Kamil Galiński¹, Jacek Gierus¹

POLISH PSYCHOTHERAPISTS AND THEIR GENERATIONAL ATTITUDES TOWARDS SUPERVISION

¹ Private practice

generations of Polish psychotherapists
needs in supervision

Summary

Objectives: The aim of the study was to collect demographic data describing the population of Polish psychotherapists of various modalities and to examine their needs in supervision. In addition, the article discusses the issue of intergenerational differences between psychotherapists based on generational theories.

Methods: The study was conducted using a proprietary survey, distributed online in 2022 (N = 257). The questionnaire consisted of 34 questions, including 4 open-ended questions and one special task, which concerned the needs of supervision.

Results: Analyses suggest that supervision is highly popular among Polish professionals (98% of respondents use supervision), of which 61% use it online or in a mixed mode. Significant differences were found between older and younger psychotherapists (Chi-square = 14.682; p = 0.023) in terms of perceived differences between online and live supervision. No significant differences were found between individual generations in the perception of supervision in other dimensions studied. The analysis of ranks showed that the most important need in supervision is the supervisor’s attentiveness facilitating the ordering of the therapeutic process.

Conclusions: Numerous results describing the population of Polish psychotherapists were obtained. It was found that there were no significant generational differences in the use of supervision. Generational theories are unlikely to be useful in this area and, based on the data collected, can be treated as stereotypical. The hierarchy of needs of supervisors does not differ significantly from the previous Polish study describing this subject. The authors ranked the needs in supervision according to their importance and proposed an “inverted pyramid of needs” in supervision.

Introduction

Psychotherapy supervision, although it has existed since the beginning of psychotherapy itself, has not been so far characterized by any comprehensive theoretical or statistical study in Poland. Nevertheless, recently there has been a certain increase in the number of empirical publications on supervision [1, 2] as well as those that present examples of supervision work. In Polish and foreign publications, researchers mainly look at two aspects of supervision: (1) the supervision relationship and (2) needs in supervision.
Inspired by the discussion on the shape of psychotherapeutic training in Poland and the lack of new quantitative research, we decided to construct a questionnaire to describe the population of Polish psychotherapists and their attitudes towards supervision. An additional research question concerned generational differences between psychotherapists. “Generation” is understood as a group of members of society who were born around the same time [3]. In a period of intense civilizational change, mainly involving the intense development of various communication channels, online sessions, and a fascination with the possibilities of AI, it becomes legitimate to ask whether younger generations look at supervision differently to older ones. How do they benefit from supervision? Is psychotherapy and supervision facing “banishment” in the virtual world?

In 1991, William Strauss and Neil Howe presented their book *Generations. The history of America’s future, 1584 to 2069* [4], a generational theory that divided society into generations giving them the following labels: baby boomers (age: 58-76), generation X (age: 42-57), generation Y or millennials (age 28-41) and generation Z (age 12-27). The book has been cited 4,795 times in the scientific literature since its publication [5]. Perhaps this is why there are many references to generations X, Y, Z in the journalistic space.

Despite its popularity in pop culture, generational theory also faces criticism. Some publications undermine its usefulness and point to a lack of evidence concerning the actual differences between the generations defined by the authors. They even point out that so-called “generationalism” is actually the belief that members of different generations have some unique characteristics [6].

In 2015, Jacek Bomba and Kazimierz Bierzyński [7] in a survey study addressed needs relating to supervision. The authors concluded that the supervisor should: (1) direct his or her attentiveness to the ordering of the therapeutic process, (2) support the understanding of the emotional dimension of psychotherapy, (3) give the therapist a sense of support, and (4) facilitate the use of personal capacities. It is also important (5) to conceptualize psychotherapeutic diagnosis and (6) to embed the supervisor’s opinion.

The above findings inspired us to replicate the research after seven years considering generational theory perspective. The main research questions were related to: (1) demographic structure of a group of Polish psychotherapists, (2) supervision needs reported by Polish psychotherapists and (3) how to divide the sample considering the Polish training pathway. Polish pathway stages are represented by: (1) therapists in the course of a four-year training in psychotherapy, (2) specialists after psychotherapy training (without a certificate), (3) psychotherapists with a certificate of the Polish Psychological Association or the Polish Psychiatric Association, (4) trainee supervisors and (5) certified supervisors.

We also decided to pose a question about supervisee’s needs, but to formulate it in a different way: asking respondents to rank the needs according to their own preferences. Posing the question in this way creates a slightly different (hierarchical) context for answering and the results obtained this way can build new interpretations.

**Method**

The study was conducted with an original questionnaire, which consisted of 34 questions, including 4 open-ended questions. It was divided into 6 sections: consent questions
Polish psychotherapists and their generational attitudes towards supervision

(1 question), sociodemographic characteristics (9 questions), questions about various aspects of participation in supervision (19 questions), 4 open questions and one special task, and a thank you note. The survey was distributed electronically, with the help of the Scientific Section of Psychotherapy of the Polish Psychiatric Association, the Scientific Section of Psychotherapy of the Polish Psychological Association and also through social media (Facebook) and popular messenger apps (WhatsApp). The survey was conducted between 20 August and 7 September 2022. Responses regarding supervision were given on a nominal dichotomous scale (Y/N), or through multiple choice questions.

Table 1. Survey structure: section, question, question form

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Form of the question</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.</td>
<td>1. I voluntarily agree to participate in the survey and declare that I am an adult person. I understand that I can withdraw from participating in the survey at any time. The survey is anonymous.</td>
<td>Close-ended</td>
</tr>
<tr>
<td>II.</td>
<td>2. Gender</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>3. Age in years</td>
<td>Open-ended</td>
</tr>
<tr>
<td></td>
<td>4. Place of work</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>5. What is your educational background?</td>
<td>Semi-open</td>
</tr>
<tr>
<td></td>
<td>6. Length of service as a psychotherapist in years</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>7. What kind of psychotherapy do you work in?</td>
<td>Semi-open</td>
</tr>
<tr>
<td></td>
<td>8. What kind of patients/clients do you work with?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>9. In what form do you provide psychotherapy?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>10. What stage of your career are you at?</td>
<td>Semi-open</td>
</tr>
<tr>
<td>III.</td>
<td>11. Are you currently participating in supervision?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>12. What supervision do you currently use?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>13. What is the form of your supervision?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>14. Do you see any differences between online and in-person supervision?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>15. What differences do you see between online and face-to-face supervision?</td>
<td>Open-ended</td>
</tr>
<tr>
<td>IV.</td>
<td>16. Do you have access to supervision at your main place of work?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>17. Where do you most often use supervision?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>18. What is your supervisor’s approach?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>19. Have you been supervised by a trainee supervisor?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>20. How many hours of supervision do you have per month?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>21. What do you think is the approximate total number of hours of supervision in your professional work so far?</td>
<td>Semi-open</td>
</tr>
<tr>
<td></td>
<td>22. Do you have any negative experiences with supervision (interruption of the process, disappointment with the guidance, etc.)</td>
<td>Open-ended</td>
</tr>
<tr>
<td></td>
<td>23. How much do you currently pay for 1 hour of supervision?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>24. Could you tell us the number of supervisors you have had over the course of your career?</td>
<td>Open-ended</td>
</tr>
<tr>
<td></td>
<td>25. How did you find your current supervisor?</td>
<td>Semi-open</td>
</tr>
<tr>
<td></td>
<td>26. How do you assess the overall access to supervision?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>27. How do you assess the usefulness of supervision in the process of psychotherapy?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>28. How do you assess the impact of supervision on the process of introducing changes in the way you work?</td>
<td>Close-ended</td>
</tr>
<tr>
<td></td>
<td>29. How do you assess the competence of your current supervisor?</td>
<td>Close-ended</td>
</tr>
</tbody>
</table>

*table continued on the next page*
V.

30. What is the most important thing for you in supervision?
31. What do you dislike about supervision?
32. What qualities do you think a supervisor should have?
33. What do you expect most from your supervisor?

VI.

34. Special assignment: What do you expect from your supervisor? Organize these statements by assuming that number 1 is the most important feature and number 8 is the least important. Use the ordering arrows.

There was a significant disproportion in the number of women (N = 208) and men (N = 49) among the N = 257 subjects who took part in the study. The age of participants ranged from 26 to 70 years (M = 44.39). A sample of N = 255 subjects is presented in the paper due to missing data in some statistics records. Twenty-five subjects represented the baby boomers, 133 subjects were generation X representatives, 96 were millennials (Y) and one person represented generation Z.

A total of 99% of the psychotherapists worked in urban areas, of which 78% in cities with more than 150,000 inhabitants. Of the respondents, 77% were psychologists, 5% were psychiatrists, 9% were pedagogues and 9% represented other professions, i.e., theologians, philosophers, philologists, sociologists, special educators, journalists, chemists, etc. The most numerous group of psychotherapists in terms of professional experience are those with experience of 6-15 years of practice. We noticed overrepresentation of specialists working in psychodynamic and psychoanalytic approaches, which can be explained by the tendency of cognitive-behavioral psychotherapists to organize in separate associations.

Of all the subjects, 253 practice adult psychotherapy, 100 do adolescent therapy and 41 conduct children therapy. N = 256 provide individual psychotherapy, 97 conduct cou-
Polish psychotherapists and their generational attitudes towards supervision

of therapy, 67 work with groups and 59 offer family therapy. In terms of career stage, psychotherapists who completed psychotherapy training (but without a certificate) were the predominant group, and 24% of the subjects were certified supervisors and trainee supervisors. Aggregating the groups of supervisors and certified psychotherapists suggests that 40% of the subjects in the sample were at least certified psychotherapists.

This result should make us reflect on the criteria necessary for certification and its importance in the psychotherapeutic community.

Figure 2. **Percentage of psychotherapists at each career stage in the study sample**

Results

Use of supervision in the study sample

A total of 98% (N = 252) of the respondents confirmed active participation in supervision. Of these, 77.8% were under individual supervision, 68.8% under group supervision, 30.3% attended peer supervision, 26.8% used peer counselling and 2% did not use any of the above forms of supervision. In terms of the form of supervision, the predominant mode was mixed: online and live (61%). A smaller (26%) proportion of surveyed psychotherapists used live-only supervision, while few used online-only supervision (13%). Only slightly more than half of the respondents perceived a difference between using online and live supervision (Fig. 3).

Those who perceived a difference between the various forms of supervision gave descriptive answers, examples of which are quoted in Box 1.
Box 1. Examples of respondents’ statements on qualitative differences between forms of supervision

— “Live supervision allows for greater involvement in the process and reduces the number of distractions. [...] It allows you to feel and think better about your patients and those of your colleagues.”
— “Better interpersonal contact (non-verbal body language).”
— “No backstage conversations, no face-to-face interaction, the need for high concentration, which is difficult for me online.”
— “When I’m in live supervision, I feel that I belong to the group and more connected to it.”
— “Online is more convenient, but face-to-face contact gives you additional material.”

Regarding where supervision is used and how it is funded, 64% of the respondents have supervision provided by their main workplace, but 75% of the psychotherapists look for a supervisor on their own and pay for it with their own funds. In 11% of cases, supervision is provided by non-public centers, in 8% by a school of psychotherapy and in 6% by the workplace (public institution). The modality of one’s supervisor declared by the respondents seems to correspond with the modality declared by participants themselves (Fig. 4).
Of those surveyed, 33% had the experience of supervision by a trainee supervisor. When asked for an estimate of the number of hours of supervision they had received, respondents mostly found it difficult to specify. They did, however, indicate a significant number of hours and participation in long-standing supervision processes. An average was calculated from the answers that included specific numerical data (M = 408 hours). The most numerous group among the sample (N = 136) declared between 4 and 6 hours of supervision per month. Regarding the price of supervision, the largest group (N = 166) were those paying amounts between PLN 150 and 250 per hour. In the sample, respondents already had experience of consultation with several supervisors (M = 5.64), and they found their current supervisor most often through personal contacts or a school of psychotherapy (Fig. 5).

![Figure 5. How did you find your current supervisor?](image)

Of those surveyed, 41% (N = 105) had no negative experiences with supervision, 29% (N = 75) had a single negative experience and 25% (N = 65) had several negative experiences.

**Needs of supervisees**

Qualitative questions about the needs of supervisees were answered (depending on the question) by 231-242 subjects. The results are illustrated in Table 2.

| Table 2. Needs of supervisees – synthesis of responses to descriptive questions |
|---|---|
| **What is the most important issue for you in supervision?** | Support, deepening the understanding of psychotherapy, respect, a different perspective, trust and safety, broadening of knowledge |
| **What do you dislike about supervision?** | Criticism, evaluation, rigidity, self-aggrandizement, imposing the only right point of view, writing down sessions, lack of supervisor involvement, directiveness |
| **What qualities do you think a supervisor should have?** | Knowledge, kindness, openness, competence, patience, readiness to teach, speaking directly, understanding |
| **What do you expect most from your supervisor?** | Kindness, neutrality of worldview knowledge/wisdom, competence, greater experience, empathy, sincerity and humility |
Needs were also ranked by the respondents in the special task (Section VI, question 34. What do you expect from your supervisor?) in order from the most to the least important. The most important appeared to be:

35. Mindfulness in structuring the therapeutic process
36. Help in the understanding of therapist’s emotions
37. Support and understanding of one’s own difficulties
38. Helping people to use their own capabilities (development).

Generational affiliation and career stage and selected aspects of therapeutic practice and supervision.

To make this manuscript clearer, the results of only those combinations of variables which have shown statistical significance, or which may be cognitively valuable will be presented. Others have been omitted but have been made available to the editors of Psychoterapia.

Crosstab analysis with Pearson’s chi-square tests showed no statistically significant intergenerational differences in the sample in terms of: (1) the form of supervision, (2) the number of hours of supervision, (3) how to find a supervisor, or (4) expectations from supervisor. Furthermore, the analysis showed significant intergenerational differences (chi-square = 14.682; p = 0.023) in terms of perceived differences between online and live supervision. The older the generation, the higher the relative number of respondents perceived the mentioned difference (see Table 2). However, it should be noted that generation Z members are poorly represented in the sample.

Table 3. Generation numbers vs. perceived differences between online and live supervision

<table>
<thead>
<tr>
<th>Do you see any difference between online and in-person supervision?</th>
<th>Generation Z (12–27)</th>
<th>Millennials (Y) (28–41)</th>
<th>Generation X (42–57)</th>
<th>Baby boomers (58–76)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>0</td>
<td>44</td>
<td>77</td>
<td>20</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>27</td>
<td>31</td>
<td>4</td>
</tr>
<tr>
<td>I don’t have an opinion</td>
<td>1</td>
<td>25</td>
<td>25</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>1</td>
<td>96</td>
<td>133</td>
<td>25</td>
</tr>
</tbody>
</table>

In contrast, respondents who were at different career stages differed in terms of:

1. Proportion of respondents using one-to-one supervision (chi-square = 24.587; p = 0.0001). The proportion of attendants and non-attendants of individual supervision at most career stages oscillates between ¼ and ⅓, all trainee supervisors and half of the certified supervisors use this form of supervision.

2. Percentage of respondents using peer group supervision (chi-square = 13.012; p = 0.023). Particularly distinctive groups were: (1) psychotherapists with completed training but without certification (38%) and (2) certified supervisors (56.6%). However, it can be stated that the reasons for using this form of supervision are different in these groups.
3. Expectations from the supervisor. The Kruskall-Wallis test ($p < 0.05$) indicated that there were significant differences in terms of the level of individual expectations of the supervisor by individuals at different career stages. The results of more detailed analyses indicated that the difference related to the variable “Support and understanding of my difficulties” ($\text{Chi-square} = 9.571; p = 0.048$). Analysis of the level of mean ranks given by each group suggested that the more advanced the career stage, the higher the rank given to this expectation.

**Discussion of the results**

**Structure of the study sample**

The data obtained indicate that among psychotherapists it is women who are the dominant group and this is also confirmed in other studies: the ratio between female and male psychotherapists generally varies between 4:1 and 5:1 [1, 2]. This disproportion is often explained by the perception that the profession of psychotherapist is mainly correlated with stereotypically feminine traits such as sensitivity, high empathy, support, etc. With career progression, the gender disproportion decreases. There are no data so far on the reasons for this phenomenon, but it can be assumed that the explanatory factors are similar to the wage gap: (1) working hours may be less favorable for women due to other responsibilities, (2) women are more likely to take care of younger or older family members [8].

The majority of psychotherapists practice in cities with a population of more than 150,000, which allows us to conclude that psychotherapy is mainly available in larger cities and that this is where the greatest development appears.

The most numerous groups in terms of seniority were psychotherapists with 6-15 years of experience; however, we noticed an overrepresentation of “older psychotherapists” in the survey, which is probably related to the distribution of the survey and the likely greater interest in the survey topic especially among experienced psychotherapists and supervisors. Among the therapists surveyed, the psychodynamic modality was predominant, which is representative of the older societies for psychotherapists, namely the Polish Psychiatric Association and the Polish Psychological Association.

The majority of us work with adults and about one third with children and adolescents, which seems to indicate an increased interest in providing psychotherapeutic help to this age group. Individual therapy is still the dominant form, while couples therapy is the second most popular.

**Generational affiliation**

The study confirmed that generational theories are not a useful construct in contexts relevant to psychotherapists, which is also criticized in the literature [6]. No significant (statistically significant) intergenerational differences were detected in terms of form of use of supervision, number of hours of supervision, method of seeking a supervisor or expectations of a supervisor. The only intergenerational difference detected is the perception of a qualita-
tive difference between online and live supervision. Among the younger generations, fewer see a difference between the two. The older generation is more likely to see this difference, which can easily be explained by the difference in experience with the online reality, which for the younger generations already seems to be universal and equivalent. So, in the future, will we recognize that live supervision and online supervision are equivalent processes?

Career stage

Significant differences were revealed in terms of the form of supervision between the groups divided by career stage. Individual supervision was used most frequently. All trainee supervisors used this form of supervision. The group of certified supervisors is distinguished by the use of peer group supervision, which can be understood as a mature ability to seek support and understanding for oneself among a peer and professional group.

Differences were revealed by career stage and perceived differences between online and live supervision. Those with more advanced careers are generally more likely to perceive this difference (a similar result is seen when dividing by generation).

A further difference towards expectations from the supervisor was revealed: the further along in the career, the more important the need for support and understanding of difficulties becomes.

No differences were detected between the groups in terms of the number of hours of supervision. It is therefore not true that psychotherapists at the beginning of their careers differ from experienced psychotherapists in their need for supervision. The study shows that the number of hours of supervision is not significantly different at different career stages.

Psychotherapists’ preferences and needs in supervision

Almost all the therapists surveyed have a need for supervision, most often individual supervision, secondarily group supervision. Psychotherapists, probably due to the post-pandemic reality and the facilitation of online contact, prefer a mixed form of supervision (live and online). More than a half perceive differences between these forms.

More than a half of the respondents are provided with supervision in the workplace, which would indicate the spread of the supervision process in institutions. Nevertheless, most psychotherapists supervise privately. The analysis shows that we are most often loyal to our own modality and attend supervision with a supervisor representing our modality. However, when there is an incompatibility between the modality of the psychotherapist and the supervisor (e.g., CBT psychotherapist), we more often seek a supervisor from psycho-dynamic modality. Interestingly, the opposite search vector i.e., analytic psychotherapist, and supervisor representing CBT, is not observed.

Approximately one third of the respondents have had supervision with an applicant supervisor, which is probably dictated by the formal limitations related to the lack of a supervisor certificate, the number of hours counted towards the psychotherapist certificate, etc. Most subjects have between 4-6 hours of supervision per month, which is quite optimistic. The approximate total number of hours of supervision in the professional work to date was 408 hours.
Unfortunately, as many as 55% of the respondents had a minimum of one or more negative experiences of supervision. Based on the data obtained from the respondents, it appears that on average they will have come into contact with around 5.64 supervisors during their career, which, when compared with the previous result, should make one think about the responsibility that supervisors bear.

We most often look for a supervisor by direct referral. We perceive supervision as quite accessible in our country, we highly value supervisors’ competence, usefulness in psychotherapy and we see its impact on the process of change in psychotherapy.

Based on the results obtained in the special task, an inverted pyramid of needs in supervision was constructed (Fig. 6). It illustrates the needs of supervisees in order from the most to the least important. In the first place is the need for mindfulness in structuring the process, which supports outcomes received by J. Bomba and K. Bierzynski [7]. It is interesting to note that the greatest need of supervisees in both surveys is precisely the supervisor effort to order their therapeutic process.

Support and understanding of the psychotherapist’s difficulties was ranked as a second, while guidance in working with the patient was ranked third. This triad can be considered the most important needs in the supervisory process, and the application of this triad in supervisor’s work should be in line with the expectations expressed through psychotherapists.

Interestingly, the least expected in supervision are, in order, the work evaluation needed for certification and criticism of mistakes (result identical to the 2015 poll). It is understandable that the need for evaluation in supervision is not very desirable for supervisees,
but this result can also be understood by high sensitivity to criticism, since the supervision process itself contains an element of evaluation, which is necessary during the psychotherapist’s professional development. This is related, for example, to the responsibilities of the recommending supervisors. It may also be that self-censorship or even denial of the motivations associated with the certification intensified during the study.

Our study is not free of some limitations. Despite the attempts to reach CBT psychotherapists in the study sample, there were few of them, which makes it difficult to generalize the results to this group. The subject and goals of the survey were transparent to subjects, which may have resulted in psychotherapists avoiding supervision not participating. There is little representation of Generation Z, which encourages to repeat the survey in a few years’ perspective.

Conclusions

The survey conducted in 2022: “Supervision of psychotherapy – a survey for psychotherapists”, resulted in interesting findings about Polish psychotherapy and supervision.

Firstly, the analysis shows that supervision is in great demand among professionals.

Secondly, there are no significant differences between the different generations in the perception of supervision. There are no significant generational differences in the form of use of supervision. Generational theories are unlikely to show any usefulness on this topic and can be regarded as stereotypical.

Thirdly, the needs in supervision were classified. The study shows that the most important of these are, in order: mindfulness in the structuring of the therapeutic process, support and understanding of the supervisee’s difficulties, and the need for guidance in working with the patient. Fourthly, it can be concluded that there has been an increasing interest in online supervision; however, it is the senior psychotherapists who are more likely to see a difference between online and live supervision.

References

5. Google Scholar, accessed: 1.01.2024.

Email address: k.j.galinski@gmail.com; jgierus@gmail.com