

Journal of Marital and Family Therapy doi:10.1111/jmft.12060 July 2014, Vol. 40, No. 3, 402-406

## **REVIEWS**

## Megan L. Dolbin-MacNab, Reviews Editor

Lee, R. E., & Nelson, T. S. (2013). *The contemporary relational supervisor*. New York: Routledge, 228 pp., \$49.95.

Lee and Nelson have written a text that has just about everything you could want, and more, from a book about supervision. I say that purposefully—it is a book *about* supervision, not a book that teaches you how to supervise. The authors are clear in their purpose for the book, "... we do not attempt to teach people how to supervise; rather we seek to present multiple ideas about approaches to supervision so that learners can identify, clarify, and articulate their own perspectives and positions" (Lee & Nelson, 2013, pp. 83). While the authors state that they did not write the book to teach people how to supervise, it is clear that this book should be considered a core text for any couple and family therapy (CFT) supervision course.

The text is organized into four main sections (and then further broken down by chapters within these major sections) including (a) Understanding the Supervisory Process: An Overview, (b) Relational Supervision Practices, (c) Contextual Considerations, and (d) Troubleshooting and Writing a Personal Philosophy of Supervision Paper. The authors also include special chapters on "Effective Supervision According to the Literature" and "Supervision Based on Core Competencies." These chapters alone are worth the price of the text. They clearly outline and provide succinct information that is crucial in the current climate of evidence-based practices and outcome-informed learning environments. Another chapter that is beneficial to readers is the chapter, "A Closer Look at Supervision Formats." This chapter focuses on the different formats of supervision. This section is particularly helpful due to the thorough way in which the authors "think through" both the pros and cons of each method. Further, the authors present information on revolutionary forms of supervision, including digital/electronic and internet versions of supervision.

It is evident throughout the book that a relational perspective is central to the way in which the authors wrote the book. Immediately, the authors start with systemic concepts, discussing interdependent variables and the fundamentals of working with trainees/interns who work within a relational therapeutic context. They also continually integrate systems theory concepts into how they suggest thinking about supervision. Further, Lee and Nelson interweave the components of AAMFT and COAMFTE educational requirements throughout—highlighting and enlightening the components of CFT education and therapy. As a matter of fact, they do not even make mention of providing supervision for nonrelational therapies (45% individual, 51% relational, 4% group therapies in private practice settings; Northey, 2002). However, the way in which CFTs think of presenting issues and intervene with theory is consistently relational and systemic in nature. This book mirrors that relational focus within the context of supervision.

Another benefit of the book is that, at the conclusion of each chapter, the authors have included "exercises" that challenge the reader to think in different ways and develop as a supervisor. An example of one of these useful exercises is, "Some concerns are raised about using therapist reports only for supervision; therapists can (and do) filter their reports through their memories, theories and other experiences. They may even lie so as to look good to their supervisor. If you use or contemplate using case consultation what do you think about these concerns and how will you manage them?" (Lee & Nelson, 2013, pp. 82).

Lee and Nelson have a succinct, yet highly informative, way of writing about supervision that provides a vast amount of information in a small amount of type-written space. Even complicated legal and ethical details are easily understood and clearly articulated, for example HIPAA laws and details of Release of Information (chapter 11). Overall, the book is an enjoyable read. The only things missing from the text are examples of the documentation they recommend within the chapters. For instance, providing an example of an evaluation of supervision measure would have

been helpful. Further, there are no specific handouts or worksheets provided as examples of how to develop and word the "nuts and bolts" of the supervision process documentation. The authors do provide lists of what should be included in a supervision contract, which is helpful, but do not provide examples of these documents. Further, an example of a supervision note does not exist, nor is there a suggested format for how to log these notes. These resources would have been helpful, especially for novice supervisors.

When considering this book for use in supervision courses/programs, you may be asking (as I was by a colleague recently), "Why not use one of the other CFT supervision books, like the "tried and true" *Complete Systemic Supervisor* (Todd & Storm, 2003), or *Readings in Family Therapy Supervision* (AAMFT, 2000)?" My answer to this question has been made famous recently in television ads and on the Internet as satire—"Why not both?" In terms of direct content, all three texts are similar in presentation and the type of information they provide. Some information is often repeated in the three texts; however, the Lee and Nelson text is written in a way to make relational supervision much more accessible and easy to understand or incorporate. In addition, the cost of the Lee and Nelson text is quite reasonable, making it a perfect accompaniment to any additional texts and resources a seasoned supervisor should want to provide.

This text is directly linked to the AAMFT-Approved Supervisor designation and process; as such, it could be considered as a core text for any AAMFT-approved or COAMFTE-Accredited Program's course in CFT supervision. Current Approved Supervisors and Supervisors of Supervision could benefit from reviewing this text as well—for the updates and the unique, cutting-edge information that is woven within the text so well by the authors.

Christopher K. Belous, PhD, LMFT Mercer University Atlanta, GA

## REFERENCES

American Association for Marriage and Family Therapy (AAMFT, Ed.). (2000). *Readings in family therapy supervision*. Alexandria, VA: American Association for Marriage and Family Therapy.

Northey, W. F. (2002). Characteristics and clinical practices of Marriage and Family Therapists: A national survey. *Journal of Marital and Family Therapy*, 28(4), 487–494. doi:10.1111/j.1752-0606.2002.tb00373.x

Todd, T. C., & Storm, C. L. (2003). The complete systemic supervisor: Context, philosophy, and pragmatics. Lincoln, NE: iUniverse.

Lebow, J. (2013). *Couple and family therapy: An integrative map of the territory*. Washington, DC: APA Books, 310 pp., \$69.95.

*Couple and Family Therapy: An Integrative Map of the Territory*, by Jay Lebow, is a book designed to move beyond single models of treatment while advancing an integrative approach to practice of couple and family therapy. As a result, this publication serves as a current "State of the Union" address for the marriage and family therapy (MFT) profession. I can think of no one more appropriate to undertake such a task than Jay Lebow. Never being overly associated with any specific theory or approach, he is a scientist-practitioner who has dedicated the past four decades of his career to exploring what can be learned by combing different models and perspectives in the fields of family psychology and MFT.

The first few chapters provide a historical overview of the field of couple and family therapy to set the stage for presenting an integrative view of practice. In chapter 3, Lebow stresses the importance of both psychotherapy research as well as nonclinical research on couple and family processes in shaping an integrative perspective. His clear and concise writing style distills the research into digestible nuggets of clinical wisdom for frontline clinicians who may have never read a scholarly journal or primary source. The chapter speaks not only to the ways in which research can be helpful to clinicians, but also highlights its potential limitations and describes how clinicians can give feedback and be part of the dialogue in shaping future research directions. Chapter 4 reads as a concise history lesson, linking classic MFT models to more current and next generation updates.