

Book Reviews

Supervision in Clinical Practice: A Practitioner's Guide (2nd ed.)

Joyce Scaife (with contributions from Francesca Inskipp, Brigid Proctor, Jon Scaife and Sue Walsh)

Hove: Routledge, 2008. pp. 424. £24.99 (pb). ISBN: 978-0-415-450003.

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As noted by Joyce Scaife in the introduction, beliefs about the value of supervision outweigh the evidence for its benefits, but presumably this conviction reflects the fact that supervision is the place where theory meets practice. Although distinctions are rightly made between “training” and “supervision” it makes sense to see these as overlapping rather than separate activities, since supervision should create a context within which ideas can be translated into actions. However, supervision is not simply a forum for learning; it is also a source of support, and for novice therapists a form of evaluation. This makes it quite a complex activity, and it is risky to assume that supervision comes naturally to all therapists. Despite this, there are rather few contexts in which supervision training is required before taking up this role, and rather few members of BABCP are formally registered as supervisors. For most professional organizations a requirement to demonstrate formal training in supervision is still some way off (even if increasingly close to realization). This leaves us in a slightly paradoxical situation; while most therapists see supervision as central, its content is often unspecified and its practice unregulated.

In this context Scaife's clear exposition of good supervisory practice is just the ticket. This is the second edition of a book that will already be familiar to many practitioners and trainers, updated to include new research and to extend discussion. Its virtues remain the same: it includes thorough coverage of relevant research and of models of learning and of supervision, but at heart its intent is pragmatic and (to my mind) is the closest thing we have to a manual of supervision. It clearly describes the good practice that supervisors should aim for, carefully detailing the processes involved in initiating and maintaining a good supervisory relationship, and in that context identifying procedures that should enhance learning. It also alerts supervisors to the many and varied challenges that they will almost inevitably encounter, and by offering solutions to these challenges reduces the likelihood that supervisors will react to these unhelpfully.

It is fair to say that the book is generic in outlook, notwithstanding a chapter that focuses on supervision for specific models and which includes a brief consideration of the ways in which supervision of CBT can be structured. This means that experienced supervisors who are seeking to learn about CBT-specific supervision skills will find only limited direct discussion of this topic. For most readers I am not sure this is a serious deficiency, since much of the skill of supervision rests on a supervisor's capacity to instantiate basic educational principles. In addition, there is careful consideration of issues that (even if common across therapies) are central to CBT supervision. A good example is the section on direct and indirect observation of clinical work, activities that can be surprisingly difficult to implement. The pragmatic orientation of the book means that it identifies the practical and emotional challenges to

observation and the various ways in which these translate into avoidance and “excuses” on the part of both supervisees and supervisors, making it more likely that this is something that will actually happen.

Traditionally a book review should identify shortcomings as well as virtues. Certainly there are some – for example, while it is good to see a section on the Improving Access to Psychological Therapy initiative, this contains a slightly misleading description of the programme. This is a shame, not only because IAPT is such a major development but also because of the central role accorded to supervision by this programme. However, small errors of omission or commission do not detract from the utility of this book for supervisors at all levels of experience. It has many virtues, and I recommend it strongly.

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Evidence-Based Practice of Cognitive-Behavioral Therapy

Deborah Dobson and Keith S. Dobson

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This volume aims to “build a bridge between research on cognitive-behavioural therapy and what clinicians actually do day to day”. This certainly seems a useful endeavour given that there is still a gap to be bridged. Indeed, it is surprising that, although much effort has been directed towards developing treatments that work, there has been relatively little work regarding how to translate research findings into clinical practice. Overall, I think the authors have achieved this aim in a volume that is relevant for all clinicians who embrace the scientist-practitioner model. It will be especially useful as an introductory text but should also offer something of interest to more expert practitioners.

One of the biggest strengths of this book is that it contains an impressive amount of information, offering both breadth and depth. However, its density could also put off some less dedicated readers. One aspect of the book that may be less attractive to readers is that visually it is rather uninteresting, comprised of text and text-based figures and tables. However, to bring the book to life, the authors illustrate the chapters with an unfolding clinical case as well as frequently referring to examples from clients in their own practice. Where authors are unable to cover certain topics in detail they offer useful further references.

This volume is not intended to be used in isolation by clinicians as it provides only an over-view of disorder-specific forms of CBT. Rather it brings together the factors common to CBT across different problem areas. As evidence-based practice for many psychological problems requires the use of disorder-specific forms of CBT, readers would need to read the current volume in addition to disorder-specific CBT manuals. Perhaps this lack of focus on disorder-specific treatments is, for me, the biggest weakness of this book, given its title. However, the authors are clear about their intentions and reviewing CBT across problem areas has enabled them to distil key principles that may be less visible from a disorder-specific vantage point.

The authors bring together several areas of expertise on top of CBT: psychology, clinical research, clinical training, private practice and professional issues. Both are based in Calgary,