1991), the technologies of power are ensured by normalisation and control employed in everyday life. This type of power is subtle, hard to recognise and even harder to resist. However, resistance also exists inside these power relations, but is considered as special cases rather than a generalisation of these acts and so these acts of resistance can be considered as uncooperative behaviours and will be labelled as abnormal and irrelevant. Biopower and biopolitics, concepts that Foucault defines as a particular form of power in the 18th century, followed the power of discipline and sovereignty and are concerned not with the individual but with the population as a whole (Zamora and Behrent, 2016). It is only the acceptance of the power in the system that makes us normal. Power and knowledge are always intertwined therefore knowledge is never neutral as it favours particular groups in order to oppress others (Schudson, 2006).

Discourses are the ‘vehicle through which knowledge and subject are constituted and also resisted (Gaventa, 2003). Foucault (1980) proposes that the construction and development of discourses and the genealogy of knowledge need to be analysed in terms of tactics and strategies of power. This position is a direct criticism of the authority of the expert and declares that groups produce and reproduce knowledge for their own interests. The socially constructed knowledge is always partial and subjective. Foucault’s ideas of power and knowledge have served as a base for the study of the construction of the ‘other’ in society, despite the fact that the absence of issues of race, racism, gender and post-coloniality are not central to his work (Westwood, 2002).

Ernesto Laclau and Chantal Mouffe (2014) follow Foucault’s idea of discursive construction as reinforcing the existing interests of some groups over others but they add that these discourses also shape political subjects. They focus on the struggle of these new antagonisms to the prevailing powers or hegemonies, based on ethnicity, gender and social class. They go beyond the class struggle characteristic of Marxist ideas, and propose ethnicity, gender and class as the main struggle of society (p. 143). Their argument rests on the notion of the *democratic imagination* that promotes ideas of equality and liberty and so is central to the struggle of becoming equal and free, e.g. the feminist movement, civil rights movements. This perspective on power focuses on the constructor of the resistance and shaper of these new identities created.

2.2.5 Conclusions

The conceptualisation of authority has always been theorised and described in relation to the conceptualisation of power. These ideas about authority and power have had a great influence in the systemic theoretical concepts and the development of diverse approaches of systemic family therapy, without being free of the narrative of the expert or expertise. Furedi (2013)

explains that authority as a narrative of expertise –and in particular, the expertise of science –is still the most powerful in the Western world, despite the acceptance of Foucault’s ideas on power and knowledge. The role of the expert is still valued positively in our culture. An expert is defined as ‘someone in possession of a specialised knowledge that is accepted by the wider society as legitimate’ (Schudson, 2006, p499).

We can conclude that authority is a social and cultural abstraction that presupposes an agreement on the norms and conditions through which it gains meaning and force (Furedi. 2013). This agreement has been conceptualised and contested by different theories in relation to its relationship with power. Authority represents a relationship between two or more people where there is a command to be obeyed and the **acceptance** of this command to be obeyed in a particular cultural, social and symbolic form. Authority is not owned by the individual, authority is always a relationship that is constructed in a particular social and cultural context.

2.3 Authority in systemic psychotherapy

The authority of the systemic psychotherapist and the systemic supervisor has been constructed in relation to the main core theoretical ideas and concepts that have influenced systemic psychotherapy. I will illustrate these different constructions of authority by looking at the epistemological shifts in systemic psychotherapy.

2.3.1 First order cybernetics and authority

Systemic psychotherapy is a relatively new approach that began after WWII as a response to the dissatisfaction of intra-psychic approaches, such as psychoanalysis (Cecchin, 1992, Dallos and Draper, 2005, Carr, 2006) and the post-war tensions that affected the family. Goldenberg and Goldenberg (2004) illustrate how this period represented a revolution in the conceptualisation of human problems, the understanding of human behaviour, the development of symptoms and their resolution. These changes represented an epistemological paradigm shift where the family became the unit where human problems were created and where they could be resolved. One of the defining events that promoted this shift was the Josiah Macy Foundation in the 1940s where, among other themes, the study of communication in reference to regulation and control were addressed (Goldenberg and Goldenberg, 2004). The term *cybernetic*, coined by Norman Weiner (1948), was used to understand that systems could auto-regulate due to their capacity to receive feedback and it was later referred to as First Order Cybernetics. Social theorists such Talcott Parsons were influenced by cybernetics and in particular by concepts of order, stability and objective patterns present in systems. These concepts were dominant in the elaborations of the early approaches of family therapy (Goolishian and Anderson, 1987), which was based on the understanding and application of the idea that general systems, independent of their type, were self-regulated thus allowing their stability.

Gregory Bateson, an English anthropologist working in the USA, was one of the major contributors in applying these new ideas to the social and behavioural sciences (Goldenberg and Goldenberg, 2004; Carr, 2006). Bateson formed the Palo Alto Group in the 1950s with Jay Haley, Don Jackson, John Weakland and John Fry, founding the Mental Research Institute (MRI). They later formed MRI Brief Therapy (Carr, 2006) which

integrated the central ideas from Bateson's cybernetics and general systems, Milton Erikson's approach to hypnotherapy, and later Von Foerster's ideas from constructivism. The MRI influenced the development of Strategic Family Therapy and Structural Family Therapy in the US and the Milan Family Therapy in Europe.

The assumption in these approaches was that the therapist was able to observe and describe the family objectively. Therapists were able to assess and treat families according to the observation of objective patterns of behaviour present in the family. Families were considered systems with objective characteristics and organising principles that were independent of the intra-psychic structures of the individuals in the family (Goolishian and Anderson, 1987). Depending on the ways these patterns were organised, families could be described as functional and dysfunctional. The therapist's authority was one of an expert who was able to assess the dysfunctional patterns of behaviour of the family system and find the interventions **in order to** change them (Dallos and Draper, 2005), the therapist is a 'directive interventionist' (Hoffman, 1981)

Embedded in this position was the idea that the therapist was a passive observer of what was happening to the family, independent of and distanced from the subjectivity of the family's dynamics (Goolishian and Anderson, 1987). The therapist is thus perceived as someone who is neutral. Neutrality is a stance of the therapist that is necessary for observing objectively (Selvini, M. et al., 1980). The authority of the therapist is not questioned, as it is assumed that their observations are objective and based on scientific research. Cecchin (1992) tells us that the Milan Team perceived the family as a mechanical system that plays games in order to maintain the stability of the system. Questions such as what kind of games the family is playing among themselves or with the therapists focus on the competitiveness of the therapeutic relationship between the therapist and the family, instead of seeking to form a collaborative relationship. Paradoxical questioning is one of the tools used by the therapist to gain control and then change in the family

system. This view of the family was based on Haley's conceptualisation of power and his influence on the Milan Team. According to Carr (1991), Haley believed that therapist's job was to identify the power struggle present in the family. This definition of power implied that some members of the family had more power than others in the family. This notion of power was opposed to Bateson's idea of power. Bateson (1972) believed that power was a myth, as power was inherent in all the members of the family system rather than positioned in only one member of the family. He criticised the unilateral view of power, as power was always relational, one individual cannot hold power over another as relationships always constrained the subjects of that relationship. Bateson's idea of power was the one that most influenced the theorising of the concept of power in family therapy during this period. This latter view of power meant that family psychotherapy did not engage with the notion of power until the 1980s in the U.S.A. and the U.K.(Flaskas and Humphrey,1993).

Gergen (1999) locates these ideas in what is called Modernism which emerged in the 16th and 17thcenturies, at a time when there was a shift towards the authority of the individual and Parsonian rational authority. He proposes that it is here that the individual becomes 'capable of observing the world for what it is, and assessing the best course of action' (p.7). This creates what is referred to as the dualism of what is 'out there' and 'in here', which raises the question of epistemology: how do we know the world out there? Modernism responds to this by assuming that the mind is a mirror of the reality out there. This implies that the knowledge of the 'out there' is objective in terms of what the mind perceives. Potter (1996) argues that the observation of reality at this time becomes central to the ways in which we understand the world 'out there'. Looking for the 'truth' and 'seeing the point' are metaphors for this emphasis where we can look at reality and objectively understand it as it is. These ways of understanding our relationship with the world 'out there' created the belief that reality is objective, genuine and verifiable. Thus, the family system is considered as a system of connections and relationships that can be predicted, like the solar

system (Minuchin, 1998); the therapist, like the astronomer, after careful observation of the family system can predict its stability and change. Thus, the psychotherapist's expertise and power are used to influence change in the family in an open and direct way.

2.3.2 Second order cybernetics and authority

In 1986, Anderson and Goolishian described the changes emerging in family therapy as a polarised view between the Parsonian model (which influenced the early models of family therapy) emphasising hierarchy, power and control, and a model that focuses on collaboration, action and discourse, which represents the shift towards postmodernism. McNamee and Gergen (1992) apply the term 'the gathering of the storm' to the transition between these two models. This has had a profound effect on practice and the theoretical thrust of family therapy and the position of the therapist and the supervisor when working with families (Dallos and Draper, 2005), in particular the view of the therapist as the 'scientist of human relations' (McNamee and Gergen, 1992).

Feminist therapists began to articulate a critique of the way that therapy was constructed as objective and neutral. They pointed out that therapy reproduces patriarchal values similar to those present in the wider society in practices that oppress women (McNamee and Gergen, 1992). Rachel Hare-Mustin (1994) invites us to look at the different positions in various social hierarchies which confer different authority to different participants in the therapy context. Power and authority are constructed in the therapeutic relationship and within the relationships of the family. She explains how power is exercised by influencing the therapeutic conversations through social inequalities, determining 'who can be spoken about and who can speak' (p.3). Social markers such as gender, race, language, age and ability become aspects that define social hierarchy, and which identify who can gain access to positions of authority. It is legitimate to consider social discourses

as present in therapy and that they are also part of supervision. Authority and power are part of the same process of oppression; authority is given only to those who belong to the more powerful groups in society. The concept of neutrality is questioned as is the stance of the therapist who does not address the power relationships within the family. Feminist therapists question issues such as child abuse and domestic violence as not being neutral events, but as part of power relations already present in society favouring men over the other members of the family (McNamee and Gergen, 1992).

The influence of constructivism during this period criticised family therapy's attempts to find only one truth about the problem in the family. Maturana and Varela (1987) argue that human beings construct their own representations of the world and it is determined, in part, by their biological structure, such as their nervous system and organs. Individuals actively construct their own realities according to their own and the environment's characteristics (Carr, 2006). Maturana (1987) postulates the impossibility of instructive interaction, an idea that hugely affected systemic epistemology. It implies that an individual cannot receive instructions from the environment, therefore, individuals cannot specify structural changes in other individuals through instructions. Maturana (2004) clarifies this by saying that therapy cannot have the universal knowledge of how a person can react to certain experiences, thus linear causality in human behaviour is impossible. Maturana also questions the wisdom of the therapist, which implies "the capacity to listen without prejudice and personal leaning, to display an attitude of openness and *laissez-faire*" (pg271). The assumption here is that the therapist and client's relationship depends on the absence of prejudice in the therapist. Love is the relational domain where therapeutic relationships are established, according to Maturana. The idea of the impossibility of instructive interaction has remained influential in systemic psychotherapy, despite the adoption of social constructionism, where prejudices are an expression of power relationships. The Milan team was influenced by Maturana's and Varela's ideas initially, however, Cecchin et al. (1994) later clarify that the therapist's prejudices are always present in the therapeutic

relationship, leading the systemic field to adopt the main ideas from social constructionism and power as central in human relationships and thereby in therapy.

2.3.3 Authority, Social constructionism and systemic psychotherapy

Postmodernism is a helpful umbrella for the development of a different theoretical body that embraces different meanings and aspects of human activity. Its emphasis is on multiplicity: multiple views, multiple lives and multiple possibilities (D'Arrigo-Patrick et al., 2016) and the rejection of 'grand social narratives'. It focuses on the different interpretations of the world constructed through language, the power dynamics that are involved in the use of language, and the stories we tell each other collectively (Ungar, 2006). Postmodernism assumes the end of the modernist era and it has affected different areas of social and cultural life such as literature, art, and the social sciences from the mid to late 20th century. Social constructionism has been considered as a strand of post-modernism even though both terms have been used interchangeably.

Social constructionism has influenced the main theoretical approaches in systemic psychotherapy. Berger and Luckmann (1966) coined the term in the late 1960s. They propose, from a sociological point of view, that reality and its knowledge, or the way to recognise it, is a complex process. They define everyday reality as a collective construct created through social processes which dominates our understanding. It is 'reality *par excellence*'; this reality will guide us and affect our perception of those experiences that are not privileged by this reality. This sharing of experiences gives rise to repeated patterns that make us behave and think in particular ways in specific contexts. Social constructionism stresses the idea that objective reality does not exist, but is constructed through language (Maturana and Varela, 1987). Language is constructed within a social and cultural context and so too are our identities. Berger et al. (1966) argue that the complexity of

understanding this process is that the human organism becomes human in relationships. Therefore what we think and do is always mediated by relationships.

Human beings are born with a predisposition to sociality, which makes us members of society. This is due to the capacity to internalise some aspects of that society. Berger and Luckmann (1966) define internalisation as the process of giving meaning to a particular event. The process of giving meaning to a particular event is subjective depending on the context of those events. Social constructionism proposes that reality is constructed by the discourses available to all of us in a determined context. These discourses are not merely ways of coordinating ways to be together, but:

‘...ways of constituting knowledge, together with the social practices, forms of subjectivity and power relations which inhere in such knowledge and relations between them. Discourses are more than ways of thinking and producing meaning. They constitute the ‘nature’ of the body, unconscious and conscious mind and emotional life of the subjects they seek to govern’ (Weedon, 1987, p.108).

Power relationships are fundamental in the construction of meanings, and discourses can be dominant or subjugated depending on the power of those who ascribe meaning.

A discourse is ‘a system of meaning – a set of propositions that cohere around a given object of meaning’ (Baxter, 2011). The meaning that we give to something is multiple and never defined completely. We give meaning through dialogue. Discourses in this perspective are contradictory and diverse. These dominant discourses will be in favour of promoting those groups with more power in a particular society. For example, when Burck (2005b) discusses language and subjectivity, and refers to the racialisation of identity and its intersection with gender, class, ethnicity and culture, she links the racialisation of identities to the ‘process involved, in the context of historical and everyday racism and unequal power relationships, through which the construct of ‘race’ is given meaning over time’ (p.22). Ethnic and

cultural identities are in a continuous process of mutation, changing within each of the different relationships that we are immersed in.

These dominant discourses circulate in the therapy room and in the belief systems of the therapist and the families. Humans are seen as ‘meaning-generating beings’ (Goolishian and Anderson, 1992, p.26). It is through therapeutic conversations that we co-create meanings. The position of the therapist is considered as a conversational artist, whose expertise is in the creation of therapeutic spaces and the facilitator of dialogues. The therapist no longer has the power to define and describe the family; the family or the client is the expert on their own issues and problems. The therapist’s main role is now constructed by the therapeutic questioning that deconstructs meanings and co-creates new ones. These questions come from a ‘not knowing’ position. Therapy is the exploration of meanings in dialogue (Anderson, 2005). The authority of the therapist from being the scientific therapist and expert in families shifts towards what Anderson and Goolishian (1992) describe as the new stance for the systemic psychotherapist: ‘the not knowing position’. The meanings that are explored in dialogue are predominantly those that the client brings; the therapist is there as a learner.

Cecchin (1992) illustrates how the Milan team begins to think about power as a social construction where people believe what has been constructed as power and behave accordingly. The family is perceived as people trying to make sense of each other in order to stay together, rather than trying to exercise control over each other. As the therapist sees the family as a social construction based on their own belief systems, the therapist becomes part of the meaning-generating system. In systemic literature, this shift in the position of the therapist is called ‘second order cybernetics’. The main focus now is on the therapist rather than the family (Cecchin, 1992). The therapist cannot know the ‘truth’ about the family, and is only able to generate a hypothesis, which is their own construction and therefore part of multiple truths or the multiverse (Maturana, and Varela, 1987). The acceptance of multiple truths implies that the therapist takes the

'both/and' stance as all the constructions are just that, and different constructions have similar value.

It is impossible to know the experiences of the client and the families; these experiences can only be interpreted, as knowledge is always socially constructed, and the therapist can only rely on their experiences and imagination (Epson et al., 1992). So the therapist can only have access to the lived experience of the client by the stories and narratives that clients bring to therapy. Epson et al. (1992) define narratives as 'a unit of meaning that provide a frame for lived experience' (p.96). The therapist's position is one where they accept and learn from the narratives that the clients bring to therapy.

The construction of authority in systemic psychotherapy has been shaped by the influence of Foucault's ideas on social constructionism, power and knowledge. However, this acknowledgement has created new tensions in systemic psychotherapy. Larner (1995) explains how the different models of systemic psychotherapy have attempted to find ways to acknowledge the power of the therapist and the practice of the 'not knowing' stance. Expertise is the concept that systemic psychotherapy chooses to describe the ways the therapist can influence the system, without directives of how this change may occur (Andersen, 1991). Larner (1995) points out that this tension as 'power, knowledge and influence are caught up in the very idea of therapy and the client's expectations of change' (p.199). He proposes Derrida's term of 'deconstruction' as 'being-in-the-way-of-understanding' (p.200) where the therapist 'knows' that they do not know; the 'power of the not-power' that family therapy cannot escape this, as it is based on individual experience and constructed in terms of social relations and discourse: it is both real and an illusion. Larner (1995)'s resolves this tension by focusing on the ethics of the therapist and therapy. It is what one does with power that is relevant, as abuse of power could be present in social constructionist practices and in those from first order cybernetics. Pare (2002) also criticises the "not-knowing position" as it veils the therapist's expertise and perpetuates the

individualistic position of one person possessing all the knowledge rather than co-constructing knowledge in the therapeutic relationship. Rober (2005) explains how the “not knowing position” stance of the therapist does not exclude the therapist’s expertise which is in the area of process rather than in the content of the conversation. Rober questions Anderson and Goolishian (1992)’s proposition as it does **not** clarify the therapist ‘s contribution in the therapeutic dialogue. He argues that this leads towards an impoverishment of therapy. Rober proposes that the “not-knowing” position refers to a receptive aspect and a reflective aspect of the therapist. The latter aspect has been neglected in therapy, which does not allow families to have a sense of the therapist’s experience of the conversation. He calls upon the use of the inner conversations of the therapist as a resource in therapeutic dialogue.

White (2005) proposes a different stance for the therapist which avoids the conflict between knowledge and oppression. He calls this position “de-centred and influential”. The de-centred position refers to the awareness of whose knowledge has been privileged in the therapeutic conversation. It is the client’s knowledge that is privileged over the therapist’s. The client is the author who re-writes her narrative in therapy. The authority here is with the client. The influential aspect of this position relies on responses that the therapist attributes to the meanings clients give to their narrative. These responses contribute to the creation of a relational space where the client can develop alternative narrative imbued with their client’s hopes, values, intentions and commitments (Gaddis, 2016). It is through curious questions that the client can begin to unpack their internalised stories and begin to re-author their new and subjugated narrative.

Power and authority are still debatable concepts in systemic psychotherapy which accepts Foucault’s critical position in relation to authority and science and also accepts **Parsons’s view of therapy** that it is a field with expertise in relationships between people and structures.

This tension is even more present in the necessity for systemic family therapy to move into the world of evidence-based practice, where scientific expertise is called upon and, at the same time, systemic family therapy predicated the decentring of the expert when working with families and supervisees. This may give rise to confusion and difficulties in positioning psychotherapists as experts and simultaneously decentring our authority by working collaboratively.

Certainly, Haim Omer (2011) in his book *The New Authority* proposes that the 'traditional' authority of the parent and teacher has been undermined by a negative perception of authority. He then proposes the development of a new authority. The presence of the parent or teacher in a responsible role based around concern and supervision would allow them to take this new position. The reason that he proposes this model is due to the negative outcomes he sees in a permissive style of parenting. In systemic theory, this approach is a return to a more directive position for the therapist, the parent and the educator. There is very little elaboration on how factors such as the socio-economics of the family, gender and ethnicity are impeding the development of authoritative relationships.

Conclusions

In summary, authority in systemic psychotherapy has shifted its focus from the authority of the psychotherapist towards the authority of the client and family. In early systemic models, the systemic psychotherapist was viewed as the expert in family relationships who could assess and determine the problem's resolution. These models were influenced by the Parsonian model of authority, known as the authority of the expert. In the second order models, the client and family are experts on their own problems. **Thus**, the systemic psychotherapist and supervisor are constructed as a facilitator of conversations privileging the knowledge of the family; this is possible by taking a 'one-down' and 'non-knowing' stance. The authority of the expert

has changed in favour of the authority of the expertise without clarifying the scope of this type of authority.

2.4 Authority and systemic supervision

Systemic supervision happens within a professional context of systemic psychotherapy. Systemic psychotherapists require supervision in order to continue to practice safely and in accordance with the specific development of competences. To become a systemic supervisor in the UK in the past, one only required a few years of experience in the field. The professionalisation of systemic supervision began with the establishment of courses for systemic supervisors. Until recently, systemic supervision courses lasted two years, but in 2010 they changed to one year to bring the course to the level of other supervision courses from other psychological models. Despite the lack of research around the impact of supervision, there is agreement that supervisees find supervision helpful (Storm et al., 2001; Bertrando and Gilli, 2010).

Literature on systemic supervision has not been extensive, even when systemic supervision has been performed from the very beginning of the application of the systemic approach. There is a consensus that systemic supervision has relied on systemic practices and theories that emerged from systemic therapy, making supervision a space where systemic interventions can be experienced isomorphically. In describing the supervisor's journey from therapist to supervisor, Burnham (2010) identifies the isomorphism between supervision and therapeutic approaches in using similar theories and practices that are known and developed in the context of therapy, and are then applied to the context of supervision.

The influence of social constructionism in family therapy has also affected systemic supervision. It has developed a range of new approaches which are part of the core of training in family therapy in the UK and the

USA. Anderson (2012) recounts how she and Goolishian abandoned the mechanical cybernetic system metaphor for a language system metaphor in the early 1990s. From a social constructionist perspective, the position of the supervisor is considered subjective and depends on their beliefs and cultural context. The supervisor is not an outside observer of the supervision system; they are part of it as they co-construct meanings in conversation with the supervisee and their relationship with the family. The stance that supervisors should take is one of curiosity (Cecchin, 1987), which has meant supervisors should be less directive and take a more personal position (Krause, 2012). Bobele et al (1995) point out the main dilemmas created in supervision as a social construction, such as the concept of hierarchy, the non-knowing position, multiple realities and the non-labelling positions. They argue that despite the hierarchy in the supervisory relationship, supervisors within the social constructionism paradigm are able to behave more respectfully and be less authoritarian by taking a one-down position [sic] (p.23).

Bertrando and Gilli (2010) define the purpose of systemic supervision: ‘to help supervisees develop an experiential expertise, useful in treating their clients’ (p.4), with an emphasis on developing the strengths of the supervisee. The role of the supervisor is seen as a model on which the supervisee will base her practice, hence the need to implement an isomorphic perspective. However, they warn against exercising authority in supervision, and becoming authoritarian through the practice of systemic supervision. They advocate a process of supervision that involves the deconstruction of the authority of the supervisor by working in collaboration with the supervisee.

Supervision as a multi-layered system (Burck and Campbell, 2002), describes various activities in supervision, different relationships and the different responsibilities that the supervisor has. Various attempts at defining supervision from a social constructionism perspective seem at odds with how the authority of the supervisor is exercised in systemic supervision. The meaning of the word supervision implies the overview by one person, who

is meant to know, of practice by another, who is learning (Karamata and Bachicha, 2012), which also implies a clear hierarchy in knowledge and experience. White (1997) and Bertrando and Gilli (2010) propose the term co-vision instead of the use of the word supervision as a way to avoid the connotation of a one-sided power relationship between the supervisor and supervisee.

Burnham (2010) describes the following functions of supervision: maintaining clinical governance; promoting the ethical responsiveness of both supervisor and supervisee; and evolving the personal and professional development of trainees, junior colleagues and peers. These functions have an implicit relationship based on a hierarchy where the supervisor 'knows' more based on their experience.

Within the hierarchy implicit in systemic supervision and its social constructionist framework of the systemic theory, there is an emphasis on collaboration and taking a 'one down' position in the therapeutic relationship. This creates tensions for the supervisor in achieving these seemingly contradictory stances. Some attempts of theorising the implications for systemic supervisors of co-constructing supervision with their supervisees have been developed. Unger (2006) saw the supervisor according to the different roles that are available to them. These roles seem to be connected to the functions that supervisors have, and are not played out at the same time but are present depending on the nature of the conversation between the supervisor and supervisee. The need to move towards a postmodern position is central for Unger, so in achieving a decentring position with the supervisees, the supervisor can employ their own subjectivity.

Mason (2010) promotes taking a second order position where the supervisor is also part of the supervisory system bringing subjectivity. He also emphasises that the supervisor has expertise in introducing their own knowledge, ideas and research, but also needs to remain curious with regards

to these areas of practice. He explains that in concentrating supervision only on what is happening to the client, supervision maintains a first order approach. Mason identifies areas that systemic supervision should address: the client and the issues they present; the client's relationship with help; the therapeutic relationship; the self of the therapist; the supervisory relationship; and the self of the supervisor. The supervisory relationship, Mason argues, is represented in the exploration of the expectations about supervision, reviews of its usefulness, and the supervisee's meaning of help. By the self of the supervisor, he refers to:

‘what ways, for example, might supervisors’ relationship with authority, the ownership of expertise and relational risk-taking (Mason, 2005) influence the way they supervise? What might supervisors be pulling back from addressing and how do they understand why they may be doing this? How might family and culture of origin and gender scripts aid or constrain, or both, the supervisor’s ability to address these areas?’ (p.438).

This study is connected with these two aspects implicated in systemic supervision: the supervisory relationship and the self of the **supervisor**, which I will develop as follows.

2.4.1 The supervisory relationship

It seems that in systemic supervision, the tensions between the authority of the supervisor and the social constructionist perspective are always present as the supervisor is the one that has expertise, experience and knowledge and adopting a ‘one down’ position and working collaboratively with the supervisees brings forward the supervisees’ knowledge and expertise as relevant. The supervisor also has to be aware of their own observations as they are subjective views based on the supervisor’s own experiences and professional knowledge.

The supervisory relationship is described as collaborative when the supervisor is transparent about the impact of power of the members involved

in the supervisory relationship. This means that the supervisor and supervisee enter into dialogue about the locations of power, oppression and privilege in all the members of the supervision process: client, therapist and supervisor (Fine and Turner, 2014).

Mason identifies the therapist's and the supervisor's tension between having expertise and the 'not knowing' position. In *Authoritative Doubt*, Mason (2005) identifies a containing concept where the therapist and the supervisor can bring forward their expertise in exercising curiosity, and the knowledge and the experience of the therapist or supervisor. He identifies the dilemma of systemic therapists who embrace a social constructionism paradigm where we are called to hold on to concepts of curiosity (Cecchin, 1987), and expertise. Mason states:

'I believe also that we should not enter into the trap of equating a belief encompassing uncertainty with a view that we cannot own our expertise. It seems there is an increasingly prominent politically correct position about equality, which is misplaced. It appears to be based around the term partnership - our views are of equal status. This can sometimes lead practitioners to act as if they don't have any expertise. It would be more helpful, I believe, - if the word was substituted by the term collaboration for then at least power differentials between therapist and clients could be more honestly acknowledged. One of the reasons that clients come to see people for help is because they feel that the therapist has some expertise that can be useful for them. Rather than be disingenuous I suggest we can aim to hold a belief of authoritative doubt...' (p.191).

Mason (2005) also refers to risk of marginalisation of the expertise of the supervisor and calls us to work collaboratively which encompass the idea of being open to the influence of the other. Bertrando and Gilli (2010) use the concepts of co-vision or inter-vision to overcome the hierarchical relationship implied in the word 'super-vision' and to reflect the focus on the strengths of the supervisee and advocate the use of the concept 'authoritative doubt' (Mason, 2005) rather than employing the 'non-knowing' position.

These have been central questions to the systemic theoretical discussion since the influence of social constructionism in systemic literature. Mason points out that a therapist should be open to offering their expertise in a way that opens up conversations, as this is a collaborative enterprise between the client and the therapist. In the theoretical framework of authority Mason suggests the authority of expertise should combine both professional and personal knowledge. In supervision, this is even more pertinent. The supervisee asks for the expertise of the supervisor as part of the supervisory process.

The importance of the supervisor's input is then located in their knowledge, experience and expertise. This knowledge is acknowledged in the supervisory relationship in a transparent and collaborative way. The self of the supervisor in relation to **ethnicity**, gender and class is still not sufficiently taken into consideration within the supervisory relationship. The knowledge and expertise of the supervisor are viewed in the context of power relationships between the supervisor and the supervisee. There is an implicit assumption that in the supervisory relationship, power resides in the supervisor, even when the supervisor belongs to a minority group. I would argue that issues of power, oppression and privilege are also present in the self of the supervisor. Storm and Todd (2014) point out that power is an ever-present ingredient of all relationships even when these relationships are collaborative.

Pendry (2017) and Messent (2017) in their articles in the book *Working with Embodiment in Supervision* attempt to address diversity in clinical supervision. Pendry talks about the creation of a context in supervision where supervisors and supervisees can explore how race affects the relationship between the supervisor and the supervisee and the supervisee and the family, and therefore relational risk (Mason, cited in Pendry, 2017). Pendry acknowledges that these conversations are difficult and sensitive, and it is the responsibility of the supervisor to create safe spaces to achieve this. He illustrates this by referring to a supervision case where the

supervisee is white and working with a black family. He then reflects how these racial issues need to be addressed by the supervisor, who has more power in the supervisory relationship. Pendry does not elaborate how the supervisee may be positioning him (Pendry) as a black supervisor. It suggests that the supervisor's race, class and gender are invisible in the relationship, as the supervisor is always in a position of power. Messent (2017), as a white supervisor, gives an account of how his cultural privilege limited the repertoire of behaviours of a BME supervisee. He illustrates a case where he was supervising a BME therapist who greets a white family following his own cultural customs. Messent, as a white supervisor, reflects that he needs to 'continually interrogate his participation in the colonial project' (Hernández and McDowell, 2010, p.31, cited in Messent, 2017) and open up discussions that permit the possibilities of different ways of interacting between the supervisee and the family, without colonising the relationship.

It would also have been helpful to reflect on how these issues would be addressed if the supervisor were from a minority group and the supervisee white British. Would that BME supervisor try to impose their own cultural and more marginalised way of relating to people? Would the supervisee listen to what the BME supervisor told them in the same way that the supervisee listened to Messent? Messent acknowledges that minority cultures are perceived as deviant and inferior in the UK, and it is likely that this perception also affects a supervisee's perception of their supervisor if they are from a minority background. How do supervisees receive the expertise of BME supervisors if they have a biased perception of minority cultures in everyday life? This is not considered or described in systemic literature. Authority as expertise is always exercised within relationships of power and is characterised by the social status of the participants of each specific relationship such as supervision, which is an aspect of this phenomenon that has been neglected since the theoretical shift towards social constructionism. This represents a paradox within systemic theory, as social constructionism, on one hand, has presented an opportunity to

challenge oppression and discriminatory practices, yet on the other, implies that power resides solely with the supervisor, as if their social statuses did not matter. The focus of this study is to contribute to and explore how authority is constructed according to the diverse social markers of the supervisor. In other words, assuming that supervisors have similar degrees of expertise through training and experience, how their authority is constructed in the supervisory relationship according to their different social markers such as gender and ethnicity, class and age.

2.4.2 The self of the supervisor

The self of the supervisor within the second order cybernetic is part of the constructions regarding the family, the supervisee and their relationship. Lappin and Hardy (2002) argue that, in supervision, the focus on the self of the supervisor has been neglected in systemic literature. It has mainly referred to the self of the therapist in the therapeutic relationship, and not to the supervisory one. They call for a ‘contextually sensitive supervisory practice’ given the increasing diversity of the social context and the client. Contextual sensitivity aims to look at issues of diversity or social markers such as culture, ethnicity, gender, and class in the supervisor. Learning about the contextual implications of these factors not only has an impact on the supervisee or client, but also on the supervisor. Mason (2005) defines the self of the supervisor as:

‘what ways, for example, might supervisors’ relationship with authority, the ownership of expertise and relational risk-taking (Mason, 2005) influence the way they supervise? What might supervisors be pulling back from addressing and how do they understand why they may be doing this? How might family and culture of origin and gender scripts aid or constrain, or both, the supervisor’s ability to address these areas?’ (p.438).

Storm and Todd (2014) state that the self of the supervisor is the primary instrument in supervision, just as the self of the therapist is in therapy. They call supervisors to know themselves to help supervisees do the same. By

including the supervisor as part of the system, systemic supervision has begun to reflect on the values and belief systems of the therapist. Systemic supervisors, like any other individuals, construct realities based on their own personal beliefs and prejudices. Reflexivity is part of the development of a collaborative relationship and is defined as a process that “involves turning one’s critical gaze back on oneself as well as the professional, historical, and cultural discourses that empower and constrain one’s capabilities to think and act in the context of a relationship” (Fine and Turner, 2014). This implies a process of questioning and dialogue with the supervisee.

Consequently, supervisory and therapeutic relationships are perceived as a reflection of relationships within a broader cultural context – a microcosm of what happens in society (Hare-Mustin, 1994). We are embedded and embodied (Hardham, 1996) in dominant discourses that impose an imbalance of power that privileges certain groups in society, whilst marginalising others. This power is demonstrated in the interactions of everyday life; it is omnipresent. McIntosh (1998) makes a distinction over how these dominant social discourses serve to oppress some groups over others and give privileges to members of the most powerful groups. Racism is perceived as a phenomenon that puts some individuals at a disadvantage, while being advantageous for other groups. She goes on to assert that, as a member of the dominant group, there are aspects of racism that we see and others that ‘one is taught not to see’. Privilege is defined as ‘the perceived status arising from advantages such as socio-economic or racial of which the individual may not be consciously aware’ (Falender et al., 2013). Derrida (cited in Parker, 1999) invites us to deconstruct this power-play by deconstructing the dominant discourses we are immersed in. He defines deconstruction as:

‘a process of critical reading and unravelling of terms, loaded terms and tensions between, that construct how we read our place in culture and in our families and in relationships, and how we think about who we are and what it might be possible for us to be’ (p.7).

Thus, social constructionism and post-modern philosophies provide an opportunity to challenge oppressive and discriminative practices by bringing social differences such as gender, ethnicity, sexuality and culture to the fore (Burr, 1995).

Supervision, within a social-constructionist framework, does not follow a strict model, but focuses on the kinds of conversations that emerge between supervisor and supervisee. Philp et al. (2007) argue that, in this way, the supervisor would enable the supervisee to take a meta position from which they could co-construct new meanings. Supervisors are also encouraged to look at the assumptions upon which their beliefs are based, and the consequences this may have on their work. Self-reflexivity in the supervisor is central, as it is in therapy. Reflexivity in therapy means a recognition of the prejudices that therapists may have in relation to the client and the family working with the therapist having brought them into the therapeutic relationship (Krause, 2012) and the awareness of the subjectivity of knowledge. Reflexivity in supervision is the capacity of the supervisor to recognise their own prejudices in relation to their supervisees, and the supervisee's relationship with the family.

In systemic literature, depending on the different approaches, the role of the therapist and the supervisor is performed differently. White and Epston (1990) examine the influence that these social discourses exert over all of us as individuals. The reflexivity and responsibility of the therapist is an essential ingredient of therapeutic practice, and therefore systemic supervision practice if we extrapolate this to the process of supervision. The development of cultural competences constitutes an important part of the training programme for therapists and supervisors, which obliges trainees to explore their personal cultural issues (Divac and Heaply, 2005).

Burnham and Harris (2002), invite us to look at the 'social graces' (an acronym for Gender, Race, Religion, Ability, Age, Culture, Class, Education, Ethnicity, Sexuality and Spirituality) as a way to promote issues

of diversity in the therapeutic and supervisory relationship. Laszloffy and Hardy (1995), suggest that therapists develop an awareness and sensitivity regarding their own culture by employing the Cultural Genogram. Krause (2002) encourages us to use the 'reflective loop exercise' as a way to minimise discrimination in therapy. Here, the therapist begins with self-reflexivity, then develops questions that are open, respectful, and curious, leading to new experiences and fresh meanings. Burnham's (1993) relational reflexivity refers to 'the abilities of the participants in a relationship to use the processes of how they relate to explore, consider, experiment with and elaborate the ways in which they relate' (Burnham, 1993, p357).

These concepts have been applied to the theoretical body of systemic supervision generating a complex relation to power. Systemic supervision needs to recognise the presence of power and its oppressive effects on some groups in society, but should also minimise power by working collaboratively and making the power relationships transparent. For instance, Murphy and Wright (2005), argue that power differentials are inherent in the supervisory process as it is constructed on the basis of social differences, difference of experience, expertise and training. However, they also define one of the aims of supervision as empowering supervisees and working with them collaboratively. It is a position that assumes that the therapist or the supervisor is holding power while they may be oppressing others, especially culturally diverse groups. The assumption here is that power is located in the supervisor, whatever their gender, class, age or ethnicity. However, power defined as "the capacity and opportunity to fulfil or obstruct personal, relational or collective needs" (Prilleltensky and Prilleltensky, 2006, p262) may not be experienced as such by those supervisors that belong to minority groups.

Culture, Race and Ethnicity

Culture, ethnicity and race as social markers have begun to be theorised since the 1980s, focusing particularly on the diversity of the families that

come to therapy. Race, ethnicity and culture are three constructs that require some clarification, as they are closely related but have different meanings. The three concepts share the aim of categorising human diversity. The term race was originally used to refer to the physical differences in the appearance of Europeans and the people they encountered in the process of colonisation (Kivisto and Croll, 2012, Hall, 2017). These physical differences were rapidly linked to other supposed differences such as intelligence, temperament and even the possibility of not being human at all. Hall (2017) calls race the 'sliding signifier', a system of meaning that organises and classifies the world in a divisive way, even though efforts to infer racial qualities to biological, physiological and genetic phenomena have proved unsustainable. Hall argues that despite the lack of evidence of the existence of race, the discourses that define it in biological and genetic terms are paradoxically still prevalent. He poses the question "What do these physical differences mean"? What ideas have emerged in terms of these physical differences? These differences are not important in themselves, but what they represent in the construction of certain discourses on identity is relevant, particularly when one identity has the "upper hand" (Hall, 2017). Wade (2010) points out that, by the end of the 20th century, science has proven that there is no evidence of the existence of human races, and there is an agreement that its meaning is a social construction based upon historical and economic contexts. Wade explains that races are "social constructions built on phenotypical variation – that is, disparities in physical appearance" (p391). These differences are specific to the social categories that exclude and include according to the geographical encounters of Europeans and their colonial history. Wade (2010) asserts that any study on race is part of that history, the history of colonisation. This is the paradox that Hall (2017) outlines: the inexistence of races and the existence of discourses that differentiates people according to differences in their physical appearance that creates a hierarchy with distributed advantage. Currently in the UK, there are racial constructions which can be traced back to British colonization differentiating the colour and cultural groups to which

people belong. This is what has been defined as the process of racialization: 'the manufacturing and utilisation of race in any capacity' (Dalal, 2002, p.27). The main aim of racialisation is the appropriation of power, the creation of a hierarchy where those at the top are white and the people of colour are beneath them (Bashi & McDaniel, 1997 cited in Fries-Britt et al, 2014).

In this study I will not employ the term race, as will instead use the term ethnicity as its meaning denotes the social differences among a variety of social groups. However, I will consider discourses which are constructed on the ideas of race. There is an academic consensus that ethnicity as a social construction describes the cultural differences between people. Barth (1969) remarks on the importance of determining the fact that it is individuals themselves who define what includes and constitutes difference and sameness when defining their ethnicity.

Falicov (1995), one of the pioneers in bringing culture and ethnicity to the fore of systemic therapy, recognises the importance of taking account of the ethnicity of families, and proposes a model that allows us to map its influence by drawing cultural borderlands, where different influences can connect or disconnect with the main ethnic group where the family is located. McGoldrick (1996) defines ethnicity as:

'...a story of our connections to our heritage and our ancestors, is always also a story of the evolution of group identities as we migrate, organise, and re-organise ourselves to meet changing historical and geographic circumstances. Ethnicity patterns our thinking, feeling, and behaviour in both obvious and subtle ways, although generally we are not aware of it' (p.ix).

She also acknowledges the interaction between ethnicity and issues of race, class, religion, politics, geography, the length of time since migration, a group's specific historical experience, and the degree of discrimination it

has experienced, underlining the complexity that this concept represents when trying to unpack its meaning.

Falicov (1988, cited in Falender et al., 2014) defines culture as:

‘...those set of shared world views and adaptive behaviours derived from simultaneous membership in a variety of contexts, such as ecological setting (rural urban, suburban) religious background, nationality and ethnicity, social class, gender-related experiences, minority status, occupation, political leanings, migratory patterns and stage of acculturation or values derived from belonging to the same generation, partaking of single historical moment, or particular ideologies’ (loc.202).

Laird (1998) argues that ethnicity and culture are dynamic, fluid and emerging concepts. She states that:

‘we ‘perform’ our cultural stories of gender, ethnicity, race and so on, through our everyday lived experiences. Furthermore, each performance, each enacted ‘storying’, is both unique and at the same time located in and related to the larger social discourses of meaning from which we gather narrative threads, symbols and ritual possibilities – a combination of tradition and imagination’ (p24).

The way we construct our cultural selves in the different contexts in which we may be immersed highlights the complexity of trying to define culture. In a therapeutic relationship, it is important to identify these cultural similarities and differences in both members of the relationship: the client and the therapist and the therapist and the supervisor. The implications are that these issues will also affect how the self of the supervisor relates and builds a rapport between the supervisor and supervisee.

Most of the research into supervision inviting us to look at power relations regarding culture, ethnicity and race is limited. Nelson et al. (2008) define supervision as a disproportionate relationship of power that combines evaluative and therapeutic components. Nelson et al. discuss this issue

within the context of the relationship of a white supervisor and a black supervisee, without acknowledging what ensues in the relationship between black supervisors and white supervisees. On ethnic relationships of power, Constantine and Sue (2007), for example, have investigated the perceptions of racial micro-aggressions among black supervisees in cross-racial dyads. They invite supervisors to address racial and cultural issues openly within the secure context of supervision, to raise awareness and reinforce knowledge and skills. Inman (2006) suggests that, given that supervision is one of the principal training methods of clinical practice:

‘the supervisor’s ability to impart knowledge and skills in diversity issues can be significantly influenced by trainees’ perception of supervisors’ multicultural competence and its implementation within the context of a supervisory relationship’ (p.73).

Inman draws on research demonstrating that factors such as the supervisor’s openness and attention to specific issues of cultural relevance were considered essential to the implementation of a culturally responsive supervisory relationship (Fukuyama, 1994; Hird et al., 2001; Killian, 2001, cited in Inman, 2006). McDowell’s (2004) research on the racial experiences of therapists in training found that all the BME trainees interviewed reported experiences of racism within the training programmes they were undertaking, in the relationship within the trainees’ group, and their relationships with tutors. This was manifested in the Euro-centrism of the course content, the group and tutors’ lack of awareness and lack of attention to race and racism being the subject of negative assumptions. The students also reported ways in which they were able to resist these racist manifestations, highlighting strengths such as building on the support of others in an attempt to understand the meaning of these racist behaviours, and by being persevering and determined. Thus, the white supervisor dyad is the one that has been most researched and focuses mainly on the perspective of white supervisors working with black supervisees in terms of cross-cultural practice.

Little, if anything, is written on black or ethnic minority BME therapists, let alone about black or ethnic minority supervisors. Most of the available literature on cultural diversity has focused on working with black and minority clients. Literature about the experiences of black and ethnic minority supervisors has predominantly been written in the USA. Thus, particular attention to the differences and complexities in the relationship between black and ethnic minority therapists and supervisors working with majority or dominant groups has been largely ignored. Patel (1998) is one of the studies in this area. It looks directly at the relationship between black therapists and white clients. Patel revealed that black therapists were aware of the power contradiction perceived by white clients and complained of feelings of discomfort and helplessness when working in these dyads. Black therapists reported that they addressed this imbalance of power by asserting their own authority as therapists, or by demonstrating their competence. Patel also suggests that one of the strategies that black therapists may use to deal with this discomfort is to abandon their black identity and immerse themselves in the predominantly white culture of their institution. We could assume that these processes are also involved in the supervisory relationship.

Wieling and Marshall (1999) found in their survey involving 6 supervisors and 46 students, that most of the supervisors and their students greatly valued cross-cultural training. 86% of the respondents were from an Anglo-Saxon cultural background and only 30% had received, at least once, supervision from a professional with a different ethnic background to their own, despite the respondents finding cross-cultural supervision beneficial. This low percentage was due to the lack of BME supervisors in the U.S.A. at that time. Of all the participants only 6 were supervisors, 5 of them valued the opportunity to supervise somebody from a different cultural background than their own as they were able to learn from those minority groups as well as having to address issues of race and culture directly with their supervisees. This study does not specify the number of BME supervisors in the total. The 98% of the respondents believed that race and ethnicity played an influential role in the supervisory relationship, seeing it as positive having the

opportunity of working with a supervisor or students from a different cultural background to their own. Wieling and Marshall (1999) argue the need to have more experiences of cross-cultural supervision as a way to promote a positive experience of supervision, even when the respondents did not explain the reasons that this could be so.

On a different study, Hird et al. (2004) have investigated how supervisors in the USA brought cultural competencies into the supervision between white and BME supervisors. They found that white supervisors spent less time talking about cultural competencies with their supervisees, especially when their supervisees were also white. This was the opposite with BME supervisors, who spent more time talking about cultural issues, especially with their BME supervisees. There is no information about how the perceptions of the supervisors' ethnic differences affected the supervisee. Toporek and Pope-Davis (2005) and Adams (2010) both cited in Porter (2013) found the supervisors from non-dominant groups have their expertise questioned by their white supervisees, especially when discussing cultural issues.

Ayo's (2010) study explores how issues of race, culture and ethnicity are raised in systemic supervision. She found that white and BME supervisors accept the responsibility of initiating and maintaining talk of race informed by their personal and professional experiences. This enabled race and culture conversations to be normalised in the supervisory relationship. However, when this did not happen supervisees were left feeling obliged to raise these issues with their team. She also points out that it is important not to assume the cultural competence of the supervisee and invite them to use cultural competency models at the early stages of supervision as a way to embed race and culture in practice and supervision groups.

Scarborough (2017) reflects on how the dominant culture trainee may be impacted by a culturally different supervisor and the impact of the power relationships within the supervisory relationships. She talks about the ways

in which culture gives different meanings to constructs such as time and the therapeutic relationship when working with minority clients. Scarborough invites her trainees to have real curiosity about them and in this way, challenging the trainees' dominant discourses from their cultural background. When discussing the location of power within the supervisory relationship, Scarborough reflects on how she is often challenged as a minority supervisor by her dominant culture trainees. Lack of trust and lack of competency were often the two responses she got from her cultural dominant trainees. She reflects on the paradox of the responses of her trainees and her own feelings of holding power and privilege in the relationship based on her experience and knowledge. She realised that the power distribution when working in the minority supervisor – dominant culture trainee dyad was different and reproduced similar biases, prejudices and stereotypes that are present in the dominant culture. Scarborough (2017) talks from the point of view of her own experience alluding to the complexity of the power distribution in the supervisory relationship, it is interesting that she does not refer to any research in this area that may enable her to make sense of these feelings.

Gender

Gender as another social marker is implicated in power relations and therefore also present in the supervisory relationship. Feminist criticism was instrumental in introducing a postmodern and social constructionist perspective to systemic psychotherapy (Anderson and Goolishian, 1988; Burck and Daniel, 1995; Hare-Mustin, 1986; Hoffmann, 1993; McNamee and Gergen, 1992). The gender of the therapist has been more thoroughly explored in systemic literature. Research on gender focuses on the ways that gender shapes relationships between therapists and clients. Stratford (1998) focused on how conversations between men and women are performed in the first therapeutic session. She looked at different researches in this area and cited Werner-Wilson et al (1997) both male and female therapists interrupted female clients nearly three times more than male clients. Jones

and Zoppel (1982) found that clients agreed that women therapists formed a more stable therapeutic relationship than male therapists. Dienhart (2001) looked at the gender of the therapist in the engagement of male clients. She found that male and female therapists' engagement perceptions and techniques were similar. However, some trends were identified. Female therapists focus more on issues of the power and privilege of men when working with male clients. Male therapists focused more on the vulnerabilities of male clients and their burdens of the power and privilege that men hold. This difference, it was assumed, is that it is harder for female therapists to engage with the men's vulnerabilities without risking over protection of their feelings or pushing them to express their emotions more openly. Male therapists may be more open to breaking with traditional dynamics when they connect with men's vulnerabilities. At a supervision level, McHale and Carr (1998) analysed dyads between female and male supervisors working with female and male trainee therapists. They found that female supervisors performed more directive discourses than male supervisors, which goes against the stereotypical idea that women provide a more collaborative supervisory relationship, but female supervisors had more resistance from their supervisees. Moorhouse and Carr (2002) studied the association between supervisors' and therapists' gender and their conversational styles. They found that the dyad of male supervisor and male therapist performed more collaborative behaviours, and the opposite was found in the dyad of male supervisor and female therapist. However, in the dyad of female supervisor and male therapist, they found that male therapists performed more collaborative behaviours towards their clients. Jordan (2006), in her research on supervisees, found that the majority reported that working with a same-gender supervisor was not important for them. From the 6% that reported that gender match could be helpful, more males found it was important. Despite these contributions to the systemic literature, Porter (2013) argues that an analysis of the social inequalities in female clients has generally been ignored until now, even by female supervisors.

This finding is striking given the influence of feminist theory in systemic literature.

Social Class

One of the most neglected social markers in systemic literature is social class. The complexity of defining social class accurately has affected the volume of research in this area. Most of the studies measure socio-economic status, which involves more tangible variables such as occupation, education and income (Cook and Lawson, 2016). Social class reflects the subjective impact on the life of the person who is in a particular group. McDowell et al. (2013b) point out that social class is rarely highlighted or closely examined as part of cultural identity in family therapy. They cite a review of five family therapy journals between 1995 and 2005, where Kosutic and McDowell (2008) found that, of 1,735 articles, only 12 (0.33%) contained an emphasis on social class or classism. McDowell et al. (2013b) argue that social class is central in shaping family narratives and families' interrelationships and expectations in their everyday life. Waldegrave et al. (2012), in explaining the development of the 'just therapy' approach, emphasise culture, gender and socio-economic status as the central contexts for the wellbeing of families. The 'just therapy' approach has alerted us to how, by not focusing on these social markers, professionals were unintentionally adjusting people to poverty. Class as a social marker is also present in the supervisory relationship, especially around values regarding education and knowledge, and particularly in a context of higher education. However, social class has not been well-documented in systemic literature in relation to supervision. Fouad and Chavez-Korell (2013) noticed that in the process of supervision and training in general it is assumed that, in the US, supervisors and supervisees share the same class and worldview. This may also be true in the UK and may explain the scarcity of literature in this field. Both authors make a distinction between social class and socio-economic status. Social class is usually defined as 'the income, wealth and resources that individuals have often stratified across groups' (p.146). The

stratification in different groups where some have more privileges and resources also impacts their individual perception of their identity (Fouad and Brown, 2000, cited in Fouad and Chavez-Korell, 2013). They propose that it is subjective experiences of social class that need to be focused on in clinical supervision, as they shape the world view of the participants of supervision differently.

Whilst researching material on social class within this review of current literature, an intersection between race/ethnicity and class rapidly emerged, as did the prototype of young white working-class males as some of those most discriminated against by social class. It seems that classism is visible when looking at white people, perhaps due to the stereotypical social expectations of white meaning being middle class and black meaning being poor. 'White trash' in the US (Isenberg, 2017) and 'chavs' (Jones, 2016) in the UK are constructions of this stereotype.

The intersectionality of these social markers has not been addressed in systemic supervision in the UK. By intersectionality I refer to the term that has been attributed to Kimberlé Crenshaw (1989), who wanted to articulate how different types of discrimination intersect to oppress people in multiple and simultaneous ways, contributing thus to social inequality and systemic injustice (Butler, 2015). Storm and Todd (2014) argue that it is precisely these conversations that address intersectionality in supervision and facilitate the discussion of the role of systems, institutions and the self of the therapist in the therapeutic system and the development of critical consciousness. In this study, I shall concentrate on the visible statuses of ethnicity, gender and class. This study attempts to determine how and if these social markers are implicated in the constructions of authority of the supervisor and, if so, how supervisors manage them in the supervisory relationship.

Conclusions

Authority in systemic supervision is constructed from social discourses that value the knowledge and expertise of the supervisor (Parson's rational authority) and also recognise that authority is given to those that belong to privileged groups and oppress others (Hare-Mutin, 1994). These two discourses create and assume complex stances for the supervisor: the supervisor has authority on the knowledge and expertise, but also has the capacity to oppress those who belong to minority groups. These two stances create tensions and dilemmas in relation to the knowledge of the supervisor and the taking-for-granted power of the supervisor in the supervisory relationship, which in turn renders the process of how ethnicity, gender and social class impact the construction of authority invisible. As can be appreciated, these social markers are implicated in the construction of the self of the therapist. I would argue that the power of the supervisor is intersected between their expertise and knowledge and according to ethnicity, gender and social class.

Chapter 3. Methodology

3.1 Introduction

This is a small-scale, qualitative study focusing on how **ethnicity**, class and gender are implicated in the supervisors' construction of authority in their supervisory relationship. In this chapter I shall outline the rationale for the study and overall research objectives and clarify the theoretical framework underpinning the study. I shall also identify key influences which informed how the study was designed and conducted and address ethical issues, self-reflexivity and relational reflexivity.

3.2 Rationale

In this study I seek to contribute to the systemic theoretical analysis in relation to supervision and diversity. The limited literature available on the diversity of supervisors and its impact on their authority relationship with supervisees does not give a thorough account of experiences of supervisors from minority backgrounds. The increasingly diverse population of the UK has not only obliged family therapy and systemic supervision to engage in cross-cultural work with diverse families, but also had a direct impact on the increased diversity of staff in the profession. The limited focus on diversity in literature on the therapist and supervisor and their theoretical contribution may replicate the oppression that these therapists and supervisors already experience in their everyday life.

I address this through my research question:

‘How are the intersections of **ethnicity**, gender and class implicated in the social construction of authority in the supervisory relationship?’

3.3 Purpose of the research

- To contribute to the development of systemic theoretical concepts and ideas when working across cultures with family therapy trainees and supervisors.
- To develop an understanding of the impact of social positioning and how authority is constructed and negotiated by supervisors from minority and majority groups.
- To contribute to improving training for trainees, family therapists and supervisors from minority backgrounds in academic and training institutions

3.3.1 Aims

- To explore supervisors' constructions of authority in the supervisory relationship.
- To explore the meaning that supervisors attribute to the process of performing and negotiating authority, in relation to their social positioning in relation to ethnicity, gender and social class.
- To explore strategies used by supervisors which enable supervisors to manage and maintain their relationship of authority in supervision.

3.4 Epistemology

The research is qualitative and fits well with the aims of this study: the exploration of how the intersections of ethnicity, culture, gender and class are implicated in the social construction of authority in the supervisory relationship. My aim is to generate a study that captures the richness and complexity of supervisors' constructing authority in their social positioning in term of race/ethnicity, gender and class. My work has stemmed from the relative lack of information on this topic in systemic literature. My main focus is on the meanings that supervisors give to authority when working with their supervisees according to their social positioning. In this context knowledge is subjective and partial.

The study is positioned in the social constructionism paradigm. Social constructionism is interested ‘in the various way of constructing reality that are available in a culture, in exploring the conditions of their use and to trace the implications for human experiences and social practices’ (Willig, 2013, p.7). Social markers such as ethnicity, gender and class are socially and historically produced meanings that are located in particular social contexts and are part of the construction of identities, therefore requiring qualitative methodologies.

Qualitative methodologies tend to be interested in the meaning that people attribute to certain concepts and processes; it is interested in the ways people make sense of and experience events. My research question and the aims of this study fit well with this kind of research as it explores questions about the understanding of how supervisors construct their authority in their supervisory relations. I shall use qualitative methods to analyse the data, as this is consistent with the subjective nature of the research study. Krause (1994) suggests that qualitative methods are more appropriate to cultural studies as they permit the contextual levels of meaning and representation to be taken into consideration in a more holistic way.

I have chosen grounded theory analysis to analyse the transcripts of the interviews. A relevant aspect of grounded theory analysis is that it is useful in exploratory studies and in areas where there is little or no theorisation (Burck, 2005a), which is the case here. Willig (2001) considers that grounded theory is the process of category identification and integrations (a method) and its product (a theory). The focus of my research is the exploration of how supervisors, in relation to their social positioning (considering race, gender and class), construct authority in their supervisory relationships. The lack of literature on this topic makes grounded theory appropriate for my research as a first step in theorising the practice of systemic supervisors.

3.4.1 Grounded theory

The sociologists Glaser and Strauss were interested in exploring theories around patients that were dying, and developed grounded theory in 1967. They defined it as ‘the discovery of theory from data systematically obtained from social research’ (Glaser and Strauss, 1967). Since then, grounded theory has been a widely used research method in social sciences. It has also been applied in the field of nursing, management and education (Olesen, 2007) and in therapy. Grounded theory has developed in three different models: *systematic* developed by Strauss and Corbin (1998, cited in Olsen, 2007) which established a series of rule-like coding which gave grounded theory a positivistic flavour, without involving the researcher’s view on the process; *emergent*, in which Glaser cautions researchers not to use a matrix but to allow the nature of analysis to dictate the nature of the research; and the *constructivist* model, developed by Charmaz. I will elaborate on this latter model, as it is the one that I will use in the analysis of the data in this study.

Charmaz (2006) developed further grounded theory, putting an emphasis on the construction of meanings, without the assumption of an external objective reality, where the research is part of the co-construction of the data. **It is worth clarifying that Charmaz uses the term constructivist to describe what systemic theory refers to as constructionism**, hence I will be using the term Grounded Theory to refer to her particular methodology.

Borgatti (1996) describes the basic method of the grounded theory approach as reading (and re-reading) a textual database (transcriptions) and labelling variables (called categories, concepts and properties) and their interrelationships. The ability to perceive variables and relationships, he adds, is termed ‘theoretical sensitivity’ and is affected by a number of things including one's reading of the literature and use of techniques designed to enhance sensitivity.

Grounded theory offers a format for examining the experiences of participants, including their values, beliefs, feelings, assumptions, and ideologies (Charmaz, 2006; Creswell, 2007; Fassinger, 2005; Glaser and Strauss, 1967). It is also argued that this particular model allows a degree of flexibility within the data collection process, giving the participant more command of the research. Through this process, new concepts and beliefs about the construction of authority emerge from the data.

Grounded theory makes possible the incorporation of diversity issues by assigning a primary importance to changing demographics and emerging interactions around diversity as central to the phenomenon under investigation; in this specific case, the authority of the supervisor. This is possible due to grounded theory's ability to generate new and emerging knowledge pertaining to issues of race, gender and class (O'Neil, Green et al., 2007).

According to Charmaz (2014), grounded theory involves the following processes, which I undertook in the analysis of the data in this research:

1. Identifying the research problem. Diversity issues are central to this research as the lack of systemic literature focusing on the self of the supervisor in relation to their race, ethnicity, gender and class. The literature on systemic supervision and power does not take account of the paradoxical position minority supervisors find themselves in, where on the one hand they have authority as supervisors and on the other hand their authority is undermined socially by their social positioning. Authority is constructed based on possession of knowledge and expertise by the supervisor, but neglects to relate the impact of the supervisor's social positioning such as class, race and ethnicity, and gender.

2. Developing research questions. The open-ended nature of the research question in grounded theory contrasts with hypothesis-driven questions. The research question in this study – *How the intersections of race, culture, gender and class are implicated in the social construction of*

authority in the supervisory relationship—seeks to determine the differences, if any, in the constructions of authority according to the supervisor’s social positioning in relation to social markers such as racial and ethnic, gender and class differences.

3. Collecting data. Grounded theory acknowledges the position of the researcher in the construction of data, and therefore acknowledges the subjectivity of the process such as the biases and assumptions of the researcher. The data collection in this study is based on face-to-face interviewing, where I sought a similar number of participants from different gender and ethnic groups. In relation to gender, I ensured there was an equal number of male and female participants. In relation to ethnicity, the participants identified themselves as belonging to specific ethnic groups including white British, black British, mixed race and Indian. Given my research questions on majority and minority supervisors, I divided them into White British as the majority ethnic group and Black and Minority Ethnic (BME) as an ethnic group.

Instrument used. I used a semi-structured interview (see Appendix 2) as a way to guide my conversations with the supervisors. Once I had devised the interview, I discussed it with colleagues and tutors, incorporating their views and ideas to facilitate the process of gathering information.

The semi-structured interview identified the main areas explored by the study, without determining them precisely. Thus, the interview enabled me to introduce other questions or prompts that could relate to the participants’ responses. The interviews varied in length, depending on the participants’ answers and the different answers that these questions triggered. Most of the interviews lasted for approximately 45 minutes.

Recruitment process. The participants were recruited using a letter of invitation to those who had accessed various family therapy supervision courses and those who had appeared in the Association of Family Therapy supervisors’ register. I contacted them by telephone and email, and after the initial contact I sent them general information (see Appendix 3) on the

research together with the consent forms. Of the 13 people contacted, 12 replied immediately and agreed to participate in the project. I was unable to record the interview with one of the participants, so I was not able to include this data.

The positionality of the researcher is an important aspect to consider in grounded theory. I am a Chilean woman and a systemic psychotherapist, supervisor and tutor. Some studies suggest that ethnic matching in research may encourage the development of trust and promote a good rapport between the researcher and participants (O'Neil et al., 2007). This meant that for female BME participants, this matching was achieved in terms of being from a BME background, which may have facilitated some difficult conversations that may not have emerged with researchers from a white majority background. My minority status may also have constrained some conversations with those supervisors from majority social markers.

Analysing and interpreting data. In the analysis and interpretation of the data, diversity issues were central to the research question. In the coding, I was conscious of some racial and gender issues that the participants were articulating, even when I did not ask directly how race and ethnicity or gender were affecting their performance of authority in the supervisory relationship. However, if the participants named some of these aspects I tried to follow them and asked further questions for clarification.

Validating findings. Two colleagues read the coding and made suggestions about other ways to interpret the data analysed. Both were White British women and systemic psychotherapists. I also have two supervisors, one internal with vast experience in race and ethnic studies and an external supervisor who is highly experienced in supervision; one is BME and the other White British.

Writing the report. This is the final stage of the study and it has gone through different drafts. In the writing and re-writing of this thesis, I have been aware and sensitive to issues of diversity by reading and incorporating

literature on race, ethnicity, gender and social class, looking at journals inside and outside the systemic literature that address these issues. I have sought to incorporate literature that also looks at the subject of authority where these issues are absent.

3.5 Ethical procedures

The participants interviewed were asked about their experiences within the context of being family therapy supervisors. I obtained permission and approval from the NRES (London) (Appendix 4). All the participants signed the application forms including the consent forms (Appendix 5) and letters informing them of the research.

I also illustrated the possible consequences that this type of research may have on the participants. I was able to offer the provision of further sessions with the participants if they wanted to discuss any aspect of the research, or things emerged following their participation in the semi-structured interview. All of them read the information sheet (Appendix 3) and agreed to complete the consent form (Appendix 5).

3.6 Participants

3.6.1 Selection of the participants

The participants' criteria of inclusion were that they were qualified family therapy supervisors, working and practising supervision. They also identified their ethnicity, gender and class.

Participants

There were 12 research participants, all of whom were systemic supervisors and established as supervisors in their agency. They all identified themselves through their ethnicity, class and gender.

Confidentiality

In order to protect the participants' anonymity, I have changed their names and only given some general information about their background.

Participant No1 is a British/South-Asian systemic psychotherapist based in a CAMHS and undertaking the Family Therapy Supervision Course. She describes English as her first language.

Participant No2 is a Middle-Eastern systemic psychotherapist based in a CAMHS and undertaking the Family Therapy Supervisor Course. She describes English as her fourth language, Persian being her first.

Participant No3 has a mixed-race heritage, having a White Irish mother and a Nigerian Black father. She is a supervisor and systemic psychotherapist working in a training institution in London. She describes English as her first language.

Participant No4 is a Black British woman who works as a trainer, supervisor and family therapist in CAMHS. She describes English as her first language.

Participant No5 is a White British woman working as a family therapist and supervisor in CAMHS. She describes English as her first language.

Participant No6 is a White British woman who is a family therapist and supervisor working in CAMHS.

Participant No7 is a White British woman working as a family therapist and systemic supervisor in CAMHS. She describes English as her first language.

Participant No8 is a male White British family therapist who works in CAMHS and describes English as his first language.

Participant No9 is a White British male family therapist who manages and supervises a team in CAMHS. He describes English as his first language.

Participant No 10 is a Black Caribbean male who manages and supervises a team in CAMHS. He describes English as his first language.

Participant No11 is mixed race male family therapist and supervisor and manages a CAMHS team.

Participant No12 is an Indian male who manages a local authority team in London. The recording of this participant was faulty so not accessible for analysis.

Participants	Ethnicity	Age	Gender	First Language	Born in Brita
Rashmi	British/Asian	42	Female	English	Yes
Zara	Middle Eastern	53	Female	Persian	No
Veronica	Mixed Race: White/Nigerian	57	Female	English	Yes
Carol	Black British	60	Female	English	Yes
Lizzi	White British	38	Female	English	Yes
Paula	White British	57	Female	English	Yes
Laura	White British	42	Female	English	Yes
Peter	White British	54	Male	English	Yes
John	White British	55	Male	English	Yes
David	Black Caribbean	36	Male	English	Yes
Manuel	Mixed Race	55	Male	English	No
Raj	Indian	55	Male	English	No

I interviewed them in a place of their choice, which involved both public and private spaces such as their homes, their workplaces or public coffee shops. Those participants who identified themselves as other than white and British, I described them in the analysis and findings as black and ethnic minority (BME) participants, given the small sample and in this way the

analysis on race/ethnicity was clearer when comparing different cultural backgrounds.

3.7 Data Analysis

The procedures of the data analysis are:

- The transcripts were read and re-read to familiarise me with their contents and detect themes of interest.
- The transcripts underwent complete coding to address instances that address the research question.
- The codes were phrases that the participants mentioned in relation to the research questions (see example of coding Appendix 6).
- The data was analysed into sub-themes and themes.
- Final themes linked with the research question.

Chapter 4. Findings

The aim of this study was to explore how ethnicity, gender and class are implicated in the systemic supervisor's construction of authority. It also aimed to explore strategies that systemic supervisors use to help them to manage and maintain the process of exercising authority. **Eleven theoretical codes emerged from the data I obtained. Two are related to the constructions of authority available to systemic supervisors, five to the construction of authority according to social markers such as gender, ethnicity, age and class, and the last four to the supervisors' use of theoretical approaches when constructing authority.**

Table 1 - Dominant constructions of authority

Theoretical codes	Focused codes	Initial codes
4.1. Internalisations of Dominant Constructions of Authority	4.1.1 Parental	Clear hierarchy Male Harsh and containing Boss of the house
	4.1.2 Professional	Professional hierarchy Collaborative White female Thoughtful & respectful Sensitive and grounded Understanding
	4.1.3 Institutional	Social authority Police Legal Religious Government Traditional authority Political oppression
4.2. Personal and Relational Constructions of Authority	4.2.1 Personal authority	Being bossy Being in charge Being directive Being in control Having confidence Having wisdom

	4.2.2 Given authority	Entitlement Experience Having agency Negotiation
	4.2.3 Claimed	Designated roles in an institution Job descriptions In charge
	4.2.4 Earned	Being helpful to the group Showing you can take responsibilities People know what I am talking about

Table 2 – The intersectionality of the construction of authority

Theoretical codes	Focused codes	Initial codes
4.3. The Intersection of Ethnicity and Class	4.3.1 BME Ethnicity not being named	I am not a woman of difference I never played too loud...the ethnicity bit a lens to look at everything from a point of disadvantage Very tricky areas to talk People feel afraid Game that the supervisee plays It doesn't feel safe for me Not being believed Being close by ethnicity
	4.3.2 White Ethnicity not being named	The most obvious in me is being white I don't see the link between authority and ethnicity It's a horrible feeling

	4.3.3BME authority being challenged	<p>Meteorise</p> <p>You wouldn't say that to a white supervisor</p> <p>My English has become a tool for challenging me</p> <p>My contributions are challenged</p> <p>I feel an outside</p>
4.4. Ethnicity expressed by Language	4.4.1.English as a second language	<p>It is a constraint to me</p> <p>That [language] comes into the relationship at times</p> <p>They could pretend that they don't know</p> <p>It is a diversion</p> <p>They would take me less serious, ridicule me</p>
	4.4.2 English as a first language	<p>You can't succeed with a regional accent</p> <p>It might preoccupy me</p> <p>Accents are really key</p> <p>Eloquence</p> <p>Anglicised black therapist</p> <p>Speaking clear English</p> <p>It is not the accent that gives authority</p>
4.5 Authority, ethnicity and gender	4.5.1 BME females gendered constructions of authority	<p>Gentle authority</p> <p>Caring and nurturing</p> <p>Having a masculine Voice</p> <p>Men in power</p>
	4.5.2BME male's gendered construction of authority	<p>Very tricky</p> <p>I am a man and I am in a position of authority</p> <p>Authority is masculine</p>
	4.5.3 White female's gendered construction of authority	<p>Females are quite powerful</p> <p>Males holding knowledge</p>

4.6 Authority and Class	4.6.1 Being posh/middle class	I get heard in a particular way because I am quite posh I have privileges in many levels I can't help it, just I am white and middle class
4.7 Authority and age	4.7.1 Being middle-aged	Having experience Respect Feeling safe An asset
	4.7.2 Being young	Age and experience equate expertise

Table 3 - Theoretical models used in the performance of authority

Theoretical codes	Focused codes	Initial codes
4.8 Multiversa	4.8.1 Authority constrained by multiple realities	It's tricky to manage I just cut to the chase It's good to have directions Not expressing our opinion Go outside that box
4.9 The Domain of Production	4.9.1 Taking responsibilities	Highlighting child protection issues Having responsibility to intervene Child protection is a responsibility of authority The authority of having clinical responsibility in high risks cases Taking the advice to refer to children services Reporting back to the registering bodies If it goes wrong I would have to take the responsibility There is a duty Responsibility of the course I am teaching

		Responsibility of getting things done
4.10 The Domain of Explanations	Curiosity	So, let's explore it You can explore more Not having the answers but helping them to move forward Just be curious
4.11 The Domain of Aesthetic	Collaboration	getting along beside people it's very much collaborative it's something that we create together I am just sharing ideas I want supervision to mean a collaborative space
	Transparency	Naming power To be clear about one's own position To be quite transparent Being open in some way

4.1 Internalised dominant constructions of authority

The participants described a series of internal dominant constructions that guide and inform the performance of their authority; these internal constructions are mostly based on their early experiences and relationships of authority, which I shall call 'internalisations of dominant constructions of authority'. Within the social constructionist paradigm, these constructions are linked to their emotional connections and personal experiences regarding authority. These dominant constructions allow supervisors to position themselves in relation to authority: some of these dominant constructions are rejected while others are followed when supervisors talk about their own authority. Three main constructions were described: parental authority, professional authority and institutional authority.

4.1.1 Parental authority

Most of the participants gave meaning to authority according to their relationship with familial authority. One of their main construction of

authority emerged from their experiences of parental authority and the meanings they gave to this construction as children. Rashmi (BME woman) describes the parent and child model in her own upbringing as one she has been able to draw upon when performing authority with her supervisees and links this model to the ability to make decisions:

'I am also from a family where there is a very clear hierarchy, you are children, we are parents, adults make decisions, children don't.'

Authority is constructed here as the ability to take decisions within a clear hierarchy between children and parents. Rashmi seems to accept this hierarchy as a positive model of authority.

Veronica (BME Mixed race/British woman) looks at her own position within her family, she identifies herself as the eldest child in her family unit and therefore, part of a clear family hierarchy. She perceives her own authority by having accepted some responsibilities and having opinions; which implicitly she seems to take by being the elder child and thus closer to the parental authority. The hierarchy is constructed in line with age difference, where being an older sibling means taking more responsibility and more privileges:

'I think that I am an older child and I think I've always taken, accepted responsibility as an older child and I was brought up in a family where having opinions was very important, thinking about things was privileged and being able to talk about things...'

Zara (BME woman) discusses the difficulties in challenging authority and hierarchy as child in her political and cultural context:

'I think that is very much...I've been thinking about this...again back in my country because there is a hierarchy of child-parents relationships, and parents-teacher relationships, because that's one of the first relationships that we come across as children, so when it comes to your parents, when it comes to your teachers...you always, regardless, it's you who is wrong, not your parents, not your teachers, and that's is with me, it's kind of...that's where it's coming from taking responsibility for everything that could go wrong.'

She links authority to a hierarchy that does not question parents and teachers **in** her cultural context. Zara (BME woman) connects with the difficulties in challenging authority to her cultural upbringing and the roles of people in positions of authority, however, as an adult she is not able to take this position of authority, as she keeps taking responsibility for what could go wrong. She seems to be hinting at the constructions of authority of collective societies but also at something that she cannot fulfil as an adult. The constructions that Zara may have about these roles as parents and teachers are not positive and therefore she cannot take this position of authority as an adult.

This specific way of constructing hierarchy seems to be connected to Rashmi's, Veronica's and Zara's cultural backgrounds. They come from diverse cultural background, where collective values are more dominant. These cultural backgrounds are those ones 'in which people, from birth onwards, are integrated into strong, cohesive in-groups, which, throughout people's lifetime, continue to protect them in exchange for unquestioning loyalty' (Hofstede, 1991, p.260). Hence, individuals living in collectivistic societies are expected to follow the norms, rules, and values of a collectivistic culture, which embrace loyalty to and respect for parental authority. This does not mean that individuals from these cultural backgrounds do not challenge authority, but they do it by not challenging it directly as may be more prevalent in individualistic societies. It is clear that Veronica (BME woman) and Rashmi (BME woman) value this family hierarchy and they have found themselves in position where they can perform some authority. This is not the case for Zara (BME woman).

The relation of gender and authority is clearer in the following statement, as we can see later that Manuel (BME man) seems to construct authority as challenging parental hierarchy more openly in his youth:

'...And I suppose the other person in authority, and I'm surprised that he came to mind, to be honest, because I had a lot of problems with him when I was young, is my father. Again, and the one thing that I've noticed

that I think he also has given me is a way of being in authority without being punitive and always being supportive, and just being accepting...'

His construction of authority is masculine, he values and accepts this supportive authority. Although he does hint at having difficulties with authority himself, he does not express how explicitly. I wonder if Manuel (BME man) has a similar construction of authority in mind to Paula (White British woman). They are both discussing the differences between their relationships to parental authority as young people and as adults. It is only when they can be viewed as a relationship of two adults, equals to some extent, that the construction of legitimate authority is present. Paula commented on her relationship to authority via the relationship with her parents, especially how she perceived her father's authority. Paula (white British woman) links parental authority to her father being the boss and to punishment if he was not obeyed when she was young. In this quote she names power rather than authority:

'I suppose because I was much more likely to take notice, particularly as I get older, of my dad than my mum. He did have more power; he was the boss in the house, no doubt about that. And I suppose that the power of that is that I did what I was told because else, you know, else you would be punished or whatever.'

She then adds how her father has remained a figure of authority in her adult life even though she may try to resist being positioned by it:

'Well, he might try. But it isn't performed because I reject the position that he puts me in, you know, the child position that he tries to put me in. So it doesn't have any power. But, as I said, he does still have authority. And in my mind, in my head I sometimes think, oh yeah, my dad would be saying this about it or whatever, and I might not choose to agree, but actually this is still a voice that has some say, not say, erm, yeah, but to be listened to, I suppose...'

Paula makes a distinction between power and authority. She seems to be defining power as the power to be obeyed, even if this is through punishment; and authority as power to be persuaded so she would listen to their advice. This distinction is similar to Weber's (1968) definition of

legitimate authority as the figure that can affect others' behaviour without recourse to punishment.

Lizzi (white British woman) also comments on parental authority, but again stresses the lasting impression and experience of it from a child's perspective:

'I think there are many things that go through my mind. The authority I experienced from parents as a child, parental authority is the more uppermost in my mind [rather] than my own authority I have as a parent myself, my own experience as a child.'

She then adds a more critical comment about what she felt about this parental authority:

'My experience was that he [father] was harsh, yet I suppose at times his authority was containing. But I think, overall, my experience would be that he was overly authoritative'

Lizzi, Paula and Manuel bring out a different position towards authority compared to Rashmi (BME woman), Veronica (BME woman). Lizzi and Paula are two white British women who perceive parental authority as harsh and punitive. This authority is challenged due to its harshness, which shows two aspects; that there are different styles of parental authority, and that this style of authority can be challenged.

British culture tends to value more individualistic values that consider the self as unique and independent; therefore, each individual can pursue his or her own goals; personal goals take priority over the collective goals (Triandis and Gelfand, 2012). Thus, Lizzi and Paula construct authority from patriarchal-dominant models, but can hold a more critical position about parental authority even when they also consider this kind of authority as containing. Manuel (BME man) also articulates his construction of authority in this way even though he could also be described as being from a collective culture. It would be interesting to explore whether these differences in values

are also affected by gender, as they may underline intersectionality majority and minority social markers.

All participants talk about an emotional relationship with authority when they talk about parental authority. Interestingly, most of them refer to the father rather than the mother as the person whom they identify with authority. Some of the women who linked authority with their fathers seem to convey a more negative emotional element, using words, such as ‘harsh’ or ‘punitive’ in their descriptions. Most of the participants linked their ideas about authority to masculinity in general and to fatherhood in particular. Patriarchal dominant discourses seem to be central in the construction of authority across ethnicities and gender of the participants.

4.1.2 Professional authority

The participants mentioned other dominant social constructions of authority when they call on authority in their professional context. These constructions represent an authority based on dominant values of experience and knowledge that they have professionally.

For Manuel (BME man), apart from his father as a construction of authority, his teacher also fitted with those values and beliefs of a person in authority:

‘...there’s two people that come to mind, if you think about a person who was in authority to me, who have... and it’s two men, one is my Latin teacher, when I was at secondary school, I had six years Latin and I saw him... near the last few years I saw him every day and he had a way of relating to people, relating to young people, to me and to others that I observed that was very, very respectful, despite whatever way he was treated, but he was able to still get the best out of it and see... and not be punitive at all.’

He stresses respect for this kind of authority based on the relationship that they were able to develop with their students, and once again distinguishes the values of respect and punishment present in the construction of authority.

Zara (BME woman) recalls an experience with her male supervisor where she is able to see an embodied example, as opposed to theoretical discussion of how to negotiate authority collaboratively, which was useful to her:

'so watching David, he is collaborative, but he is using his power, he knows when he needs to take a position of power. To me that's very clear and I like that, but in previous training, that never was clarified, there was not a distinction, only it was through papers, evaluation of papers, when we knew that they were in a position of power'

Zara defines authority in relation to power. She is also hinting at the differences between power and authority which were previously made by white female supervisors. Her supervisor can bring both aspects of legitimate authority, the use of power and her perception of its legitimacy which she calls collaborative, while her previous experiences she notices the use of power in the arbitrary evaluations. Yaffe (2017) defines parental authority based on these two aspects power and legitimacy, however, some of the participants in this study conceptualise their supervisor's authority in these terms rather than in relation to their own parental authority.

Laura, (white British woman), talks very clearly about having a role model for her own authority in her female systemic supervisor:

'Yeah, she's been a fantastic role model of somebody who is very thoughtful and measured in her comments, but seems to get a very nice balance between knowing when to just add to a conversation and knowing when to enquire into a conversation. And she's somebody that I've really valued supervision from, and I'm trying to internalise with my own supervisees, you know, when I'm embarking on supervision with others.'

Lizzi (white British woman) describes her systemic supervisor as:

'Well, I think I trust her. I think she is very sensible and grounded, which is important to me. She's definitely got her feet on the ground. And I think she understands my way of working. I think both of the clinical supervisors I have got - I have one for the NHS, working outside, - are quite challenging of me when they have understood how I am doing it.'

Paula (white British woman) also brings her supervisor as her construction of authority. She emphasises the dominant social markers of her supervisor's authority, to which she then adds scary. I wonder if Paula is beginning to notice that authority is also constructed through social markers such as class, age, education and ethnicity which can be scary as Paula intersects the same social markers as her supervisor:

'She's white. She's middle-class. She's an American woman. She is very articulate. She is, what, middle-age, well, my age, I suppose. Scary. She is highly educated, yeah. Practising religion isn't a part of her life. She is not married. Actually, that's interesting because some of my colleagues who don't have children - she doesn't have children - and some of my colleagues who don't have children feel that their authority with families is sometimes in question.

In these constructions, the dominant figures of authority are women and men and they are constructed as more positive authority. This kind of authority is less questioned and therefore accepted by these supervisors, as it is seen as supportive and accepting of their professional identity. All white British women mentioned their female supervisor as their preferred model of authority, but most of the female BME and White male supervisors did not. I could speculate that as most of the female BME have white supervisors, these relationships may be more complex. The same may be true for white males who do not speak about their supervisors and may already see themselves as vested with some authority. For white female supervisors, their own white female supervisors offer positive role models for authority to which they can relate well, as they may also come from similar backgrounds to their supervisors, in terms of shared race and ethnicity, gender and class. In this finding, these participants are learning about asserting their own authority via the performance of authority of their own supervisor. This tallies with Bertrando and Gilli's (2010) argument about the importance of the role of the supervisor as the supervisee learns more from the ways that the supervisor practice than from the content of supervision.

4.1.3 Institutional authority

By institutional authority I am referring to the participants' constructions of authority based on social institutions such as the government, the police or the law. The relation that they have with them is usually a complex one.

Lizzi (white British woman) mentions the police as one of the constructions that are imposed upon her in the society in which she lives:

'Social Authority I think as in the Police and that kind of thing. So, authority as it is put on me is the first thing that comes to mind, not authority that I have or give out.'

Laura (white British woman) mentions her relationship with the legal system, which is also a body which dictates what she should or should not do:

'I guess I'm thinking about legal, the sort of legal system and laws that we have to keep on a day-to-day level around, you know, things that we should and shouldn't do. Or, sort of driving laws, highway code, [laughter], that sort of thing.'

She then adds:

'I suppose symbols of authority in Britain would be the government, local councils, courts, judicial systems. But also, you've got organisations, I think Britain does it through institutions like education, social services, you know, the public sector, really, are very established, NHS, it's got the history.'

She begins to identify what Weber (1968) refers to as traditional authority:

'And I think British culture buys into this idea of tradition and holding onto tradition, and somehow, the longer something's been around the more weight and authority it's got, and that's valued. You've got Church of England though, interestingly, that authority I think is being challenged more and more. So you've got all these great British institutions that I think are still influencing people's lives on a day-to-day level.'

Here Lizzi (white British woman) identifies the different institutions that are seen as embedded in British traditions, including the NHS. She seems to

accept this type of authority as part of the cultural background of her everyday life. 'Traditionally British' may also allude to the fact that these institutions also contain the cultural values of the hegemonic group, white British.

Zara (BME woman) constructs institutional authority as repressive, based on her political experiences in her country of origin. This seems to explain her negative associations with parental authority. She also mentions her active role in fighting against oppression:

'I am uncomfortable with authority, every time you are using it, it takes me back...authority meant oppression, authority meant...back home authority meant politically active and having consequences to the person who has authority, of someone who could oppress you. Yeah, that's what I am connecting with!'

Zara (BME woman) seems to relate to **the idea of illegitimate** power when she talks about authority, where authority is the representation of the interests of the most powerful by visible coercion in her country of origin, Iran. She talks of authority as an illegitimate figure that oppresses and to whom she has to be opposed. This type of authority, even when it is part of her own cultural background, is impossible for her to relate to as a role model. **Foucault's work has not focused on how colonial discourses have shaped authoritarian regimes outside Europe. However, many of the post-colonial studies have based their analysis of these power relationships on Foucault's concept of discourse (Said, 1978). The presence of dictatorships and authoritarian regimes in post-colonial countries seems to shape the construction of authority as illegitimate, which stops Zara asserting her authority within her supervisory relationships. Zara (BME woman) is the only BME woman that did not grow up in the UK. The construction of authority outside the Western world has not been sufficiently theorised nor researched, but Zara's experiences may hint at how authority may be differently constructed in countries that are former colonies of European empires such as the UK, Spain and France. This could be an interesting area for further research.**

These institutional models are constructed by the participants as regulators of social behaviour in a broader context. The meaning of this kind of authority is connected to the regulations of those hegemonic social groups in British culture, whether used forcefully or implicitly. Interestingly, only one of the BME supervisors feels that she has to take an active position against this form of authority, even when some of the supervisors construct institutional authority which is imposed upon them.

In conclusion, the participants construct authority (parental, professional and institutional) as mostly being imposed upon them, as largely masculine and white. These constructions of authority link well with what Weber (1949) defines as 'traditional' and 'charismatic' and legal/rational. Traditional authority is represented by the father or patriarchal figure as well as some of the institutions such as the Church; charismatic authority represented by their own supervisors or teachers; and legal/rational authority by the institutions such as the legal system and the systemic knowledge. Paula (White British woman) and Zara (BME woman) make the distinction between power and authority identifying power with the use of coercion and/or punishment and the difficulties in questioning it. For most of the participants, authority is connected with more benign, supportive and respectful values. These constructions of authority reflect Weber (1949) and Arendt (1954)'s concept of authority as they define it as part of a collaborative relationship.

4.2 Personal and relational constructions of authority

4.2.1 Personal authority

The participants described their own personal relationship to authority, and the characteristics and personality traits they associate with their personal construction of authority in the supervisory relationship. John (white male British) conveys his initial ideas about authority and how it is something that he already has:

'Describe authority -it? [Long pause] I don't know. That's a bit of a hard question...well, I think what I'm stumbling over is the idea of authority... I've got it in my head as quite a linear thing, something that I've got, and therefore how would I describe it?'

Veronica (mixed race female) mentions an aspect of her own personality:

'I suppose it makes us, I suppose another description that I am quite bossy, but actually I don't mind being bossy.'

Interviewer: How would you describe being bossy?

'Well I don't mind being, telling people what to do, and erm... and I think sometimes in this business people back off that [telling people what to do], in family therapy and training, I think that they think about different ways of doing it, sometimes I just cut to the chase'

Veronica constructs her bossiness as giving her authority, which she sees as being at odds with systemic theory and its emphasis on multiple perspectives, which can hinder a more directive and, in her words, 'bossy' approach. Veronica describes her bossiness as 'cutting to the chase' of those multiple meanings available in a particular episode in supervision.

Peter (white male) also connects authority with this description:

'Erm...I mean the bossiness was the first word that came to mind and then I thought bossiness being the boss and...being in charge but I suppose...' That's interesting because what I'm doing is merging being in charge and familiarity, erm and what I think that it's for me as a man that mediates always what I do with being in charge and being, having a sensitivity to dimensions of power, and therefore thinking, wanting to think with people about what it means to be doing the job.'

He constructs authority and power differently. Authority is constructed as being in charge and power as constructed on social markers such as his gender. It is noteworthy that Peter (white British man) and Veronica (BME woman) construct bossiness differently; She calls herself bossy whilst Peter talks about 'being the boss' 'taking charge'. The use of this distinction conveys the gender-based constructions of authority (Baxter, 2010) where men are constructed as 'being the boss' whilst women in these positions of

authority are constructed by adjectives that convey negative connotations such as 'being bossy'. Veronica (BME woman) hints **at** this negative meaning when she adds 'I don't mind...'

Peter acknowledges his characteristics of being controlling, judgemental and authoritarian and 'falling into authority' in his own family, but wanting to take a more varied position which he seems to suggest is hard and a struggle, given the positioning of his own family:

'I can sometimes be controlling, and a bit directive and a bit judgemental and because I have a 14-year-old son and a 11-year-old daughter and we often talk about tone of voice daily we talk about that and it's often because I think I've been a bit authoritarian and...that then arises and something that I'm wanting to, be able to have a lot of variety... you see in my family I tend to fall into authority, I tend to...'

Peter (BME man) uses his self-reflexivity to bring more variety to his repertoire of behaviour, although, despite this, he tends 'to fall into authority'. I think that this is an interesting quote as it conveys the significance of social markers in the relationship to authority.

Lizzi (white British woman) constructs her own authority as having agency over her own life after she was able to leave her family. This seems to be constructed as an active process of seeking authority rather than an authority that it is bestowed on her:

'So, I did try to assert my own authority. And in fact, what I ended up doing was leaving home very young and having authority over my own life, having my own agency over myself.'

This construction of authority is closer to the original meaning of authority that implies being able to author her life and to have control over it. She seems to value this experience, which points to a process of individualisation and maturity.

Laura (white British woman) constructs confidence and certainty as qualities that tend to gain authority and brings forward a sense of 'performing' authority in her word 'play to others' these qualities:

'And I think I am aware that confidence has a lot to play in how authority gets perceived, and if somebody comes across as being quite confident and quite certain about something on whether they're making a statement or asking a question, I think people can then just acquiesce to that and think, 'Oh, they must know what they're talking about.'

Paula (white British woman) constructs wisdom as a personal trait that is present in her father and therefore acts upon her willingness to obey this type of authority:

'But the authority comes, I think, from actually feeling that I want to do what is suggested because of thinking that my dad had some wisdom about it. It was different from just doing it because I was told – he actually had something else, a quality about what he was saying, and that was with regard to different areas I suppose.'

Authority is constructed based on the quality of the suggestions given to her by her father, which convey his wisdom. In the next quote, Paula constructs authority as something different to offer:

'Erm, I suppose you could be, one's self, you could be a barrier for authority if you don't feel that you have got something that you are doing differently. For me, it's important to... yeah, to sort of think that I have got something to offer that might be different'

Authority is constructed by having some skill or personality trait or behaviour that is new, original and relevant. This tallies with what Weber (1978) calls charismatic authority, which is 'an individual personality, by virtue of which he is considered extraordinary and treated as endowed with supernatural, superhuman or specifically exceptional powers or qualities' (p.241) and also hints at Parsons' rational authority which is defined by the expert knowledge in the ways that they have to bring something different.

These skills are constructed in relation to systemic theory, thus Peter (white British male) constructs his authority as 'being directive and linear', a characteristic which he has and is trying to change, due to systemic theory shift from first order cybernetic which is linear and directive, rather than seeing the supervisor as part of the system, or second order cybernetic. White female supervisors identify more positive attributes such as confidence and wisdom, which are personal attributes that help them to assert authority. Laura (white British woman)'s construction of authority as confident and certain also comes across as the opposite to Mason's (1993) stance of 'safe uncertainty' and 'authoritative doubt' (2005). Only one BME woman named a personal attribute of authority, 'being bossy' who also finds systemic theory as unhelpful when performing authority.

4.2.2 Relational authority

Authority is also constructed as being negotiated in relationships between the supervisor who gives a command, and the supervisee who responds to that command. There are three ways of seeing it: claiming, given and earned authority.

4.2.2.1 Claiming Authority

Laura (white British woman) explains how her own experience of supervision has allowed her to claim authority:

'I think my own supervision, I have individual supervision, but also being part of the group has helped me claim my authority as supervisor, and internalise and given me a sense of entitlement in, 'No, no, it's okay to ask these kind of questions, [interviewee].' And remind myself that, you know, 'You get asked these kind of questions, and do you feel intimidated by them? No.'

Her experiences of her individual and group supervision have a positive effect on her ability to claim authority without feeling intimidated in asking questions. She uses the word 'entitlement' here to convey her assertiveness

in asking certain questions. The internalisation of the authority of her supervisor gives her an entitlement to ask challenging questions without feeling she may be intimidating her supervisees. This may indicate that, when supervisors have a positive experience of supervision that they can identify and fit with their training, claiming authority is more straightforward. In this quote, there is no questioning of her supervisor's styles or theoretical expertise. This may be different and more complex for BME supervisors who also have to negotiate other discourses of authority in relation to their race and ethnicity.

The role or the position that supervisors have in the institution gives the supervisors authority. This was a common way of perceiving authority for some supervisors; authority was given due to the role that they were playing in an organisation. This is a more passive position of performing authority as it is given by their position in the organisation.

However, there are differences in the ways that these roles are perceived by BME supervisors and white British supervisors. Carol (BME woman) explains this by differentiating this kind of authority and what she sees as real power:

'If I think about my work situation, I'm thinking about the authority vested in me, when I was managing the psychiatric social work team, and in that case I think I had an authority that it was vested in me, because of my title, and because of the responsibilities and so on that came with that, so that would be something I think about in terms of authority but not necessarily power.'

She distinguishes between the authority given to her by her title or role and her power. This construction of authority seems to be based on her job description which defines her responsibilities; power refers to her capacity to make her command heard as a BME supervisor, which she does not have in the organisation.

4..2.2.2 Given Authority

Peter (white British male) also reflects on authority being given but he attributes a very different meaning to this process. It seems he does not have to claim authority as his supervisees implicitly give it to him:

'I am very interested in your words claiming it because I think I'm given it at a large extent...at times...maybe not always taken, I must give it back...or putting in the middle somewhere...'

Peter (white British man) offers a different relational construction of authority to Carol (BME woman); Peter rejects the idea that he claims authority as it is given to him and he responds by giving it back to his supervisees. For Carol, the institution gives her authority through her professional role but does not empower her.

Peter also adds that he feels in charge of taking decisions on behalf of the supervision group. He has the expectation that he will be included in the decision-making processes, in contrast to minority supervisors who feel excluded from this process:

'And the sense of being in charge is about...an expectation to be included in...erm...in quite a lot of the decision making, what families are we going to be seeing and also having the potential to be directive if I think it's going to be useful'

John (white British male) also relates authority to the role he has in the organisation:

'...it's interesting, because I think the authority that you have is granted to you through the responsibility to the organisation.'

This is what gives him the power to decide what he does in his role as he explains:

'Probably I would define authority quite narrowly there in terms of that there would be certain... what would you call them? The kind of mandated standards around confidentiality, note-keeping, protection of case material, possibly being prepared for supervision might be an area of authority,

safeguarding, risk assessment, that I feel that as a supervisor the organisation expects me to hold responsibility for. And because it does, I would use my authority.'

The two white male supervisors have a different emotional connection with authority within their organisations, although Peter and John seem to have the support needed in order to have power and authority, whilst Carol (BME supervisor) is aware of the responsibilities that she has in relation to her job title, but her institution does not acknowledge that power is embedded in her relationships (Pearce, 1994, 2007).

4.2.2.2 Earned authority

Earned authority is a different type of authority where there is an active aspect that has been gained through the process of experience and knowledge used in the performance of authority.

Paula, a white British woman, constructs her authority as earned; she has to do something to get the authority she holds it is, therefore, an active process where she has to act as 'being helpful and having some knowledge' as well as 'being able to take responsibilities':

'So, authority, I think, is something that is earned through being helpful, through being... maybe having some knowledge, I don't know, showing that you can take responsibility for yourself and some other things. It just feels like it has a lot more... it's a lot more complex, it's got lots of different dimensions to it and it feels like it's a more co-created position with people.'

Carol (BME woman) mentions that supervisees come to her as an 'authority figure' based on her knowledge:

'I think people decide to vest interest in me if they think I know what I'm talking about, and then you can feel the trust and then they run with my ideas, and or we make our ideas together and it goes very easily.'

Women in general may feel they have to prove their worth as an authority figure. Carol (BME woman) mentions her knowledge as the aspect that

makes the relationship with her supervisees work. This construction of authority assumes experience and knowledge have to be demonstrated so supervisees can trust them as authority. There is a sense in these two participants that they have some agency in earning authority but this agency is constructed within the notion of struggle.

These relational aspects –given, claimed and earned authority – seem to hint at the power differences between supervisors and authority. We cannot generalise these findings to all the participants in this study, as only a few comments on this relational aspect in their construction of authority. However, authority seems to be negotiated differently according to the gender and ethnic markers of the supervisors. The more hegemonic groups tend to construct authority as given and those with less power as earned.

4.3 Intersectionality and supervisors' performance of authority

The participants belong to different social markers of race/ethnicity, gender and social class. They described here how these markers are implicated in the constructions of supervisors' authority. These social markers also operate in the ways that they perform authority with their supervisees. These aspects facilitate and hinder the ways in which they asserted and managed their authority.

4.3.1 Ethnicity not being named

One of the aims of this research was to explore how ethnicity, gender and class are implicated in the ways in which authority is constructed and performed. In a diverse group of participants, ethnicity was the social marker that none of the participants discussed directly with their supervisees, even when they perceive it as influencing their authorities. Despite BME supervisors recognising the negative prejudices **about** their ethnicity and its effect on their authority, they were not able to discuss it in order to challenge

the comments made by their supervisees, nor to support their cross-cultural supervision.

Zara (BME woman) alluded to her identity within the supervision process; she made it clear that she would not use her identity as a woman with a cultural difference with her supervisees, but she uses gender as a marker of difference:

'In this context, I wouldn't call me a woman of cultural difference; Monica, these are all my internal conversation. In a supervision relationship, I am not a bilingual therapist, I am a monolingual therapist, so whatever now that means to whoever...'

Later on, she added in relation to her supervisees:

'Actually, I think that they [supervisees] would say to you that they haven't thought about it [ethnicity], but that they would say she pays attention to gender perspective, yeah to them, they would say, yeah she is always hot on gender. So that would be their comments...'

Monica: So ethnicity, you will be seen as a woman of...?

'I suppose that I never played it very loud...the ethnicity bit.'

This quote reflects the way in which BME supervisors may position themselves in the supervisory relationship. For Zara, her visible ethnicity becomes the 'ethnicity bit'. The silence about ethnicity may be connected with what Rashmi (BME woman) says about the risks involved in talking about race and ethnicity, especially its connection with discourses on disadvantage embedded in the British culture:

'We all have our race and culture, but it's not my primary lens always, not my primary lens...I'm trying to be careful because what I don't want to say is that race and culture becomes a lens to see everything through disadvantage.'

Rashmi identifies ethnicity with the discourse of 'disadvantage'. She makes a conscious effort to avoid using the lens of ethnicity with her supervisees. This suggests that for some BME supervisors, talking about

their ethnicity is perceived as positioning them in a disadvantageous position and, therefore, hindering their performance of authority.

Veronica (BME woman) seems much more at ease with the impact of her ethnicity on her performance of authority. However, she also describes this ambivalence as a difficult and risky conversation:

Monica: You said that you get exasperated [of not being heard about your expertise in working with black families], would it be accepted, this argument, if it was coming from a white supervisor? Would it be challenged differently?

Veronica: 'Yes, there is always that question...there is always that question, not that I ask it, because then I think it gets into very tricky areas, erm well I think that in a group I wouldn't ask, I wouldn't ask that question. I would think about it, I might reflect on it...but and I might talk to other supervisors about it, but I'm not sure, I wouldn't do it in the group, but if it was a one to one I might feel that I could raise it, but actually I don't always...I am not always that consistent in my practice, let's say. I don't think that I should do this.'

Veronica (BME woman) explains her supervisees' reluctance to accept her cultural expertise in working with black families, but she cannot talk about the ways this may be connected to her own ethnicity. She mentions that discussing this will result in entering 'tricky areas' if she challenges her supervisees. I think that Veronica is hinting at the complexity of voicing unconscious or conscious racism with supervisees. She then explains how her authority is challenged by voicing concerns about the need to consider issues of race and culture during group supervision:

'I think that one of the challenges is to...is the sort of game that supervisees can play around their understanding or not of cultural differences, and where I get exasperated is where I am giving a very clear message to a supervisee that I really think that he should be exploring race within this family, where there is a mixed race boy who is much darker than the other kids in the family who could pass as white, what does it mean in this family, and I know that it means something, I am almost sure it does, and this supervisee won't go there because he gives very good reasons of - why? It's not important.'

Veronica is implying here that she does not feel her supervisees engage with her suggestions and she also seems reluctant to challenge why her expertise in culture is not recognised or listened to by clients and colleagues. Cultural difference is explicitly named in the family, but not in what happens between Veronica and her supervisee. Her expertise in this area is not taken seriously by her supervisees, even when she seems very clear about the importance of this issue to what may be happening in the family. One could say that Veronica does not have difficulties in naming what she thinks is happening in the family dynamic, but does not challenge this when the supervisee does not 'go there'. This not only leaves her supervisees without the benefit of her expertise, but also the families that her supervisees are working with and the systemic practice as a whole. The fact of not speaking from a cultural point of view, or drawing on cultural knowledge is a significant loss for the systemic and therapeutic field. Despite the relevance of what she is saying, Veronica as a BME supervisor felt undermined in her knowledge and on a personal level by her supervisees. Veronica seems to be able to assert her expertise but the supervisees challenge it. This both reflects and challenges Masons' concept of Authoritative Doubt as a neutral stance that supervisors may take. Veronica (BME woman) attempts to share her expertise, but this is not heard in the same way that supervisees hear white male supervisors (John). Her expertise is not valued. This tallies with what Scarborough (2017) argues about the power distribution in the supervisory relationship when the supervisor supervises a dominant culture trainee. She refers to the lack of trust and the questioning of her competence when she offers different meanings to those of the cultural dominant trainee.

Laura (white British woman) talks about the ways in which her white ethnicity provides privileges, as well as constraints:

'Well, I think, depending on who's in front of me, I think what's most obvious is me being white. And I think people either tune into sameness or difference, depending on what the ethnic background is of the families that

I see. So, quite often I'm meeting people that are assuming I'm going to agree with them, or are assuming that I'm not going to be aware of some of the complexities that might be involved in relationships.'

Laura names some of the dynamics in cross-cultural work and its complexity. She seems to be alluding to the assumptions made when working with the same ethnicity, as the supervisee assumes that Laura may be able to better understand them. Interestingly, in comparison to the earlier statement from Veronica, Laura implies that her supervisees will listen to her if she is similar to the families that they are working with. It seems that Laura's authority is accepted when the families share her ethnic background.

Manuel (BME man) denotes racism as how his ways of trying to talk about ethnicity can be perceived:

'I think people feel frightened here, because as long as you talk about it, you are kind of accusing them of being racist. So, I often use humour in a one-down position in order to explore, because again it's not about me, you know, my feelings of oh I feel hurt and this and that.'

He mentions the dilemma of talking about culture and making **it** all about his feelings. He is implying the double bind that BME supervisors have in talking about ethnicity. Manuel (BME male) also talks about the importance of safety when talking about his ethnicity:

'But if I don't have a good relationship it doesn't... and because of that, it doesn't feel safe for me, despite being the supervisor, because that supervisory relationship with the supervisor, let's say like that a little bit, is in itself in a bigger context, and I don't think that context for me is always as safe.'

Manuel talks about feeling unsafe when discussing ethnicity in a wider social context, where these conversations are risky as they provoke accusations of racism and potential feelings of guilt in the white supervisee. He then speaks about the lack of support that he has within his institution, which leaves him unable to have these risky conversations:

'I would not be confident to say that if there was an issue between myself and the supervisee, that I would be supported or that I would be... what's the word? I don't want to say believed. But if there is a conflict or there is a difference of opinion or there is an issue that needs resolving, I don't know whether because of ethnicity, language, background, culture, the fact that I'm not from here at all, creates a little bit of a distance for the third party, you know, a triangle that would come in to resolve or mediate or to explore what's going on. And despite the fact that, hierarchically, let's say, in terms of power or authority, that third person might be my boss or someone there, the distance between the supervisee and the external person would be less. That's how I'm sensing it here.'

Manuel conveys that his 'difference' means that he may not be supported by his superiors and supervisees, alluding to institutional racism. This is similar to the comments that Carol (BME woman) made previously where she distinguishes her job position as supervisor and power within the institution. The structures of the NHS are managed mostly by white middle-class people who may reproduce the same racist discourses as their white colleagues, and therefore will be closer to the position of the white supervisee (Kleine, 2014).

John (white British man) seems to think that ethnicity is not connected to authority at first, accepting that this is his own position, but then later contradicts himself when talking about his confidence in talking about cultural issues':

'Racially, I don't think I've ever... In my view – others might have a different view – I don't see a link between authority and those aspects of the graces. I don't see a link. I'd actually feel that I would... in terms of... I would defer to somebody who was... But I wouldn't feel confident in a group of others of saying, 'Look, I think this is what the cultural issue is here.' I'd be saying, 'Well, I've got some ideas, but I wonder what other ideas people have'

John (white British) seems to have a colour-blind approach to authority; there is no recognition that this may be different for BME supervisors. It also hints that cultural expertise is also not valued as something that could give the supervisor authority. I believe that this is the dominant position in the

systemic literature, which assumes that the ethnicity of the supervisor has no effect on their authority or that his ethnicity may be creating a hierarchy in the supervisory relationship.

Paula (white British woman) reflects on her own difficulties in talking about or naming the influence of ethnicity on authority. The strength of her feelings shows how recognising that being white British has an effect on authority and also recognises the racism involved in this point of view:

'Well, I'd like to say it [ethnicity] shouldn't make a difference. This is very difficult to say that, actually, for me, sometimes I think it [ethnicity] does make a difference. And that's a terrible thing to admit. [Sighs] It is a terrible thing to admit. How can I admit this and let you put this on tape? [Laughter]. It's ghastly, isn't it?'

Lizzi, white British supervisor, reflects on similar feelings to Paula, their discomfort in regards to their own position and how there may inevitably be inadvertent racism and silencing:

'And the idea of just, sort of, reinforcing the idea of dominant cultures is quite upsetting even though I know I can't help it, just I am white and middle-class and English and all the rest of it. But it doesn't feel comfortable. I wouldn't want it to be a silencing matter for people, you know? That's a horrible feeling. Hmm...'

The white British women supervisors acknowledge that ethnicity has an effect on authority and by recognising this makes them feel 'uncomfortable', 'horrible' and 'ghastly'. These are intense feelings that seem to silence white supervisors who believe that ethnicity could be implicated in the construction of authority. The fear of being seen as racist by proxy provokes these strong emotions that prevent any discussion of the matter (Erskine, 1994 cited in Bond, 2010, Dalal, 2002).

It seems that systemic supervisors struggle with confronting issues of racism and discussing ethnicity and otherness openly in their supervisory relationship. BME supervisors do not name their own ethnicity due to the risks of further discrimination, to make white people feel that they are calling

them racists, and therefore not feeling safe in their relationships with their white supervisees and relationships within their broadly white institutions.

4.3.2 BME authority being challenged

All the BME participants identified that their authority was challenged by their supervisees because of their ethnicity, but refrained from overtly naming their ethnicity. These challenges seem to place BME supervisors in difficult positions when they are trying to claim authority in the supervisory relationship.

Rashmi (BME woman) reflected upon the effect of being young, South Asian and successful in her career, a position that challenged the credibility of the means of achieving such goals:

‘...someone I know just became a consultant, she is South Asian, there were several comments about her meteorically rise. I’ve heard that expression two or three times with a kind of...I think the invitation was how is that possible. That’s how I interpreted it, I gave that interpretation. Also...I don’t know what it is about that expression, I heard about a South Asian man with a very good job in Family Therapy, and again that expression was used, in a completely different context, what is it about the association between achievement with somehow and that word, which suggest that is something not right’

Rashmi uses the word ‘meteorically’, suggesting that when South Asian professionals progress rapidly professionally, there is a mistrust of their achievements, implying their position must have been gained through other attributes rather than competence and expertise. She may be referring to the dominant discourse that BME people are promoted rapidly in some institutions as a ‘token of diversity’.

Veronica (BME woman) describes how her supervisees challenge her position as a supervisor:

‘I think that maybe...for example...I have one white trainee that didn’t think twice in challenging me, actually quite early on, I did wonder if he would do that with a white supervisor, and I wonder if he would do that with

a white female supervisor. I think that there are these challenges, and I think that people do them in different ways, and it's a question whether I want to take them up, or not, or what I do with it I think is more the issue. Some of them do...some challenge the very position, a psychiatrist who sat here and said day one, 'I haven't seen you around'...so what? you know...you wouldn't say that to a white supervisor, I'm sure he wouldn't.'

Veronica, as a BME woman, interprets the supervisee as challenging her position as supervisor by alluding to her that she has not been in this position for very long, when the supervisee has been there for longer and knows who is who in the agency. She believes that this would not have happened if she were a white supervisor. I believe that Rashmi and Veronica are naming the dominant discourse of being recruited as the token BME person or through positive discrimination in their own institutions, which remain largely white in relation to the positions of power, which undermines their position.

Zara (BME woman) also explained how supervisees challenge black and ethnic minority supervisors by telling her that they do not know what she really means when she is trying to challenge them:

'I wouldn't know, I wouldn't know, because there is a lot happening at work, in relation to supervisory relationship, and how people are kind of addressing these issues, or when these issues come in indirectly, when addressing these issues, my English has become a tool, the way that I speak English has become a tool for people to tell me that things are not OK.'

Language has become the excuse for people to challenge her presence. These challenges seemed to undermine her confidence and authority despite her expertise. This is a process that reflects relational aspects of performing authority. Authority does not depend only on the specific characteristics of the supervisor, but also on the way that supervisees position the supervisor.

Manuel (BME man) also feels that in his post his authority is challenged due to his ethnicity:

'But I think there are conversations and relationships that I'm in here, work and personal, but let's say work now, where it's less important that I'm a man, that I'm male, but because I'm black – I'm using the political

term - in the team with all white females, whatever their role in some ways, but I feel that my... authority is maybe not the right word in this context, but that my contributions are challenged, or even strategically less challenged, less commented on at times, not because I'm male in a more female dominated... but because I'm not white, I'm not English.'

He reflects on how some of his cultural ways of relating to people are challenged, and then he describes what happens to his authority:

'A few years back I was even told by someone, a female colleague, 'I just want to tell you, I don't like how you do that.' And I think I may have... Just kind of when I talk to someone and I'm agreeing with them and all that... Okay, I know what you mean. I have a very... and lightly touch (he shows me that it is a touch in the back upper arm) And so whether this is [here], I don't know, but there is something about that kind of... because I'm very... It is part of my way of relating in whichever context, and I think that challenges my authority. So that interaction destabilised me at that moment, so what do I do then... but this should say something more about me than anything else, I kind of distance myself from this person and anyone else. So all of a sudden I feel uncertain and shaky and I feel an outsider.'

Again, Manuel views the ways his colleague can challenge him as intimidation, placing him in an unsafe or uncertain position of authority. He seems to be alluding to the social stereotype for black men being seen as aggressive and hence fearful and sexual (Lemelle, 2010).

4.4 Ethnicity expressed in language

4.4.1 English as a second language

All participants identify their language as a central aspect in their claiming authority, even when only for Zara (BME woman) and Manuel (BME man) English is not their first language. Manuel, for whom English is his second language, claims it affects his supervisory relationships:

'But yes, no language... maybe for yourself, I don't know, but when English is not your first language - and I'm not culturally from here, so there's still moments that I sometimes... I don't get their humour, it doesn't

make sense to me, there's much more distance, there's a bit of a coldness, there's a bit of a... So, I think that comes into the relationship at times.'

Manuel is also hinting at the difficulties of the process of engagement in systemic psychotherapy for BME supervisors when English is not their first language, such as using humour in supervision.

Zara (BME woman) reflects on her language and not being able to speak English as her first language:

'Yes, I think that helps (speaking English as a first language), because there is no way that an English-speaking supervisee could pretend that they didn't know what I was talking about, because there isn't an accent, there isn't...they can't hide behind anything, I speak exactly the same as they do...'

English is Zara's fourth language, and reflects how her supervisees challenge her authority by telling her that they don't understand her language instead of them saying I don't know what you are asking me:

'I need to be totally switched off from it, switch off from the invitation that I get from the supervisees, I don't know how to explain this...they invite me to have a conversation, it's almost a diversion, your language, the accent is a diversion, so for example: 'the question that you asked me doesn't connect, as simple as that, but no, they say...I don't understand what you are saying' so the 'I'm not understanding what you are saying' has meant that something is wrong, that I am using the wrong words in the English language.'

Zara seems to manage this challenge by switching off the invitation of having to talk about her English. This switching off can be perceived as the effect of painful experiences and her desire to protect herself from further challenging situations.

Laura (white British woman) describes some of the struggles that she thinks she might have if English were her second language:

'I would... I guess I might be checking out more that people were understanding me, maybe? It would be something else that might be

preoccupying me, but if it wasn't there I would be maybe more freed up and more confident and be focused on what other people's ideas might be about.'

Laura appreciates how speaking English makes her feel:

'I think it would be a level of confidence, my level of confidence in being... because language is so key, isn't it? And how people use it. And I think I would be maybe questioning, 'Are people taking me as seriously as somebody who speaks English as a first language? Is my use of English being understood?' if I've got an accent, or, you know, I think accents are really key in how people are perceived. So, it might influence my sense of confidence and how I articulate my ideas.'

George (BME man) talks about how his English accent facilitates the relationship:

'A couple of people have said that I'm... not just professional, actually. A young woman who I used to work with, she said that my voice makes me appear... it's because of my voice that she perceives me as being anglicised, and that makes a difference. She herself was pleased [for speaking English as a first language]. This wasn't a supervisory relationship, but I think that she was more able to say what maybe gets created and doesn't get said. It makes a difference to work, to meet with a black therapist. My voice reminds her that there are constraints and affordances to working with an anglicised black therapist. Anglicised is the word'

George is identifying how this woman was pleased to hear that he sounded anglicised so she could accept that he is black. He suggests there are affordances and constraints with being seen as an anglicised black therapist, however, he only names the affordances that having English as a first language bring to his relationships.

Carol (BME woman), whose first language is English, also sees the lack of clarity in English as a possible hindrance that could make claiming authority difficult for supervisors:

'That might be a factor in...I'm looking at what are the factors that are important in developing authority, and speaking clear English is one of them. I think that supervisees, because there is a lot of nuances, subtleness

in the speaking, it's the joking, it's understanding the humour, and if I want to be humorous then I can'

It seems that proficiency in the dominant language (English) was presented as facilitating authority in the supervisory relationship. It also allowed the participants to broaden their means of engaging through being humorous and playful. This may also contribute directly to the feedback from BME supervisors who are not proficient in English may receive, and therefore be positioned and take a position of less authority. It may also indicate other ways in which racism is experienced as painful and dismissing of their expertise and knowledge.

These findings fit well with other American research which found that ethnic minorities are more questioned by their white supervisees (Adam, 2010, cited in Porter, 2013), and how women's instructions in supervision are more resisted by their supervisees (McHale & Carr, 1998, cited in Porter, 2013). In this study, BME supervisors find themselves more challenged by their supervisees than white British supervisors, and white women supervisors seem more mindful of the difficulties of having English as a second language as they may experience similar responses from the supervisees.

4.4.2 English as a first language

The effect of a regional accents and eloquence was also highlighted by some of the participants. For the BME participants, having an accent seemed potentially to be associated with greater discrimination, but it did not seem to make a difference to white supervisors.

Veronica (BME woman) says:

'And one of the things that happened in there is very important because my father told me way back when I was at school, 'if you want to succeed in this society as a black person, don't only have to work harder and you have to study hard and get reasonably good qualifications. And also, you can't succeed with a regional accent.'

Rashmi (BME woman) talked about how her authority is positively enhanced by her eloquence:

'One thing that I realised that happened was that throughout my life I have feedback about eloquence, I think that that is a different way of authority. I know that I can sit there in a room, a huge room, and say what comes across, and that having power over language, be a man or woman, I have noticed erm...it seems somehow it transcends the gender barrier.'

Both BME participants, for whom although English was their first language, spoke about the way their authority was enhanced through clear speech and intimating to others that they were in control of what they said. One participant for example explained how her authority could be challenged if she did not speak English as a first language. Veronica (BME woman) articulated this when she commented:

'if I had an accent that might get in the way in some way, they might sort of want to take me less seriously, or ridicule or be less curious...or whatever...'

However, for Lizzi, a white female supervisor, regional accents do not make much difference in the performance of authority:

'That's interesting. Because I don't think it's the accent. Because you listen to John Burnham with his lovely North-East accent, he doesn't have any less authority than a family therapist who has a London accent or something. So, it's not the accent that gives the authority; it really isn't.'

She does explain what might make John's position more authoritative or not, such as his gender or ethnicity, or his knowledge.

English as a first language seems to enable some BME supervisors to assert their authority by conveying a persona that is middle class or 'posh'; it seems that for BME supervisors, it is not enough to speak English as a first language, they must also convey a particular social class to assert their authority in the supervisory relationship. Burck (2005) states that language is 'culture soaked' and as such, it does not only reflect constructs such as gender and ethnicity, but also social class. It seems here the two BME

supervisors are hinting at the intersectionality of their position - being 'posh' or 'middle class allows them to assert their authority, despite their gender and ethnicity.

4.5 Authority, Gender and Ethnicity

The participants constructed their authority in relation to masculine attributes such as a male voice, a male figure and as a masculine way to perform authority. They saw masculine authority as the 'natural' way of exercising and performing authority, where men have been socialised to take an authoritative position. However, for BME male supervisors their position of authority was complex as they move between dominant and subjugated position, as will be illustrated later in this section.

Authority and its intersection with gender and ethnicity manifested themselves in a unique way for Rashmi (BME woman). She described her authority, citing one of her supervisees, as 'gentle authority':

'...Within supervision with my last individual supervisee, just thinking about the course, a bit of feedback was that 'you have a very gentle authority', 'oh' I said 'tell me what gentle authority means? That's sounds like a paper', and...they say it is something about the way that you maintain, or you embody or something like that, holding certainty and uncertainty in your manner...'

When I asked her about the possible meaning of 'gentle authority', Rashmi began to make connections with the intersectionality of gender and ethnicity which gives meaning to her authority:

'That will fit with South Asian women that are caring and nurturing, that South Asian women are thoughtful about this, so the gentleness has a discourse on its own I think that links with being a South Asian'

Rashmi then talks about the ways she draws on a more 'masculine voice' as a way of asserting her authority and also as a way of challenging her supervisees who describe her authority as gentle. This seems to be a conscious process for Rashmi who describes herself as having authority

through clarity; she sees power in her clarity despite coming across as gentle and makes this power synonymous with masculinity:

'I have a very large voice, a very clear voice in places, so even though it may be gentle it is a powerful voice because I know there are ways that I speak that I think, erm...masculine.'

Zara (BME woman) linked her lack of authority to the lack of gendered role models of women in positions of authority. She seems to be resigned to her position of not having power.

'Something about outward, I suppose men are now...if you look at the politics, men in power...they are used to making decisions, there aren't women in power making decisions, so that's what is I am connecting with, but men are socially constructed in a position of power.'

George (BME man) reflects on how men are in positions of authority even though there are more women in his organisation:

'I think it's a little tricky because I work in an environment where the women by far outnumber the men and yet the majority of men are managers. So, it's a clear indicator that there's a power imbalance. There's no reason why out of the pool of expertise that there is in our organisation that so many of the men are in positions of authority.'

He links this to his own position as a man and the ways in which he 'finds' himself performing a managerial position, but then questions it as he does not seem to feel capable of embodying it as a black man. Here he implies a model of authority that is male but also white. He acknowledges his position of authority but unable to give an explanation for being in this position. I think that George is ambivalent due to his intersectionality, being a black male manager is not the same as being a white male manager, but he feels he has more power in comparison to women and less power in comparison to white men:

'So, you know, and I'm a man and I'm a manager, and I'm in a position of authority, I guess, so I don't know...How did it get constructed? How did I find myself acting into this? I honestly don't know. I honestly don't know. Nothing to me causes me to feel, 'Yes, it's this.' I don't have that real kind of

embodied sense. Inequity is the right word for it, and it's because of this. I am a little baffled. It might seem naive, but I am baffled, yes'

He seems to be baffled by the intersection of his maleness and blackness with authority. In the next statement, he begins to wonder if authority is more connected with gender than colour; he seems to be saying or asking me, a woman, if I agree that authority could be exempt from colour?

'It does. It's funny. It's strange because I hadn't made the connection between men in my position and what it means to be masculine. Is there a perception that the top-down kind of domain of production, manager, is masculine in characteristic, regardless of gender?'

I heard this question as George starting to generate some ideas about his intersectionality and the complexity to construct authority in these dominant gender and cultural discourses. I was surprised that, as a systemic supervisor, the intersectionality between gender and ethnicity was just being thought about in that instance. The intersection of race, ethnicity and gender brings out the complexity, nuances and ambivalence in trying to perform authority according to these aspects of difference.

Manuel (BME man) describes the intersection between his thinking about gender and ethnicity, and how the highest context marker can change; in his experience of his work context, being black is more challenging.

'So, when I think of challenging authority, even though I'm a senior clinician in the team, I think the issue of race and ethnicity is extremely important. Yes, I'm a male, but I sometimes think I get the sense that [clears throat] I used to think, let me put it that way – I'm answering your question – I used to think that gender – and I love that book of Gwyn Daniel and Charlotte Burke, it's old now – but I always thought that gender was the highest context, and I still have a feeling that it's up there'

He then adds:

'But I think there are conversations and relationships that I'm in here, work and personal, but let's say work now, where it's less important that I'm a man, that I'm male, but because I'm black – I'm using the political term - in the team with all white females, whatever their role in some ways,

but I feel that my... authority is maybe not the right word in this context, but that my contributions are challenged, or even strategically less challenged, less commented on at times, not because I'm male in a more female dominated... but because I'm not white, I'm not English.'

Lizzi (white British woman) also notices working in an environment which is female dominated, and how this makes her feel more confident in her authority:

'And to feel confident, I think. Well, certainly my gender as a female, I think... yeah, like I say, it's quite a female dominated unit. And actually, I think females are quite powerful, actually'

Lizzi acknowledges her female-dominated unit in the context of the caring professions, where females are seen as powerful. I wonder if Lizzi is beginning to articulate some type of female authority that emerges when there are fewer men available for those positions of power. Institutions such as the NHS and social care with a majority of women in their work force may facilitate the authority of white British women.

However, at a micro level, Paula (white British woman) reflects on the ways that her supervisees perceive her authority when a male colleague visits her group. She seems to be saying that her authority in the group of women comes from her ability to reflect on emotional knowledge, which her female supervisees valued. However, when her male colleague visited them, her supervisees comment on his knowledge, specifically his theoretical knowledge:

'I think they perceived him, when he came, as talking too much theory. And yet it's a group who ask for theory and have said that I don't do very much theory. And in fact, I do, I think. But he was perceived as doing it. Erm, I guess that it's just discourses about men as being the ones holding knowledge, perhaps, or holding that kind of knowledge as opposed to perhaps emotional knowledge. It was very interesting, really. And they are very used to working with women in the team; they have not had many men in the team. And the men in the wider CAMHS team are seen as people who are very instrumental, very medical model, sort of. I suppose there's traditional discourses about men, really...'

It seems here that Paula is drawing on her emotional knowledge to affirm her authority in the group, even when the group has asked her for theoretical knowledge. She seems to be drawing on the discourses that males and females are different in the type of knowledge that they are perceived as having. By doing this, she seems to give women more authority for having emotional intelligence and men theoretical knowledge. This tallies with gender constructions that are prevalent in gender, race, and ethnicity discourses in British society (Baxter, 2010).

4.6 Social class and authority

Three of the participants mentioned class as an important aspect that facilitates their performance of authority. All the participants identified themselves as middle class. Being middle class was especially pertinent with regards to the values of education and achievement. These aspects were seen as enabling the participants to attain positions of authority.

Veronica (BME woman) identified her education as a way of gaining a particular accent and language which has helped her authority:

'And I went to a good school, where we were taught by women who just come out of the war, post-war feminists who saw us as women who would be automatically in capable jobs, that was the academic expectation in my school, so standards were quite high so therefore, we spoke like I speak. I don't think that is that posh, but I'm aware that compared to other people it is considered posh, so that therefore means, I know that some of what happens is that I get heard in a particular way because I am quite posh, I think that other people think so.'

Rashmi (BME woman) also finds that being middle class has facilitated her claiming authority:

'Middle class means that I have been to excellent schools, that I have been surrounded by people where achievement is the norm erm..I have been part of international communities, in my own community, I have privileges in many different levels which I think in the intersection between how you negotiate culture in a different country protects me on a million of different levels...'

Rashmi is also alluding here to the ways her class gives her privilege even though she is a BME woman. In both statements, what is gained by being middle class is the knowledge that by receiving a good education one also gains access to privileges, which in turn facilitate entitlement to claim authority.

Lizzi (white British woman) also acknowledges being middle class and its intersectionality with race/ethnicity as being one of her dominant social markers which facilitate her position of authority:

'And the idea of just, sort of, reinforcing the idea of dominant cultures is quite upsetting even though I know I can't help it, just I am white and middle-class and English and all the rest of it. But it doesn't feel comfortable. I wouldn't want it to be a silencing matter for people, you know? That's a horrible feeling. Hmm...'

It seems here that she is trying to be self-reflective, but the horror of recognising her own privilege does not allow her to work through her positions of power and she seems to leave it at not wanting to silence others. The emotional impact that this acknowledgement has on Lizzi may be related to stories of pride and shame (Hardy and Laszloffy, 1995).

4.7 Age and Authority

Age is a social marker that facilitated or constrained authority depended on the age of the participants. Rashmi (BME woman) who was the youngest supervisor interviewed sees being young as a hindrance to her authority. I believe that this was particularly important for her as her supervisee may see her as a young woman who does not have the necessary expertise and the knowledge:

'Age...I have to negotiate regularly that I, because of my age and the experience I have, has moved from, and I think that there is a lot of that, I think that there is an enormous amount of many contexts where age and experiences somehow are equating to expertise.'

Manuel (BME man) also describes his struggles in supervising older people due to his age:

'I find that awkward, I find that difficult. I really find that difficult. I've always found people who are older than I am, I need to have respect for, and how do I know? So, it's been quite a journey to supervise people who are older than I am, for instance, both male and female, and that still continues to be a feature'

In this statement, Manuel is bringing to the construction of authority into a cultural discourse of respecting elders. He has already mentioned how he was brought up with the notion that he should respect professionals many of whom are now his elders. The cultural value of 'respect' for Manuel and Rahim, who come from a more collectivist non-Western background, impede them when directly challenging and questioning their elders, who should just be followed.

For Liza, a white woman, being middle aged is actually something that has made her feel safer:

'I am middle-aged. And actually, that feels very safe.'

John, a middle-aged white male supervisor, also alludes to age as a facilitator for the performance of authority:

'I think the others, like age, I feel that... I don't know. I feel that, in some ways, that is... It can be an asset to the process, you know, a taken-for-grantedness, that I've seen more families and I feel more confident in that training setting. Not necessarily in a work setting, I wouldn't say. But in a training setting, I would say, well, I feel much more confident in this setting...'

He links this to experience, but also acknowledges that this may be constraining:

'Yes, okay. So, in that way, I think age facilitates because people recognise... I mean, sometimes maybe not, they may think I'm very stuck in what I've done or been doing it too long. But I think the fact that I can say, 'Ah, well I've seen a problem like this before...'

This social marker is connected to experience as knowledge that has an impact on the confidence of the supervisor. This way of constructing authority is similar to Parsons' rational authority in a way that age allows the supervisor to have more knowledge about certain situations that they have already addressed.

In summary, race/ethnicity, gender and social class are social markers that are implicated in the construction and performance of authority for these supervisors, which mean that for those supervisors that are part of the hegemonic groups, it is easier to assert their authority compared to those ones that are from minority groups.

4.8 Influence of systemic models in the construction of authority

The participants construct authority from a social constructionism position or second order which has influenced systemic psychotherapy over the last 40 years. Participants try to reconcile their construction of authority with the influence of social constructionism in systemic psychotherapy as they see it as problematic at times.

4.8.1 Multiple Realities

The existence of multiple realities has become a central systemic concept that the participants identify as contributing to their performance of authority. Multiple realities and the multiverse are concepts that have influenced family therapy since the shift towards social constructionism (Dallos & Draper, 2005; Carr, 2006). It is used to imply the rejection of objective rationalism and the recognition that the observer plays a role in what is observed, and each observer generates different realities according to their system of meanings.

Carol (BME woman) states:

‘That’s a tricky one because...because that’s the whole idea about many truths, many realities and multiverses is quite tricky to manage at times and this is where I think my age and experience is helpful to me and probably going back to thinking about my training, particularly as a first year trainee, I always remember John giving us exercises where you take a position so that you talk out of that position and so very often I am thinking, yes there are many stories, many stories to be had or to be told, so I think what position am I taking?’

Carol recognises the need to take a position even when we can hold multiple realities. This is a tension present in supervision for all the participants.

Veronica (BME woman) outlines some of the difficulties in relation to holding multiple views in Family Therapy and its effect on ‘telling people what to do’:

‘Well I don’t mind being, telling people what to do, and erm... and I think sometimes in this business people back off that, family therapy and training, I think that they think about different ways of doing it, sometimes I just cut to the chase’

Veronica also mentions this tension in the context of supervision - of holding different realities but having to come to the point or as she puts it, ‘cut to the chase’. This is an important tension present in supervision, as facilitating the possibility of multiple realities and also taking a particular position around the supervisor’s views on the supervisees’ practice or thinking.

Manuel (BME man) speaks about the difficulties in asserting authority within the acceptance of multiple views. He raises another interesting point - the absence of the first order models in family therapy where the supervisor can give directions as well as offering other points of views:

‘And I really can see that I think family therapy hasn’t been really good to hold on to what we had, you know, before the multiple positions, that actually it’s good to have a direction and it’s good to kind of keep checking with the client and you get some feedback, even though I think family

therapists are very good at giving... asking for and working with almost moment-to-moment feedback'

Manuel (BME man) distinguishes authority and the not-knowing position, and he remarks upon the limitations of that position. He is critical of how multiple realities allow him to explore without taking a position, and he describes the effects of this as 'fatal' as the supervisor cannot take a firm position:

'So, I've always thought, as a therapist, I've found it easier to almost show more authority usefully than really sitting in a not-knowing position because I think that has been fatal, I think, in some ways for our discipline but that also has crept into supervision, that we just explore and explore and explore and don't really say what our opinion is.'

Then he discusses the ways he uses other theories, which allow him to take a position. I believe that he **is** exploring more psychoanalytic approaches from which he can take a position. He seems to be naming another tension that may be present in supervision: exploration versus taking a position. These are processes that relate to the self-reflexivity of the supervisor.

'The way I understand systemic theory and cybernetics and the core issues that I take from that is that I am allowed to go outside of that box and bring it in usefully, ethically, so I can go to more internalising models if I need to understand that and if I need to open myself up for exploration, in that sense, systemic theory is helpful.'

It is worth noticing the sense of ambivalence in the use of this concept when performing authority. It seems that multiple realities make the supervisor curious (see below), but limit the supervisor in giving directions and imparting their knowledge and expertise.

4.8.2 The domain of action

Domain of production: taking responsibilities

All the participants viewed their authority in relation to taking responsibility. Authority was maintained in order to ensure the safety of

clients and supervisees. All the supervisors needed to claim authority with their supervisees in relation to the safety of clients.

Zara (BME woman) described this aspect when discussing her supervisees' perception of her authority:

'I suppose that they would say that she is very good at highlighting child protection issues, that is very clear, as to when to leave the case open or to close the case, and kind of...thinking at a practical level what needs to happen next to a case.'

This kind of authority shapes work with families, giving directions, and therefore, introducing structure to the case.

Rashmi (BME woman) talked about her responsibilities in taking decisions that may affect the family and also the supervisee dynamic. The ways she attended to this process made her authority tangible to the supervisees:

'Erm...they might say that in some cases, on some occasions I offer to go into the room, to go into the supervision room, which they have found helpful, I have attended to difficulties... picked up difficult relationships between two of them and attended to that, and also done it broadly, I have attended to individual difficulties around what their thinking is in particular relationships within the group, processed that, and also made allowances...'

She also saw her authority as being exercised when she needed to address child protection issues:

'Child protection isn't a choice, is not a personal choice, is not personal negotiation, it is a responsibility of the authority that it's invested on us, maybe at different levels...'

She also talked about her clinical responsibility in performing authority:

'the authority to have clinical responsibility, I think that, that is important particularly in this clinic with high, high risk cases, we don't do any tier 2, we don't have behavioural difficulties, we have young people in and out of hospital all the time, so there is something about authority to take clinical

decisions and be able to share that clinical thinking with people, that's very important.'

John (white British man) also mentions child protection as an area where he clearly exercises authority, given the risks involved. In this case, he attends to the risks but would push further if the risks are not addressed by the supervisee, suggesting a disciplinary action if his views are not heard by the supervisee.

'So that I would then feel that if someone said... you know, there was a child protection issue but I don't know whether to refer. And if my judgement is, actually, this child could be at risk, you really need to take advice on this from this person. That if it wasn't done, I would have the authority to go back and say, 'This really needs to be done. And if you don't accept that this needs to be done from our conversation, then I need to take it to the next level, a person who has given me the authority,' or assumed authority. And maybe I'm wrong, but that's how I understand it'

Manuel (BME man) mentions this clinical responsibility and also his duty of reporting back to the main organisations that regulate systemic practice:

'Obviously, in clinical supervision there is also an issue of different responsibilities because ultimately a clinical supervisor could report back and would need to report back on a regular basis but not frequently, to the, for instance, UKCP or AFT in our case or any other registering bodies that also supervises other therapists from other modalities. But you've got a responsibility that if you think that there's some bad practice or things that are... you have to address in your supervision, and it's not being... and it's not improving, if you like'

John (white British man) states his responsibility regarding the training he imparts:

'I think it's about the responsibility to the course which has, as its principles, to train the best possible systemic practitioners, to be able to lead the course and help clients in a whole range of ways that's safe, effective, views on systemic ideas, act as a change agent. All those things is what the course wants you to do. So that's one context'

Claiming authority in this context was related to the supervisor's ability to clarify their responsibility to their supervisee, 'to lay responsibility on the table'.

George (BME man) brings his own dilemma in seeing his authority moving between the domain of production and the kind of supervisor he wants to be. He seems to suggest that authority in this context is something negative and that he would like to be exempt from this kind of responsibility:

'You know, so, yes, I can be... the concern and that domain of production, that domain of what's real and getting things done, getting things open and closed, assessing need, that can creep in and kind of diminish my capacity to be open and to listen and to be curious sometimes. So just in terms of how I act into my organisation, it can be a struggle for me to be the kind of supervisor that I want to be as often as I want to be...'

This aspect of authority seems to be over-emphasised. Responsibility for taking decisions and shaping the interventions of the supervisees was constructed as something that they could not opt out of, as it was a legal and institutional requirement, especially with regards to child protection issues or training competences. The participants seem to construct this means of having authority as straightforward, when in reality it is much more complex in its performance.

The domain of explanation: curiosity

Some participants named curiosity as part of their theoretical repertoire, which helps them to perform their authority. Carol (BME woman) uses her curiosity in order to be helpful to her supervisees, but she also suggests that her supervisory relationship may have some initial mistrust which she has to work through with the supervisee:

'If I was to, thinking very Milan, if I was to understand [what the supervisee says] straight away, and say yes I know this is it [what they are talking about], [but I say instead] how I might've been helpful to you, so let's explore it, let's find out what it's made up of, can it be called something else, might be something else; you think if you did [think in this way], what

differences would it make. I think that often makes me interested in, especially if my supervisee is not systemically trained.'

Manuel (BME man) also refers to curiosity as part of his role as supervisor:

'So, you can be much more kind of exploring. At least that's what I do in clinical supervision, is just kind of being curious around the... yes, in MST they talk about drivers, well I'd say the factors that are impacting on this recurrent theme, maybe, so you can then talk more about personal issues, past or present, it could be something about the supervisory relationship.'

Curiosity is identified as asking questions by the majority of the supervisors. Paula (white British woman) discusses how she feels she does not have to have all the answers, but needs to ask then wait for feedback:

'I think I don't need to know everything but I think that I need to be able to ask the right questions, I suppose. So it's that kind of knowledge – knowing how to help them to go forward with their thinking but not having the answers for them. Do you see what I mean?'

Curiosity is also central for Laura (white British woman):

'There's a couple of key things that I just hang on to for grim death, I think, in my systemic training. One is my use of curiosity. I always try and think, 'Just be curious [interviewee], don't ever lose that sense of curiosity. And the other is, you know, this idea that quite often a question is better than a statement'

Domain of aesthetics: transparency and collaboration– two polarities in the supervisory relationship

Most of the participants suggested in their responses that their authority was an aspect of the supervisory relationship that was given meaning in relation to their idea of collaboration. The participants' positions on authority were determined by their views on their ideas of being collaborative. It seems that the participants talked about their authority as vacillating between the two polarities power and collaboration within the supervisory relationship.

Thus, the participants' main ideas about the supervisory relationship were constructed in terms of the concept of collaboration. Power, or authority, was seen as something supervisors needed to be aware of, or at least show self-reflexivity, in order to minimise power struggles. The result is that the supervisor seems to downplay their authority so that they can work collaboratively with the supervisee, as authority and collaboration are seen as polar opposites. Rashmi (BME woman) comments on her attitude to collaborative practice:

'For me (the supervisory relationship) is something about getting along beside people in their learning and being a part of a collaborative effort to enable people to progress...'

'I think supervision is a joint process of learning of two people, two people's learning ...em...'

One of the participants highlighted the collaborative emphasis of the supervisory relationship but began to question its influence on the supervisory relationship in her case. Zara (BME woman) talks about her difficulties in understanding authority in the context of systemic training. She talked about the lack of clarity when power **has been exercised** within systemic training and the confusion that this represents. **She seems to construct power in a collaborative relationship, where power is clearly named in the supervisory relationship. The clarity of the position of power is important for Zara (BME woman):**

'My training, my previous training, that's another chapter in itself...(laughing)...at... (London FT institution) they are promoting power but they are saying that there is no power, that it's very much collaborative, so watching DC, he is collaborative, but he is using his power, he knows when he needs to take a position of power. To me that's very clear and I like that, but in previous training, that never was clarified, there was not a distinction, only it was through papers, evaluation of papers, when we knew that they were in a position of power.'

Here Zara constructs 'power' and 'power with collaboration' as two different concepts. She hints that power with collaboration is **when power**

has been made clear in the supervisory relationship. Later on, she clarifies this position as making it difficult for her to claim authority in the supervisory relationship:

'the supervisor has an authority that in the systemic approach, social constructionist approach, we are continuously challenging the issues of power and authority, so when I am in the supervisory relationship I really don't think that I have an authority over them.'

It seems here that Zara is going back to the idea that power and authority have to be minimised rather than to be named and clarified. The theoretical framework and her own personal experiences of authority seem to make her reluctant to assert her own authority.

By contrast, Paula (white British) defines collaboration as part of authority and the opposite to power:

'I try to work very collaboratively with people. And although I appreciate there is power involved in that, what I would prefer to see myself using is authority, because authority has, for me, a different quality and almost a different dimension. It's something we create together that isn't just there because it happens to be within the given relationship.'

Both white British women seem to be afraid of their power and want to negate it, which is a confusing and contradictory position. Paula believes that they are all equal in their various roles in the group she supervises:

'It's complicated, isn't it? I think that when I am, sort of, with the group... I am just trying to think about it in the group. Because, as I said, the power we generate from our roles is fairly equal, not entirely, but fairly equal. I mean, obviously it does come into things'

She mentions the way she manages problems when trying to work collaboratively and being directive:

'I think two things. I think... sometimes when I'm sharing ideas they think, I think I'm just sharing ideas; they I think I'm telling them what to do. And I have to be a bit careful because I almost need to say afterwards, 'These are just ideas.' [Laughter]. 'You don't have to...'

Paula acknowledges her power to persuade the group of her ideas, even when she wants them to treat her idea as one of many expressed by the group. This construct of authority is based on telling supervisees that she has some ideas but not obliging them to accept them if they are not constructive or appropriate in the circumstances. These ideas may also link in with Mason's concept of Authoritative Doubt. Paula is able to share her ideas but then she runs the risk that her ideas are the only ones considered by the supervisees.

Rashmi (BME woman) talks about moving in and out of these positions whilst supervising:

'I mean coming in and out of positions, so there may be times when my power is fixed, if there was some concern about a person's practice, something that has happened in the room, or a session that may have caused harm to a family, fixed in a way that I will come down as a ton of brick...'

Power is being constructed as something objective and fixed like the clients' safety. George (BME man) also notes the differences between authority and collaboration in supervision:

'...For me, collaboration's really important. I think maybe supervision is maybe a slightly out-dated word for the practices that we want to... the things that we want to practice. Supervision doesn't necessarily fit that comfortably with a concept like collaboration, but I would like supervision to mean a collaborative, reflective space...'

George seems to suggest that supervision is traditionally different to collaboration and that he is trying to bring it into his practice. It seems here that the difference between collaboration and authority was constructed depending on the degree of negotiation between the supervisor and the supervisees.

Another participant noted the need for negotiating the 'fit' between supervisor and supervisee. Veronica (BME woman) says:

'I think it's a question of fit around supervisors and the supervisee, and not always fit. And thinking about that, and making adjustments to be able

to work alongside people who perhaps one's own natural tendencies don't fit with them, and then how do you work with that...'

However, having highlighted this area, she explained that she would not accommodate her own style in order to tailor it to fit with a particular trainee. It seems that, despite what George (BME man) says, supervisors are constantly negotiating power and authority with their supervisees, in a process that is both complex and unorganised. Supervisors seem to struggle with how to reconcile authority, power and collaboration, putting them at odds with their theoretical knowledge and experience:

'I chose to look at an area of my own practice in term of tolerance, and I found myself being so super tolerant of a trainee that it was almost detrimental to the group. I think that one has to think about these things, whereas my natural inclination is to be not quite so tolerant, and I sort of work on that for a while, then I thought well it's not doing to me or anybody else much good really, so to try to be so different from one self, having tried it, why actually not just...this woman used to talk a lot and eventually I have to sort of encourage her to be less talkative and more succinct, and interrupt and take authority for that, to take responsibility for that, because it was having an effect.'

Veronica (BME woman) also introduces the idea that too much collaboration has a negative effect on the supervisory relationship and describes how at times she has to take authority. It seems that the participants have a complicated relationship with authority for - they want to work collaboratively, but have to maintain their authority. This process of negotiating power and authority and collaboration seems disorganised and unpredictable. They seem to oscillate between positions of collaboration, authority and power. Systemic theory does not offer ways to reconcile these juxtapositions.

Transparency

Some of the participants mention transparency as a concept which helps them to move between collaboration and authority. Rashmi (BME woman) introduces the idea of ‘naming power’, the need to be transparent with regards to one’s own position. All participants believe that the way to maintain authority within a collaborative relationship is the capacity to be transparent about their own position as supervisors, especially regarding their rights and obligations:

‘My idea of collaboration is naming power, naming what is fixed and what is not fixed, because that is not a choice I have, it’s an ethical responsibility, like child protection.’

Explicitly identifying power is seen as something that ought to be done unequivocally to create transparency in the relationship. Again, this model fits well with the dominant literature on family therapy, where power needs to be named in order to be clear and transparent. In general, power is considered as an aspect of the relationship that needs to be addressed from the outset between the supervisor and the supervisee (Storm et al, 2001). Guildfoyle’s (2004) critique of the conceptualisation of power in dialogical therapies looks at the impossibility of negating power in the therapeutic relationship of any therapy, this is what the participants are doing here: by naming their power, they can make a dialogue on different positions possible.

Veronica (BME woman) talked about the need to clarify the position of the supervisor as an integral part of the supervisory relationship:

‘I think one also needs to be clear of one’s own position, in relation to a lot of things, in terms of what your expectations are of the students, and what are their expectations of you are important and of the context that they are in, how we can work with that, and also being able to review that, and being able to talk about the learning, of the learning curve that needs to develop, and the fit, I think it’s a question of fit around supervisors and the supervisee, and not always fit.’

Laura (white British woman) adds to this idea:

'And I think, the way I use my authority, actually, is to be quite transparent about my experiences and to maybe think and help people think that maybe this isn't just about them personally, that this is something that we all experience at some level, a level of intimidation or a level of anxiety.'

John also explains how he prefers being transparent in his position in order to get authority:

'So, I think people see me as being very transparent and quite brave in that context, saying, well, you know. We all do it... Or open in some way'

Chapter 5. Discussion

5.1 Introduction

In this chapter, I shall discuss the findings of the study and link them to the literature, considering the strengths and limitations of the study and reviewing the self-reflexivity issues that arose from the research and assessing the clinical implications.

5.2 Authority

This study explores how the intersections of ethnicity, gender and class are implicated in the systemic supervisor's construction of authority. The findings demonstrate that systemic supervisors construct authority based on dominant social constructions that replicate power relations already present in their cultural background. Although family therapy and systemic supervision have considered the importance of power relations and social differences over the last four decades, systemic supervisors are still finding it difficult to overtly challenge these dominant constructions.

5.3 Internalisation of dominant social constructions of authority

One of the first findings of this study is the participants' internalised constructions of authority. By internalisation of social constructions, I am referring to process of giving meanings to a particular event or relationship (Berger & Luckmann, 1966). The dominant constructions internalised by the participants are those that confer authority to hegemonic social groups. The relationship with their father is one of the main underlying constructions of authority; the father figure who disciplines and is in charge of the family represents a patriarchal construction of authority. This construction conveys a particular kind of relationship, one in which parents, and fathers in particular, have authority over children (Furedi, 2013). This construction of authority conveys two social markers in the construction of authority, gender and age difference in a clear hierarchy. This means that the constructions of

authority are perceived as male, and in a hierarchical intergenerational relationship. The father is the participants' first exposure to authority.

Some BME men and BME women participants tend to construct parental authority more positively, in part due to their collectivist cultural orientation in which hierarchy and respect for elders are valued. Falicov (2013) explains how in non-Western cultural contexts there tends to be a preference for collectivistic family arrangements where closeness between parent and child and parental respect throughout life are encouraged. We can say that BME supervisors give a different meaning to these arrangements in comparison to their white British colleagues. Thus, patriarchy is constructed differently according to the participants' cultural background, influencing how they challenge this authority - some directly and others indirectly.

To some extent, white female supervisors in this study were able to challenge the patriarchal construction of authority more directly through the assertion of their individuality and agency, which tend to be valued in Western cultural contexts. Also in these contexts, the separation of the individual from the family in early adulthood is more normative. The feminist movement in these cultural contexts may also have contributed to the deconstruction of patriarchy, which enables white women to challenge patriarchy and express themselves more directly. This is not to say that in non-Western culture patriarchy is not challenged, but that it may be done in different ways that conform to that cultural context. The cultural trajectory may differ greatly from individual to individual and would be an interesting aspect to explore further.

The patriarchal construction of authority giving credence to white male authority was also reinforced in participants naming certain institutions as examples of authority: the police, the Church and the legal system. This construction of authority reinforces a particular type of institutional authority that is white, middle-class and male. All the participants share these constructions, even when these dominant constructions endorse a type

of hegemonic authority to which some participants do not belong. I would argue that the internalisation of these dominant constructions of authority tends to benefit supervisors who are part of these dominant social groups, as through these internalisations discrimination is also internalised (Collins, 2000; Harnois&Ifatunji, 2011). If we presume that these dominant constructions are also internalised by the supervisees, we can see how a white male supervisor is readily positioned as an authority figure, even before they consciously exert authority within the supervisory relationship.

Authority is a concept constructed by the participants as embedded in power relationships. The internalisation of authority is an internalisation of relationships that are gendered, racialised and classed. We could surmise that these intersectional constructions are internalised by the supervisors and supervisees, and so discrimination may be present in the supervisory relationship. Participants who are not represented by these hegemonic models would have to find ways to contest these dominant constructions by negotiating and claiming their authority differently from the prototype of white, middle-class, male authority.

However, on a professional level, some participants' construction of authority is based on their own supervisors; this is easier for white British female supervisors who themselves have white British female supervisors modelling authority. Most of the 'supervisors of the supervisors' interviewed in this study were white women. This seems to empower and enable white British women in negotiating their own agency as supervisors more easily, as their supervisors share their professional and theoretical values and their cultural and gender background. For BME women who also have experience of a female supervisor, it may provide them with a female model for supervision, but one that is based on a notion of white Western feminism. How this would be integrated in their own cultural constructions of womanhood is unknown and would be interesting to explore. For white British and BME men, the significance of a female supervisor may be different, and given male privilege it is easy for them to retain the dominant

patriarchal model of authority in their supervisory relationship; or at best they may mediate it from a Western female perspective.

It is worth considering this alternative construction of authority which is female, white and middle-class, as it challenges the internalised patriarchal authority and to some extent empowers white British women supervisors to successfully assert their authority aided by the strong feminist critique in systemic psychotherapy that influenced the shift to second order cybernetics. Thus, the relationship between BME female supervisors and BME female supervisees may promote a different cultural and social construction of authority that challenges the hegemonic constructions of white male and white female authority (Collins, 2000).

The exercise of authority in supervision is largely constructed through the hegemonic models of authority already present in society; in other words, mainly through male models, who belong to a middle-class white culture. White British women supervisors and BME supervisors have access to fewer models and construct authority differently. White women supervisors have access to a model that is female and shares their cultural and professional backgrounds, while BME women in particular struggle to find a model or constructions of authority that fit and are isomorphic with their cultural background.

5.4 Personal and relational authority

5.4.1 Personal authority

Most of the white participants partly constructed their authority based on personal attributes that developed over time. Personal attributes seemed to facilitate their assertion of authority, such as ‘being bossy’, ‘having confidence’ or ‘having wisdom’. However, these personal attributes were viewed as more problematic by white male supervisors, some of them are making a conscious effort to be ‘less bossy’. This effort facilitates their aim of creating a collaborative relationship with their supervisees, collaboration

being one of the main stances for the therapist and supervisor in systemic psychotherapy. This description of authority is linked to what Weber (1978) calls charismatic authority, which depends on the extraordinary personal qualities of the supervisor. I would argue that this type of authority based on personal qualities is constructed on an already racialised, gendered and classed prototype of authority in the supervisory relationship. Falender et al. (2013), identifying the privileges that ethnicity, class and gender bring, suggests that the subjects of privilege are not always conscious of their privilege and see their development as personal achievement rather than as a product of that privilege. These personal aspects of their authority are not considered in connection with the dominant social markers such as ethnicity, class and gender which influence our identity. It would be worth examining how some of these personal attributes interact in the construction of authority and the racial and ethnic backgrounds of the participants in future research. The assignment of negative values to certain social groups based on their colour, gender and class has been shown to be closely correlated with poor self-esteem, poor physical and mental health and poor educational achievements. For instance, the accumulative effect of exposure to racial discrimination over time is associated with an increase in poor mental and physical health (Wallace et al., 2016), low self-esteem (Yip, 2015), and the effect of high levels of deprivation negatively affects the aspirations of adolescents (Frostick et al., 2016). These discriminatory experiences may have an effect on the self-perception of those participants who belong to the most stigmatised groups, something which should be explored further.

5.4.2 Relational authority

The participants construct their relationship with authority differently according to their social positioning. For a white male supervisor, authority is perceived as ‘given’ to them. This is, however, problematic in systemic practice, with its critique of power, its emphasis on collaboration and its aspiration to empower supervisees’ ideas and practice. One of the participants talked eloquently about how he tries, unsuccessfully, to ‘give

back' the influence that his ideas have in the supervisory group. BME women and white British women are at the other end of the scale. By having to 'earn' authority, women convey the efforts that they make for their ideas and suggestions to have a positive impact on the supervisees. One BME woman expresses how her post gives her authority in relation to the responsibilities, but does not give her power over her supervisees so they can challenge her position as a manager.

BME male participants seem to be positioned in the middle of this spectrum, but they do not talk about a relational authority. This may be due to their being aware of their power through their gender but being challenged by their ethnicity. These findings tally with the concept of privilege and oppression described by Falander et al. (2013). The most stigmatised groups have to strive to obtain the authority necessary in their role as supervisors, and even then have to deal with their position being challenged. The power of persuasion seems to be imperative in the ways that BME and white female participants give meaning to their relationship with authority. Arendt (1954) argues that the existence of the need to persuade is proof of the absence of authority, so in BME and white women supervisors, who describe their relation with authority as 'earned', reveal the tension between their position as supervisors and their power to convince. In contrast, white male supervisors, in trying to 'give back' authority, are conveying the presence of their authority, independent of having to justify what they do or say in supervision. Participants are conveying Arendt's (1954) definition of authority, which she sees as a relationship that always demands obedience without external means of coercion. These two aspects are present in the meaning that supervisors attribute to authority. For women, obedience comes after they have proved to their supervisees that they have knowledge and experience that is helpful for those supervisees.

Thus, authority seems to be constructed by supervisors as internal and external processes, which locate supervisors in social hierarchies that reproduce power relationships already present in society (Miller, 1994).

These two main themes are closely related to the **ethnicity**, gender and class intersectionality of authority.

5.5 The intersection of **ethnicity, gender and social class implicated in authority**

Gender, class and **ethnicity** have been addressed by systemic theory since the early 1980s (see Chapter 2). Charlotte Burck and Gwyn Daniel (1994), Monica McGoldrick (1996), Celia Falicov (1995; 1998), Virginia **Goldner** (1985) and Britt Krause (2002; 2012) among others, have focused on issues of diversity and power relationships in cross-gender and cultural therapy and supervision. One of the most commonly used concepts in systemic theory in the UK is the ‘Social Ggrraaacceeesss’ (Burnham, 2010; 2012; Burnham and Harris, 2002) which have helped to address power relations socially constructed on the basis of social markers. These social markers are constructs which give certain groups power over others in relation to each of these aspects. This concept is familiar to the systemic supervisors in this research, as they reflect on the social markers based on the ‘Social Ggrraaacceeesss’ in relation to their own authority, such as ethnicity, gender, class and language. This systemic tool has helped in cross-cultural therapy with families and has also encouraged self-reflectivity in systemic supervision in the UK (Burnham, 2012).

Given the findings, the participants do take into account and reflect on the impact of these social markers in the assertion of authority in the supervisory relationship. It seems that the use of Social Ggrraaacceeesss as a tool has offered a scope for understanding how these aspects affect their beliefs and the relationships of the supervisors and their supervisees. However, supervisors, regardless of ethnicity and gender, find it difficult to articulate how these markers and their intersectional relationships affect and are embedded in the social constructs of authority. I would argue that the participants cannot conceptualise how these social markers intersect in the practice of supervision. I would propose the concept of Intersectionality. This is a concept that has helped social sciences to highlight the multiple

positioning that constitutes everyday life and the power relationships that are central to it (Phoenix, 2006). It is also conceived as a theory of identity in which its dimensions are viewed as operating simultaneously and in complex interaction with each other (Crenshaw, 1989, cited in Lau Chin et al., 2016). Intersectionality as a construct has not been used enough in systemic psychotherapy despite the value that it provides in addressing the complexity of the multiple types of oppression of the individual (Butler, 2015). Gutierrez (2018) argues that intersectionality in systemic supervision is crucial for multicultural systemic supervision. She acknowledges that to move forward in addressing multicultural therapy, an awareness of intersectionality in supervision is vital, where the complexity of power and the isomorphic processes between supervisor/supervisees are discussed.

The findings show that those participants who occupy positions of the dominant social markers of gender, ethnicity and class experience an intersectionality bias that participants with the least dominant social markers do not experience: white middle-class male supervisors do not seem to experience the oppression that their middle-class white female colleagues do; white middle-class female supervisors do not experience the same oppression as male and female BME middle-class supervisors; and BME middle-class male supervisors do not experience the same oppression as their BME middle-class female colleagues. Ethnicity and gender were found to intersect in different kinds of oppression. Class was not found to be such a variable, as all participants identify themselves as being middle-class. However, participants reflect on the implication of being middle class and well educated in their assertion of authority.

I would argue that family therapy and systemic theory, despite their focus on the Social Ggrraaacceeesss, have not yet managed to challenge these social biases in the supervisory relationship and the institutions where these supervisors work. Systemic theory, in considering the intersection of culture, gender, ethnicity and class, can give meaning to the complexity of these power relationships in supervision, but how this is put into practice and how

power and authority are dealt with in the supervisory relationship to produce a different experience and possible construction of authority may go against the dominant status quo. In this study, supervisors give accounts of how racism, classism and sexism operate in the supervisory relationship, replicating social processes of discrimination, which constrains or facilitates their authority differently, depending on their social positioning.

Moradi (2017) indicates that research about multiple forms of oppression results in stratification of power and resources, where white men are at the top of the hierarchy and black women are the bottom, leaving white women and black men in the middle. Intersectionality indicates that BME women's experiences cannot be understood by their experiences of racism or sexism, but they also are subject to prejudice that it is unique to black women and different from that experienced by white women or black men. BME female supervisors seem to be the group whose authority is challenged most. The identification of these biases may be even more difficult, and Remedios and Snyder (2015) argue that the lack of research focused on BME women is due to the fact BME women do not represent stereotypical women, who are thought of as white, nor stereotypical BME people, who are thought of as male. They also indicate that individuals who are stigmatised by different prejudices elaborate strategies for coping with discrimination that support their adjustment to situations in which they are devalued. BME women seem to challenge their supervisees primarily on the basis of voicing their gendered oppression. This may work better as a strategy, given that the NHS and mental health services in particular, are predominantly female, and the powerful influence the feminist critique has had on systemic psychotherapy. This may help BME women to challenge authority on the basis of gender without referring to ethnic discrimination, which seems harder to challenge directly and is less widely recognised. Where English is their first language, BME women supervisors tend to use language strategically to convey their middle-class status and high level of education as social markers. BME participants discuss how 'talking posh' or 'being eloquent' are markers which help them to position themselves in terms of authority. BME women

who have English as their second language seem to experience further discrimination in their supervisory relationship, as lower proficiency in English seems to further position themselves as having a lack of experience and knowledge.

One of the most striking findings is that the ethnicity of the supervisor is not discussed in the supervisory relationship. Ethnicity is a visible social marker, but it is not voiced in the supervisory relationship by any of the supervisors in this study, which may suggest no prejudicial encounters with supervisees. Today, in the 'politically correct' UK professional field, prejudice is subtle, and therefore BME supervisors experience uncertainty about others' motives in these interactions. They may consequently focus more time on trying to analyse the motives underlying the supervisee's behaviour rather than the performance of their own role as a systemic supervisor, thus limiting their authority. One of the BME woman participants talks about her inner conversations (Rober, 1999) when trying to understand some of the behaviour of her supervisees and her language and cultural background as being reasons for prejudice. BME participants, in taking these social markers separately, are clear which of their minority statuses is being targeted, but they tend to locate it more openly in their gender positioning rather than their ethnicity.

Remedios and Snyder (2015) explain that people who are victims of prejudice explain these prejudices in terms of an external and internal attribution. The external attribution is made when they can recognise a biased person, which needs to be present for the attribution to happen. The internal attribution occurs when the stigmatised person is part of a group that is stigmatised. The recognition of internal attributes that are stigmatised demands recognition that this prejudice is constant and linked to immutable aspects of the self, such as the colour of their skin or their use of language. The authors identify that the process of recognising this latter kind of prejudice is painful, as the person stigmatised can do very little to change these assumptions. This may explain the silence of the BME supervisors

with regards to their ethnicity and their difficulty in naming it. Another explanation is suggested by Fleras (2016), who points out the difficulties of challenging racism that is expressed through micro-aggression. Micro-aggressions are everyday expressions of racism which Fleras calls the ‘new face of racism’, and involve both a micro-aggressor and the micro-aggressed. This type of racism is difficult to identify, as the majority of the population perceives the behaviour as normal and neutral. This poses the difficulty of assessing complexity and response, but has an impact on the micro-aggressed. The ambiguity of the micro-aggression leaves the aggressed struggling to determine if it is bigotry or if they are reading too much into it and there was no intention to offend. The aggressed is identified as hypersensitive and may be seen as playing the ‘race card’ if they try to challenge these aggressions, victimising them further.

In her article *Exposing Racism, Exploring Race*, Erskine (2002) calls on family therapy to address issues of power in family relationships and thus tackle exploitation and social justice. She argues that the exposure to racism in the life of families and the exploration of the effect that race has on our identity needs to be part of any family therapy. I would argue that it is also pertinent when addressing race/ethnicity in relation to therapists and supervisors. By doing this, family therapy and systemic supervision can create spaces where these issues can be discussed openly so they can be experienced and processed, facilitating reflection. Culture and ethnicity as social markers do not seem to get elaborated upon or worked through by white supervisors who are in a position of authority.

5.6 Authority as a legitimate power

The participants seem to accept that authority is a construct that is part of supervisory relationships despite some of them struggling with the acknowledgement of same. None of the participants see authority as something that is negative per se, or which may need to be avoided in the supervisory relationship, except for the supervisor who did not grow up in the UK.

Hearn (2012) argues that power has a broad scope and that there are three concepts that have been central in discussions of power: domination, authority and legitimacy which derive from the work of Max Weber, already considered in the literature review. Hearn establishes the close interdependence between authority and legitimacy, by stating that authority is 'power that enjoys legitimacy and legitimacy as a way of regarding authority' (p.22). Authority, he claims, is the power to make commands and have them obeyed. These commands need to be legitimised by a wider source of authority's power. Thus, the participants seem to suggest that authority is a legitimate power that is given through their expertise and positions in the institution where they work.

The meaning that participants give to authority in this research tallies with Parson's rational authority (Guzman, 2008) and Arendt's (1954) definition of authority as the capacity to be obeyed without the use of persuasion through argument or the use of coercion or violence. It is a voluntary agreement. BME participants seem to struggle when the supervisees do not seem to give them authority even when they have similar training and expertise to systemic supervisors, which supports Scarborough's (2017) feelings as a supervisor.

The question of legitimacy of authority was constructed by the participants in relation to the expertise and knowledge of the supervisor (Bertrando and Gilli, 2010). However, it also highlights difficulties for those groups that have been historically oppressed to assert their authority, however legitimate their command is. One of the participants offers her views of how her cultural knowledge is challenged by the supervisee even when she seems to have personal expertise in this area. The findings of this research expose the tension between the ways that social identity such as ethnicity, gender and class are mediating the legitimate authority of the supervisors. In other words, the supervisors with more dominant statuses find their knowledge and expertise legitimised by their supervisees reinforcing their authority in

a way that differs to BME supervisors, leaving the latter struggling when trying to assert their authority in the supervisory relationship.

5.7 Whiteness as the unmarked social marker

Some white supervisors in this study suggest that their ethnicity may be giving them some privilege in terms of their authority, but they are not able to name its effect on their exercise of authority in their supervisory relationships. Frankenberg (1999) points out the dilemmas in exposing whiteness: in trying to decentre it, it may become *re-centred*, a risk white supervisors may try to avoid. Frankenberg names whiteness the ‘unmarked marker’, as it is there, but it is invisible. Whiteness, she points out, is considered historically constructed, ‘whiteness is invisible by asserting its normalcy, its transparency, in contrast to the ‘other’ on which its transparency depends’ (p.5). I propose that by addressing whiteness in systemic psychotherapy, we could more consciously address all cultures and ethnic positions present in the supervisory relationship, be these in the familial or professional context. This may also contribute to the discussions about the different kinds of whiteness relevant in post-Brexit Britain. The discussion of whiteness could also give space to reflect on the white migration to this country, which creates shades of whiteness in society. Whiteness seems to work by naming who is excluded or included in the term, rather than anything culturally meaningful (Frankenberg, 1999). If we begin to consider whiteness as another social construct, we may be able to construct alternative meanings beyond racial dominance and white supremacy. We may be able to ask what whiteness is in our everyday lives, as a construct of identity and identification that also can provide actions of anti-racism. White female participants express feelings of shame and guilt when talking tentatively about their privilege in the exercise of authority. This awareness seems to be paralysing and silencing, perpetuating the status quo of racism in professional and family relationships.

The emotions that racism triggers contribute to not acknowledging white privilege and its oppressiveness explicitly. Dalal (2002) argues that racism

is better understood as the process of racialisation which is 'the manufacturing and utilisation of race in any capacity' (p.27) and the main aim of racialisation is the appropriation of power. In doing so, some groups gain power over other groups. He argues that these definitions lack the emotional content of the activity of racialisation. He proposes that emotions involved in the process of racialisation may not be evident, but are active on an unconscious level. Thus, racism can be defined as the hatred of the other, from which other emotions such as pain and guilt are produced. Guilt and shame are named by white women supervisors in this study as the emotions implicated in racialisation of the construction of authority.

Dalal (2002) believes that the emergence of racism can be explained in terms of the formation of groups. Groups are based on illusionary similarities and, therefore, they require the formation of the 'us' and 'them'. This distancing is emotional. He explains that when the white therapist realises that their whiteness gives them privileges, and this realisation is also the realisation of guilt and pain. Avoidance of reflection on this privilege is a defence against the pain of remembering it. The identification of these processes could shed some light on the systemic literature and understanding of deeper racialisation processes. Dalal (2002) describes racism as a form of hatred of one group for another, performed on a spectrum that at one extreme is overt racism and at the other is more covert, the latter being much more problematic as it is invisible. Some white British supervisors in this study acknowledge that ethnicity may facilitate or constrain authority, but it appears that guilt and shame are emotions that hinder their self-reflexivity, even when they are conscious of how their own ethnicity may be facilitating issues of authority. Fortier (2005) points out the existence of discourses that are prevalent in British society and promote the politics of nationalist pride in order to eradicate the shame of racism; she names them as anti-anti-racism discourses, as they reject any recognition of the presence of racism by sanitising its history and perceiving anti-racism as an attempt to destroy British culture. White systemic supervisors may step in and out of these

discourses, depending on the strength of their feelings, and they need to be aware of emotional and social processes that may be operating.

5.8 Language, ethnicity and social class

The participants construct the English language as the language of hegemony. They talk hypothetically of how having English, as a second language would constrain their position of authority. It is not difficult to think of the role of the English language in the 21st century; it has become the language of globalisation. Burck (2005a) observes that English became the language that represented power through the process of colonisation, and the colonised communities are those that speak English as a second language after their native language. The coloniser speaks only English, so bilingualism and multilingualism became connected with status. Globalisation has exacerbated this, giving a superior status to native English speakers (Neeley& Dumas, 2016). Speaking English as a second language creates the same power relationships today in the UK.

The BME participants who speak English as a first language reflect on their privileged position and the negative responses that they would have from their supervisees if they spoke English as a second language. White supervisors do not consider speaking English as a first language as a privilege, but the BME participants make reference to the hypothetical constraints of speaking English as a second language as a totalising effect implicated in class and culture. Class is only named when English is the first language.

Therefore, speaking English as a second language seems to constrain the participants' authority. Only two participants, who are also BME supervisors, speak English as a second language. However, most of the BME participants for whom English is their first language reflect on the negative impact that having English as a second language could have on their authority. It would be interesting to research white supervisors who speak English as a second language and its impact on their authority, as it may

bring more nuance of language as a marker of class and ethnicity. Having an accent from one of the main European coloniser countries, such as a French accent, and being white may not have the same impact for a supervisor as having an accent and being BME.

Some of the participants talk about class and language when English is spoken as a first language with a regional accent. The participants consider speaking English with a 'posh' accent to be a contributor to their authority, even when all the participants identified themselves as middle-class. Speaking English as a second language brings up representations of the 'other' that are all encompassing, including all other cultural social markers, while regional accents bring up class as a social marker which can be changed and modified by the participants by acquiring a 'posh' accent. These findings tally with what Fanon (1952; 2008) and Burck (2005a) observe about the effects of colonialism on the relationship between the coloniser and colonised, where the former is construed as superior in all the social markers and the latter as inferior. These constructions are embedded in both, the coloniser and colonised. In this study, BME participants seem more aware of social class as marker, performed through their English as a first language and speaking 'posh', which facilitates their authority

5.9 Gender: a way to negotiate power

In this study, women supervisors, both white and BME, openly assert their gender oppression, which enables them to challenge sexism confidently in their supervision. Sexism is a prejudice that can potentially unite BME female supervisors and their white female colleagues working in institutions where the majority of the members of the staff are women. In this way, female BME supervisors are able to share a common marker of oppression with other women within their place of work. Making connections between BME and white women has proven to be a positive strategy in addressing not only gender issues, but also class and race/ethnicity. Garcia-Coll et al. (1993) propose ways of building connections through differences among women. They propose identifying collective stories and personal

experiences in women with diversity, and the need to acknowledge the feeling of shame and guilt in those groups that have oppressed others. To achieve this, women have to talk openly about taking risks that will necessitate learning from experiences of oppression. This may be achieved by the openness of a dialogue within the differences.

At the moment, these female systemic supervisors are able to acknowledge their gender oppression without naming the differences, but the dialogue seems to stop there. White female participants acknowledge their own oppression through their need to have a female role model who empowers their position as supervisors, as they do not have other cultural models available for their performance of authority. Within their organisations, most of the managers are male, despite significant improvements in this area. White women may also be more open to addressing sexism, as in this area they do not experience the same intense feelings of guilt and shame when addressing ethnicity and class. One of the participants notices the differences when a male colleague visits her supervision group and her supervisees acknowledge how much theoretical knowledge he provides, when this is something that she tries very hard to impart as supervisor of the group. The authority of knowledge is easily attributed to the male colleague supervisor by other women supervisees.

It is not so for white male supervisors. White male participants acknowledge the privileges that gender grants them in the construction of authority, but it is not clear how they define and reflect on the effect of gender on their own supervisory relationship with their female supervisors or their supervisees. Only one male BME supervisor reflects on his position and admits struggling to understand that he is a manager of an all-women team. I would argue that being male and BME brings nuances to their position of power; their experience of gender privileges, but also the oppression that they have experienced in relation to their ethnicity. This connects well with research on male intersectionality (Barker & Levon, 2016) which points out that the prototype of maleness in the UK is white and

middle-class, while being a BME male is positioned in the margins of these hegemonic discourses. Christensen and Jensen (2014, cited in Barker & Levon, 2016) describe the need to use two different hegemonies when representing maleness; one is an *internal hegemony* meaning the dominance of males over other males, and the other is *external dominance* i.e. the dominance of men over women. In this study, some male BME participants seem to connect with these two dominances when supervising women within a patriarchal culture, leaving them uncertain of their position. This may also explain the position of another male BME supervisor in this study, who reflects on the importance of gender within power relations but then considers how his ethnicity is the social marker which is the most challenging. This intersectionality also needs to be discussed overtly in the supervisory relationship, giving an account of the complexity of power relationships within the performance of authority.

5.10 Space for dialogue on intersectionality

Supervisors do not elaborate on the intersectionality of social markers and their effect on authority. There are no spaces where they can safely reflect on these intersections of gender, ethnicity and class. The relationship between BME women and their white female supervisors is more complex than that of white female supervisors as, although BME supervisors may feel understood from a gender perspective, ethnic differences are not often worked through. This may explain why gender for BME female supervisors is easier to articulate in the supervisory relationship than race and ethnicity. Remedios et al. (2016) suggest that BME women may feel that they can only be understood by groups that understand the intersection and stigmatisations of both gender and ethnicity. This proposition leaves them with a smaller section of society by whom they can feel genuinely understood. BME women supervisors could benefit from peer supervision where they could discuss how their authority is affected by their gender and ethnicity. White supervisors may also need a safe space where they can talk about how their intersections of gender, race and ethnicity, are constructed in relationships.

Garcia-Coll et al. (1993) suggest building connections through diversity, which may result in a good template to promote these dialogues. Oversight of supervision training on the issue of diversity could be enhanced, encouraging a more reflexive way of addressing the feelings of anxiety that this issue may raise. These conversations cannot be left to individuals, but must be part of the structures of the institutions where supervisors work.

5.11 Institutional racism

Some BME supervisors in this study mention their inability to address cultural and ethnic issues when they feel prejudice or discrimination from their supervisees. Some of the participants suggest that they do not feel supported within their institutions. Their silence in relation to their ethnicity can be explained by the unsafe context in which these relationships are constructed. A male BME supervisor talks about how he perceives the closeness and trust based on loyalties around white British race and culture within his organisation. This leaves him feeling unsupported by the organisational structure. Another participant, a BME woman, talks about her position within the organisation, where her role is vested with responsibilities but not with real authority. I think that this is an important aspect to take into consideration when initiating discussions about ethnicity or any 'othering' social processes on a professional level and in the organisational context.

Despite numerous efforts to legislate on diversity rights, it seems that these BME supervisors still feel they are not supported by the culture in the NHS, where most of them work. The NHS has not dealt with institutional racism in the working relationships of its employees. Institutionalised racism was defined by Sir William Macpherson (1999) as:

'the collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin. It can be seen or detected in processes, attitudes and behaviour which

amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and racial stereotyping' (Macpherson, 1999).

He used this concept to refer the Metropolitan Police Service after its failure to properly investigate the death of Stephen Lawrence. Krause (2017) defined Institutional Racism as:

'the racism hidden in ideas and actions, which may be outside awareness and has thus not addressed the problem of racism as not an individual issue but as an issue of the very fabric of relationships, attitudes and ideology' (p.2).

According to online data from the BBC (Dangerfield, 2012), only 1% of the Chief Executives of the NHS are black or from ethnic minorities, well below the percentage of the population, especially in some areas of London where nearly 40% of the population is BME. Kline (2014) found that London's BME population was 45% of the total, and 41% of the NHS staff was BME, yet only 2.5% of the Chief Executives or Chairs were BME. The study also found that women were the least represented at Chair and Chief Executive level (Kline, 2014). This indicates how authority is mainly represented by white British men, even in areas which are highly diverse, and that on the whole these jobs go to male workers rather than to female. Overall, white British men are over-represented in the highest positions in the NHS, and BME men are better represented than white or BME women.

This issue raises questions for systemic theory and practice: of how we deal with discrimination by addressing it in the supervisory relationship; of whether BME supervisors can challenge power dynamics by exploring the meaning of racism in their everyday relationships; or whether we also need to address these structural imbalances of power within organisational structures. If we want to have a policy that empowers BME supervisors, we need to address these issues through conversations and actions that contribute to giving BME supervisors a voice, and to a discussion of institutionalised racism in the NHS (Amhed, 2012). Dalal (2012) argues that

once racism infiltrates the structures of institutions, it becomes invisible. Institutional racism, he says, 'is the outcome of unconscious colour-coded psyches which in turn are the outcomes of a socio-developmental process occurring in a colour-coded milieu' (p.215). This process is not straightforward, given the complexity and multiplicity of covert institutional racism. The Just Therapy team (Tamasese and Waldegrave, 2003) suggests that naming the injustice in institutional groups is the first step towards changing the oppressive dynamics embedded in the institutions. This involves the creation of cultural and gender caucuses where oppression is acknowledged directly by those who belong to different cultures and different genders where the majority groups are accountable to the minority groups. This process requires the political will to deal with institutional racism as it is easy to leave the responsibility to those oppressed groups to identify discrimination when the responsibility rests with the dominant groups to work on their awareness of issues of power (Tamasese and Waldegrave, 2003).

5.11 Systemic theory and authority

Systemic theory and practice has been structured around a few central concepts that are prominent in systemic theory and the practice of supervision. All the research participants give accounts of their exercise and construction of authority using concepts influenced by the social constructionist systemic literature, including multiple perspectives, collaboration, transparency and curiosity. Holding multiple perspectives and asserting authority is perceived by some of the participants as difficult and at times as an either/or position. These dilemmas are similar to those ones presented by the systemic literature in trying to hold on the expertise and knowledge of the supervisor and at the same time, holding on the non-knowing stance (Larner, 1995, Pare, 2002, Mason, 2005, Bertrando & Gilly, 2010). The participants resolved this dilemma by using the Domains of Actions framework.

All the participants use as a guiding framework *The Domains of Actions* (Lang et al., 1990). This was conceived to deal with the dilemma of constructivist thinking.

5.11.1 The domain of production

All the research participants mention their authority in relation to their responsibilities around issues of child protection and training standards. This is an area that all the supervisors accept as part of their supervisory role, and which gives them the confidence to take decisions in relation to their supervisee's practice. This is seen as the prevalent position taken in supervision from which supervisors can assert their responsibility. There is a sense that the participants are able to assert their authority confidently in this domain. Lang et al. (1990) define the domain of production as 'the frame that we conceive the world in objective terms' (p.41). It is the domain of one established truth, the universe instead of the multiverse. In this way, the participants place their authority clearly in this domain. It seems that they can affirm their authority when they are in situations that can be perceived as certain.

Supervision within this domain seems to relate to the etymological meaning of looking *over* someone; to look over the practice of supervisees and set the boundaries that are expected according to standards that are seen as objective, such as child protection and the competencies the supervisee requires in order to develop and perform effectively as a systemic therapist. Supervision may be viewed as the space where we create the boundaries for systemic thinking and practice. This type of authority could be described as Weber's (1949) legal/rational authority where there is a legal body accepted by society as legitimate.

5.11.2 The domain of explanation

Some participants also locate their supervision position in holding curiosity about what the supervisees bring about their practice. Curiosity

gives permission to the supervisor to explore with the supervisee different and multiple realities or perspectives. Lang et al. (1990) define this domain as the domain of questions and questionings. Curiosity also seems to be the stance of expertise that the supervisor has in supervision. In this domain, supervisors invite their supervisees to embrace different points of view, without necessarily participating in giving directions about which of these perspectives may be the most helpful for the family or supervisee. The supervisors show their expertise in enabling the supervisee to hold multiple perspectives. Despite the elaboration and understanding of Mason's (2005) concept of authoritative doubt mentioned by some of the participants, they seem unable to use their own cultural expertise and experiences that may be relevant in cross-cultural work within this domain. Even when, one BME participant mentions how she tries to bring her cultural expertise to the discussion, to find that she is challenged by her white supervisee who dismisses this local knowledge, I believe that this could be the domain where supervisors could bring their own expertise about culture and intersectionality. They have knowledge and experience in this area. This kind of authority can be described as Parsons' rational authority, as curiosity is one of the central tenets of systemic psychotherapy and systemic supervision for the explorations of the dilemmas brought by the family or the supervisee. This could be incorporated in the literature of expertise of the systemic supervisor: to model and discuss issues of their own intersectionality.

5.11.3 The domain of aesthetics

Lang et al. (1990) define this domain as 'the way that professionals working with human beings in relationship guide their practice' (p.44). This is the domain that also involves the ethical dimension when working with people. Supervisors talked about moving between the two domains in a way that encompasses collaboration and transparency. Collaboration allows them to use their expertise in ways that facilitate curiosity. Transparency is used to facilitate the setting of boundaries, by what they call 'naming power'.

However, for both white and BME supervisors, ethnicity is not named, so this particular power relation becomes invisible for their supervisees. I could speculate that if this is happening in the supervisory relationship, we could infer that it is also occurring in the therapeutic relationship between the therapist and the family. I would argue that this happens due to the invisibility of the intersectionality of the supervisor as it is assumed that all supervisors have the same authority and power in the supervisory relationship.

Laing et al. (1990) set up three aims when writing *The Domains of Action*, one of them is “to sort out different types of actions in relation to professional roles in any context and remain consistent with the systemic viewpoint that lived experience is co-constructed by human beings co-ordinating their actions in relationships with one another” (p. 40). In doing this, they identify the three domains of actions. It is interesting that despite their description of the Domain of Production as the ‘frame in which we conceive the world in objective terms’, they also clarify that ‘curiosity’ (Cecchin, 1987), a systemic concept, is central to this domain. All participants construct the domain of production as a set of responsibilities where creativity and the multiplicity of views are not privileged. It seems that the understanding of the productive domain has been eroded leaving it as a domain where we have to intervene despite the different explanations and perspectives in the construction of those legal frames. Lang et al. (1990) clarify that from a systemic perspective, the judgements that are made in this domain need to be consistent not only with their roles, but also in relation to the judgements in the domains of aesthetics and explanation. I wonder if the reasons of the narrow meaning given to the production domain may hint at the ways that this paper is being taught in the UK conveying a simplified version of the original paper which has led to these three domains becoming rigid. This could be an interesting theme for future research.

5.11.4 Social Grrraacceeesss and intersectionality

Although all the supervisors positioned themselves within the social constructionist paradigm and can reflect on how power relations impact on their relationships with their supervisees and within the institution, looking at the Social Grrraacceeesss does not allow them to consider how oppression operates in the intersection of these social markers. Based on the findings of this study, it seems that supervisors are not aware of how these differences in power limit or privilege their own position of authority.

The literature on systemic supervision reflects and assumes that the supervisor holds the same power, independent of their social positioning (Nelson et al., 2008; Pendry, 2017; Messent, 2017, Gutierrez, 2018). The assumption is that this kind of representation of the supervisor embraces and reproduces the relations of power already present in British society, where power is represented by white, middle-class men and supervisees as the 'other' (female, BME and possibly middle-class). The representation of the white supervisor and BME supervisee replicates the power relations of white superiority that are already present in this particular context. The findings suggest that we need to look more closely at these social markers and the ways in which power shapes relationships in the context of supervision and how it may be contested and challenged.

This study challenges this position, and argues that the systemic supervision literature is still ethnocentric by not engaging with difference in a meaningful way, and not representing the supervisor from those least powerful groups. The consequences of this ethnocentrism are ominous, as at one level it leaves BME and, to some extent, female supervisors without a narrative to explain the power struggles that they encounter in their supervisory relationship. On a higher level, although systemic theory takes into account the social context, in practice it does not sufficiently engage with the social context in which these power relationships are situated.

The socio-historical colonial and post-colonial contexts influence not only the direct relationships between supervisor and supervisee, but also the ways in which knowledge serves to reproduce these relationships of power. The different schools of thought in systemic theory have emerged mostly from the practice of European and Western traditions, and despite many efforts in systemic theory to develop marginalised discourses, this remains a challenge. For supervisors in minority groups, their experiences, knowledge and expertise are not being recognised or represented in the field. For supervisors from the dominant groups, their privilege is not considered sufficiently.

The lack of analysis of these power relationships in supervision may also be part of the complexity for BME supervisors of having to recognise their position of oppression (Srouf, 2015), the experience of which may induce feelings of anger, shame and fear (Watts-Jones, 2002). These power differentials are more complex for BME supervisors, as making these differences visible may also affect their authority and their relationships with their white colleagues and supervisees.

Reflexive cultural positioning theory (Tan & Moghaddem, 1995) explores the way that reflexivity is mediated by the construction of the concept of *self*. Reflexive positioning is defined as ‘a process by which one intentionally or unintentionally positions oneself in unfolding personal stories told to oneself’ (p.389). However, the concept of *self* reflects boundaries that are differently present in the values of individualist and collective societies. In collective societies, the self is seen in relationships, whilst in individualistic societies the self is independent and unique. These diverse values will affect the ways that people see the ‘other’ in relation to the self. This concept of reflexive cultural positions may be operating in the ways that supervisors perceive their own authority. Most BME supervisors come from collective backgrounds, which, with their tendency towards hierarchy and respect, may make it harder for them to challenge hegemonic

white British views, as there is a desire to 'fit in' and also a fear of racism and exclusion from the 'professional' field.

Instead of naming their minority social markers, BME supervisors exercise authority by accentuating their more dominant markers such as class and language.

Frantz Fanon, in his book *Black Skin White Mask* (1986), describes the effect of colonialism among Black people in the Antilles. He talks about how black people want to talk and behave as their colonisers do, and that language is central to this process of identification. The BME participants talk about how having English as a first language protects them from further oppression. They also talk about how language could be used to challenge their expertise and knowledge when English was their second language. They discuss how 'talking posh' helps them to assert their authority, as class adds legitimacy to their performance of authority. BME supervisors, especially BME women supervisors, tend to bring forward social markers where they have more power, such as class and language, but even then their authority is challenged. This can also be seen as what Watts-Jones identifies as 'internalised racism' (2002). She describes this as the situation where black people can have access to privileges by abandoning their identities and assuming those of the dominant group. I believe that authority in supervision is so embedded and so embodied by hegemonic white male models that it is practically impossible for BME and female supervisors to exercise authority without trying to reproduce these dominant models.

5.12 Conclusions

Authority is a concept that gets its meanings from hegemonic constructions available in British culture. These constructions are present in white British and Black and ethnic minority male and female supervisors' **accounts**. Thus, authority as a relationship is performed using these hegemonic models, which are biases favouring the supervisors from most dominant groups and limiting minority groups in an intersectional manner.

The performance and negotiation of authority is mediated by the intersectional positions of the supervisors; the more dominant markers the supervisor has, the more effortless their assertion of authority, and the fewer dominant markers the supervisor has, the more challenging their assumption of authority. Thus, these social markers give nuances to the relationships of power present in the supervisory relationship.

Systemic supervision literature has not addressed sufficiently this power differential among supervisors, leaving minority supervisors without a narrative which permits them to discuss and reflect on these oppressive experiences and build on strategies to challenge these dynamics. These power relationships are not named in the supervisory relationship, compounding the struggle for minority supervisors to assert and negotiate their authority in their relationship with their supervisees, even when they are aware of the impact that this may have on their performance of authority.

In short, race, ethnicity, gender and social class as social markers are implicated in the construction of authority by the supervisors of this study. Authority is a gendered, racialised and classed-based construct and thus shapes the influence of how knowledge and expertise is conveyed and received in the supervisory relationship.

Chapter 6. Theory-making in grounded theory

Grounded theory seeks the construction of new theory from analysed data, especially in cases where literature is scarce. Drawing on this approach, I will develop some theoretical contributions regarding the construction of authority in the supervisory relationship.

Authority is a construct that has been neglected by the systemic field despite being considered one of the competences that systemic supervisors have to develop in their training (Bracelij-Kobe and Trampuz, 2010) as well as a supervisory stance of knowledge and expertise (Bertrando and Gill, 2010), which results in an imbalance of power between the supervisor and the supervisee.

Authority for systemic supervisors is a complex concept that is shaped by the intersectionality of the supervisor and the meanings that this intersectionality is given in a particular cultural background.

To understand the construction and performance of authority in the supervisory relationship, there must be an understanding that social constructions of authority are based on familial and largely patriarchal structures that are internalised from a young age by the supervisors and most probably by the supervisees. These are further compounded in the British context by hegemonic social constructions of authority as white, middle class and male. This gendered, racialised and class-based construct makes it harder for female, BME and working-class supervisors to assert and negotiate their authority, which needs to be worked through for all of these intersectional social markers and individual histories.

Although authority is socially constructed, for there to be a sense of authorship it has to be coherent with one's historical, cultural and social contexts, and worked through in relationships. The implications of social markers such as class, gender and ethnicity in the construction of authority, for example, are not, in general, taken into consideration in the definitions of authority such as the power or right to give orders, make decisions, and enforce obedience or as the power to influence others,

especially with regards to a commanding manner or recognised knowledge of something, or as the person with extensive or specialised knowledge about a subject; in other words, an expert.

Systemic theory does provide some concepts that could facilitate this understanding, such as the notion of social ggrraaacceesss(Burnham and Harris, 2002) and the critique of power, but in practice this is seldom done in a way that truly challenges power in the supervisory relationship and the dominant social context. In order to address this gap in the conceptualisation of authority, an awareness of the intersectionality of the supervisor is central to the systemic theoretical framework. Intersectionality is an analysis of the multiple positioning that constitute the day to day experience and the power relationship within (Phoenix, 2006); understood as the ‘interaction between gender, race and other categories of difference in individual lives, social practices, institutional arrangements and cultural ideologies and the outcomes of these interactions in the term of power (Davis, 2008 cited in Gutierrez, 2018). Butler (2015) clarifies the need of using the intersectionality lens as a way to gain a rich and uniqueness in the analysis of power in the relationships when working systemically.

Other theoretical ideas, such as domains of actions (Lang et al. 1990), are seldom integrated with the tensions of cross-cultural thinking and curiosity, so that the domain of production and legislation silences the struggle in cross-cultural thinking and the idea of multiple perspectives is resolved into a universal position. Paradoxically, the idea of social constructionism may make it hard for supervisors, as their desire for collaboration and accepting multiple perspectives may prevent them from taking up a strong position of authority. The concept of authoritative doubt (Mason, 2010) tries to take a both/and position and reconcile expertise with openness to other perspectives, but often this does not take into account or fully engage with the tensions in different social positions and the power inherent within them. Given that ethnicity, gender and class are implicated in the construction and performance of authority, it is reasonable to suggest that the concept of

authoritative doubt should be deconstructed when and how authority is performed according to the ethnicity, gender and class in the supervisory relationship, using the framework of intersectionality (Phoenix, 2006; Butler, 2015).

The same could be applied to other theoretical concepts in systemic theory, such as the 'one down' position; the decentred and influential position that has been postulated with the influence of social constructionism in systemic psychotherapy. The therapist's and supervisor's position is always constructed according to racialised, classed and gendered hegemonic discourses already present in a particular society. The influence of social constructionism in systemic psychotherapy seems to see these positions as fixed and independent of the power relationship, a paradoxical position. Taking a one down position is different if one is a white male middle-class supervisor or a BME female supervisor, as these positions are always relational, and depend on the power relationships based on ethnicity, gender and class between supervisor and supervisee, in other words, a BME female supervisor is already in a one down position in relation to her white male supervisee.

The self of the therapist and the supervisory relationship

The self of the supervisor when compared to the self of the therapist has not received much attention in systemic literature (Daniel, 2013). In Mason's (2010) definition of the self of the supervisor, authority is named but not sufficiently deconstructed in the ways that give meanings to the diversity of the supervisor:

'what ways, for example, might supervisors' relationship with authority, the ownership of expertise and relational risk-taking (Mason, 2005) influence the way they supervise? What might supervisors be pulling back from addressing and how do they understand why they may be doing this? How might family and culture of origin and gender scripts aid or constrain, or both, the supervisor's ability to address these areas?' (p.438).

The attention to diversity and multicultural supervisory competences has historically been addressed by taking one social status at a time. This study shows that power in supervision operates in an intersectional way where minority statuses oppress and prejudice the performance authority of the supervisor in a compounded manner. This contradicts the all-encompassing ways that power has been conceptualised in systemic supervision, assuming that the supervisor holds a position of power over the supervisee due to the supervisee's probable perception of the supervisor as more expert and more experienced (Bobelet *et al.*, 1995). Expertise and experience are only two of the social discourses implicated in the construction of authority in the supervisory relationship. The intersectionality of the supervisor positions supervisors in a relative position of power, determined by the prejudices present in their cultural background. Supervisors from minority statuses encounter challenges from their supervisees that majority status supervisors do not encounter. Assuming that supervisors have similar training, knowledge and experience, authority is constructed in the supervisory relation depending on the intersectionality of the supervisors.

Intersectionality in the construction of Authority in the supervisory relationship in the UK:

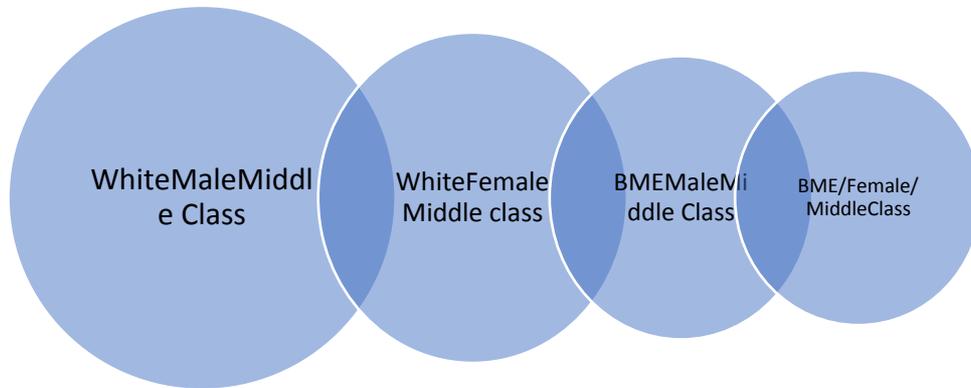


Diagram 1: The more dominant social markers the supervisor has the more authority that the supervisor can assert and is given in the supervisory relationship

Emotions implicated in talking about ethnicity in the supervisory relationship

Discussing social differences in supervision is complex, especially when considering race/ethnicity as a social marker of the supervisor. Negative emotions such as guilt, fear, anxiety, and shame were some of the emotions that were present in the conversations about ethnicity. These emotions make conversations difficult and therefore require special attention in training and practice of family therapists and supervisors.

The intersectionality of the supervisor is part of the self of the supervisor and it has an impact on the performance of authority within the supervisory relationship. By acknowledging and addressing its impact, we may be able to create a context where these positions can be addressed in a triadic way: supervisor, supervisee and clients. The intersectionality of the supervisor is embedded and embodied

(Hardman, 1995) in ways that affects how they assert their authority and how supervisees respond to it.

One of the roles of the supervisor is to manage difficult emotions in the supervisory relationship (Christensen et al, 2011) as well as managing their own emotions. Minority supervisors are challenged in ways that majority supervisors are not. This challenge is present in the supervisory relationship as well as within the institution where BEM supervisors work, BEM supervisors do not feel safe, as these findings show. These experiences are difficult to process for BEM supervisors as they are not able to express them, challenge them and ask for support within their teams and institutions. This highlights the isolation that BEM supervisors feel within their working relationships.

Intersectionality (Crenshaw, 1989 ; Butler, 2015) as a theoretical tool could provide the opportunity to bring those challenging conversations to the fore, creating a fluidity in the power relationships present in the supervisory relationship. The centrality of this concept when training family psychotherapists and supervisors could enable the integration of experiences, dilemmas and feelings that are generated by working in a diverse but unequal system. For instance, supervision of the supervisor encompassing intersectionality could play an important role in developing skills to discuss and process these feelings thus acknowledging the specific difficulties that BEM supervisors encounter in their practice. Butler (2015) and Gutierrez (2018) have shown how this concept could be used in supervision to raise awareness and increase sensitivity in order to accomplish a multicultural systemic psychotherapy. Sato's (2014) study confirms these findings arguing that the presence of a mentor or a supportive supervisor is fundamental in the ways that the BEM supervisors are able to manage microaggressions. I would argue that this is also an important factor for all supervisors interviewed in this research, where supervisors' supervisors need to be aware of their and their supervisees social statuses and the challenges that they have in their practice as systemic supervisors.

At a higher institutional level, the consideration of diversity in the position of the supervisor needs to be openly addressed and supported by the Association of Family Therapy (AFT), who regulate the content and implementation of family therapy and systemic supervision training. A model of cultural consultation when developing the different guidelines and regulations may aid the integration of a curriculum where diversity is embedded throughout its content and reflexivity.

Chapter 7. Self-reflexivity

Self-reflexivity is central when taking a social constructionist stance in systemic practice and qualitative research. Self-reflexivity in research is the process which brings personal biases to the fore, puts contingencies into context and is the theoretical grounding that informs the researcher's own view (Allen, 2000; Willig, 2013). This research data is a combination of my own beliefs and those of the participants, and therefore subjectivity is central to these two perspectives (Burck, 2005). The assumption is that both the participants' and the researcher's views are co-constructions that emerge in a specific context. The nature of their reality is subjective, but it is based on historically and socially constructed power inequalities. According to Olsen (2007), reflexivity has been conceived in three different forms: 1) a full explanation of how analytical and practical issues were handled; 2) examination of the researcher's own background and its influence on the research; and 3) reflections on the researcher's own emotions, worries and feelings. As the sole author of this study, it has not been easy to maintain these different forms of reflexivity as they represent complex processes over the period of the interviews, analysis and writing of the study.

I am a BME woman for whom English is her second language. I am middle-class, well educated, and have lived in the UK for more than 20 years. I am from Chile, where I qualified as social worker, motivated by principles of social justice and equality. Freire (1969) and Maturana were two of the central theorists who influenced me as a young student. I trained as a family therapist at the Tavistock Clinic and then as a supervisor at the same institution. Social constructionism and issues of social justice and diversity were central to this training. Nevertheless, I felt that most of the theories available assumed that the therapist and the supervisor hold power in these relationships. I thought that my minority status was not sufficiently represented in the positions of the therapist and supervisor. The research question, the design and the interview format were developed from this position and curiosity.

My hope was that, by interviewing supervisors, I would explore and possibly resolve some of the issues that I was struggling with in my supervisory relationships. As I mentioned before, the research question stemmed from my own experiences of disempowerment in therapeutic relationships and the supervisory relationship.

My supervisory relationships are mostly located in the cultural encounter between me as a BME woman supervisor and white British supervisees. I have experienced these relationships as very rewarding but also very challenging to my authority. I felt that my position could be easily contested and criticised, which has made me strive for further knowledge and training as a way to respond to these challenges, using education as the social marker which could help me legitimise and exercise my authority. I have to recognise that getting older has also helped me to be heard by the supervisees, but not always.

I thought that these experiences were personal to me due to my own individual characteristics, such as being quiet, not wanting to assert my own position in a context which I did not know, and that my relationship with authority had a negative connotation. Authority for me has had a very ambivalent meaning due to my own experiences and the models of authority I grew up with. Growing up in a right-wing dictatorship has given me an insight into ways that power can be used to suppress peoples' freedom. I suppose that these experiences are true for many black and ethnic minority therapists and supervisors who have come from countries that have a history of colonisation. I belong to a culture that values white European knowledge and ways of being and is prejudiced against the indigenous pre-Columbian culture. Ethnically, I am mixed between these two cultures; I have a combination of the culture of the coloniser and the colonised, represented in the Spanish language and my brown skin.

The whole process of designing, interviewing, analysing and writing this study has meant that I have had to be very aware of jumping to conclusions too quickly, and assuming that I have understood the meaning and experiences of the supervisors. In researching across cultures, it is very difficult to determine which aspects

connect me to the data, and which issues disconnect me. All the participants share similar training based on respect of 'others' and a reflection on issues of power. The interviewing process was a moving experience at times, as I was also in the process of witnessing the challenges that these supervisors had gone through to attain, maintain and negotiate their authority. It also made me reflect on my own struggles when claiming authority, not only as a supervisor but also in life in general.

Even when I assumed that I would have much in common with the participants, some of the findings were a surprise to me, especially those related to the use of language in the exercise of authority, even when this has clearly also been true in my experience. I knew that this provoked new dilemmas in the relationships with supervisees, but I was unaware of the weight that this issue might have in the performance of authority, especially when seen from the point of view of the black and ethnic minority supervisors for whom English was their first language. This was clearly seen as a particularly disadvantageous factor with regard to discrimination. Writing this dissertation has also involved challenges in the use of language, in that I have not found it easy to express the sophistication of the findings well enough in English to demonstrate my knowledge and expertise fully.

I was impressed by the way the participants were able to talk openly with me about these assumptions. I was aware of my presence, representing 'the other' in interviews when talking to white British supervisors, especially with those women who found it painful to recognise that power was operating in the supervisory relationship, and that for BME supervisors, authority was shaped differently when working with their supervisees. I wanted them to talk more about these feelings, but I was also aware of the intensity of these feelings and the need to contain them by acknowledging them implicitly. Perhaps this would not have happened if I were white British; perhaps my curiosity could have gone beyond these strong emotions. I hope that my being BME may have helped the engagement and empathy of the participants. This may be an isomorphic process in relation to that which supervisors go through when discussing their intersectionality. These are not easy conversations and they may feel risky as people may be blamed or

criticised when talking about the positions regarding their social statuses. As a lone researcher, I felt that I needed to protect the participants from further distress, and at the same time, protect myself from possible ethical issues that could have emerged in the interview process. It is worth considering the necessary structural support for people engaging in this sort of dialogue.

Throughout the course of the research, I was pushed to find the meanings of my own constructions about authority and to reflect on what I represent for the families and supervisees who I work with. Some of these issues were addressed in my own clinical supervision, which helped me to reflect on my own meanings of authority so I did not project them directly onto the participants. Exercises such as the externalisation of authority and interviewing family relatives about their perception of my own authority were key in challenging my own assumptions regarding this concept.

The experience of interviewing these participants brought about the personal realisation of the lack of spaces where these issues could be voiced and explored safely, and as a collective rather than being viewed as individual experiences. I live and work in a context where ethnic diversity is rare, and therefore tend to think about individual experiences rather than collective experiences that are heightened in a context of discrimination.

Carrying out this study has also helped me to find a shared narrative that may account for some of my own experiences working in my position as a supervisor and a therapist. This, in turn, has enabled me to take a different position regarding authority, which, paradoxically, has made me more able to use my own expertise and respond to challenges that facilitate dialogue about race and ethnicity, gender, class, age and education.

The findings are also the results of some difficult conversations with the supervisors who were identified as white British and BME. These created a tension between what can be talked about within groups and across groups. The findings

therefore do not represent the 'pure experiences' of the supervisors, but are constructions created through immersion in the culture and context of the relationship between the participants and me.

Chapter 8. Implications for Clinical Supervision

1. The findings demonstrate that, despite systemic theory's attempts to address issues of power in relationships and the existence of positive legislation towards equality, these power relationships are still not being voiced in systemic supervision. Systemic supervision is well situated to do this, and I would argue that intersectionality as a working concept could offer the opportunity to make these social markers visible, challenging the replication of hegemonic models of authority by explicitly defining the historical background of these relationships. Situating supervisors in their own cultural background could contribute towards a richer, more diverse systemic theory and practice.

The sense of isolation that supervisors experience when thinking about their own ethnicities was conspicuous in this study. It was clear that supervisors did not have spaces where these discussions were possible. It is not enough for systemic supervision to be informed by a social constructionist perspective while discussions about intersectionality and power are not well supported by training and professional institutions. Watts-Jones (2002) calls for black therapists to create sanctuaries where they can explore their internalised racism. The Just Therapy team (Waldegrave et al. , 2003, Waldegrave, 2009) has already advocated on how these caucusing have enabled some accountability regarding the experiences of minority groups regarding gender or ethnicity. These cultural groups enable dialogues that respect the diverse experiences that minorities encounter in society, through the marginalised groups taking the leadership on those themes that are related to gender or ethnicity. I believe that the creation of safe spaces for cultural dialogue should be open to white and BME male and female supervisors, as issues of anti-racism and gender equality involve everybody. Tamasese and Waldegrave (2003)

name two values that are present in a just institution and in just therapy:
co-operation and respect.

2. Cultural studies need to be an integral part of the curricula of systemic therapy and systemic supervision, not seen as separate from general systemic theory. The inability of the supervisors to consider the domain of action as a cultural proposition points at how supervisors see theory and culture as separate entities. These theoretical models are permeated by dominant, hegemonic models of relationships that favour certain types of knowledge and some groups over others, which need to be identified as part of the learning process. Otherwise, systemic theory echoes the same prejudice - that culture is only located in minority groups. I would argue that all theoretical models are also cultural theoretical models.

Castro Romero and Afuape (2016) have illustrated some of their own experiences when teaching 'liberation psychology', by introducing roundtables where discussion about what Western psychology can learn from Latin American communities, examining how education and knowledge are not neutral, but culturally, socially and politically situated. Their approach may offer a possibility to bring forward minority views already present in the systemic field.

3. This position where all theories are cultural theories may facilitate the emergence of theoretical models from different cultural realities. This may facilitate the co-creation of multiple models where we can offer different positions for supervisors in line with their ethnicity, gender, class and age.
4. Supervision of the supervision is a vital space for supervisors. It appears that supervision provides them with an opportunity to observe and experience how theory is performed in the behaviour of their own supervisors. Supervision is a model for experiencing the openness of intersectional conversations and power analysis. The analysis of the power in these relationships may give permission to supervisors to do this in a safe way with their own supervisees. I would like to invite supervisors of supervisors to integrate these conversations about power analysis, as they

are the people on whom supervisors model their own behaviour as figures of authority. Supervisors may acknowledge their power within the supervisory relationship as in setting the supervision agenda or evaluation criteria, and also from the power that their social markers give them such as ethnicity, gender and class (Porter, 2013).

5. More research should be conducted to explore the power differential between the dyads of BME supervisors and white British supervisees, BME women supervisors and white supervisees, and BME therapists and white families. In this way, these power differentials can be spoken about more openly in the supervisory relationship.

Chapter 9. Suggestions

A helpful idea to consider in the field of systemic therapy and systemic supervision would be the formation of the kind of race/ethnicity affinity groups or caucuses that have been successful in other institutions as a way to generate antiracist policies and confront institutional racism (Blitz & Khol, 2012). Dee Watts-Jones (2002) suggests that such affinity groups for black therapists can offer the possibility of addressing, discussing and potentially resolving their internalised racism; she calls these groups ‘sanctuaries’ as they are spaces where people can challenge their oppression safely. I would suggest that these affinity groups should also be available for different intersectional positions of supervisors. In other words, groups where white males, white women, BME men and BME women can explore their specific intersectionality in relation to gender, ethnicity and class; a space where supervisors could discuss and experience their feelings of shame, guilt and pain around privilege and oppression, as suggested by Garcia-Coll et al (1993). I propose that these groups should be part of the systemic therapy and supervision courses. The expectation would be that these groups could be a continuous part of therapists’ and supervisors’ professional development. .

In terms of supervision practice, I suggest that the process of supervision should begin by exploring how to make the incorporation of the power dynamic between supervisor and supervisee explicit on a cultural level, and how these issues would be addressed in the future. This is a process that develops over time, so trust and safety issues are paramount. This may take a step closer towards Messent’s (2016) and Pendry’s (2016) invitation to address cultural issues in systemic supervision. BME and white supervisors have a responsibility to name these contextual constructions of authority in the supervisory relationship.

At the theoretical level, I would like to invite supervisors to investigate the cultural background of the theoretical models in use in supervision through the lens of relational intersectionality. Supervision is always a cultural encounter (Porter, 2013) where this intersectionality is experienced by supervisees and supervisors. Each theoretical model is part of social and historical relations that will position clients, therapists and supervisors according to particular discursive practices.

At the research level, I would like to suggest that systemic research should be open to exploring these cultural issues as an integral part of any type of research, like any kind of relationship explored in research which has these cultural prototypes; for example, when researching suicide, what are the cultural discourses available to understanding **these** issues for a client within the specific context of race/ethnicity or gender? These markers generate meanings which shape individual and group experiences. Dominant discourses and lived experiences are intertwined and inhabit one another.

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Appendices

Appendix 1

The Deeds of the Divine Augustus

By Augustus

Written 14 A.C.E.

Translated by Thomas Bushnell, BSG

A copy below of the deeds of the divine Augustus, by which he subjected the whole wide earth to the rule of the Roman people, and of the money which he spent for the state and Roman people, inscribed on two bronze pillars, which are set up in Rome.

1. In my nineteenth year, on my own initiative and at my own expense, I raised an army with which I set free the state, which was oppressed by the domination of a faction. For that reason, the senate enrolled me in its order by laudatory resolutions, when Gaius Pansa and Aulus Hirtius were consuls (43 B.C.E.), assigning me the place of a consul in the giving of opinions, and gave me the imperium. With me as

propraetor, it ordered me, together with the consuls, to take care lest any detriment befall the state. But the people made me consul in the same year, when the consuls each perished in battle, and they made me a triumvir for the settling of the state.

2. I drove the men who slaughtered my father into exile with a legal order, punishing their crime, and afterwards, when they waged war on the state, I conquered them in two battles.

3. I often waged war, civil and foreign, on the earth and sea, in the whole wide world, and as victor I spared all the citizens who sought pardon. As for foreign nations, those which I was able to safely forgive, I preferred to preserve than to destroy. About five hundred thousand Roman citizens were sworn to me. I led something more than three hundred thousand of them into colonies and I returned them to their cities, after their stipend had been earned, and I assigned all of them fields or gave them money for their military service. I captured six hundred ships in addition to those smaller than triremes.

4. Twice I triumphed with an ovation, and three times I enjoyed a curule triumph and twenty one times I was named emperor. When the senate decreed more triumphs for me, I sat out from all of them. I placed the laurel from the fasces in the Capitol, when the vows which I pronounced in each war had been fulfilled. On account of the things successfully done by me and through my officers, under my auspices, on earth and sea, the senate decreed fifty-five times that there be sacrifices to the immortal gods. Moreover there were 890 days on which the senate decreed there would be sacrifices. In my triumphs kings and nine children of kings were led before my chariot. I had been consul thirteen times, when I wrote this, and I was in the thirty-seventh year of tribunician power (14 A.C.E.).

5. When the dictatorship was offered to me, both in my presence and my absence, by the people and senate, when Marcus Marcellus and Lucius Arruntius were consuls (22 B.C.E.), I did not accept it. I did not evade the curatorship of grain in the height of the food shortage, which I so arranged that within a few days I freed the entire city from the present fear and danger by my own expense and administration. When the annual and perpetual consulship was then again offered to me, I did not accept it.

6. When Marcus Vinicius and Quintus Lucretius were consuls (19 B.C.E.), then again when Publius Lentulus and Gnaeus Lentulus were (18 B.C.E.), and third when Paullus Fabius Maximus and Quintus

Tubero were (11 B.C.E.), although the senate and Roman people consented that I alone be made curator of the laws and customs with the highest power, I received no magistracy offered contrary to the customs of the ancestors. What the senate then wanted to accomplish through me, I did through tribunician power, and five times on my own accord I both requested and received from the senate a colleague in such power.

7. I was triumvir for the settling of the state for ten continuous years. I was first of the senate up to that day on which I wrote this, for forty years. I was high priest, augur, one of the Fifteen for the performance of rites, one of the Seven of the sacred feasts, brother of Arvis, fellow of Titus, and Fetial.

8. When I was consul the fifth time (29 B.C.E.), I increased the number of patricians by order of the people and senate. I read the roll of the senate three times, and in my sixth consulate (28 B.C.E.) I made a census of the people with Marcus Agrippa as my colleague. I conducted a lustrum, after a forty-one year gap, in which lustrum were counted 4,063,000 heads of Roman citizens. Then again, with consular imperium I conducted a lustrum alone when Gaius Censorinus and Gaius Asinius were consuls (8 B.C.E.), in which lustrum were counted 4,233,000 heads of Roman citizens. And the third time, with consular imperium, I conducted a lustrum with my son Tiberius Caesar as colleague, when Sextus Pompeius and Sextus Appuleius were consuls (14 A.C.E.), in which lustrum were counted 4,937,000 of the heads of Roman citizens. By new laws passed with my sponsorship, I restored many traditions of the ancestors, which were falling into disuse in our age, and myself I handed on precedents of many things to be imitated in later generations.

9. The senate decreed that vows be undertaken for my health by the consuls and priests every fifth year. In fulfilment of these vows they often celebrated games for my life; several times the four highest colleges of priests, several times the consuls. Also both privately and as a city all the citizens unanimously and continuously prayed at all the shrines for my health.

10. By a senate decree my name was included in the Saliar Hymn, and it was sanctified by a law, both that I would be sacrosanct forever, and that, as long as I would live, the tribunician power would be mine. I was unwilling to be high priest in the place of my living colleague; when the people offered me that priesthood which my father had, I refused it. And I received that priesthood, after several years, with the death of him who had occupied it since the opportunity of the civil disturbance, with

a multitude flocking together out of all Italy to my election, so many as had never before been in Rome, when Publius Sulpicius and Gaius Valgius were consuls (12 B.C.E.).

11. The senate consecrated the altar of Fortune the Bringer-back before the temples of Honor and Virtue at the Campanian gate for my return, on which it ordered the priests and Vestal virgins to offer yearly sacrifices on the day when I had returned to the city from Syria (when Quintus Lucretius and Marcus Vinicius were consuls (19 Bc)), and it named that day Augustalia after my cognomen.

12. By the authority of the senate, a part of the praetors and tribunes of the plebs, with consul Quintus Lucretius and the leading men, was sent to meet me in Campania, which honor had been decreed for no one but me until that time. When I returned to Rome from Spain and Gaul, having successfully accomplished matters in those provinces, when Tiberius Nero and Publius Quinctilius were consuls (13 B.C.E.), the senate voted to consecrate the altar of August Peace in the field of Mars for my return, on which it ordered the magistrates and priests and Vestal virgins to offer annual sacrifices.

13. Our ancestors wanted Janus Quirinus to be closed when throughout the all the rule of the Roman people, by land and sea, peace had been secured through victory. Although before my birth it had been closed twice in all in recorded memory from the founding of the city, the senate voted three times in my principate that it be closed.

14. When my sons Gaius and Lucius Caesar, whom fortune stole from me as youths, were fourteen, the senate and Roman people made them consuls-designate on behalf of my honor, so that they would enter that magistracy after five years, and the senate decreed that on that day when they were led into the forum they would be included in public councils. Moreover the Roman knights together named each of them first of the youth and gave them shields and spears.

15. I paid to the Roman plebs, HS 300 per man from my father's will and in my own name gave HS 400 from the spoils of war when I was consul for the fifth time (29 B.C.E.); furthermore I again paid out a public gift of HS 400 per man, in my tenth consulate (24 B.C.E.), from my own patrimony; and, when consul for the eleventh time (23 B.C.E.), twelve doles of grain personally bought were measured out; and in my twelfth year of tribunician power (12-11 B.C.E.) I gave HS 400 per man for the third time. And these public gifts of mine never reached fewer than 250,000 men. In my eighteenth year of tribunician power, as

consul for the twelfth time (5 B.C.E.), I gave to 320,000 plebs of the city HS 240 per man. And, when consul the fifth time (29 B.C.E.), I gave from my war-spoils to colonies of my soldiers each HS 1000 per man; about 120,000 men in the colonies received this triumphal public gift. Consul for the thirteenth time (2 B.C.E.), I gave HS 240 to the plebs who then received the public grain; they were a few more than 200,000.

16. I paid the towns money for the fields which I had assigned to soldiers in my fourth consulate (30 B.C.E.) and then when Marcus Crassus and Gnaeus Lentulus Augur were consuls (14 B.C.E.); the sum was about HS 600,000,000 which I paid out for Italian estates, and about HS 260,000,000 which I paid for provincial fields. I was first and alone who did this among all who founded military colonies in Italy or the provinces according to the memory of my age. And afterwards, when Tiberius Nero and Gnaeus Piso were consuls (7 B.C.E.), and likewise when Gaius Antistius and Decius Laelius were consuls (6 B.C.E.), and when Gaius Calvisius and Lucius Passienus were consuls (4 B.C.E.), and when Lucius Lentulus and Marcus Messalla were consuls (3 B.C.E.), and when Lucius Caninius and Quintus Fabricius were consuls (2 B.C.E.), I paid out rewards in cash to the soldiers whom I had led into their towns when their service was completed, and in this venture I spent about HS 400,000,000.

17. Four times I helped the senatorial treasury with my money, so that I offered HS 150,000,000 to those who were in charge of the treasury. And when Marcus Lepidus and Lucius Arruntius were consuls (6 A.C.E.), I offered HS 170,000,000 from my patrimony to the military treasury, which was founded by my advice and from which rewards were given to soldiers who had served twenty or more times.

18. From that year when Gnaeus and Publius Lentulus were consuls (18 BC), when the taxes fell short, I gave out contributions of grain and money from my granary and patrimony, sometimes to 100,000 men, sometimes to many more.

19. I built the senate-house and the Chalcidicum which adjoins it and the temple of Apollo on the Palatine with porticos, the temple of divine Julius, the Lupercal, the portico at the Flaminian circus, which I allowed to be called by the name Octavian, after he who had earlier built in the same place, the state box at the great circus, the temple on the Capitoline of Jupiter Subduer and Jupiter Thunderer, the temple of Quirinus, the temples of Minerva and Queen Juno and Jupiter Liberator on the Aventine, the temple of the Lares at the top of the holy street, the

temple of the gods of the Penates on the Velian, the temple of Youth, and the temple of the Great Mother on the Palatine.

20. I rebuilt the Capitol and the theater of Pompey, each work at enormous cost, without any inscription of my name. I rebuilt aqueducts in many places that had decayed with age, and I doubled the capacity of the Marcian aqueduct by sending a new spring into its channel. I completed the Forum of Julius and the basilic which he built between the temple of Castor and the temple of Saturn, works begun and almost finished by my father. When the same basilica was burned with fire I expanded its grounds and I began it under an inscription of the name of my sons, and, if I should not complete it alive, I ordered it to be completed by my heirs. Consul for the sixth time (28 B.C.E.), I rebuilt eighty-two temples of the gods in the city by the authority of the senate, omitting nothing which ought to have been rebuilt at that time. Consul for the seventh time (27 B.C.E.), I rebuilt the Flaminian road from the city to Ariminum and all the bridges except the Mulvian and Minucian.

21. I built the temple of Mars Ultor on private ground and the forum of Augustus from war-spoils. I build the theater at the temple of Apollo on ground largely bought from private owners, under the name of Marcus Marcellus my son-in-law. I consecrated gifts from war-spoils in the Capitol and in the temple of divine Julius, in the temple of Apollo, in the temple of Vesta, and in the temple of Mars Ultor, which cost me about HS 100,000,000. I sent back gold crowns weighing 35,000 to the towns and colonies of Italy, which had been contributed for my triumphs, and later, however many times I was named emperor, I refused gold crowns from the towns and colonies which they equally kindly decreed, and before they had decreed them.

22. Three times I gave shows of gladiators under my name and five times under the name of my sons and grandsons; in these shows about 10,000 men fought. Twice I furnished under my name spectacles of athletes gathered from everywhere, and three times under my grandson's name. I celebrated games under my name four times, and furthermore in the place of other magistrates twenty-three times. As master of the college I celebrated the secular games for the college of the Fifteen, with my colleague Marcus Agrippa, when Gaius Furnius and Gaius Silanus were consuls (17 B.C.E.). Consul for the thirteenth time (2 B.C.E.), I celebrated the first games of Mas, which after that time thereafter in following years, by a senate decree and a law, the consuls were to celebrate. Twenty-six times, under my name or that of

my sons and grandsons, I gave the people hunts of African beasts in the circus, in the open, or in the amphitheater; in them about 3,500 beasts were killed.

23. I gave the people a spectacle of a naval battle, in the place across the Tiber where the grove of the Caesars is now, with the ground excavated in length 1,800 feet, in width 1,200, in which thirty beaked ships, biremes or triremes, but many smaller, fought among themselves; in these ships about 3,000 men fought in addition to the rowers.

24. In the temples of all the cities of the province of Asia, as victor, I replaced the ornaments which he with whom I fought the war had possessed privately after he despoiled the temples. Silver statues of me on foot, on horseback, and standing in a chariot-were erected in about eighty cities, which I myself removed, and from the money I placed golden offerings in the temple of Apollo under my name and of those who paid the honor of the statues to me.

25. I restored peace to the sea from pirates. In that slave war I handed over to their masters for the infliction of punishments about 30,000 captured, who had fled their masters and taken up arms against the state. All Italy swore allegiance to me voluntarily, and demanded me as leader of the war which I won at Actium; the provinces of Gaul, Spain, Africa, Sicily, and Sardinia swore the same allegiance. And those who then fought under my standard were more than 700 senators, among whom 83 were made consuls either before or after, up to the day this was written, and about 170 were made priests.

26. I extended the borders of all the provinces of the Roman people which neighbored nations not subject to our rule. I restored peace to the provinces of Gaul and Spain, likewise Germany, which includes the ocean from Cadiz to the mouth of the river Elbe. I brought peace to the Alps from the region which is near the Adriatic Sea to the Tuscan, with no unjust war waged against any nation. I sailed my ships on the ocean from the mouth of the Rhine to the east region up to the borders of the Cimbri, where no Roman had gone before that time by land or sea, and the Cimbri and the Charydes and the Semnones and the other Germans of the same territory sought by envoys the friendship of me and of the Roman people. By my order and auspices two armies were led at about the same time into Ethiopia and into that part of Arabia which is called Happy, and the troops of each nation of enemies were slaughtered in battle and many towns captured. They penetrated into Ethiopia all the way to the town Nabata, which is near to Meroe; and into Arabia all the way to the border of the Sabaei, advancing to the

town Mariba.

27. I added Egypt to the rule of the Roman people. When Artaxes, king of Greater Armenia, was killed, though I could have made it a province, I preferred, by the example of our elders, to hand over that kingdom to Tigranes, son of king Artavasdes, and grandson of King Tigranes, through Tiberius Nero, who was then my step-son. And the same nation, after revolting and rebelling, and subdued through my son Gaius, I handed over to be ruled by King Ariobarzanes son of Artabazus, King of the Medes, and after his death, to his son Artavasdes; and when he was killed, I sent Tigranes, who came from the royal clan of the Armenians, into that rule. I recovered all the provinces which lie across the Adriatic to the east and Cyrene, with kings now possessing them in large part, and Sicily and Sardina, which had been occupied earlier in the slave war.

28. I founded colonies of soldiers in Africa, Sicily, Macedonia, each Spain, Greece, Asia, Syria, Narbonian Gaul, and Pisidia, and furthermore had twenty-eight colonies founded in Italy under my authority, which were very populous and crowded while I lived.

29. I recovered from Spain, Gaul, and Dalmatia the many military standards lost through other leaders, after defeating the enemies. I compelled the Parthians to return to me the spoils and standards of three Roman armies, and as suppliants to seek the friendship of the Roman people. Furthermore I placed those standards in the sanctuary of the temple of Mars Ultor.

30. As for the tribes of the Pannonians, before my principate no army of the Roman people had entered their land. When they were conquered through Tiberius Nero, who was then my step-son and emissary, I subjected them to the rule of the Roman people and extended the borders of Illyricum to the shores of the river Danube. On the near side of it the army of the Dacians was conquered and overcome under my auspices, and then my army, led across the Danube, forced the tribes of the Dacians to bear the rule of the Roman people.

31. Emissaries from the Indian kings were often sent to me, which had not been seen before that time by any Roman leader. The Bastarnae, the Scythians, and the Sarmatians, who are on this side of the river Don and the kings further away, and the kings of the Albanians, of the Iberians, and of the Medes, sought our friendship through emissaries.

32. To me were sent supplications by kings: of the

Parthians, Tiridates and later Phrates son of king Phrates, of the Medes, Artavasdes, of the Adiabeni, Artaxares, of the Britons, Dumnobellaunus and Tincommius, of the Sugambri, Maelo, of the Marcomanian Suebi (...) (-)rus. King Phrates of the Parthians, son of Orodes, sent all his sons and grandsons into Italy to me, though defeated in no war, but seeking our friendship through the pledges of his children. And in my principate many other peoples experienced the faith of the Roman people, of whom nothing had previously existed of embassies or interchange of friendship with the Roman people.

33. The nations of the Parthians and Medes received from me the first kings of those nations which they sought by emissaries: the Parthians, Vonones son of king Phrates, grandson of king Orodes, the Medes, Ariobarzanes, son of king Artavasdes, grandson of king Aiobarzanes.

34. In my sixth and seventh consulates (28-27 B.C.E.), after putting out the civil war, having obtained all things by universal consent, I handed over the state from my power to the dominion of the senate and Roman people. And for this merit of mine, by a senate decree, I was called Augustus and the doors of my temple were publicly clothed with laurel and a civic crown was fixed over my door and a gold shield placed in the Julian senate-house, and the inscription of that shield testified to the virtue, mercy, justice, and piety, for which the senate and Roman people gave it to me. After that time, I exceeded all in influence, but I had no greater power than the others who were colleagues with me in each magistracy.

35. When I administered my thirteenth consulate (2 B.C.E.), the senate and Equestrian order and Roman people all called me father of the country, and voted that the same be inscribed in the vestibule of my temple, in the Julian senate-house, and in the forum of Augustus under the chariot which had been placed there for me by a decision of the senate. When I wrote this I was seventy-six years old.

Appendix

Written after Augustus' death.

1. All the expenditures which he gave either into the treasury or to the Roman plebs or to discharged soldiers: HS 2,400,000,000.
2. The works he built: the temples of Mars, of Jupiter Subduer and Thunderer, of Apollo, of divine Julius, of Minerva, of Queen Juno, of

Jupiter Liberator, of the Lares, of the gods of the Penates, of Youth, and of the Great Mother, the Lupercal, the state box at the circus, the senate-house with the Chalcidicum, the forum of Augustus, the Julian basilica, the theater of Marcellus, the Octavian portico, and the grove of the Caesars across the Tiber.

3. He rebuilt the Capitol and holy temples numbering eighty-two, the theater of Pompey, waterways, and the Flaminian road.

4. The sum expended on theatrical spectacles and gladatorial games and athletes and hunts and mock naval battles and money given to colonies, cities, and towns destroyed by earthquake and fire or per man to friends and senators, whom he raised to the senate rating: innumerable.

THE END

Appendix 2:Semi-structured Interview

Age.....

Gender.....

Ethnicity.....

1. How would you describe your experiences of supervision?
2. Can you give me some examples of these experiences?
3. How important is the supervisory relationship for you?

4. In your opinion, what aspects are the most relevant in achieving a satisfactory supervisory relationship in general?
5. How have you developed these aspects?
6. What has enabled you to become an effective supervisor?
7. Do you believe that ethnicity may be influencing the supervisory relationship?
8. If so, how has your ethnicity influenced your supervisory relationship?
How have you managed this?
9. What do you think are the issues around authority for supervisors in general? And for supervisors of colour in particular?
10. What are the main challenges for a supervisor of colour to take authority?
11. What has helped you to overcome these challenges?
12. If I were asking your supervisees these questions about you, what would they say about you as a supervisor and you asserting authority?
13. What challenges have been visible for them?
14. What do you think a training programme should include to address these issues?

Appendix 3: Letter of Information

Dear Colleague,

I am writing to ask for your participation in this study that aims to look at the different dilemmas that black or coloured supervisors encounter when working with white supervisees. I am a Chilean Family Therapist and have found that there is very little literature written on this subject, especially from the UK. My hope is that this research will allow us to reflect on the self of a supervisor of colour as well as identifying those common landscapes shared by white supervisors.

This is a qualitative study which means that I am interested in your views, beliefs and values of your position as a coloured or black supervisor working with white

British supervisees. The method to gather this information is a semi-structured interview that will last between 1-1.5 hours. Your personal information will be made anonymous in order to protect your confidentiality.

If you are willing to participate in this study, please contact me at monica.roman@ntlworld.com or call me (07792915886) to arrange a convenient time to meet. If you would like to discuss this further, please contact me and I will be happy to answer any queries that you may have.

If you are interested, I will give you a written summary with the outcomes of the study once the research is complete.

Looking forward to hearing from you

Yours sincerely

Monica Roman

Appendix 4: NRES London Ethical Approval Letter

East London and the City Research Ethics Committee 1

Room 24, 2nd Floor

Burdett House

Mile End Hospital

Bancroft Road

London

E1 4DG

Mrs Monica Roman-Morales

The Orchard Centre

William Macleod Way

Southampton

SO16 4XE

Dear Mrs Roman-Morales

Study Title: **An exploration of how Family Therapy Supervisors construct authority in the supervisory relationship: Dilemmas and Struggles**

REC reference number: **09/H0703/85**

Thank you for your letter of 11 November 2009, responding to the Committee's request for further information on the above research and submitting revised documentation.

The further information has been considered on behalf of the Committee by the Chair.

Confirmation of ethical opinion

On behalf of the Committee, I am pleased to confirm a favourable ethical opinion for the above research on the basis described in the application form, protocol and supporting documentation as revised, subject to the conditions specified below.

Ethical review of research sites

The favourable opinion applies to all NHS sites taking part in the study, subject to management permission being obtained from the NHS/HSC R&D office prior to the start of the study (see “Conditions of the favourable opinion” below).

Conditions of the favourable opinion

The favourable opinion is subject to the following conditions being met prior to the start of the study.

Management permission or approval must be obtained from each host organisation prior to the start of the study at the site concerned.

For NHS research sites only, management permission for research (“R&D approval”) should be obtained from the relevant care organisation(s) in accordance with NHS research governance arrangements. Guidance on applying for NHS permission for research is available in the Integrated Research Application System or at <http://www.rdforum.nhs.uk>. *Where the only involvement of the NHS organisation is as a Participant Identification Centre, management permission for research is not required but the R&D office should be notified of the study. Guidance should be sought from the R&D office where necessary.*

Sponsors are not required to notify the Committee of approvals from host organisations.

9.1.1.1.1.1

9.1.1.1.1.2 **It is the responsibility of the sponsor to ensure that all the conditions are complied with before the start of the study or its initiation at a particular site (as applicable).**

Approved documents

The final list of documents reviewed and approved by the Committee is as follows:

<i>Document</i>	<i>Version</i>	<i>Date</i>	
CV - Charlotte Burck			
CV - Monica Roman Morales			
Research Proposal	1.0		
Covering Letter		01 April 2009	
REC application			
Peer Review			
Participant Consent Form	1		
Participant Information Sheet	1		

Letter of invitation to participant	1		
Email attaching sponsor& indemnity letter		11 November 2009	
Fax attaching Peer Review		11 November 2009	
Email attaching amended research protocol		19 October 2009	
Response to Request for Further Information			

Statement of compliance

The Committee is constituted in accordance with the Governance Arrangements for Research Ethics Committees (July 2001) and complies fully with the Standard Operating Procedures for Research Ethics Committees in the UK.

After ethical review

Now that you have completed the application process please visit the National Research Ethics Service website > After Review

You are invited to give your view of the service that you have received from the National Research Ethics Service and the application procedure. If you wish to make your views known please use the feedback form available on the website.

The attached document “*After ethical review – guidance for researchers*” gives detailed guidance on reporting requirements for studies with a favourable opinion, including:

- Notifying substantial amendments
- Adding new sites and investigators
- Progress and safety reports
- Notifying the end of the study

The NRES website also provides guidance on these topics, which is updated in the light of changes in reporting requirements or procedures.

We would also like to inform you that we consult regularly with stakeholders to improve our service. If you would like to join our Reference Group please email referencegroup@nres.npsa.nhs.uk.

09/H0703/85

Please quote this number on all correspondence

Yours sincerely

P.P. Senior Research Ethics Administrator

A. T. Tucker BSc(Hons) PhD SRCS

Chairman

East London and The City Research Ethics Committee 1

Enclosures: "After ethical review – guidance for researchers"

Copy to: Dr Charlotte Burck

Appendix 5: CONSENT FORM

Title of the Project:

Name of Researcher: Monica Roman-Morales

Contact Number: 07792915886

Best Time to phone: During Office Hours

Name:

Date:

Signature

Address:

Researcher:

Date:

Signature

Appendix 6: Example of the beginning of coding

Coding White Male London

Paragraph	Code
. Supervision has different contexts.	I think my supervisory role is different in a training context than it would be in a work context, or even in a private supervision context. They are all different

<p>So the differences are that... I think in a... If we start with training, that the role and responsibility is defined a bit by the aims and outcomes of the course for the students.</p>	<p>Supervision defined by roles and responsibilities</p>
<p>So I think within that there is a lot of scope on therapy trainings for an individual, [clears throat] style of supervision. But at the same time, there are some baselines that people need to achieve in terms of competencies to be able to practice.</p>	<p>Having some baselines when it is supervision in a training context</p>
<p>I don't probably need to go through those, but they would range from being able to conduct an interview based on systemic principles and using systemic-style questioning and [clears throat] delivering interventions that attempt to have some kind of impact either on the way a family functions or the way a family communicates in line with what a client's view is, about what they'd like to be different, how they'd like their family relationships to develop or change.</p>	<p>Competences for Supervision in training</p>
<p>That's what you are looking for. There's a different power relationship there, because you'll put power then... if power is... because you talked about power before.</p>	<p>Power as somehow present in different ways</p>

<p>I think it's about the responsibility to the course which has, as its principles, to train the best possible systemic practitioners, to be able to lead the course and help clients in a whole range of ways that's safe, effective, views on systemic ideas, act as a change agent. All those things is what the course wants you to do. So that's one context.</p>	<p>Power as responsibility</p>
<p>I think in a work place as a supervisor, I think again you are defined by the organisation. The organisation has an idea about your roles and responsibilities. And they would be about ensuring that clinical work is conducted along particular competencies, it attends to risk,</p>	<p>Supervision in the context of work – defined by roles and responsibilities of the organisation</p>
<p>it attends to risk, it looks to meet some kind of goals and outcomes, it's time limited.</p>	<p>Supervision competences in the work place</p>
<p>And within that, supervision would have a role to, I don't know, untangle dilemmas or think with the supervisee about how to meet some of the aspects of change that the family are coming with.</p>	<p>Roles of supervision in the work place</p>
<p>But also it might be slightly different. Well, it's not entirely different to a training context, but you are governed by a responsibility to, in a child mental health service</p>	<p>Some similarities between the context of training and the work place</p>

<p>which I work, to the child. So a parent might define what the problem is, but you do have some responsibility to look out for the wellbeing and positive developmental stages of a child, in addition to look out for risk, protect their welfare.</p>	
<p>So, as a supervisor, you have to be thinking not only how can the family change but also are we holding in mind the needs of the client group, which is children.</p>	<p>General responsibilities for supervision</p>
<p>Yes. I mean, it's slightly different because, for example, where I train, we have a very mixed demographic, so we sometimes get couples, we get older families, so grown-up children wanting to work and things, and then we might have younger children. So you may have many more adults as part of the whole cohort.</p>	<p>Differences between training: mixed clients</p>

<p>It's more varied. And I think that the vulnerabilities are slightly different when you are working just with adults because you assume competence, give it competence for the adults. They know what they are coming for. Sometimes, when children are brought for therapy, we have a responsibility within the organisation to protect their interest. Even though the family may define this is the problem, actually, you know, you have to be thinking in a number of different ways.</p>	<p>Differences in clients and the responsibility in supervision, adult competence</p>
<p>And then in private supervision I think you are fairly free because you then are... I use more of a consultant model. I'm not clinically responsible for that work, but I consult to somebody who has a line manager or somebody that they report to within the organisation.</p>	<p>Private supervision as a consultant model v clinical responsibility</p>
<p>But I consult to them to offer different ideas in relation to that. So it is very organised by the context.</p>	<p>Supervision organised by its context.</p>

<p>Okay. Yes, I mean, we can... Yes, it's interesting, because I think the authority that you have is granted to you through the responsibility to the organisation.</p>	<p>Authority defined by the personal responsibility to the organisation</p>
<p>Exactly. Yes. So I think certainly in the training context, for me, it's about being aware of what the course is looking for at different points in the trainee's development and then using your authority where you may think, actually, there are aspects of the learning which I think this student is not attending to, or, if I gave you an example, it may be that as an organisation and as a developing therapist, very clear that you point out the nature of confidentiality. And if a student routinely didn't point out confidentiality,</p>	<p>Authority is defined by the responsibilities of the organisation</p>
<p>I think I would have the authority to say, 'If you don't do this for your next two or three cases, that will be something that will go against you in your assessment. You really do need to be emphasising confidentiality as part of, you know.' So I think it's then that you</p>	<p>Being called into your authority by the organisation</p>

<p>get called into your authority, real authority, I think.</p>	
<p>Well, I think that real authority in that you are probably saying, ‘Look, I have a responsibility to the organisation to ensure that when you leave here that...’ for example, ‘If you have said to a client we will not discuss you in other contexts, or that we won’t show this information, that you have a responsibility to do that.</p>	<p>Real authority as responsibility given to you</p>
<p>Well, I think that real authority in that you are probably saying, ‘Look, I have a responsibility to the organisation to ensure that when you leave here that...’ for example, ‘If you have said to a client we will not discuss you in other contexts, or that we won’t show this information, that you have a responsibility to do that. And if I come into a kitchen and find that you are talking about a client with other people, I feel I have the authority to say that’s not acceptable. What you have said to the client is not what the training course endorses. It needs to stop, you know.’ And I think that’s what I would say is authority.</p>	<p>Authority as being endorsed</p>
<p>And then you would say that, if someone said, ‘Well, I disagree,’ and so, well, okay. It’s a whole power thing, you know, where I would</p>	<p>Power is vested in the requirement of the course</p>

<p>say my power is vested in, you know. This is not something I'm choosing for myself; it's a course requirement. My authority comes from the fact that I feel I'm doing what the course expects me to do. And if the course changes then I haven't got the authority to ask you this. [Laughter].</p>	
<p>I think in some ways I have a similar view that the authority comes. And what I mean by that, again, I think I would... [Pause] Probably I would define authority quite narrowly there in terms of that there would be certain... what would you call them? The kind of mandated standards around confidentiality, note-keeping, protection of case material, possibly being prepared for supervision might be an area of authority, safeguarding, risk assessment, that I feel that as a supervisor the organisation expects me to hold responsibility for. And because it does, I would use my authority.</p>	<p>Authority defined by the mandated standards</p>
<p>I feel that as a supervisor the organisation expects me to hold responsibility for. And because it does, I would use my authority. Or I think I have some authority of the organisation. So that I would then feel that</p>	<p>Authority as holding responsibility</p> <p>Authority and child Protections</p>

<p>if someone said... you know, there was a child protection issue but I don't know whether to refer. And if my judgement is, actually, this child could be at risk, you really need to take advice on this from this person. That if it wasn't done, I would have the authority to go back and say, 'This really needs to be done. And if you don't accept that this needs to be done from our conversation, then I need to take it to the next level, a person who has given me the authority,' or assumed authority. And maybe I'm wrong, but that's how I understand it.</p>	
<p>I think the authority is completely different in there. I wouldn't define what I do in that context as using my authority. I think the classic would be that we have an agreement that there I'm paid, and that the only authority I have is possibly saying, 'Look, if you are not paying for these sessions, which has been jointly contracted and you agree to pay that, then my authority is we just stop.'</p>	<p>Private work and not using authority except for the contract</p>
<p>I think in reality that... because you are assessing people on a training course, everyone's awareness of authority is more obvious in a training context. I don't think it means you necessarily have to exercise</p>	<p>Assessing people is an obvious authority in training</p>

<p>authority more often. I think at work you are not assessing people in the same way</p>	
<p>I think at work you are not assessing people in the same way. I see it as you've got a maintaining function, that you want to ensure that people are... or maintaining or facilitating function, that they are enjoying the work they do and they feel supported, and that where they are challenged in their practice, that they've got somebody who is there to share ideas with. But at the same time, there's a joint responsibility to meet the Trust standards, and if I don't think they are being met, I guess the supervisor bit is that I feel I do have a bit of a responsibility, not to assess, but just to remind that person that they do need to meet what the contracts of employment are.</p>	<p>Authority at work as reminding people that they need to meet their contract-meeting standards</p>
<p>I think in a training context... How would you...? Well, there is a kind of... [Pause] There's a structural context, because I do it in groups. The other contexts we are talking about are individual, by and large. So, because it's group supervision, I think</p>	<p>Supervisory relationship in training done in groups</p>

<p>it's shaped by that in some way because [pause]</p>	
<p>? I think because I try and be very transparent in what I'm saying, is that it's inevitable in a group that there are some things that I think you just need to adjust because of the idea that if you are trying to make... if I'm talking about somebody's session that I've just observed, I will be mindful of ensuring that they get very positive feedback alongside any suggestions for change. I wouldn't want somebody in a group to think I was embarrassed because David said that was a very obvious thing to miss or, you know. I don't know. There's just a way in which a group affects it.</p>	<p>Supervision in groups and the supervisory relationship, avoiding shame.</p>
<p>[Pause] I think that's a bit... I'm not entirely sure what aspects of my personal values... There will be some beliefs there about... and informed by experience about how people have responded to feedback in the past, how I've responded to feedback. So a few, you know, rules for living that I've just noticed - how you can give very positive feedback and just</p>	<p>Rules for living as guiding the performance in the supervision in training context.</p>

<p>say one “negative thing”, and the one thing that people will focus on is the negative. It wouldn’t matter how much positive, they always focus on that.</p>	
<p>Yes, I would. But I think the difference is that because it’s in a group, you have to think quite carefully about how you present that so that the person doesn’t feel shamed in the context of others, whereas they might be able to take it more directly one-to-one. There is that other level of being shamed in the presence of others. Even though that may not be the intention, people do feel that. And again, it’s simple things like people’s reluctance sometimes to share their marks of exams. And you kind of think, well, it’s been done, it is the mark, what’s the issue? But people do feel somehow they may be judged or what-have-you by others or seen competitively in the face of others.</p>	<p>Avoiding shame and keep the standards - tension?</p>

<p>Describe Authority -it? [Long pause] I don't know. That's a bit of a hard question.</p>	<p>Authority as difficult to describe</p>
<p>Well, I think what I'm stumbling over is the idea of authority... I've got it in my head as quite a linear thing, something that I've got, and therefore how would I describe it?</p>	<p>Authority as a linear thing – something that I got</p>
<p>Whereas actually I think it's unique in every case. It's driven a bit by the context.</p>	<p>Authority as being unique, driven by the context</p>
<p>So I would describe... but also a bit relational. So there might be some people where I would use my... where my authority might be expressed in humour.</p>	<p>Authority as relational but back to responsibility</p>
<p>And given that I think that there's something that ought to be done – 'Your case notes aren't up to date,' yes? And for some people I will express that in a, kind of, very gentle, kind of, reminder but letting them know that I really expect this to be done. And maybe some people I'd be very straight.</p>	<p>Authority as reminder of what you ought to do – performed in a gentle way or very straight way</p>

<p>Well, you see, I think that's a... It would be a surprise, because, you know, in the absence... I would start there, because I think on a training course, if your supervisor... we both know that I've got some authority of assessing them, but in a context of where I'm trying to be helpful, is how I define it. But I'm saying, 'You really need to get your case notes up to date.' And if I come back and they are not there, then I'm feeling that I have to increase my degree of authority.</p>	<p>Authority as something gradual that you can increase depending on feedback</p>
<p>Well, I think that's interesting, because I think where that would most exercise me is in relation to child protection, because if a private supervisee comes to me... If I think of an example. When they say a child is being referred to me. 'And what I'm hearing is that there's, you know, he's being hit by his mother, and I've gone to the head of the school. So he's in school. I'm working in a school. A child comes to me, says he's being hit and I go to the head and I tell him. But I'm not sure he's going to do anything. He might just sit on it.' I think there is a bit of a</p>	<p>Authority in safety of the child, Child protection in private practice.</p>

<p>dilemma because I would be saying, mmm, I think you are really... there is something worrying about the fact that you are telling me the head might sit on this. You probably really need to make sure that something happens. This isn't safe.</p>	
<p>What I wouldn't be doing is setting any deadlines. I wouldn't be saying, you know, next time let's put that on supervision because I want to check it's been done.</p>	<p>Setting deadlines is not part of performing authority in private practice</p>
<p>Yes. If the trainee comes back and says, 'Well I don't really understand, I thought I was doing that,' I might, sort of, say, 'Okay, that's fine. We can both watch the tape. We can have a look; have a look at your stuff. But maybe I'm wrong, so let's see next time.' And if it happens again, I'll say, 'You remember the last time we talked about this issue of using closed questions, well I think we had some examples there and I've written them down.' And if they say, 'Oh you are absolutely right,' and, 'yes, I thought about that last time and I'm going to go away and think,' you know, again, I, you</p>	<p>Graduating authority depending on feedback</p>

<p>know. So I'm really... But I might see that they were just about to ask a closed question and then they'd change it, and I'd think, ah, somebody is learning. So that's how they are using the feedback. They are using the feedback. Am I still with your question? Am I still answering your question?</p>	
<p>Yes, I'm trying to think. Generally not. It depends what you are doing. There are different categories, I think, of observation. So if you are drawing attention to the way that they were... the direction of the interview was going... So people might be going in a certain interview, and you might say, 'I thought at that point, just watching the way the session was going, I thought there was actually quite a lot of focus on content, and just by talking to that one person you had excluded some of the others. So it was a bit like in a room of other people you are just having a dialogue and it was about the way they see things, quite context-driven.' They may say, 'Ah yes, but I was just about to move to the</p>	<p>Given directions, instructions, suggestions as having an authority model</p>

<p>others. I was going to do that.’ And you kind of... There’s not much you can say about that. It’s like, ‘Oh okay, then. Fine. So you were going to do that. Fine.’ ‘Yes, I was going to bring the others in in a minute. Yes.’</p>	
<p>So people might be going in a certain interview, and you might say, ‘I thought at that point, just watching the way the session was going, I thought there was actually quite a lot of focus on content, and just by talking to that one person you had excluded some of the others. So it was a bit like in a room of other people you are just having a dialogue and it was about the way they see things, quite context-driven.’ They may say, ‘Ah yes, but I was just about to move to the others. I was going to do that.’ And you kind of... There’s not much you can say about that. It’s like, ‘Oh okay, then. Fine. So you were going to do that. Fine.’ ‘Yes, I was going to bring the others in in a minute. Yes.’</p>	<p>Not always being able to challenge the students in a position of authority</p>

<p>But there are occasions when I can say... for example, I might say, ‘At one point you asked the mother about... You said, ‘Why do you think your husband did that?’’ And I might say, ‘From a systemic point of view, it might have been more useful to ask them to have that conversation, because my view is that it’s less important that you find out why she has those views than the person for whom she has come with, yes?’ And in that case, they don’t normally argue against that because they know what they have done. So it’s a suggestion and they can try it, but they can’t... They wouldn’t say, ‘Yes, yes, I was going to do that,’ because they didn’t do that. This is an idea about how they could do something differently. They didn’t do it.</p>	<p>Bringing new ideas to their practice as a way to show authority – having the knowledge to do something differently from a systemic point of view.</p>
<p>Or if you say, ‘Actually, you said someone was talking and they answered your question, but you looked away, you turned to the other person,’ people generally will say, ‘Oh okay, right I’ll keep an eye on that. I’ll keep an eye on who I look to,’ and what-have-you, because they...</p>	<p>Giving suggestions to the trainee</p>

<p>I think they find it useful. I think it's outside of their consciousness. It might be a non-verbal thing or something that they are just not aware of in their practice.</p>	<p>Bringing ideas to the trainees consciousness showing authority</p> <p>Dispute of ideas with the trainee – when the trainee respond to their authority and when it gets rejected.</p>
<p>So it's not really up for dispute. Whether or not someone was going to do something, yes, we can debate that, but when they've done something, it's very clear that...</p>	<p>Dispute of ideas with the trainee – when the trainee responds to their authority and when it gets rejected?</p>
<p>and if you've got an alternative suggestion, it's not that I would say, 'That's wrong what you did.' I may say, 'You could do it differently,' but they wouldn't dispute that they did it that way. They might say, 'Oh yes, I did it that way for this reason,' but they wouldn't say, 'No.' They wouldn't argue with you. They might just sort of say,</p>	<p>Bringing alternative ideas makes the trainee more receptive- strategies in managing authority</p>

<p>'Okay, fair enough.' But generally, people are receptive.</p>	
<p>I think my age is probably a factor.</p>	<p>Age as a factor that facilitates trainee receptiveness</p>
<p>Well, I think the fact that I am... not in all cases but in most cases, I am older than many of the students, that there might be a recognition, particularly if they are interested in how long I may have worked as a supervisor or been teaching.</p>	<p>Age as having more experience and practice</p>
<p>Yes, okay. So in that way, I think age facilitates because people recognise... I mean, sometimes maybe not, they may think I'm very stuck in what I've done or been doing it too long. But I think the fact that I can say, 'Ah, well I've seen a problem like this before,'...</p>	<p>I have seen this problem before – validate their authority</p>
<p>Yes, it does. No doubt about it. Because if I've got the experience, then I feel more confident, I feel that I've got</p>	<p>Experience affecting his confidence positively.</p>

<p>something to share. I'm not saying it's right, but I'm saying I have seen something similar and I remember this worked very well and it might be something that works for this client.</p>	<p>Sharing knowledge that may help this kind of clients, age will bring some kind of categorisation of clients and therefore something may work in similar ways.</p>
<p>And it also means that when I'm not sure, I don't feel flustered to say...</p>	<p>Age and experience: not getting flustered</p>
<p>I don't have anything to prove because I would say to myself, 'I'm really puzzled by this,' because I feel like I have the experience and I have seen a lot. So I think I'd use age, it helps me. It's one of the graces that is important.</p>	<p>Age: Safe uncertainty – mason</p>
<p>Yes. I'm not sure what... Gender can be both an affordance and a constraint, I think, because sometimes if I'm... at the moment, I've got a supervision group that's all women, and I think what that affords me is being able to think about how a gender or a sexuality issue might be understood from a different gender perspective but also means that I can acknowledge, well, maybe, you know, you would</p>	<p>Gender as a constrain – facilitate curiosity when working with different gender</p>

<p>have a better understanding, or I'm very curious about how you would see this. And I will see it different because I'm a man and I will have come to this, you know. As a father of a daughter it's different to being a mother of a daughter. We need to think about those differences.</p>	
<p>Racially, I don't think I've ever... In my view – others might have a different view – I don't see a link between authority and those aspects of the graces. I don't see a link. I'd actually feel that I would... in terms of... I would defer to somebody who was...</p>	<p>Race as not being part of his authority – power is invisible in this regard</p>
<p>In the group that I've got at the moment there's at least three people who are from different cultural groups to me, and I would be the first to acknowledge that I have to speak from the cultural values of the country and the class that I grew up in, so I wouldn't...</p>	<p>Race as being taken for granted.</p>
<p>I'm not sure. I don't know. [Pause] I think I would try and... I would hope, then, and try, to check for my own taken-for-granted beliefs or</p>	<p>Needing to check when working with minorities</p>

<p>positions that come from things like race, class. I don't know about sexuality as such. Yes, I mean, there may be aspects – religion, you know. I think that I would want to check myself in terms of that.</p>	
<p>I think the others, like age, I feel that... I don't know. I feel that, in some ways, that is... It can be an asset to the process, you know, a taken-for-grantedness, that I've seen more families and I feel more confident in that training setting. Not necessarily in a work setting, I wouldn't say. But in a training setting, I would say, well, I feel much more confident in this setting.</p>	<p>Age is a facilitator in the training context</p>
<p>But I wouldn't feel confident in a group of others of saying, 'Look, I think this is what the cultural issue is here.' I'd be saying, 'Well, I've got some ideas, but I wonder what other ideas people have.' So I'd be much...</p>	<p>Culture as a constraint of bringing some expertise to his supervision, but bringing more curiosity</p>
<p>I think it can, yes. But I think it feels so obvious to me now at one level, is that that if you are from the host</p>	<p>Being part of the host culture and needing to ask for differences</p>

<p>culture, the dominant culture, that I think it, yes, I think in a training context it's very important to acknowledge your differences.</p>	
<p>I'm trying to think about whether there are times where... [Pause] Have I ever said, 'Now, I think your...'? I think the problem would be is if I know a culture, the host culture particularly well, I know that community well, then I would feel that I would bring some authority from experience. I wouldn't feel the same way about a culture that I'm not familiar with, and I wouldn't make the same assumptions.</p>	<p>Knowledge about the host culture contributes to having authority – ethnicity as knowledge rather than power in the relationship by being white</p>
<p>Yes. I think so, yes. If the trainee was working with them and they were saying, 'Well, I'm not quite sure what they meant by this or why they were doing that,' I might say, 'Well, look, I did live in that area for quite a long time, and I do know what's really important to them is the fact that they feel that the population of the white people there is being reduced and that there's a lot of change. I remember that from living there.'</p>	<p>Knowledge about the population that it is familiar to him.</p>

<p>I would never say, ‘Well, I’ve read a paper on Bangladeshi families, therefore this is what’s right.’ I wouldn’t. I’d say, ‘Well, I read a paper on a Bangladeshi family, it was very interesting.’ So I don’t know if anybody else knows more. I tend to be a bit lighter about it.</p>	<p>Being lighter when referring to other culture</p>
<p>I think it’s interesting. [Long pause] I would say that in the private context they would... I’m not sure what they would think about my authority in that context.</p>	<p>Not knowing about his authority in the private context</p>
<p>If I had to guess, I would say they would say, ‘He’s very easy-going, he’s very open, he’s very flexible and very tolerant of my ideas.’ They may say, ‘Sometimes I always know with David if there’s an area where he thinks I should do something.’ Yes. They might say that.</p>	<p>Private context an authority – bringing different way of working</p>
<p>I think in the other two contexts I think they would say, ‘Yes, we know when David feels that I need to do</p>	<p>Bringing ideas of doing things differently- as a performance of authority</p>

<p>something differently or there's an issue.'</p>	
<p>I've no idea. I don't know. I can only talk about my experience of... let's think of the supervisor I had. [Pause] I think there's only one of supervisors I had who it would be less clear what his beliefs were or his authority were. I think with the others they may well be more clear about their authority.</p>	<p>Other supervisors beliefs as less clear – is this related to authority?</p>
<p>I just think... I don't know. To think of examples, it might be the extent to which they ask for feedback from you about what do you agree, does that make sense? I think some of the supervisors that I have had will not necessarily say, 'Well, you know, do you agree with that? Does that fit for you?' They would just say, 'This is what I think.' Not necessarily in a "you must do", but they would just talk from their experience.</p>	<p>Clarity as being able to share their own beliefs rather than by being tentative/curious about the impact of the supervision</p>

<p>I think it's a mix. I think it's evolved over time. I think as I've... [Pause] I think it comes from noticing the feedback from students. I think I was much more tentative when I started out as a supervisor. And I think the feedback from supervisees was they weren't quite sure what I thought about things.</p>	<p>Being tentative not being helpful in supervision – not being clear</p>
<p>I think so. I think there was... I was a bit more cautious about my authority, I had the right... you know, did I have the knowledge? And then I took some risks.</p>	<p>Being cautious about his authority not being helpful</p>
<p>Over time I took some risks to just say, 'This is what I think. This is how I see it, and I think that would be helpful to try. I don't think it's the only way, but I think it would be, for you, it might be helpful to try this.</p>	<p>Taking risks by being more clearer with suggestions</p>
<p>And then getting feedback, it really helps when you are straight. It was really helpful that you said, dar-dar-dar.'</p>	<p>Being straight as being helpful for the trainee</p>

<p>We've had supervisors in the past who I have never really been quite clear what they think, it's very general or it's a bit abstract. 'I really like it when you are specific and say something I can try.' So then, I think through that process, I've thought, oh, so that worked, people liked that, that's what they want, so I'll do some more of that.</p>	<p>Being directive as helpful</p>
<p>No, I don't think it does. I think that in a training situation - and even I've trained as a supervisor as well. I did a systemic training when it was two years - I think that there probably isn't much uniformity, and I don't mean they are all going to be the same, but I think people do it very differently. I'm getting this from the feedback from students.</p>	<p>Training in supervision not bringing that aspect of authority – based more on feedback from the students</p>
<p>What students tell me is... Because we change over. In our institution, you have one year with a supervisor and then it changes to another. So you do hear from the student what they notice about the differences. And I have heard people say, 'Well, I wasn't clear,' or, 'That person wouldn't be direct in what they were saying,'</p>	<p>Feedback of students about the style of different supervisors.</p>

<p>or they wouldn't talk transparently in the group. In the group they wouldn't share their views about what someone did; they would keep it privately and maybe wait until there was an opportunity for an individual tutorial as opposed to doing something.</p>	<p>Talking transparently and directly</p>
<p>So I think people see me as being very transparent and quite brave in that context, saying, well, you know. We all do it... Or open in some way.</p>	<p>Perception by the students as being brave by being direct in the context of supervision</p>
<p>Well, in some ways, what works well for me is if I get good feedback from the students. If the students are saying, 'No, we don't like this,' then I wouldn't do it. But year on year I keep getting encouragement from the students to do more of this.</p>	<p>Following feedback from students</p>
<p>But I don't think that, in answer to your question, I don't think that's mandated. I don't think the way I</p>	<p>Being direct as not being mandated as part of the role</p>

<p>do things and another supervisor in the same organisation does it would be comparable, and I think students comment about that.</p>	
<p>They say, ‘Huh, it’s very different. Very different to what I had last year.’ And that doesn’t mean different good or bad necessarily but they might say it’s very different.</p>	<p>Feedback from students that the style of supervision is different, contradictions as being good?</p>
<p>And last year one of my students did her dissertation on feedback from supervisors to students and the beliefs of supervisors about giving feedback. She said that the - what’s the...- spark or the incentive for that had come from having me as a supervisor and feeling that there was something about the way of giving feedback and giving it in an open and transparent way that she really liked,</p>	<p>Giving feedback open and transparently as something that students really liked</p>
<p>[Redacted]</p>	<p>[Redacted]</p>
<p>and was comparing it to what other students were saying, where they said well they are never quite clear what their supervisor thinks. So</p>	<p>Other supervisors not being clear – not knowing what the supervisor thinks</p>

<p>that led her to want to do a dissertation on it.</p>	
<p>Um [long pause] Well, I don't know whether... No, but it was interesting, as we've gone along, I think... you didn't ask it, but I think quite a lot of what I've been talking about is how do you get feedback.</p>	<p>Feedback from students informing practice and authority</p>
<p>Well, yes. How do you get feedback about your authority? How do you get feedback about the use of graces in your supervision? Because I think as we've gone along I realised that that whole idea of using the feedback you get and then changing your practice according to it and then trying to judge it is quite, certainly important</p>	<p>Using feedback about your authority</p>
<p>Yes. It's only been important for me in what I see as my development and the risk I will take. So I don't know whether people have different views about how they explicitly get feedback on their practice but I think it emerged...</p>	<p>Getting feedback as his own style of performing</p>

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