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Supervision in signed language interpreting: Benefits for the field and practitioners

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Supervision in Signed Language Interpreting:

Benefits for the Field and Practitioners

By

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WE, THE UNDERSIGNED MEMBERS OF THE GRADUATE FACULTY OF WESTERN OREGON UNIVERSITY HAVE EXAMINED THE ENCLOSED

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ABSTRACT

Supervision in Signed Language Interpreting:

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The fields of medicine and mental health have a long history of conducting and

researching case conferencing and supervision; however, to date, there has been no

research into how or if signed language interpreters are participating in supervision and

what benefits they experience as a result. For the purposes of this research, supervision is

defined as an intentional interaction between two or more practitioners, the goal of which

is to engage in reflective practice, ensure quality services for consumers, and support the

wellbeing of the practitioner. The study included survey responses from 113 signed

language interpreters about their experiences attending supervision sessions that use the

demand control schema (DC-S) framework. Results revealed a profile for the type of

practitioner who has participated in supervision. The majority of respondents of the

survey had been involved in an ongoing supervision group that was facilitated in a participatory or co-operative manner. Benefits of supervision revealed from this research can be categorized as enriched learning (formative), increased professional standards and accountability (normative), and support for the wellbeing of the practitioner (restorative). Some of the most frequently cited benefits in these categories included: relationships with colleagues, new perspectives, professional development, more options for responding to work demands, a better understanding of decision-making, and support. These findings indicate that current issues in the areas of education, standards and ethics, and work-related stress for practitioners within the signed language interpreting field may be addressed through the use of professional peer supervision groups. Recommendations include establishing an infrastructure for the provision of professional peer supervision, a requirement of supervision as a component of credentialing interpreters, and further research on supervision.

Keywords: supervision, case conferencing, demand control schema, interpreting, sign language

CHAPTER 1: INTRODUCTION

Background and Theoretical Framework

As the coordinator of a grant-funded, one-year, post-graduate supervision program, I have observed and documented anecdotal evidence from participants that engaging in supervision has numerous benefits for themselves and their work. However, when looking into the literature on the topic of supervision, it is apparent that, to date, there has been no study that investigates what the current state of involvement in supervision is and what the benefits are for practitioners.

Since American Sign Language (ASL) interpreters began to professionalize in the United States in the early 1960s, there has been much discussion about the practice and principles of interpreters in their work with Deaf, Deafblind, and hard-of-hearing consumers (Cokely, 2000). Scholarship in the interpreting field has emphasized the importance of a teleological view of ethics, one that evaluates ethics based on outcomes and results in context (Best, 2016; Calle-Alberdi, 2015; Cokely, 2000; Dean, 2015; Dean & Pollard, 2011). A teleological view of ethics provides a theoretical framework that supports the practice of supervision by asserting that ethical behavior is not defined by a set of rules to be followed; practitioners therefore must continually assess and reflect on their decision-making situated within in the context of each interpreting assignment.

In line with teleological views of ethics is the designation of interpreting as a practice profession, similar to disciplines such as medicine and teaching. A practice profession is one that requires the practitioner to have knowledge and technical skills as

well as to provide services in a dynamic context where they employ minute-to-minute

ethical decision-making skills that have an impact on the consumers and the situation

(Dean & Pollard, 2005, 2011). The designation of interpreting as a practice profession

requires that interpreters not only develop the technical skill of interpreting between two

languages, but they must also continually practice their work with consumers in dynamic

contexts.

The demand control schema (DC-S) provides a way of analyzing and assessing

the work of interpreting that is in line with the designation of interpreting as a practice

profession and a teleological approach to ethics. In developing this schema, Dean and

Pollard (2001) drew on Karasek and Theorell's (1992) work on job-strain and decision-

making latitude. They developed DC-S as a way for interpreters to conceptualize and

evaluate their decision-making in the complex ethical context of interpreting work. The

DC-S framework is used to examine the interplay of demands (salient aspects of the

work) and controls (an interpreter's decisions, characteristics, skills, and knowledge that

they employ in response to demands) within an interpreted context (Dean & Pollard,

2001). The dialogic work analysis allows interpreters to analyze how a chosen control

option impacts consumers and participants in the interpreted setting by identifying

consequences and resulting demands (Dean & Pollard, 2013).

Supervision, also referred to as case conferencing or professional consultation, is

common practice in medical and mental health fields. Bishop and Sweeney (2006)

defined clinical supervision as "a designated interaction between two or more

practitioners within a safe and supportive environment, that enables a continuum of

reflective critical analysis of care, to ensure quality patients services, and the wellbeing of

the practitioner" (as cited in Bishop, 2007, p. 1). Research in mental health and medical fields have shown substantial benefits of supervision for practitioners and the field as a whole, including: a better understanding of and perspective on work place issues, increased self-awareness, improved relationships and support from colleagues, increased job satisfaction, decreased stress, and increased instances of desired outcomes for the client (Brunero & Stein-Parbury, 2008; Gonge & Buus, 2011; Taylor, 2014; Wheeler & Richards, 2007).

Proctor's Three Function Model of Clinical Supervision served as the primary framework for this study. This model categorizes the benefits of supervision into "*formative* – the tasks of learning and facilitating learning, *normative* – the tasks of monitoring, and self-monitoring, standards and ethics, and *restorative* – the tasks of refreshment" (Proctor, 2000, p. 7). This framework will also be applied to analyze current literature in the signed language field and identify current issues in formative, normative, and restorative categories.

Statement of the Problem

Signed language interpreting is a relatively young field, which scholars argue has not yet reached a fully professionalized state (Bontempo, 2013; Witter-Merithew & Johnson, 2004). Research has illuminated issues in the profession in the areas of interpreter education (Bontempo & Napier, 2007; Dean & Pollard, 2001; Smith, Cancel, & Maroney, 2012; Witter-Merithew & Johnson, 2004), ethics, decision-making, and standards (Cokely, 2000; Dean, 2015; Dean & Pollard, 2001, 2005, 2011; Hetherington, 2012; Holcombe, 2014; Judd, 2015), and harmful influences and impacts on the wellbeing of practitioners (Bower, 2015; Ott, 2012; Schwenke, 2015). It is necessary to

develop and investigate practices that may serve to mitigate such issues in the field, support practitioners, and ensure quality interpreting services for consumers.

One such practice employed in other fields is professional supervision. Supervision is required in other practice professions by professional organizations and as a component of licensing (Corey, Haynes, & Moulton, 2014); however, the practice is still in its infancy in the signed language interpreting field. Although supervision sessions are being conducted by signed language interpreters in the United States, the United Kingdom, and Australia (Hetherington, 2012; Judd, 2015; Smith et al., 2012), there is currently no information about how many interpreters are attending supervision, why they participate in sessions, what the characteristics of these supervision sessions are, and what benefits practitioners experience as a result of their participation.

Purpose of the Study

The purpose of this research is to document what is current practice for supervision in the signed language interpreting field and to identify the benefits of supervision as perceived by interpreters who participate in supervision sessions that use the demand control schema as a framework. In this study, the following questions will be investigated:

1. What is current practice for participation in DC-S supervision among signed language interpreters?

2. What are the benefits of participation in DC-S supervision for signed language interpreters?

It is important that all professional development practices are investigated and vetted for their effectiveness and value. If benefits of supervision are not currently

experienced by practitioners, the interpreting profession must make adjustments to the

provision of supervision or look for alternative methods to engage in professional

discussions regarding the work. If practitioners cite benefits that could help improve

issues present in the field, then professional organizations, institutions, and other

practitioners have a justification for the practice and a rationale for expanding the

availably of this form of professional development.

Definition of Terms

*Supervision—*An intentional interaction between two or more practitioners, the goal of

      which is to engage in reflective practice, ensure quality services for consumers,

      and support the wellbeing of the practitioner.

*Demand control schema—*A theoretical construct applied to the signed language

      interpreting field by Dean and Pollard (2001) which asserts that interpreting work

      consists of an interplay between demand and controls. The *dialogic work analysis*

      part of the schema provides a decision-making model that promotes reflective

      practice (Dean & Pollard, 2013).

      Demands—"Requirements of a job, which may include aspects of the

      environment, the actual task being performed, and other factors that "act upon"

      the individual" (Dean & Pollard, 2001, p. 2).

      Controls—"Resources the interpreter has at her or his disposal or a response the

      interpreter offers in light of assignment demands" (Dean & Pollard, 2013, p. 15).

Proctor's Three Functions of Supervision

> "*Formative—*the tasks of learning and facilitating learning,
>
> *Normative—*the tasks of monitoring, and self-monitoring, standards and ethics,
>
> *Restorative—*the tasks of refreshment" (Proctor, 2000, p. 7).

CHAPTER 2: LITERATURE REVIEW

Although there have always been those who have served as interpreters between
signed and spoken languages, the signed language interpreting field began to formally
professionalize in the United States in the early 1960s (Ball, 2013). The United States
was the first place interpreters came together to form a professional organization; due to
this, other countries looked to the United States as a model, with many following similar
paths to professionalization (Cokely, 2000). In the past 50 years, the interpreting field
has come a long way. The establishment of professional organizations, changes to
interpreter education, and the development of policies and standards have had numerous
positive impacts on the field, practitioners, and service users (Ball, 2013). However, the
field is young and research has illuminated issues within the field in regards to interpreter
education (Bontempo & Napier, 2007; Dean & Pollard, 2001; Smith et al., 2012; Witter-
Merithew & Johnson, 2004), ethics, decision-making and standards (Cokely, 2000; Dean,
2015; Dean & Pollard, 2001, 2005, 2011; Hetherington, 2012; Holcombe, 2014; Judd,
2015), and impacts to practitioners (Bower, 2015; Ott, 2012; Schwenke, 2015). The
following literature review includes an overview of these topics and the current state of
signed language interpreting by using Proctor's (2000) *formative*, *normative*, and
restorative framework to categorize issues the field is currently facing. Literature from
the disciplines of signed language interpreting, medicine, and mental health was
examined to determine how these issues can be addressed through the use of supervision.

Normative Issues in Signed Language Interpreting

Proctor (2000) defined *normative* as relating to the tasks of monitoring, and self-monitoring, standards, and ethics. As a new field, signed language interpreting is contending with many normative issues such as deontological approaches to ethics, beliefs about nature of confidentiality, and a lack of networks of practice.

Interpreting ethics. The Registry of Interpreters for the Deaf was established in the United States in 1964 (Ball, 2013). After establishing this new national certifying body and professional organization, members developed the first professional code of ethics (Ball, 2013). This code, along with a shift in beliefs away from a model of the interpreter as helper, operationalized the machine or conduit metaphor of interpreting. In applying the conduit metaphor, interpreters denied that their presence had any effect on the situation, did not accept responsibility for facilitating communication, and were not concerned with the impact of the interpreted message (Humphrey & Alcorn, 2001). The conduit metaphor provided guidance on how an interpreter should act and instilled deeply held beliefs about what type of profession interpreting is. This model also held the underlying assumption that interpreting was a technical profession, meaning all that was required to be an effective interpreter was knowledge of two languages and technical interpretation skills (Dean & Pollard, 2005).

In addition to the conceptualization of the interpreter as a conduit and technical professional, there has also been a prevailing deontological view of interpreting ethics. Cokely (2000) described that "deontological approaches to ethics hold that certain acts or behaviors are inherently wrong or unacceptable and thus are always prohibited" (p. 11). Scholars maintain that the Registry of Interpreters for the Deaf Code of Ethics and

normative messages within the field promoted a deontological view of ethics, prescribing what decisions interpreters should make and when behaviors were deemed ethical (Cokely, 2000; Dean, 2015; Dean & Pollard, 2011). A rule-based deontological view of ethics does not allow for exceptions and cannot account for real-world complexities inherent in the facilitation of communication and in working with people (Cokely, 2000; Dean & Pollard, 2005).

Scholars in the interpreting field have been pushing for a shift away from these historical approaches to ethics and toward a more context-based frame for ethical decision-making. Researchers propose a teleological approach to interpreting ethics, one that evaluates ethics based on outcomes and results in context, as opposed to a prescribed deontological rule-based approach (Cokely, 2000; Dean, 2015; Dean & Pollard, 2011). A teleological approach to ethics allows for interpreter autonomy in decision-making and fosters the development of critical thinking skills by considering the circumstances, participants, and potential impacts (Dean & Pollard, 2005).

Dean and Pollard (2005, 2013) have also called for a change from a technical professional label to that of a practice profession, which aligns the interpreting field with other human service professions such as teaching and nursing. A practice profession is one that requires the practitioner to have knowledge and technical skills and provide services in a dynamic context where they employ minute-to-minute ethical decision-making skills that have an impact on the consumers and the situation (Dean & Pollard, 2005, 2011).

Hall, Holcomb, and Elliott (2016) disagreed with Dean and Pollard's (2005, 2013) assertion that interpreting is a practice profession. Although all authors are in agreement

about the need for practitioner reflection and assessment to improve an interpreter's work

within the interpreting profession, their perspectives differ on approach. Hall et al. (2016)

argued that the practice profession model is another attempt to "reinforce an interpreter-

and academically-centered approach" (p. 8) and instead suggested that interpreters should

reposition themselves to align with Deaf people and Deaf cultural norms. The debate

about the delineation of interpreting as a practice profession is outside the scope of the

research questions selected for this study; however, the fact that there is a debate

emphasizes the conflicting messages interpreters still receive regarding their role,

function, and professional identity.

These conflicting messages support Dean and Pollard's (2005) claim that the

interpreting profession experiences a disconnect between its prevailing rhetoric about

how work is conducted and the actual (de facto) practice of interpreters. They assert that

this disconnect results in deception on behalf of interpreters about their work and

increases work-related stress. They also explain such a gap increases risks for ineffective,

unethical services for consumers, due to lack of accurate information for oversight, and

impedes educators' abilities to adequately prepare interpreting students for the realities of

the profession.

Despite researchers in the field advocating for the delineation of interpreting as a

practice profession, Hetherington (2012) and Holcombe (2014) both found that there is

evidence to suggest practitioners continue to view interpreting as a technical profession.

In her interview of Australian Auslan/English Interpreters Judd (2015) found that some

participant statements still reflected deontological views, but that there were also

statements that suggested some teleological approaches to ethical decision-making in

their work. Dean (2015) found that a cohort of ASL/English interpreters appeared to possess "less advanced ethical reasoning skills than their age and education would suggest" (p. 260) and that their responses showed reasoning patterns that were less developed than other groups such as staff nurses, college students, adults in general. It is evident that deontological approaches to decision-making and views of interpreting as a technical profession are still present in the field despite aims to promote more advanced reasoning and context-based approaches to ethics.

Professional norms of confidentially. The 1979 Registry of Interpreters for the Deaf Code of Ethics, which was in place for 25 years, included a tenet that stated that "Interpreter/Transliterators shall keep all interpreted and assignment related information strictly confidential" (as cited in Cokely, 2000, p. 10). This code provided no language about where practitioners could find professional spaces to discuss their work or if it was even appropriate to have such discussions. The current Code of Professional Conduct, adopted in 2005, states that interpreters "share assignment-related information only on a confidential and 'as-needed' basis (e.g., supervisors, interpreter team members, members of the educational team, hiring entities)" (Registry of Interpreters for the Deaf, 2005). The Registry of Interpreters for the Deaf Code of Professional Conduct and Standard Practice Papers make no mention of supervision, case conferencing, or peer consultation.

Dean and Pollard (2009, 2013) suggested that the profession and interpreters may have fundamentally misunderstood and misapplied the tenet of confidentiality. They stated that other practice professions view confidentiality in keeping with the origin of the word, *to confide,* denoting that confidentiality is something that is actively maintained with other practitioners by sharing necessary information in confidence. Professions with

strict legal requirements to maintain patient confidentiality, such as nursing and counseling, continue to engage in structured professional discussions about their work through supervision (Bowles & Young, 1999; Brunero & Stein-Parbury, 2008; Buus, Angel, Traynor, & Gonge, 2011; Proctor, 2000).

Collegiality and networks of practice. Research in the nursing field has revealed that a lack of collegiality among nurses, manifesting as insufficient communication and teamwork, resulted in missed opportunities for care and has a substantial negative impact on patients (Menard, 2014). Although there has been no research in the interpreting field to date on how the collegiality of interpreters working in teams affects the consumers they serve, this research helps emphasize the importance of communicating about shared work in other practice professions, and it underscores the concept that the practice of maintaining confidentially does not equate to never discussing one's work.

Within the signed language interpreting field, Witter-Merithew and Johnson (2004) emphasized the importance of a professional culture they defined as the "nature of community within the profession as evidenced in the formal and informal networks of practitioners designed to promote and perpetuate a shared mission" (p. 38). They stated that such a culture is an essential component of professionalization and that aspects of this trait are lacking within the signed language interpreting field. Additionally, Dong and Turner (2016) found that, for freelance interpreters, a network of other practitioners is a vital way to gain information and procedural knowledge; however they assert that this network of practice is interrupted by current market conditions and agency polices. They contend that "interpreters' social and collegial needs are largely unmet owing to the fragmented nature of the work" (p. 20).

Although research on how and if interpreters are discussing their work is limited, recent findings show that interpreters are communicating with their colleagues typically in informal and unstructured ways. Zenizo (2013) found that debriefing in VRS settings is typically initiated by interpreters themselves seeking out and speaking with another person. Bower (2015) surveyed practitioners who noted they experienced workplace stress in VRS settings and indicated debriefing as one of the primary ways they would suggest for reducing their stress at work. The lack of research on debriefing and formal spaces to discuss interpreting work could point to a prevailing belief that confidentiality equates to never discussing one's work and that interpreters do not have structured ways to discuss their work or to develop professional networks of practice.

> Dean and Pollard (2013) posited a new approach to confidentiality:
>
> We suggest that the most effective way practitioners can "constantly reexamine those values, principles, and beliefs that underscore and shape the decisions we make and the actions we undertake" is by talking about your work in *structured, validated ways,* with your colleagues. There is only so much examination one can do alone. Multiple perspectives, conveyed via structured dialogue, provide benefits that introspection or "sharing stories" alone cannot. (p. 139)

Palmer (1998) would agree stating that "community can do much to rescue us from ignorance, bias, and self-deception if we are willing to submit our assumptions, our observations, our theories—indeed ourselves—to its scrutiny" (p. 104).

Restorative Issues in Signed Language Interpreting

In addition to normative issues that affect the field as a whole, there are restorative issues that impact the wellbeing and practice of individual practitioners.

Restorative tasks as defined by Proctor (2000) relate to the refreshment of the individual. Brunero and Stein-Parbury (2008) defined the restorative practice of supervision as providing collegial and social support. There are issues within the signed language interpreting field that have an impact on the individual practitioner such as occupational stress, burn out, and horizontal violence.

Occupational stress and burnout. Dean and Pollard (2001) asserted that signed language interpreting is a high-demand job; however, interpreters are often constrained in their ability to make decisions. They state that practitioners who experience many pressing demands in their work, but who are limited in their ability to respond, experience increased workplace stress and burnout. There is evidence to suggest the interpreting field has a high prevalence of burnout, similar to other human service professions such as nursing (Bower, 2015; Schwenke, 2015). Burnout can be defined as emotional exhaustion in those whose work requires managing complex interpersonal interactions (Bower, 2015; Schwenke, 2015). Burnout as a result of workplace stress frequently results in practitioners leaving the field or significantly reducing their work hours (Schwenke, 2015).

In looking for a solution to reduce occupational stress and burnout, Bower (2015) asked Video Relay Service interpreters for ideas about how to reduce their stress, the third most frequent response was "more opportunities to team, debrief, and/or more support for colleagues and management" (p. 11). Schwenke (2015) supported this idea by stating, "allowing interpreters to talk about their work is collegial as well as preventative of burnout" (p. 137). Dean and Pollard (2001, 2009, 2013) suggested supervision as a

solution to reduce the impacts of work-related stress and burnout in the signed language interpreting field.

      Horizontal violence. Another source of stress for interpreters may occur from harmful interpersonal interactions among practitioners. Ott (2012) investigated intergenerational conflict between interpreters and found that interpreters tended to trust their own generational group more than other groups, suggesting tension among age cohorts. Ott also found that this intergenerational tension takes place in a larger context of horizontal violence among interpreters. Horizontal violence is defined as "infighting within a group of people who experience stress related to powerlessness" (p. 11). Survey responses also showed that interpreters felt constrained in their decision-making for fear of what other interpreters might think. Although not generalizable to the broader population of signed language interpreters, this research indicates that a possible culture of horizontal violence exists within the interpreting field. Ott (2012) stated, "As literature shows, if horizontal violence is happening, it has serious consequences for individuals, organizations, and the field as a whole" (p. 92). If horizontal violence is present in the field, interpreters may also benefit from practices that develop and support collegiality.

Formative and Restorative Issues in Interpreter Education

      In addition to issues that affect working interpreters, there are also formative concerns in interpreter education that affect interpreters who are preparing for and in the process of entering into the field. Scholars in the interpreting field have cited the presence of a gap between the skills of recent interpreter program graduates and the skills needed for entry-level work and certification (Bontempo & Napier, 2007; Dean & Pollard, 2001; Smith et al., 2012; Walker & Shaw, 2011; Witter-Merithew & Johnson, 2004). Bontempo

and Napier (2007) found significant gaps in the following areas for professional and paraprofessional interpreters: "self-confidence; memory skills; concentration skills; self-monitoring skills; specialist knowledge; objectivity; public speaking skills; self-discipline; world knowledge; contextual knowledge; assertiveness and intuition" (p. 291). Walker and Shaw (2011) contributed research that shows the mean time between graduation from an interpreter training program and certification for signed language interpreters with associate degrees was approximately five years and those with a bachelor's degree achieved certification after approximately three years. Meadows (2013) found that ASL/English interpreters entering into the field found job duties (such as finding enough work, interpersonal interactions with colleagues, and running a business) more stress-inducing than that of interpreting between languages. This research reveals issues with the preparation of entry-level interpreters. Such evidence suggests that these practitioners are in need of additional formative education in order to develop the necessary skills and knowledge of a professional signed language interpreter.

Formative issues regarding the knowledge and skill of recent graduates do not only have negative impacts on the field and consumers but on practitioners themselves. Meadows (2013) found that the rocky transition into the field often results in real-world transition shock among ASL/English interpreters. Such shock resulted in tense relationships with colleagues, the necessity to prove themselves, and feeling that expectations in the field were not met. Dean and Pollard (2013) stated:

> There is presently no substantive infrastructure to support interpreters moving
> from the student phase of their career to the practitioner phase—no ready-made
> network of colleagues, mentors, or supervisors who have been trained in the use

of reflective practice techniques as a means for developing one's decision-making

skills. (p. 143)

Witter-Merithew and Johnson (2004) echoed the sentiment that there is no systematic

way for interpreters to enter into the field and suggested that "one way to close this gap is

through close supervision, support, and guided continuing education" (p. 32).

Although the interpreting field has made great strides over the past 50 years, there

are many issues within the field that need to be addressed in order to move forward.

There is evidence to suggest interpreters continue to be constrained in their autonomy and

decision-making due to a deontological view of ethics and a belief that interpreting is a

technical profession. Concerns persist in interpreter education about "the gap," the work-

readiness of interpreters entering the field, and the impact this has on the interpreters

themselves and the consumers they serve. Working interpreters also may experience a

lack of confidential, professional spaces to discuss their work, increased workplace stress,

burnout, and the possibility of horizontal violence.

It is clear that issues of standards, education, and the wellbeing of practitioners

will be important to address as the field continues to grow; practices should be developed

to support these areas. Scholars have emphasized a need for a structured professional way

to discuss the work of interpreting for the benefit of all stakeholders (Anderson, 2012;

Dean & Pollard, 2001, 2011, 2013; Fritsch Rudser, 1986; Hetherington, 2012; Judd,

2015; Maffia, 2014). It is common for interpreting researchers to draw on literature and

adopt practices from other practice professions (Calle-Alberdi, 2015; Dean & Pollard,

2001; Judd, 2015; Maffia, 2014). The following section includes literature from the

medical and mental health professions about their practice of supervision in order to

combat formative, normative, and restorative issues within their respective fields.

Clinical Supervision in Practice Professions

Clinical supervision in practice professions, sometimes referred to as "helping

professions," originated from the practice of psychotherapy (Corey et al., 2014). In the

last 30 years, clinical supervision has become more commonly practiced and

standardized. Examples of professional groups that have produced standards, guidelines,

and requirements for supervision include: the American Association of Marriage and

Family Therapy, American Counseling Association, National Association of Social

Workers, and American Psychological Association (Corey et al., 2014). Various

regulatory and certifying bodies require clinical supervision as a component of

maintaining professional certifications or licenses, and institutions that employ

practitioners in the mental health fields often require clinical supervision as part of their

job duties (Corey et al., 2014; O'Donoghue, 2015; Proctor, 2000; Wheeler & Richards,

2007).

Terminology for the practice of supervision varies, including case conferencing,

peer guidance, or professional consultation (Dean & Pollard, 2013). Definitions in some

professions indicate a more hierarchical professional relationship, where a more

experienced supervisor provides guidance and support to a novice supervisee about their

work with clients. For example, Corey et al. (2014) defined clinical supervision as:

> A distinct professional practice employing a collaborative relationship that has
>
> both facilitative and evaluative components, that extends over time, which has the
>
> goals of enhancing the professional competence and science-informed practice of

the supervisee, monitoring the quality of services provided, protecting the public, and providing a gatekeeping function for entry into the profession. (p. 3)

Other definitions suggest a peer-group reflective approach that places more emphasis on the benefits to the practitioner. In the field of nursing, Bishop and Sweeney (2006) defined clinical supervision as "a designated interaction between two or more practitioners within a safe and supportive environment, that enables a continuum of reflective critical analysis of care, to ensure quality patients services, and the wellbeing of the practitioner" (as cited in Bishop, 2007, p. 1).

Most definitions indicate that supervision involves a practitioner discussing an aspect or aspects of their work with another professional for the benefit of the person receiving supervision, the clients they serve, and the profession. The medical and mental health fields have been defining and conducting supervision for more than three decades; because of this, there is a large body of research on the effectiveness and benefits of clinical supervision.

Proctor's Functions of Clinical Supervision

Proctor's (1986) model of clinical supervision is widely used for framing and evaluating clinical supervision (Gonge & Buus, 2011). Proctor (2000) held that supervision has three functions: "*formative* – the tasks of learning and facilitating learning, *normative* – the tasks of monitoring, and self-monitoring, standards and ethics, and *restorative* – the tasks of refreshment" (p. 7).

This framework was later incorporated with Proctor's (2000) theoretical orientation of supervision and became known as the Supervision Alliance Model. This model of clinical supervision is the foundation of the internationally validated

Manchester Clinical Scale of Supervision (MCSS) that is currently the most frequently

used instrument to measure the effectiveness of clinical supervision (Gonge & Buus,

2011). Numerous studies have been conducted to investigate the benefits of supervision

for practitioners. Results from these studies provide evidence that Proctor's formative,

normative, and restorative benefits of supervision are all present to varying degrees

(Bowles & Young, 1999; Brunero & Stein-Parbury, 2008; Taylor, 2014).

Brunero and Stein-Parbury (2008) synthesized 22 studies on clinical supervision

in the nursing field and found benefits that corresponded to all three of Proctor's

categories of normative, formative, and restorative functions of supervision. Although all

three categories were present, the restorative benefit of supervision was cited more

frequently. Brunero and Stein-Parbury (2008) stated that this could be due to "the

stressful nature of nursing work and the subsequent need for colleague support" (p. 93).

Table 1

Reported Outcomes Categorized to Proctor's Model

Normative: Professional accountability		
Change of action		
Moral sensitivity	Professional identity	Risk taking
Problem solving	Confirming uniqueness of	Job satisfaction
Commitment affirmation	role	Professional solidarity
Confirmation of actions	Change organization of	Confirmation of nursing
and role	nursing care	interventions
Identify solutions	Improve individual's nursing	Nurse patient cooperation
Improve nursing practice	care	Less patient resistance
Increase understanding of	Critiquing practice	Improve patient
professional issues	Improving practice	relationship
Formative: Skill and knowledge development		
New learning		
Improved knowledge	Competence and creativity	Improved idea time
Professional development	Professional development	Idea support
(deeper knowledge)	Confirming patient	Creativity and innovation

Self confidence	uniqueness	Communication skills
Self-awareness of thoughts and feelings	Gaining knowledge	
Improved knowledge of human rights	Competence	
	Trust in self	
	Knowledge	
Recognizing family needs more	Insight into therapeutic use of self when relating to patients	

Restorative: Colleague/social support

Listening and being supportive	Lower perceived anxiety	Improved relationship with nurses
Improved coping at work	Understanding colleagues	
Accessing support	Increased interest	Trust
Better relationship amongst staff	Relief (discuss thoughts and feelings)	Reduced conflict
		Reduced tedium
Engagement in the workplace	Relief of thoughts and feelings	Reduced burnout
		Personal accomplishment
Safe group environment	Empathy	Personal development
Sense of security	Sense of community	Coping
Satisfaction with nurses	Catharsis	
	Self understanding	

From "The effectiveness of clinical supervision in nursing an evidence based literature review" by Brunero and Stein-Parbury, 2008, *Australian Journal of Advanced Nursing, 25*(3), p. 88. Copyright Australian Nursing & Midwifery Federation. Reprinted with permission of AJAN.

Although studies have indicated benefits of supervision to practitioners (Bowles & Young, 1999; Brunero & Stein-Parbury, 2008; Buus, Angel, Traynor, & Gonge, 2011; Gonge & Buus, 2011), there are several reoccurring barriers to successful and effective supervision. Dilworth, Higgins, Parker, Kelly, and Turner (2013) analyzed current literature in the medical field and found that two major sources of debate around supervision stemmed from the implications of the complex and undefined nature of supervision and a resistance to change from healthcare organizations. As a result of the complexity and diversity of the contexts in which it is implemented, the scholars report confusion about the role and structure of clinical supervision, a weak unlinked evidence

base, challenges measuring the effectiveness of clinical supervision, and difficulty in implementing clinical supervision in practice (Dilworth et al., 2013).

Buus et al. (2011) found that psychiatric nursing staff believed that supervision provided personal insight, insight from others, and emotional relief in support from colleagues. However, respondents indicated they felt it had little influence on their daily work. The authors suggest that this occurrence could be because supervision does not, in fact, have lasting impacts on everyday practice or that it, indeed, does have lasting effects of which the respondents were unaware. Researchers have also called for additional studies investigating the correlation between clinical supervision and effective service delivery to clients (Wheeler & Richards, 2007).

A solution to some of these issues within the provision of supervision could be the use of contracting. Researchers in the allied health, nursing, and psychology fields have noted the importance of formal contracts in supervision to clarify the commitments of group members (Kuipers, Pager, Bell, Hall, & Kendall, 2013; Proctor, 2000; Smith, Erickson Cornish, & Riva, 2014). Proctor (2000) stated that "contracts and agreements can be structural aids for engaging group members and other parties to the supervision. They are, by nature, mutual arrangements" (p. 54). Smith et al. (2014) asserted that contracts play a critical role in clarifying the scope of supervision; where, when, and how the group will meet; and policies for resolving issues that may arise such as attendance. Kuipers et al. (2013) concluded from their research among allied health professions that "the implementation of formal arrangements enhances the processes and outcomes of peer groups implemented for professional support and clinical supervision" (p. 391).

It is evident that clinical supervision in the medical and mental health fields has formative, normative, and restorative benefits for practitioners and the field. In addition, the literature provides rationale for a supported infrastructure for the provision of supervision, the education of practitioners about the benefits of supervision, and the use of contracting as essential in ensuring the intended outcomes of supervision. Although supervision has been a topic of much research and is considered standard practice in many practice professions, its utilization in signed language interpreting is in its early stages.

Supervision in the Signed Language Interpreting Field

In 1986, Fritsch Rudser suggested one-on-one supervision, modeled after the supervision of health professionals, as a solution to the lack of confidential spaces to discuss interpreting work and as a way to improve standards in the signed language interpreting field. Today, professional supervision is not yet standard practice in the interpreting field (Hetherington, 2012). As of 2017, the Registry of Interpreters for the Deaf does not have any formal stance on supervision and there are no requirements for interpreters to engage in supervision or any type of reflective practice.

One research-supported method of peer group support is *supervision sessions* that follow the constructs of the demand control schema (DC-S) as proposed by Dean and Pollard (2001). Dean and Pollard (2011) defined *supervision sessions* as "supportive, confidential, interactive dialogue between two (or more) professionals regarding their work with consumers, the goal of which is to enhance professional practice" (p. 170). Supervision sessions using the DC-S framework are currently being conducted in areas in

the United States, United Kingdom, and Australia (Hetherington, 2012; Judd, 2015; Maffia, 2014; Smith et al., 2012).

The DC-S framework was adapted by Dean and Pollard in 2001, after they saw the need to examine the complexities of signed language interpreting and ethical decision-making. Dean and Pollard drew from Karasek and Theorell's (1992) existing demand-control theory and applied it to the field of signed language interpreting: "Demand-control theory is a job analysis method useful in studies of occupational stress and reduction of stress-related illness, injury, and burnout" (Dean & Pollard, 2001, p. 1). This theory asserts that *demands* are factors that "act upon" an individual; Dean and Pollard (2001) categorized these demands as environmental, interpersonal, paralinguistic, and intrapersonal. An interpreter can choose to employ *controls* in response to the demands of a given situation. Controls include an interpreter's decisions, responses, characteristics, skills, and knowledge. The *dialogic work analysis* assesses how a chosen control option affects participants in the interpreted setting by identifying *consequences*, what will occur as a result of a selected control option, and *resulting demands*, what potentially could occur as a result of a selected control option (Dean & Pollard, 2013). The DC-S framework allows interpreters to analyze and understand interactions and the impact on their own decision-making within a given interpreting context.

Although supervision sessions are being conducted on smaller scales, there is much that needs to be done before supervision can be regularly accessed by practitioners (Dean & Pollard, 2013; Maffia, 2014). In order to meet the needs of diverse interpreting professionals, Anderson (2012) requested that interpreting leaders change the professional paradigm by adopting and revising a variety of peer support and consultation

models and working to promote the availability of these opportunities. Citing the current lack of research on the benefits of supervision, she also claimed that if leaders in the field conduct further research and demonstrate, through practice, the effectiveness of group consultation, stakeholders will support and fund future professional support groups.

Benefits of DC-S Supervision

There have been numerous suggested theoretical benefits of the DC-S framework and supervision sessions on interpreters and their work (Dean & Pollard, 2005, 2011, 2013). Early empirical research on the practice has also indicated promising outcomes for interpreters and the profession (Hetherington, 2012; Holcombe, 2014; Judd, 2014; Maffia, 2014; Smith et al., 2012). Proposed benefits for practitioners who engage in supervision include: increased critical thinking skills, development of professional identity, enhanced ethical decision-making, and a more thorough understanding of confidentiality in a practice profession (Dean & Pollard, 2005, 2011, 2013; Judd, 2014). Additional benefits to the field, as a whole, have been proposed as ensuring quality services for consumers, moving the field toward a practice profession model, reducing interpreter burnout, and supporting autonomy, agency, and self-determination for interpreters (Dean & Pollard, 2011, 2013). Hetherington (2012) stated supervision can be used to "combat this stress by providing interpreters with regular, protected time to receive support, guidance, and feedback on their work" (p. 54). Schwenke (2015) suggested that interpreters should familiarize themselves with the demand control schema and establish self-care strategies for managing work-related stress and reducing chances of burnout.

Judd (2015) conducted pre- and post-interviews of interpreters who participated in five 3-hour online training sessions on the demand control schema. Although participants' responses to the training varied, analysis of their responses to ethical scenarios showed increased awareness in the areas of controls they bring to their work, consequences of decisions on consumers and their work, and the influence of intrapersonal aspects on decision-making. In post-training interviews, participants stated the benefits they had experienced included increased confidence in ethical decision-making, reinvigoration for the work, and reduced feelings of guilt and isolation.

Multiple interpreter training programs have incorporated demand control schema constructs to their curriculum (Dean & Pollard, 2011; Johnson, Skolits, & Witter-Merithew, 2010; Smith et al., 2012). A grant from the Fund for the Improvement of Postsecondary Education (FIPSE) provided funding in an attempt to shift traditional interpreter education from a technical profession model to that of a practice profession (Johnson et al., 2010). This was to be accomplished by infusing DC-S into 15 interpreter preparation programs. Fifteen out of 18 faculty respondents reported that "student outcomes resulting during the project met or substantially exceeded their expectations" (p. 6). Positive improvements for student outcomes were identified as:

> 1) less reliance on the teacher and more empowered students; 2) an improved ability to identify demands; 3) better ability to discuss work situations more effectively, including self-assessment; and, 4) higher levels of critical thinking toward improved applications in practice. (Johnson et al., 2010, p. 5)

Faculty also reported the program was beneficial for them as well. They developed:

> 1) a new framework for teaching; 2) a new framework for discussing their work; 3) a common language; 4) a method for interpreting situation analysis and problem solving; 5) more confidence as a faculty member; 6) better ability to guide students; 7) better ability to dialog with students; and, 8) improved teaching skills (more like a coach). (Johnson et al., 2010, p. 6)

The Professional Supervision for Interpreting Practice (PSIP) program at Western Oregon University was established in 2012 as an ongoing one-year transition program for recent graduates of the Bachelor's in ASL/English Interpreting program (Smith et al., 2012). Smith et al. wrote about the benefits PSIP participants experienced, these included the provision of a safe, confidential, professional place to discuss their work; improved self-reflection; a better understanding of decision-making; increased control options; supportive relationships with colleagues; not feeling alone; and validation. In addition, data indicated that recent graduates who shared cases were not the only ones who received benefits; supervision leaders also experienced benefits to their own practice when facilitating sessions.

Although other professions have identified the formative, normative, and restorative benefits of group peer supervision for practitioners, research has not been conducted to investigate if signed language interpreters indeed experience these benefits as a result of their participation. If interpreters indicate these benefits are present, it is possible that supervision could assist the profession in developing a normative view of ethics and establishing best practices, contributing formative benefits by increasing

practitioner competence and knowledge, and providing restorative benefits that may

combat horizontal violence, vicarious trauma, and burnout.

CHAPTER 3: METHODOLOGY

Participants

To be eligible for this study participants must have been 18 years or older, currently working or have worked as a professional signed language interpreter, and have attended at least three supervision sessions. Participants were required to attend at least three sessions in order to be able to draw from a broader range of experiences when answering in-depth questions about their participation and due to the fact that previous research indicates that the amount of time participants are exposed to the demand control schema can have an effect on outcomes (Johnson et al., 2010; Judd, 2015).

For the purpose of this research, a *supervision session* was defined as two or more practitioners meeting to discuss a particular interpreting situation or case, using the demand control schema framework as outlined by Dean and Pollard (2001). Participants were informed of the expectations and required characteristics by an online implied consent form at the start of the survey (see Appendix A). Participants self-selected involvement in the study by agreeing they met the specified criteria and acknowledging their participation was voluntary and that they could withdraw at any time without penalty.

The survey was disseminated using a non-probabilistic snowball sampling method, an approach commonly used in interpreting research (Hale & Napier, 2013). In this sampling technique, the researcher selects participants who may meet criteria for inclusion in the sample and then asks them to identify other colleagues in their professional network who might also have the desired characteristics (Hale & Napier,

2013). Participants were informed of the study through e-mail or relevant social media groups and encouraged to share the link to the study with other colleagues they know had participated in supervision. A snowball sampling method was selected due to the fact there is no centralized database or registry of signed language interpreters who participate in supervision, therefore, a random probabilistic sample of interpreters was not possible. Although there is no way to know if all the interpreters who participate in supervision were contacted for inclusion in the study and results from this population may not be generalizable to the larger population of signed language interpreters, those who did respond were able to provide valuable insights into their own experiences and provide researchers with a starting point for future studies on the topic.

Design

The survey instrument was designed and disseminated using SurveyMonkey. The use of an online survey instrument allowed data to be collected from the largest number of participants within a limited time frame, and it also served the purpose of recording how many people are participating in DC-S supervision in areas within the United States and abroad. The survey consisted of seven pages, broken up into three sections, which included a total of 29 open- and closed-ended questions (see Appendix B). Questions were not required to have an answer, giving the participants autonomy to skip a question should they decide to do so.

The first section solicited demographic information about the respondent's age, location, education level, experience with interpreting, and areas of specialization in the field. The second section began with closed-ended questions that asked about training on the demand control schema and supervision, frequency of attendance at supervision

sessions, whether they had ever participated in an ongoing supervision group, and their typical role in sessions. Open-ended questions at the end of this section asked participants "why do you participate in supervision?" and "what is the main benefit you receive from supervision?"

The final section focused on participant experiences and the benefits they may have received as a result of involvement in supervision. The questions related to the benefits of supervision were adapted from a study designed by Bowles and Young (1999), who used Proctor's three-function interactive model of supervision to determine the formative, normative, and restorative benefits that nurses experienced as a result of clinical supervision. These questions were modified to fit with current terminology and practice of supervision in the signed language interpreting field. The final questions asked about respondent's most recent experience attending a supervision session.

The final page was optional and allowed participants to enter their name and email to be contacted about future supervision research. These responses were separated from the other data and stored in a separate location without any way to link the contact information to respondent answers.

Data Collection

Data collection began July 12, 2017 and was open for a five-week period, closing August 16, 2017. A total of 113 responses were collected. All responses were kept for analysis. Data was collected and kept online using the password-protected SurveyMonkey platform. After the survey closed, responses were backed up onto the principal researcher's personal password-protected computer.

Data Analysis

Qualitative questions were analyzed using QDA Miner Lite software. An open coding approach was used when analyzing the qualitative responses from participants. Open coding refers to the process of noting conceptually similar responses, collecting these responses into groupings, and applying of a conceptual label (Corbin & Strauss, 1990). After reading through the data, the primary researcher developed a codebook for categories, codes and subcodes (see Appendix C). This allowed for natural themes to emerge from the data during analysis that could then be later compared for alignment with current models proposed in the literature.

Methodological Strengths and Limitations

This research study focused solely on supervision sessions that use the demand control schema framework as proposed by Dean and Pollard (2001). The requirements for participation excluded those who may have participated and have found benefits in other forms of supervision. Further research is needed on the benefits of alternative frameworks and types of supervision being used in the field.

In order to ensure that participants have had a range of experiences in supervision, participants were required to attend at least three supervision sessions; this excludes respondents who attended supervision once or twice and did not continue. Findings may not be representative of the whole of interpreters, but results indicated in this study can reflect what this group of interpreters experienced and may indicate what others have experienced.

There is the potential for self-selection bias among respondents, in where participants who volunteer to take part in a study may be characteristically different from

those who choose not to participate (Robinson, 2014). Supervision is a new practice in the field and not required for certification; therefore, participants who have been involved in supervision are doing so of their own accord and may possess characteristics different from those who choose not to attend supervision.

An advantage to using an online survey instrument was that it allowed for a larger sample size from a wider geographic area, including more variety in perspectives and opinions. Due to the fact that there is no database of interpreters who participate in supervision, an online survey allowed for easy dissemination of the survey across participants' professional networks. Open- and closed-ended questions allowed for the collection of quantitative and qualitative data. The collection of multiple types of data supports triangulation of the findings, which increases confidence in the results of the study (Hale & Napier, 2013).

Participant Demographics

As required by the participation criteria, all respondents who self-selected for the study categorized themselves as over 18 years of age, identified as professional signed language interpreters, and indicated they had attended at least three DC-S supervision sessions. A total of 113 respondents participated. Their experience of working as a professional interpreter ranged from less than a year to more than 20 years; the largest number of interpreters (30%) had 11-15 years of experience. There were also a range of ages represented from 18 to 65 and older. The largest group of respondents (30.91%) identified themselves to be between the ages of 25-34.
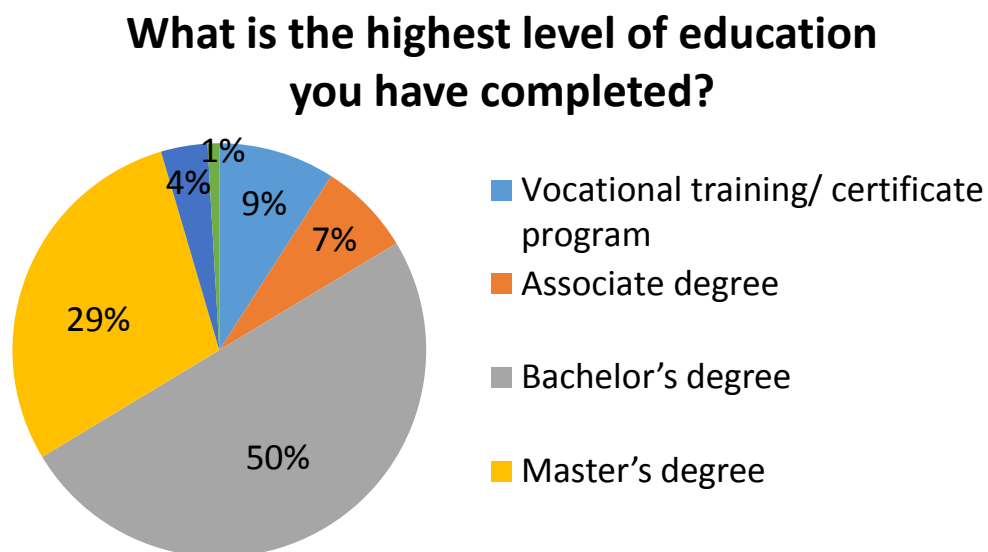
Figure 1. Education Level of Survey Participants

All participants in this study received some level of postsecondary education. The largest group of respondents (55) held a bachelor's degree, and 32 held a master's degree. Figure 1 shows the breakdown of education levels.

Individual countries have their own types and levels of certification, licensure, and credentialing for interpreters. Because this survey was open to those outside the United States, participants were provided with a text box in which to indicate their professional credentials. Only three respondents (2.83%) indicated they had no professional certification or credentials. The majority of respondents (97.17%) held some type of professional credential including undergraduate and post-graduate degrees, passing written knowledge tests, local licensure, national certification, and specialized certificates. Respondents were also asked about the settings in which they currently interpret. This question allowed for the selection of multiple responses as interpreters may work in a variety of settings in the course of their work.
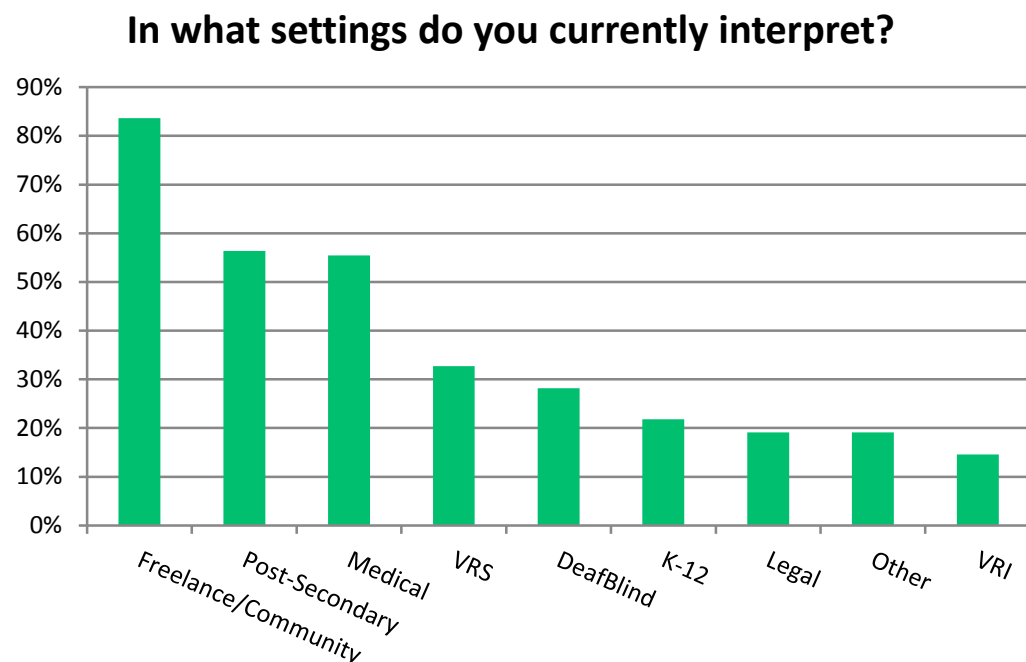
Figure 2. Settings Where Participants Are Currently Working

As can be seen in Figure 2 above, the majority of interpreters (83.64%) work in some capacity in the freelance/community sector. This high number is likely due to the fact that this type of work can include a wide range of settings, and some practitioners may group settings such as medical, social services, performance, government, and others into this one category. Responses specified in the "other" category consisted of mental health (8), performance/theatrical (6), government (3), and designated interpreting (3).

The majority of respondents, 79 (71.82%), resided within the United States. There were 23 respondents (20.91%) from the United Kingdom, 6 (5.45%) from Australia, 1 (.91%) from Canada, and 1 (.91%) from the Netherlands. To place these numbers in context within the interpreting field, the Registry of Interpreters for the Deaf (2016) in the United States consists of 15,411 members. The large number of participants from the United States is likely due to the primary researcher living in the United States and the fact that the demand control schema was first applied to the interpreting field in the United States.

Of those respondents who resided within the United States, the states most represented were Oregon (15.85%) and New York (15.85%). Other states with a large percent of respondents were Washington (9.76%), Ohio (6.10%), California (6.10%), Maryland (4.88%), and Arizona (4.88%). Oregon is over-represented, perhaps in part because the primary researcher resides in the state. Western Oregon University has also infused the demand control schema and supervision extensively into their undergraduate interpreter education curriculum (Johnson et al., 2010) and established the Professional Supervision of Interpreting Practice program that trains supervision leaders and provides supervision to undergraduates (Smith et al., 2012). A large number of responses from

New York is likely due to the fact that it is home to the University of Rochester, where Dean and Pollard (2001) first published on application of the demand control schema to the interpreting profession, and where educators continue to research, publish, and train practitioners on the demand control schema and supervision.

The demographics section included a question asking respondents to select all types of training they had received on the demand control schema and supervision. The majority of respondents (76.42%) had read the textbook *The Demand Control Schema: Interpreting as a practice profession* (Dean & Pollard, 2013), read other publications on DC-S/supervision (58.49%), or were taught in their interpreter education program (56.60%). Other ways participants were trained included formal workshops, participation in a supervision leader training, practice within a master's or postsecondary program, or were personally mentored by an expert on the subject. A typical profile of the respondent of this survey is:

- 25-34 years of age

- has 11-15 years of experience as a professional interpreter

- has a bachelor's degree

- holds professional credentials

- and works as a freelance/community interpreter

These characteristics provide a context for analyzing the results of this study and may indicate a general profile for the type of practitioner that attends DC-S supervision.

Participation in Supervision

Asking participants about their frequency of participation presented a challenge in that attendance in sessions may be irregular and participants often may have trouble

recalling when and how frequently they attended. Since the demand control framework was proposed in 2001 (Dean & Pollard, 2001), participants were asked "since 2001, how often would you say you attended supervision?" to get a general sense of overall participation. The following question asked "in the past year, how often would you say you attended supervision?" The results of their responses are shown below in Figure 3.

Frequency of Attendence
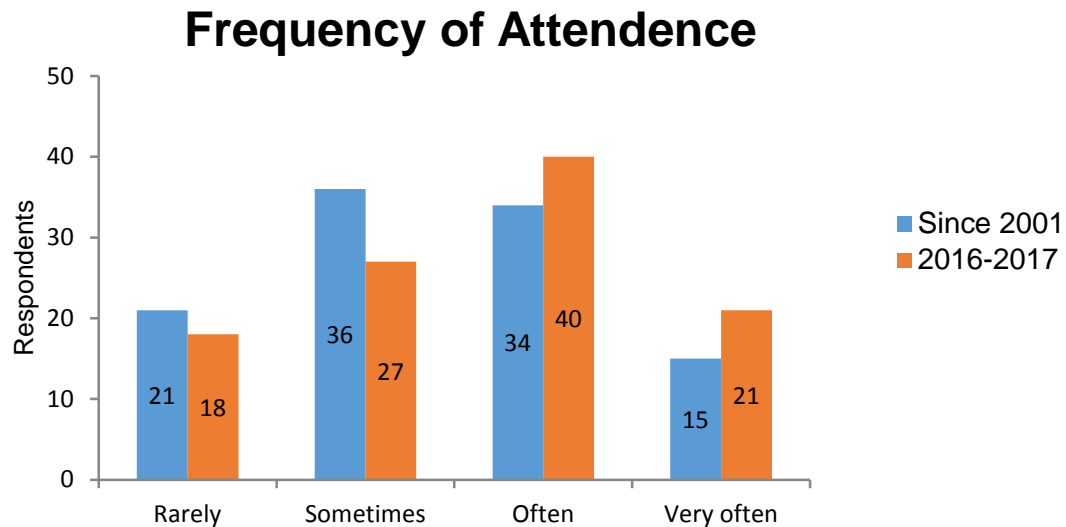
Figure 3. Comparison of Frequency of Attendance in Supervision

As results above indicate, more respondents would categorize their participation as "often" or "very often" this year than previously. Although a relatively small sample, this increase in attendance in supervision could be due to the increased awareness and availability of supervision in the signed language interpreting field. It also could be that those who participate currently in supervision are more likely to respond to a survey about their experiences.
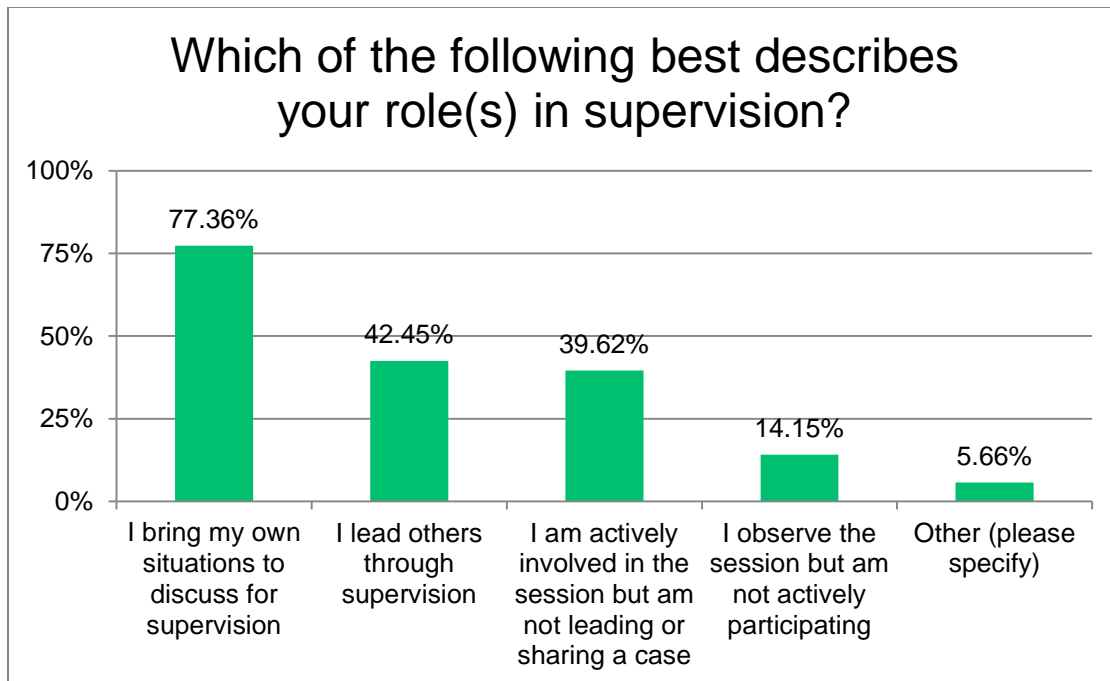
Figure 4. Participant Roles in Supervision Sessions

Participants were also asked about their role in supervision sessions. The question allowed respondents to select multiple roles, as they may participate in multiple roles over time or even in a single session. As seen above (Figure 4) the majority of respondents brought their own cases to supervision, other roles included leading the session, being an active participant, or being an outside observer.

Most participants (85%) had been involved at some point in a program they defined as ongoing (see Figure 5). It is important to note when answering the research question, "what benefits do signed language interpreters experience as a result of participation in supervision?" that the majority of the benefits described are by those who had participated in a formal ongoing group.

Have you ever participated in an ongoing supervision group that meets regularly?
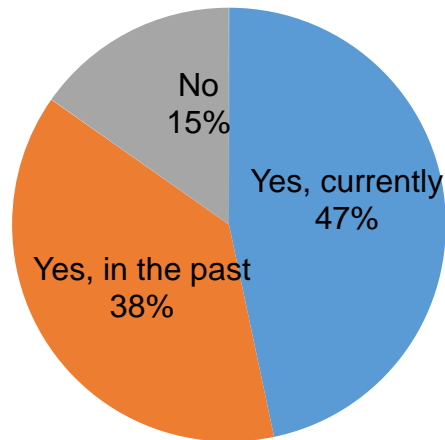
Figure 5. Participation in an Ongoing Supervision Group

When analyzing the data for statistical significance (p < .05), a correlation was present between participation in an ongoing supervision group and attendance in the past year. Of those who stated they were currently involved in an ongoing group, 38.78% categorized their attendance in supervision as "very often" and 53.06% responded "often." There was a statistically significant increase over those who had participated in an ongoing supervision group previously, where 32.50% would categorize their attendance at supervision as "rarely" and 40% as "sometimes." Participants who are involved in an ongoing group are more likely to attend supervision. Participants who are not involved in an ongoing group participate far less frequently and potentially receive less of the benefits than those who are committed to ongoing sessions.

Approximately half of respondents attended their last supervision session in person (48.04%), and half participated online using a webcam (48.04%). One response

each was received for the participation methods of phone, online chat, and through a

Google document. Those who were participating in an ongoing supervision group

currently were more likely to have used a webcam to participate in their most recent

session (68.75%), and those in an ongoing supervision group in the past were more likely

to have their most recent session in person (60.53%). These findings suggest increased

use of distance technology in the provision of supervision by formal ongoing supervision

groups.

Participants were also asked about how their last supervision session was

facilitated. Inskipp and Proctor introduced a typology for supervision groups (See Table

2) that was used as the basis for this question (as cited in Proctor, 2000).

Table 2

Type of Facilitation used in Most Recent Supervision Session

Description	Percent of Respondents	Inskipp and Proctor
The supervision leader was responsible for leading cases and encouraged input from participants.	38.24%	Type 2 Participative
The supervision leader was group facilitator and supervision monitor; casegivers and participants actively co-supervised each other.	37.25%	Type 3 Co-operative
Participants took shared responsibility for leading and sharing cases.	11.6%	Type 4 Peer Group
The supervision leader led each casegiver in turn and managed the group. Participants were primarily observer/learners.	7.84%	Type 1 Authoritative

As shown above the majority of participants (75.49%) attended a supervision

session that they would categorize as either participative or co-operative. It is important

to note when analyzing the findings of benefit of sessions on practitioners, that the majority of respondents may have received the stated benefits from participative or co-operative types of sessions.

Reasons for Participation in Supervision

Participants were asked "why do you participate in supervision?"; the following table provides a breakdown of the coded categories for responses to this question.

Table 3

Reasons for Participation in Supervision

Coded Category	Frequency of Code	Percent of Respondents
Benefits	94	91.3%
Availability	3	2.9%
Required	3	2.9%
Other	3	2.9%

To this question, 94 respondents (91.3%) explained that they attend supervision due to the benefits they receive and many cited numerous benefits. Results for the benefits of supervision are explored in the following section due to the fact that several questions were asked on this topic. Overall, 8.7% of respondents provided reasons for participation other than the benefits they received, these categories consisted of (1) the availability and access to the sessions, (2) because participants were required to attend, and (3) other. The three responses in "other" were primarily a description of supervision without providing information as to why they choose to participate. These results point to the fact that the reason practitioners are attending supervision is because it is beneficial for themselves personally, their practice, or for the benefit of the field.

Respondents were also asked to recall their most recent supervision session and were asked "why did you decide to attend the session?" Categories for the reasons for attendance in their most recent session were coded as *contracted*, indicating an agreement to attend supervision; *availability*, the availability of the session; *benefits*, the benefits received were the reason for attendance; and *structure*, the type of session was the reason for attendance. Respondents whose answers fit the criteria for more than one category were coded into multiple categories.

Table 4

Reason for Attendance at Most Recent Supervision Session

Coded Category	Frequency of Code	Percent of Respondents
Contracted	43	45.7%
Benefits	29	30.9%
Structure	25	26.7%
Availability	9	9.6%

When asked "why do you participate in supervision?" (Table 3), 91.3% of participants cited the benefits of supervision as their overall reason for attending supervision, however when asked why they attended their most recent session (Table 4), 45.7% stated it was because they had previously agreed to do so, which was coded as *contracted*. This code included a previous commitment to attend supervision and requirements to attend by a program or employer. Although this survey did not include questions regarding whether contracts were issued for the sessions respondents attended, the fact that 45.7% of respondents cited a previous commitment to attend may have been due to a formal or informal version of contracting. The findings from this data show that

interpreters do find supervision to be beneficial but that, perhaps, a commitment is required in order to ensure their attendance at supervision. This supports the inclusion of contracting within DC-S supervision, similar to practices in medical and mental health fields (Proctor, 2000; Smith et al., 2014).

The most frequent reason for attendance in the *contracted* category (19.1%) was that participants were involved in an ongoing series of sessions or in a supervision group that met regularly. Examples of responses by participants in this category were: "We set fixed dates in advance. I have committed to attend all as part of my continuing professional development" and "because it was part of a regular series of supervision sessions that I am involved in." Additionally, participants who indicated they were currently enrolled in an ongoing supervision program were more likely to categorize their participation in supervision as "very often" compared to those who participated in supervision in the past. These results reveal the importance of ongoing supervision programs that require participants to commit to attendance in advance. Both ongoing supervision groups and the use of formal contracts may be necessary in order for practitioners to take full advantage of the benefits offered by supervision.

Benefits of Supervision

Participants were provided with 12 statements and asked about their agreement with each using a Likert scale ranging from "strongly disagree" to "strongly agree." These statements were drawn from a questionnaire developed to evaluate nurses' experiences with supervision (Bowles & Young, 1999). The statements corresponded to Proctor's three functions of supervision: formative, normative, and restorative.

Table 5

Benefits Categorized by Proctor's Three Functions of Supervision

Formative Benefits	Disagree	Neutral	Agree
think through situations more critically	0.95%	0.95%	98.10%
been made more aware of my decision making process	0.97%	2.91%	96.12%
learn new ways to approach my interpreting practice	1.90%	2.86%	95.24%
increased my knowledge of interpreting	1.96%	11.76%	86.28%
Normative Benefits			
ensure I provide effective interpreting services for consumers	0.95%	1.90%	97.14%
been provided a space to talk through ethical issues	0.97%	1.94%	97.09%
support my colleagues professional development	1.90%	1.90%	96.19%
improved my interpreting practice	1.96%	7.84%	90.20%
Restorative Benefits			
cope emotionally with difficult situations	1.92%	6.73%	91.35%
felt more supported in my practice	0.97%	7.77%	91.26%
feel more self-confident in my work	1.90%	9.52%	88.57%
experienced reduced work related stress	4.85%	15.53%	79.61%

The data collected from these questions indicate that respondents experienced all three categories of benefits as a result of their participation in supervision. The statement that most participants agreed with (98.10%) was that "supervision helps me think through situations more critically," a formative function. The statement that the fewest number of respondents agreed with (79.61%) was "through participation in supervision, I have experienced reduced work-related stress," a restorative function. A lower response rate to the benefit of reduced work-related stress could be due to the phrasing of the statement. Researchers have noted a significant amount of stress for signed language interpreters and suggested that interpreting can be a high-stress profession (Dean & Pollard, 2001). Thus respondents may have not experienced a change in the amount of stress they

experience at work; however, this does not preclude that supervision did provide a way to cope with the stress they experience after an interpreting assignment. Another reason for lower agreement with this statement could be that practitioners are not aware of the ongoing restorative benefits of supervision. Similar findings were discovered in the field of nursing: Practitioners may be unaware of the lasting influences of supervision on their daily practice (Buus et al., 2011).

In analyzing the responses to these closed-ended questions, respondents generally agreed with all statements regarding the benefits of supervision in all three categories. There was slightly more agreement with normative function statements, followed by formative, and, finally, restorative. It is important to note that the type of benefits selected for inclusion in the closed-ended questions and the phrasing of statements may have had an impact on the results. In order to contextualize and triangulate findings, these closed-ended questions were supplemented with open-ended, qualitative data to gain a more holistic picture of the benefits that respondents receive as a result of supervision.

In order to solicit responses about the benefits of supervision in participants' own words, the survey included the open-ended question "what is the main benefit you receive from supervision?" The data from this question were analyzed using an open-coding, inductive approach that allowed themes to emerge and codes to be developed. During the process of coding, it was apparent that sub-codes could be coded into larger coding categories that aligned with Proctor's formative, normative, and restorative functions of supervision. For a full description of the sub-code criteria see Appendix C. The breakdown of the codes for this question is shown below.

Table 6

Coded Category Responses to Main Benefit of Supervision

Code/Sub-code	Cases	% of Cases
Normative	**101**	**44.69%**
Collegial Relationships	41	39.8%
Professional Development	24	23.3%
Professional Standards/Ethics	13	12.6%
Place to Discuss the Work	13	12.6%
Reflective Practice	10	9.7%
Formative	**80**	**35.39%**
Perspective	37	35.4%
Control Options	22	21.4%
Understanding Decision-Making	15	14.6%
General Learning	6	5.8%
Restorative	**45**	**19.91%**
Support	15	14.6%
Shared Experience	10	9.7%
Validation	8	7.8%
Stress Management	6	5.8%
Offloading	5	4.9%
Increased Confidence	1	1.0%

Responses for this question frequently included more than one benefit. Therefore, multiple codes were often assigned to one response. For example the response "I feel supported and learn from the others in the group, it allows me to be more reflective on my own practice" was coded into the categories of *support*, *general learning*, *collegial relationships,* and *reflective practice*.

It is notable that the sub-code of *collegial relationships* had the most frequent number of cases (39.8%) and that many of the responses explicitly cited interactions with other participants as either the main benefit or as the way they access a benefit. In the example response given above, the participant cited *support* and *general learning* as benefits and accessed these through interactions with others in the group (*collegial relationships*). This overlap of benefits is supported in other research on supervision; for example, nurses who were interviewed about their experiences with supervision stated that successful supervision would help them gain a new perspective, and this would in turn reduce stress and help them feel restored (Buus et al., 2011). Overlap and influences between these categories showed up frequently in the data. It is reasonable to assume that many of these benefits cannot be experienced in isolation but rather must be co-constructed with other practitioners and have strong influences on each other.

Another reason for such a high number of instances of the *collegial relationships* code was noted in the literature review. The fact remains that signed language interpreters often lack places to discuss their work with colleagues and may still feel constrained by prevailing beliefs about the nature of confidentiality in the field (Dean, 2015; Dean & Pollard, 2009; Hetherington, 2011; Zenizo, 2013). Potentially this could show up in the data so frequently because it provides a benefit not available to practitioners through other methods.

At the conclusion of the survey, respondents were provided with an open-ended text box that asked, "Anything else you would like to share about your experiences with supervision?" Forty-six respondents took the opportunity to share thoughts; these

responses were coded into the categories of *recommendations*, *challenges*, and, *favorable comments*.

The largest category of responses for this question was *favorable comments* about the practice of supervision. Twelve respondents (26.1% of those who responded to the additional question) mentioned benefits of supervision that aligned with earlier responses. Eight respondents (17.4%) had responses relating to personal enjoyment of supervision, reporting comments such as "I look forward to it!" and "I thoroughly enjoy it!"

Some respondents also expressed *challenges* they have experienced with supervision. The most frequently mentioned challenge was the lack of availability of supervision. Five respondents explicitly cited this concern. One example of this response is "Just that there's a large demand for it but there's not a lot of trainings on how to host supervision groups. As an employer I would like to offer it for my employees but I tried several times to get some training on and there's just nothing available for me." Another stated "I don't know enough people where I live now to have supervision. I wish it was more prevalent in the field." A few respondents commented on issues that can arise during sessions. One respondent mentioned they felt pressured to share a case when nothing big happened in the last month, another stated their perspective that supervision in very small communities presents challenges for the participants to remain unbiased, and another mentioned that sometimes people just have a hard time sharing.

Emergent in the *recommendations* category was the importance of application to supervision for interpreter education programs. Six respondents mentioned they either already embed DC-S and supervision in their curriculum or that this should be standard practice to teach in interpreter training programs (ITP). One respondent answered "I have

infused DC-S and supervision throughout my curriculum because of the benefits I have seen," and another stated "I wholeheartedly support it and think it's best to start implementing them at the ITP level."

Another theme in the *recommendation* category was the belief that supervision should be a required practice. A total of three respondents mentioned this, one stating, "I believe it should be compulsory for interpreters, it has been so beneficial for my practice, and for reducing my stress levels around my work." Two respondents recommended the use of other frameworks in addition to the demand control schema; one commented, "I have also in the past participated in supervision sessions that did not use DC-S and found them incredibly rich and valuable. DC-S offers a nice framework, but it is not always the best option for every group or every situation." There were also recommendations from respondents about the structure and function of the supervision group: suggesting the advantages of having an experienced external supervisor, a closed supervision group that meets regularly with the same participants, and the importance of communication. One participant shared advice on the process of supervision: "Sometimes light bulb moments happen. Often they don't. It's always worth it."

CHAPTER 5: CONCLUSION

The first research question for this study was "what is current practice for participation in DC-S supervision among signed language interpreters?" This study was the first attempt to document what current practice is for DC-S supervision in the signed language interpreting field. The results of this research show that at least 113 signed language interpreters from the United States, United Kingdom, Australia, Canada, and the Netherlands have attended at least three DC-S supervision sessions. A profile for the average respondent of this study was 25-34 years of age, had 11-15 years of experience as a professional interpreter, held a bachelor's degree and professional credentials, and worked as a freelance/community interpreter. These characteristics give insight into the type of practitioner taking advantage of DC-S supervision.

The supervision that participants attended was categorized as primarily *participative* or *co-operative*. Supervision sessions are currently being conducted both online and in person at equal rates. The majority of respondents (85%) indicated participation at some point in an ongoing supervision program.

When asked in general why do they participate in supervision, respondents cited the benefits they experience, however, when asked why they attended their most recent session they cited because they had committed to do so (*contracted*). Other professions such as nursing and psychology have cited the importance of contracting in the supervision process (Proctor, 2000; Smith et al., 2014). Research in other fields in combination with the results of this study provides a strong rationale for the inclusion of

contracting within DC-S supervision. It is also important that many respondents, who were categorized as being *contracted* to attend, stated they attended because they were in some form of ongoing group. This may suggest that ongoing supervision programs that require participants to commit to attendance in advance may be necessary in order for practitioners to take advantage of the benefits offered by supervision.

The second research question was "what are the benefits of participation in DC-S supervision for signed language interpreters?" The results of this study indicate that, as a whole, signed language interpreters who participated in DC-S supervision received benefits in all of Proctor's (2000) formative, normative, and restorative categories. The most frequently stated main benefits in each category were collegial relationships (normative), gaining a new perspective (formative), and support (restorative).

As the results of the literature review indicate, signed language interpreting is a relatively new profession, and there are a number of issues related to education and skills, ethics and standards, collegial relationships, and stress on the practitioner. The results of this study indicate that the majority of signed language interpreters who participated in supervision using the DC-S framework gained knowledge and skills that benefit their practice, reflected on ethical decision-making, and felt validated and supported by their colleagues. These findings suggest that the benefits that interpreters experience as a result of participation in supervision could go a long way in improving issues in the field.

Research suggests that interpreters may still hold deontological views of ethics and view interpreting as a technical profession (Hetherington, 2012; Holcombe, 2014; Judd, 2015). Results from this study show that interpreters who participate in supervision cited a different perspective on their work, additional control options, and a better

understanding of decision-making. These benefits could help practitioners who participate in supervision better understand their work as a practice profession and provide education to help shift to a more deontological view of ethical decision-making.

Interpreters in the past have been constrained by professional norms and beliefs about confidentiality. In the past the profession operated under the tenet that all information should remain "strictly confidential" (Cokely, 2000). Due to this, practitioners have not traditionally been afforded safe professional spaces to discuss their work. However, participants in this study most frequently cited collegial relationships as the main benefit they receive from supervision; a number of them also explicitly stated that supervision provided them a place to discuss their work. Supervision sessions can address the lack of formal spaces for professional collaboration, increasing collegial relationships and allowing practitioners to support each other in improving their practice.

As discussed in the literature, research indicates a gap in the skills possessed by practitioners entering the field and the skills required for entry-level work of an acceptable quality (Bontempo & Napier, 2007; Dean & Pollard, 2001; Walker & Shaw, 2011; Witter-Merithew & Johnson, 2004). Participants of supervision who participated in this study cited benefits including a different perspective on their work, a greater number of control options in responding to demands, a better understanding of decision-making and continued learning. As practitioners enter the field, supervision may provide an opportunity for continued formative education helping bridge the gap between graduation from a program and professional competency. Formative educational benefits were cited not only by interpreters who had few years of experience but by interpreters that had been working for a number of years.

Horizontal violence is a topic of recent investigation in interpreting literature, and there is evidence to suggest its presence and impact on the interpreting field and practitioners. Respondents who participated in this survey who had attended supervision cited feeling supported and validated by their colleagues. Many participants noted that many of the other benefits they received, such as a different perspective or learning new approaches to their work, came directly from their interaction with their peers. Participation in supervision could be used as a tool to combat horizontal violence in our field, resulting in increased collegial relationships.

Workplace stress can result in a high propensity for burnout in a particular workforce (Schwenke, 2015). The issues indicated in the interpreting literature regarding a gap in skills upon entering into the field, prevailing beliefs about the nature of confidentiality, a lack of places to discuss one's work, and the presence of horizontal violence are all forms of workplace stress that can result in burnout and lower job satisfaction. Interpreters who participated in this research stated they experienced support, validation, stress management, and the ability to offload or vent as a result of their involvement with supervision. Interpreters who benefit from the restorative function of supervision may experience reduced stress and increased work satisfaction.

Supervision should not be seen as a magic pill to cure all that ails a growing profession. Multiple approaches and solutions are needed to work toward a profession comprised of knowledgeable, competent practitioners who provide the highest quality services for consumers. However, as this study has documented, supervision provides benefits in the areas of education, self-monitoring, standards, ethics, and restoration for the practitioner. As such it should be incorporated into current professional systems and

into interpreters' regular practices. The findings from this study also provide a starting point for future research on the topic of supervision within the signed language interpreting field.

Recommendations

This study provided a rationale for supervision in the form of benefits to practitioners and explored its applications within the signed language interpreting field. Supervision should be readily available for any practitioner who wants to take advantage of the benefits documented in this study. Responses from participants indicate that perhaps there is a larger demand for supervision than what is currently available. There is a need for an infrastructure of supervision that would serve to educate the field about the benefits of supervision, provide a space for supervision sessions to take place, train supervision facilitators, and conduct further research on supervision practices. Current organizations—such as professional associations, interpreter training programs, and those providing professional development in the field—would benefit from the adoption of the practice of supervision and the implementation of DC-S principles in their work with pre-service and working interpreters.

Although organizations and institutions have a responsibility to develop an infrastructure for the provision of supervision, it is also advisable that working practitioners educate themselves on DC-S and supervision through the resources currently available. Responses from participants in this study indicate that this can be done by reading literature on DC-S and supervision, participating in trainings and workshops, seeking out a mentor with expertise in supervision, and signing up for an ongoing supervision program.

As revealed in this study, interpreters cite many benefits as a result of participation in supervision. However, the most frequently cited reason they attend a session is due to a previous commitment to do so. Practitioners may need an impetus to attend a session, but once there, they tend to find rich benefits for themselves and their practice. As Gonge and Buus (2011) found among nurses who attended supervision, "the most important factor associated with experienced effectiveness of clinical supervision was participation in supervision" (p. 107). This suggests that current programs may benefit from requiring a commitment to an ongoing series of supervision sessions. It also provides rationale for requiring supervision as a component of professional certification and credentialing. Such a requirement would put the interpreting field in line with other professions that require supervision such as nursing, counseling, and social work (Corey et al., 2014; O'Donoghue, 2015; Proctor, 2000; Wheeler & Richards, 2007).

Suggestions for Future Research

This research is focused exclusively on supervision that uses the DC-S framework. Exploratory research is needed to investigate what other types of supervision sessions are being conducted within the interpreting profession. Future research is also needed to investigate the effectiveness of these other forms of supervision and should compare the benefits of those sessions with programs that use a DC-S framework.

Organizations, trainers, and facilitators currently providing supervision should collect, analyze, and publish data in order to develop best practices for implementing and running supervision groups. Potential lines of inquiry for research on the effectiveness of supervision groups could include: how does the role of a supervision leader influence the group and benefits experienced for practitioners, what are the benefits of peer-group

supervision as compared to one-on-one sessions, are their differences in online provision of supervision and in person supervision, what do the type of cases interpreters bring to supervision reveal about the state of the interpreting field, and does an interpreter's participation in supervision have a direct effect on the provision of services and the experience of consumers?

In Closing

The signed language interpreting field is still developing as a profession, and there are a number of issues related to the education of interpreters; practitioners' conceptualization and application of the tenets of confidentially and ethics; and occupational stress, horizontal violence and burnout. The findings from this study document a number of benefits interpreters experience as a result of their participation in supervision that help to address such issues in the field. This, along with the large body of research supporting the practice of supervision in other practice professions, provides a strong rationale for implementing a supervision infrastructure and establishing requirements for attending supervision as part of credentialing and continuing education. Increased availability of supervision and a requirement to attend supervision as part of professional reflective practice would allow signed language interpreters to take full advantage of the formative, normative, and restorative benefits of participation in supervision.

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Consent to Participate

* Thank you for your willingness to participate in this study. Please review the following information before continuing.

Research Description
The purpose of this research is to investigate how signed language interpreters are engaging in professional supervision and what benefits they experience as a result of their participation.

Participant Description
Participants in this study must be 18 years or older. They must currently be working or have previously worked as a professional sign language interpreter and have participated in at least three supervision sessions. For the purpose of this study, a supervision session is defined as two or more practitioners meeting to discuss a particular interpreting situation or case, using the demand-control schema framework as outlined by Dean and Pollard (2001).

Participation
Your participation in this study is voluntary. You will receive no monetary compensation for your time. The survey should require approximately 10-15 minutes of your time. You have the right at any time to discontinue your participation without penalty. Should you decide to exit the survey at any time, your responses will be deleted prior to analysis.

Benefits
Your responses will contribute to a better understanding of the practice of supervision in our field and will provide an opportunity to reflect and share your experiences with supervision.

Risks
There are no known risks associated with participation in this study. Should you feel any unintended emotional or physical discomfort at any time, you have the right to withdraw from the study without adverse consequences.

Confidentiality
The survey will be anonymous. Your name will not be connected to your responses in any way. Any personal identifiers that a participant provides in their responses will be removed after coding. Upon completion of the survey, you will have the option to provide your contact information in order to receive future updates about this research, which will not be associated with any responses provided. The principal investigator will retain data in keeping with laws and Western Oregon University's Institutional Review Board requirements. Only researchers with IRB approval will be able to view participants responses. The data collected will be included in a final thesis for the Master of Arts in Interpreting Studies degree at Western Oregon University. Research findings may also be included in future articles, reports, and presentations.

Contact
This study has been approved by the Institutional Review Board (IRB) at Western Oregon University. The IRB reviews and approves proposals to ensure participants are informed and safe for the duration of the study. You may contact them at 1-503-838-9200 or irb@wou.edu.

If you have any questions or concerns you may contact the principal investigator, Jenna Curtis, curtisj@wou.edu. You may also contact graduate advisor, Amanda Smith, smithar@wou.edu.

Thank You,

Jenna Curtis
Western Oregon University

Selecting the option below indicates:

- I am over the age of 18
- I am working or have worked as a professional sign language interpreter
- I have attended at least three supervision sessions
- I have read and understood the above agreement
- I hereby give my consent to voluntarily participate in the study

○ I meet the above critera

APPENDIX B: SURVEY QUESTIONNAIRE

Demographic Information

How many years have you worked as a professional interpreter?

- ( ) Less than one year
- ( ) 1-2 years
- ( ) 2-5 years
- ( ) 6-10 years
- ( ) 11-15 years
- ( ) 16-20 years
- ( ) 20+ years

What professional certification or credentials do you posses?

[   ]

In what settings do you currently interpret?
Select all that apply

- [ ] Freelance/Community
- [ ] Post-Secondary (trade school/college/university)
- [ ] K-12 (elementary/middle/highschool)
- [ ] DeafBlind
- [ ] Medical
- [ ] Legal
- [ ] VRS
- [ ] VRI
- [ ] Other (please specify)

  [   ]

What is the highest level of education you have completed?

[   ]

In what country do you live?

[   ]

If you live in the United States, what state do you reside in?

[   ]

What is your age?

○ 18 to 24

○ 25 to 34

○ 35 to 44

○ 45 to 54

○ 55 to 64

○ 65 or older

Participation in Supervision

This section will ask you to answer questions about your experiences participating in supervision.

What types of training have you received on the demand-control schema or supervision?
(Please select all that apply)

- [ ] It was taught in my interpreting program
- [ ] A 0-3 hour workshop
- [ ] A 3-8 hour workshop
- [ ] A multiday training
- [ ] Supervision leader training
- [ ] Read The Demand Control Schema Textbook (Dean & Pollard, 2013)
- [ ] Read other publications on the demand control schema/supervision
- [ ] Other (please specify)

> [   ]

Since 2001, how often would you say you attended supervision?
- ( ) Rarely
- ( ) Sometimes
- ( ) Often
- ( ) Very often

In the past year, how often would you say you attended supervision?
- ( ) Rarely
- ( ) Sometimes
- ( ) Often
- ( ) Very often

Have you ever participated in an ongoing supervision group that meets regularly?
- ( ) Yes, currently
- ( ) Yes, in the past
- ( ) No

Which of the following best describes your role(s) in supervision?

- [ ] I lead others through supervision
- [ ] I bring my own situations to discuss for supervision
- [ ] I am actively involved in the session but am not leading or sharing a case
- [ ] I observe the session but am not actively participating
- [ ] Other (please specify)

Why do you participate in supervision?

What is the main benefit you receive from supervision?

Experience with supervision

Please indicate your agreement with the following statements about your overall experience with supervision.

Supervision has helped me to...

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
learn new ways to approach my interpreting practice	○	○	○	○	○
think through situations more critically	○	○	○	○	○
support my colleagues professional development	○	○	○	○	○
ensure I provide effective interpreting services for consumers	○	○	○	○	○
feel more self-confident in my work	○	○	○	○	○
cope emotionally with difficult situations	○	○	○	○	○

[Optional] Other ways supervision has helped me are...

[   ]

Experience with Supervision

Please indicate your agreement with the following statements about your overall experience with supervision.

Through my participation in supervision, I have...

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
been made more aware of my decision making process	◯	◯	◯	◯	◯
increased my knowledge of interpreting	◯	◯	◯	◯	◯
improved my interpreting practice	◯	◯	◯	◯	◯
been provided a space to talk through ethical issues	◯	◯	◯	◯	◯
experienced reduced work related stress	◯	◯	◯	◯	◯
felt more supported in my practice	◯	◯	◯	◯	◯

[Optional] Through my participation in supervision, I have also....

Thinking back to the **most recent** supervision session that you can recall attending, please answer the following questions.

How did you attend the session?

○ In person

○ Online using a webcam

○ On the phone

○ Other (please specify)

[   ]

Why did you decide to attend the session?

[   ]

Which of the following best describes your role in the session?

○ I led others through supervision

○ I brought my own situations and topics to discuss for supervision

○ I was actively involved in the session but not leading or sharing

○ I was observing the session but not actively participating

○ Other (please specify)

[   ]

Which best describes how the session was facilitated?

○ The supervision leader led each casegiver in turn and managed the group. Participants were primarily observer/learners.

○ The supervision leader was responsible for leading cases and encouraged input from participants.

○ The supervision leader was group facilitator and supervision monitor; casegivers and participants actively co-supervised each other.

○ Participants took shared responsibility for leading and sharing cases.

○ Other (please specify)

[   ]

What, if any, personal or professional benefits did you gain from your participation in the session?

[   ]

Anything else you would like to share about your experiences with supervision?

Thank You

If you would like to be contacted about future supervision research, please enter your information below. Your contact information will be separated from your responses.

If you do not want to enter your contact information, please click 'done' at the bottom to exit the survey.

If you have any questions or concerns you may contact:
Principal Investigator: Jenna Curtis, curtisj@wou.edu
Graduate Advisor: Amanda Smith, arsmith@wou.edu

What is your first name?

What is your last name?

At what email address would you like to be contacted?

Code/Subcode	Description of Code/Subcode
Formative	**Relating to learning or the facilitation of learning**
Perspective	A shift in or realization of an understanding or point of view
Control Options	Gaining new tools, ideas, or solutions for problems/situations
Decision-Making	A deeper understanding and increased knowledge of ethics and of one's decision-making process
General Learning	General learning and education that was not specified or did not meet definition for another formative category
Normative	**Relating to monitoring, self-monitoring, standards, and ethics**
Collegial Relationships	Developing, maintaining, and benefiting from relationships with other practitioners in the field
Professional Development	Improved practice. Skills, and professional growth
Professional Standards	Upholding and developing standards within the interpreting profession
Place to Discuss the Work	Having a place to discuss the work of interpreting, a place to work through situations
Reflective Practice	Self-monitoring and critical reflection on one's practice
Restorative	**Relating to the task of refreshment and wellbeing of the practitioner**
Support	To receive assistance and encouragement from others
Shared Experience	Realization of a shared experience and the feeling of not being alone
Validation	Recognize or affirm the validity or worth of a person or their feelings, opinions, or decisions
Stress Management	Reduction of stress or anxiety about ones work
Offloading	Offloading of feelings and emotions. Feeling of relief, unburdening, or a release.
Increased confidence	An increase in trust, reliability, efficacy of the one's self