

Podcast Guest (Andrea Redeau) (2023-01-16 15:08 GMT-8) - Transcript

Attendees

Andrea Redeau, Dr. Tara Sanderson

Transcript

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Dr. Tara Sanderson: Welcome everybody, and thank you for joining me today. We are talking to Andrea. I should have asked you how to say your last name redeau. Yes, win there.

Andrea Redeau: Redeaux, you are right. You.

Dr. Tara Sanderson: Yeah. We met many moons ago, it feels like talking about a working through our

Dr. Tara Sanderson: My practice. I had asked her to come and teach in my practice talking about working on our own stuff and building cultural competence. And I am so excited to hear all of the things that you have got going on in helping others, build in the same way that you came in and trained my staff in the Andrea is a licensed professional counselor, as well as a clinical supervisor. For those seeking licensure in Oregon. She currently serves as an appointed board member on the Oregon Board of licensed, professional counselors and therapists and just in case you're not in Oregon, Oregon has a lot of really long names for very many things. Everything has like a six word name here we're not just you know licensed professional counselors or professional counselors associates or whatever it's like the world's longest names.

Dr. Tara Sanderson: Um, she's also a presenter educator and I secretly loved that. You included that you're the you're an overall badass in the world of therapy on your website. Because I do believe that every time I talk to somebody about you, I immediately think like she's just she's got a lot going on,...

Andrea Redeau: Well, thank...

Dr. Tara Sanderson: and she is masterful at the way she does it. So, I am so grateful that you're here today and gonna share with us.

Andrea Redeau: That was so nice to hear. It's always But sometimes uncomfortable, but nice to like that. Reminder of like oh yeah I am. Yes, I am. Sometimes I write it and then oftentimes I believe it.

Dr. Tara Sanderson: Yeah, that's right. That is right. So as we get started I'm gonna ask you. My random question for today. And today's question is, what modern convenience could you live without?

Andrea Redeau: Could I live without? oh, That is so hard.

Dr. Tara Sanderson: Hmm.

Andrea Redeau: What modern convenience could I live without? I could live without air conditioning. I could live without air conditioning.

Dr. Tara Sanderson: Mmm.

Andrea Redeau: I am somebody who's constantly freezing And so even at the moment...

Dr. Tara Sanderson: Gotcha.

Andrea Redeau: where everybody else is like, it's so hot in here. I'm like really I'm feeling really neutral at this moment. And so I could live without air conditioning, it would be hard, but would be far easier than living without heat,...

Dr. Tara Sanderson: Yes.

Andrea Redeau: because I live my life cold but I would say air conditioning. Is like what I'm willing to give, but I don't want to give much else.

Dr. Tara Sanderson: Yeah. Yeah, right. When I looked at that question, I started listing off in my head, all the things that I really enjoy about this time period in our lives. And then, I thought, You know, I could live without contacts. Like, I wear contacts all the time. I, I like being able to do stuff without my glasses, not getting fogged up, or rained on or whatever. But if I had to, I could live without glue, without contacts, I could do,...

Andrea Redeau: Yeah. as a glass is...

Dr. Tara Sanderson: I could do glasses and be just fine.

Andrea Redeau: where all day every day in a non-contact where you may want to come over to the good life, You do get foggy, you rained on it is hard to lay down like you put your head on a pillow.

Dr. Tara Sanderson: Yeah. It's true.

Andrea Redeau: But I I feel like glasses are a vibe. So I've I've instilled it.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: So if you want to come over to this good life, let me know.

Dr. Tara Sanderson: We'll do. I did read something the other day that was like the thing that I'm worried about the most with if there's an apocalypse or, you know, a zombie revolution, or who knows whatever else is losing my glasses. Because at that point, who's going to give you new ones and I was like, Oh dangerous, yes, that's a prescription.

Andrea Redeau: I never. I never even thought about that.

Dr. Tara Sanderson: You can't just use anybody, right?

Andrea Redeau: Makes sense. What would I do? Without if I didn't have glasses, I would just be nauseous and running into walls all day. So, okay,...

Dr. Tara Sanderson: Right.

Andrea Redeau: so if there's a family apocalypse, if the big one hits Oregon, grab both of my pairs of glasses.

Dr. Tara Sanderson: Yes, hold on to them with dear life is...

Andrea Redeau: Got it.

Dr. Tara Sanderson: what I learned from that. Oh, all right,...

Andrea Redeau: I think that's it.

Dr. Tara Sanderson: so we're gonna talk a little bit about being a bypuck, therapist, being a supervisor and kind of just an exploration of anything and everything that we want to talk about today. So let's get going.

Andrea Redeau: Okay, great.

Dr. Tara Sanderson: What are the what are the top? Maybe like just you can go with one thing or three things don't really you know whatever works for you things that you feel like are kind of the most important things that we need to know about your experience being a bypak therapist or by Fox supervisor.

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Andrea Redeau: Most important things are so many things. I think the most important thing.

Dr. Tara Sanderson: I know.

Andrea Redeau: Is. To remember as a bypok therapist. That we have an additional layer of trauma that we have to sit in. All times at all times,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: that it's a layer of trauma that there's a basic layer of trauma that comes with doing what we do. Right. And then there's your own counter transference that comes with doing what we do. And then there's another layer of systemic harm that are field is now,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: just starting to see. I wouldn't say reckon with, I would say see, And that layer of trauma that we interact with on a daily basis.

Andrea Redeau: Is something that I think keeps us out of the field and out of the good work. That we need to and want to do for our own community. That that trauma impacts my ability to do the work that I want to do for my community. And I think is new clinicians. There's so much newness, you're kind of just like a little dove just like walking around trying to get your feeding and like I'm so overwhelmed and then

there's this other part that's not in books. Professors don't talk about people don't tune you into and it hits you like another ton of bricks

Dr. Tara Sanderson: Yeah. Yeah, and I think that element of it it's not a slow creeping, right? It is a ton of bricks when it hits.

Andrea Redeau: Yeah. It is. I think that it is in my experience, it is like earth-shattering. It's that foundation, break that you see with, when we work with clients and you teach them about racism and sexism and all that isms and patriarch in that like shattering of all the things you knew to be true like that crack in your foundation.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: that is happening, as you are watching somebody else, go through a crack in their foundation and...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: it is It is been the hardest part of this career and I think it's something that we often don't attune to because there was nobody talking about this when I started in the field.

Dr. Tara Sanderson: You know. Absolutely, absolutely. And I think that's why it is so important that we keep figuring out ways to support more by pox supervisors. So that as people are going through this experience of being a baby little clinician and learning just the ropes of being a clinician and have these brick experiences, these earth-shattering experiences that they're talking to somebody who truly gets it.

Andrea Redeau: yes, having somebody Who gets it from a level of like, Oh, I remember. Like I remember the moment, it shattered where I was,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: I could tell you what was on the wall. What room I was in, where I was an uber Oregon. I can tell you exactly what happened the moment I went. Oh, there's a thing here. oh, That's racism. Oh wait. Is that towards me? And the kind of like tumble of your thoughts?

Dr. Tara Sanderson: Yeah. Yeah.

Andrea Redeau: And fortunately, that tumble doesn't stop it. Just kind of slows down. Over time.

Dr. Tara Sanderson: Yeah. What are some of the tools that you use with supervisees to help them navigate that?

Andrea Redeau: So, I think the first tool that we do is just naming that it's here that like, racism and race are going to play a role in all of your client interactions. That. if you haven't done your own work around your race,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: racism, your own experiences, maybe the unconscious belief that you have It is going to be more challenging in that moment to do that with somebody else who is living in those beliefs and...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: so I think the first part is it is happening. What is happening is real and...

Dr. Tara Sanderson: Yep.

Andrea Redeau: that is racism. And it's Hard.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: Because in this role, We are there to help and we're there to care. And we're there to invest in to be with people.

Andrea Redeau: And we are taught to put your emotions aside to shelf that it's not about you, you're having counter transference, stop feeling that, stop making it about you. When everything about this interaction and racism is about me. So how do I...

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Dr. Tara Sanderson: Yeah.

Andrea Redeau: then shelf this when it's impacting everything I do in our interactions? and so there's a part to...

Dr. Tara Sanderson: Uh-huh.

Andrea Redeau: where if we can name it, For ourselves. And we can see how it's interacting with our clients, our co-workers, our bosses, all of that. Then we have a little more power in the situation.

Dr. Tara Sanderson: Yeah. Yeah, I think about so much of American culture specifically, but, you know, probably a little more universal than I know of being very conflict avoidance. Like we want, like our ultimate goal when you ask most people is, like, happiness and like, you know, I very much channeled, my my inner Miss universe of saying, like world peace, like that's what I want, right? But I do think that a big part of this process is conflict and it is sitting with the messiness of shattering of your foundation and figuring out how to move in conflict with another person for everybody's growth and benefit, right? Because it's not just about one party anymore. It's about both parties in that.

Andrea Redeau: Yes, and it's about the roles that you play in all of those. And it is, it is innately confrontational, It didn't neatly uncomfortable. You know, we learn right in our books that you know, when there is a difference, you talk about it, right? When there is a difference, when there is a socioeconomic difference, you talk about it. When there is a different in how you view the world, your social location you talk about it. But in all of those instances, nobody told me what it would be like to be black in the counselor and...

Dr. Tara Sanderson: Right.

Andrea Redeau: there is a white person on the other side. It's always you have the power, you are the dominant culture. So broach. This Well,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: outside of this room. I really have no dominance so this room, I'm actually not in the dominant culture but is still

Dr. Tara Sanderson: Yeah.

Andrea Redeau: We have to I have to every day teach supervises, how to navigate through those conversations.

Dr. Tara Sanderson: And I think that's really powerful to remember that that the the role of being a supervisor, when I think about the hats, we wear the role of being a supervisor, kind of my visual of that just became a hat with ear flaps, right? Like we have extra components that we have to navigate and especially as a bypass supervisor like you have a whole extra layer of work that must be done with a supervisy, to really like, understand their own stuff, leading into the therapy room and how they navigate things. In the therapy room down to the basics of what we learn in those first initial sessions of like and more, right? It's not enough to just you...

Andrea Redeau: and, Yes,...

Dr. Tara Sanderson: notice the the difference in socioeconomic status. We now have to also say like there is more here, something bigger in this room.

Andrea Redeau: then that I think as a supervisor I've learned to attune to that early on, right? And so before I would say like Well tell me a little bit about your experience. Now, it's what is your social location, What? Identities, trigger you at what moments do, I know that you're in distress, Have you ever had confrontation around race? What would that look like professionally for you to navigate that? How does it feel to have a black woman? A biracial. Black woman, as you are supervisor, have you ever had anybody for my social location as your quote unquote authority? What does that look like?

Dr. Tara Sanderson: Yeah.

Andrea Redeau: And these are all a second layer of conversations that without, I'm not safe and they're not safe.

Dr. Tara Sanderson: Yes. Yes. I was just doing a consultation earlier about like talking to a potential supervisie and I always recommend that they go out and consult with several before they pick one. I said, You know, don't pick one out of convenience or cost pick one that really fits for you and what you want to do and some of the questions I have them asked were things like, You know, tell me about your theoretical orientation. Tell me about how you look at notes and background, you know, like intake documents and things like, How do you structure therapy sessions? But you're right, I did not think at all about like, that extra layer of

Dr. Tara Sanderson: Of so many elements of how we would have to work together from that idea of, you know, how would it be to have somebody who is biracial. Black as your supervisor, as someone in authority to you, Have you ever had to have a racial conversation or a race or a conversation around having somebody who is in my socioeconomic status? Overseeing you like those elements are so vital to understand right up front. So that you do know, if it's somebody...

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Andrea Redeau: You.

Dr. Tara Sanderson: who can work with you and wants to grow in whatever areas they're going in or somebody who's going to trigger in weird ways, that isn't going to make be a good fit.

Andrea Redeau: You're right. I always encourage especially like, when we have that. Like, What is your theoretical orientation? Why? Why is that your orientation?

Dr. Tara Sanderson: Yeah. Yeah.

Andrea Redeau: Can you attach that orientation to your own identity to how you see the world? If I can see how you see the world? When we do get into sticky situations, I can go. Oh, that makes sense. Why you chose to do that? Probably not the best decision. However, I can see from your upbringing from your social location. What? Your goals, are your theoretical orientation, your identity, the clients identity, I could see why you moved into some triangulation that makes That lens.

Dr. Tara Sanderson: oh,

Andrea Redeau: Oftentimes what can happen is it?

Andrea Redeau: It comes down differently, right? Because I am a black woman, right? And there are stereotypes that often people's believe and...

Dr. Tara Sanderson: Yeah.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: so I can be seen as aggressive. I can be seen as two directive. I can be seen as being mean or hurtful. If we don't have that conversation up front, that's how you're likely gonna proceed, the redirection And so let's have it up front about...

Dr. Tara Sanderson: Yep. Yep.

Andrea Redeau: who I am and who you are. And let's see if it meshes and if it doesn't That's all right. I'll see you in the field over from people to you.

Dr. Tara Sanderson: Yep. Yep.

Andrea Redeau: Let me

Dr. Tara Sanderson: Absolutely. And I love that, that element at the beginning, where you were saying, but getting somebody to answer. Why, like, Where did it come from in? You that, you understand, that this is how change happens, or This is how people grow or whether it is, like, What's your background in that? Because that's gonna influence all of your decision making whenever I talk to new supervises about like, Well, how do I develop my theoretical orientation? Do I just pick one, I always look at them and say like, no, you don't just pick one because you can do any of them, it is possible to learn to do any of them, but the way that you truly understand how change happens and how you expect that to come about

Dr. Tara Sanderson: The easier it's going to be to utilize those tools in that framework to do whatever. And then you pile in all of the like extra tools that you want to use on top of that framework.

Andrea Redeau: Right.

Dr. Tara Sanderson: And especially, as a supervisor,...

Andrea Redeau: and,

Dr. Tara Sanderson: kind of turning that into that element of saying. Now that I know how you see the world now, I know it to be on the lookout for for when we have a conflict or when there is something, or when you're making a choice, that I not so sure. I agree with how I can tie that back to, Where did that come from? Oh, you have this in your history, which brought along this now, I know why you picked it, but here's how we're gonna do it in the future, because this is more beneficial to our clients, or this is better in whatever way.

Andrea Redeau: Yes, absolutely. It gives us the why, right? That's what we as therapists want to do, and I want people. To do things based on what they truly believe like, I am a big advocate as a supervisor like, What's your gut telling you? Well, I don't know...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: if I should go with my gut. Well, you're up in your head and I can guarantee we read the same book, so I know it was thinking, but how are you feeling? What's the difference?

Dr. Tara Sanderson: Yes.

Andrea Redeau: Because if we acted on what we were thinking, we wouldn't be in this conversation but you act one...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: how you were feeling. So what did your gut say? There's always some Strength in there again, I'm a strength based therapist, right? So there's a strength in there. How can we pull that out and it is related to who you are in your identity. It is related to how you see the world and I want people to be able to do that without supervision at some point. So let's teach you how to do it.

Dr. Tara Sanderson: Yeah, absolutely. I think that is such a important component. Our history has created lots of patterns of behavior. Some of those culturally, you know, pushed upon us and pressed upon us. Some of those from our family dynamics, some of those from choices that we made that seem bright enough at the time.

Andrea Redeau: If?

Dr. Tara Sanderson: And then there is this core element of who we are and our value, and our vision, and our mission in life. But, you know, is deep in there, and I think helping supervisees separate out. Like, I'm definitely conflict avoidant as a little human and knowing that, that came from my parents divorce and that came from all sorts of my stuff, right? Like I can peacekeep, I want a peacekeep as much as possible but knowing that like my gut doesn't want to peacekeep my patterns of behavior. Want me to peace. Keep. Right.

Andrea Redeau: Okay.

Dr. Tara Sanderson: So when there is a conflict needed in therapy or in supervision I can absolutely feel. My my self say you need to lean in and fix this and then all of the patterns of behavior that I've ever done as a human go. No, no, no, just ignore it. It will go away, right? The difference between my gut and...

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Andrea Redeau: Absolutely.

Dr. Tara Sanderson: my patterns and my brain, right and trying to get really clear on like well who's speaking here which one is going? A fear base, which one is going from a strength space which one is, you know, really going to get you towards your end goal and...

Andrea Redeau: We? Yes.

Dr. Tara Sanderson: let's not let's not give ourselves too much credit for you know, all the things we've learned or all the ways that we've dealt things before. Let's really hone in on like what's gonna help us get to our goal even if it's big hard and scary.

Andrea Redeau: Absolutely. And it's often big-hearted scary. That's like it's a big hard and...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: scary and how do we honor that? Yes, I got wants to do this but somehow I listened to my head and...

Dr. Tara Sanderson: Again.

Andrea Redeau: somehow I listen to appear, right? But I always go back to your, I fundamentally believe therapists are bored. I can't teach you how to be a therapist. You're born this way.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: You were born as a healer. Another cultures we see that is a healer in this culture. We call it a therapist. And so what is your gut? Telling you you didn't come to this field just happenstance. The books are how you write it. The books are how you treatment plan, the books are our protection, oftentimes what your gut say,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: and how can we maneuver that to follow what the books are saying?

Dr. Tara Sanderson: Yeah. One of my clinicians a little while. Back said, Tara was reading these, these three different treatment models over the course of the last couple of months. and I,

Dr. Tara Sanderson: Feel like they're all saying the same things with different titles is That, am I alone? And I'm like, no, girl, you're not alone in that. That is a hundred percent True.

Andrea Redeau: Nope.

Dr. Tara Sanderson: Like we all all of them have different ways of conceptualizing, the concepts in which change gets made, and how we help people. And for good reason, some things just work better for some

diagnoses, some things just work better for some people. Somebody really like lived this experience and was like It's so good. Let me help other people with this. It's awesome that we have tons of different things, but you're right, boil it down to its core. We're we're talking about community, helping people make changes in their world so that they can be themselves, right? And taking out even the like the element of saying that they can be their best selves.

Andrea Redeau: Okay.

Dr. Tara Sanderson: I don't know that. I even meet people to be their best selves. I just want them to be themselves.

Andrea Redeau: You see? Absolutely and if we can say that sometimes your best self doesn't show up and that's okay. I forgive you.

Dr. Tara Sanderson: Yeah. Yeah.

Dr. Tara Sanderson: Absolutely. Oh, so good. So much stuff in there. How do you feel like supervisors could do better at challenging supervisees to do their own work?

Andrea Redeau: If you, I think that it's as a supervisor, I see that as my role is, I and again, this is my theoretical orientation, which is based on who I am as a person, which is a very direct person. And I love to challenge things. I loved your challenges status quo. I'm the one who like throws the bombs. Like, Oh, let's see what happens. And I love the reaction, right? So honoring that, that is how I do things. I completely understand that not everybody is like that.

Dr. Tara Sanderson: Here. Yeah.

Andrea Redeau: For me, I think challenging people is asking where do you want to go? What do you want me to provide you? What are we looking for? Are you looking for a supervisor who is supportive and in a cultural because that's what you need. Okay.

Dr. Tara Sanderson: Hmm.

Andrea Redeau: That may not be me today. Are you looking for somebody...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: who is actually more logistic oriented? Because you really know that you struggle with the Type, A parts, which is like clinical documentation, timely mannered treatment planning, like the check-off stuff. I know where you're going. It is much easier for me to be directive because I can see where we're actually leading. I'm just,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: I think that for supervisors, you know, when somebody wants to be avoided or not have a hard conversation With a client which we all can relate to, nobody loves having hard conversations with clients.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: But if I know where the supervises end all be all goal is like my end all. Be all goal is to be in private practice. Okay. Well then you need to learn how to do this. That.

Andrea Redeau: If you're not trying to be in private practice and you plan to have a supervisor who's watching your videos, some a structure of an agency that has a treatment plan, that's already lined out, and you have an admin person who can tell them that they have a need, a higher level of care. Well, then I don't need to teach you how to do that. If you are saying,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: you want to be in private practice, or you want this thing? That we got to kind of push you a little more to meet your goal,...

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Dr. Tara Sanderson: Yep.

Andrea Redeau: but that's only yours.

Dr. Tara Sanderson: Yeah. Yeah, that is huge. What I hear in that is that clinicians need to show up in this space knowing where they are headed and not necessarily like you have to have it all planned out every detail but like the end goal of, you know, Do I want to work for a company forever? Do I want to work as an independent practitioner do? I want to learn this specific? Modality? What is it that you're doing here so that I can help guide, whatever that is,

Andrea Redeau: Yes. And I think that that That is how we utilize supervision and I think that there has been maybe a cultural shift or just a change in from when I was in the field. Early on to supervision to how it is now, right? That I think that we have more understanding than we ever did before, right. I think that we have more insights about intersectionality. We have so much more understanding about,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: like, the, how supervision can be all encompassing, but I do believe that supervision is used to ask these hard questions.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: What is your goal? What do you plan to do? What do you not a five-year? But like If you had the wand question, If you had a one Where would you like to be but I also believe that if we don't utilize supervision then we don't really talk about those career development pieces. We don't talk about the community pieces that are important about other clinicians that you need to know that I often tell supervisees The people you went to class with and...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: you sat in all those classes, those are your colleagues now. Do you want them as colleagues? Maybe not. So maybe we should think about what is it gonna look to get you, the colleagues that you want and you need and so supervision, I believe is about where are you going? And how do I help you get there following the ores in the Ethics? In finding the little therapist in you.

Dr. Tara Sanderson: Yeah, absolutely. And I love that component of recognizing that part of our role, of course, is to make sure that we are helping them understand their clients and doing all of the stuff around that and mitigate risk and all those pieces. But a part of our goal has to be bigger than that. It has to be helping them develop to be an independent therapist, whether that's independent within an agency or a company or independent on their own. It is so important for them to feel really solid in their skills as an independent clinician.

Andrea Redeau: Yes. And that's ideally what we want. The more therapists in the world the less calls and emails we get

Dr. Tara Sanderson: I know it. I know it. I think I used to dream of the day where we could like put ourselves out of a job, but then I realized that that really was kind of apocalypsy so I maybe not need to have that as my dream, maybe my dream is that we have enough therapists to do this work so that everybody can get what they need when they need it.

Andrea Redeau: In. I think we're aware that we don't have enough.

Dr. Tara Sanderson: Yeah, absolutely. Absolutely. Oh, so good. Would you say that getting supervision of your supervision is, is important.

Andrea Redeau: Yes, and no. I think that there's a both and...

Dr. Tara Sanderson: Okay.

Andrea Redeau: in that getting supervision of your supervision is a place to check Your own cues, check your own triggers. Check your own boundaries to make sure that you're like, you are aligning to have somebody on your team. Just like we are on our supervisory's team. And I also believe that supervision in the things that we tell people are based on who we are and based on our beliefs. And it's based on our practices, And it's based on our identities.

Dr. Tara Sanderson: Know.

Andrea Redeau: And so well supervision of supervision is important because I want to always have those checks and balances I do recognize that there is a point to where in my own supervision of supervision. There's a limitation Right.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: That To be frank, there aren't many by pox supervisors.

Dr. Tara Sanderson: Right.

Andrea Redeau: I have a certain niche, I do a certain thing and I would love to hear how you would take that on with the supervisory. I'd love to hear how you would take it on with the client, but my world is different and maybe how you would do it.

Dr. Tara Sanderson: Yep. Yep.

Andrea Redeau: It's not how I would do it. So there's a yes and a no in there.

Dr. Tara Sanderson: Yeah. There's a part of me that would love for us to call it something different. So like I think that supervision of supervision when you're learning to become a supervisor is awesome. Like I think that we absolutely need that space for having somebody double check us on like am I doing this? I might do. I got do I have the framework of what I'm supposed to be doing here and then I think switching it into like consultation about supervision being more of you know, I don't need it to be some national guideline that we have to do this thing but I do think it being more of a normal element of of who we are supervisors to say. Yeah, I'm in a console group where we talk about our challenges with supervision and what we need to keep growing in or what questions we need to start asking and answering because I think that you know although I may not need supervision to say that I'm doing it right anymore. I'm I may need supervision or maybe consultation to make sure I'm challenging the way that I'm doing things so I'm not getting stuck in some right. That is

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Dr. Tara Sanderson: It is doing good.

Andrea Redeau: Absolutely right. That. A part of being a therapist is creating a network and a part of being a supervisor is creating a network. And I have many humans in my life who are also therapist who I often call and I say Hey can I dump Sure? Let me know. You know and...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: you get the back. I give it 24 hours and sit in it. I would not respond. Got it. Okay, good feedback because I was gonna respond, okay, 24 hours, you're right. But sometimes right, just like, as a newbie therapist, I had people as a supervisor. I have people, I don't do things alone and supervision of supervision is just having more people. Yeah.

Dr. Tara Sanderson: oh, Yeah I think that recognizing how lonely this industry can be. If you don't build a community to support, you is a really strong element of of the process that I put into making sure my supervisees have what they need, right? I am asking, What's your social circle? Like, What are who are the people that you connect with? Who are the therapist that you connect with that, you can share these these stories with, right? I think one of the big questions that I see a lot of times with clinicians is the is about, like,

Dr. Tara Sanderson: How who do they talk to about this stuff? Once they don't have a supervisor, right? Because right now, they can come into their supervisor with all of the stories of their people and lay some of that burden down and and work with another human on carrying the weight of these stories. And once you, you don't, you know, if you haven't built that community, that's on the, you just kind of have a lot of stuff which leads to burn out and chaos and and sometimes leads to some shady decisions like sharing with your partner about your clients day where like that's not your story to tell your partner actually.

Andrea Redeau: You.

Dr. Tara Sanderson: So helping develop that I think is really important.

Andrea Redeau: Well.

Andrea Redeau: I think that especially community is so important for bypuck therapists, right? That when I got into this field, I didn't know any black therapist. I mean,...

Dr. Tara Sanderson: Mmm. Yeah.

Andrea Redeau: me and I went to an agency that had one other black Chemical dependency, peer support. And it was a lonely world. I was lonely for a lot of time.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: I had things that were activating me that I didn't have to put anywhere, because I couldn't explain to my graduate school Bestie because she didn't know because there was no way to explain that to her, I couldn't run into my supervisors of office and say, You won't believe what happened because I didn't know what happened.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: And to understand that being a clinician is lonely, being by pocket of clinician is terribly lonely. It is a place to where you, I often live in between two communities. I live in a community that loves therapy is interested in and I am all things badass therapy, but then I go to my family, a lot of my family doesn't believe in therapy and they don't believe in mental health treatment and there's a lot of cultural stigma. And so, for a lot of us, we live in these two worlds and it's really hard to establish that consultation role. Once you've already established once you've already become licensed once you're already Being a supervisor.

Dr. Tara Sanderson: Hmm.

Andrea Redeau: And we want them to create community, we want associates to create communities interns to create community early on

Dr. Tara Sanderson: Yeah.

Andrea Redeau: And if they don't have that, then we all have the experience of feeling alone, feeling isolated, experiencing microaggressions, microaggressions in nowhere, to put it. And luckily,...

Dr. Tara Sanderson: Yep.

Andrea Redeau: I mean, the good part is, is that through all of that trauma that I have experienced, there are programs now, there are supervisors. There are other people. We have a, you know, a clinicians of color email chain, right? Where we can connect with one another,...

Dr. Tara Sanderson: Nice.

Andrea Redeau: they're community events for clinicians of color. There are some really good like, systemic programs out there to enrich clinicians of color, by pop clinicians to have community to have cohort. That without that,...

00:35:00

Dr. Tara Sanderson: Yeah.

Andrea Redeau: oftentimes what we find is, a lot of clinicians, don't stay in Oregon.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: There's no support here and so a lot of my work outside of my clinical work is now how do we get clinicians of color connected? To a supervisor who looks like them who understands them, who can see it. How do we make sure that you have somebody in your phone to call another clinician of color? Like you won't believe? What they said to me. And to have somebody on the other line. I it's so powerful to have another person. Say to you like, Yeah, I know it's hard. Yes, it is and to know that they know it's hard.

Dr. Tara Sanderson: Yeah. Yes. Yeah.

Andrea Redeau: Instead of I could see that would be hard now, I know what it's hard because somebody just did that to me about 20 minutes ago.

Dr. Tara Sanderson: Yes.

Andrea Redeau: And to have that. And so I've been doing a lot of work with some different agencies and really encouraging people like get a bypass supervisor. It a bypass cohort. There's a new. There's some new legislation coming out from OHA about helping funding, so I talk therapist, which is so important. Our numbers are dismally low for Bypoc therapists.

Dr. Tara Sanderson: Yes.

Andrea Redeau: All collectively of all biopoc, we're less than 9%. African American for less than 2% of permissions.

Dr. Tara Sanderson: Wow.

Andrea Redeau: and if you take 2% of clinicians, And that's like LPC Lmft social workers, we take 2% and then we're expecting people to have supervisors. There's not enough in a two percent.

Dr. Tara Sanderson: Wow. Yep.

Andrea Redeau: and so, what we want to do now is to make that like systemic change foster for organizations to say, you know, We want by puck therapist and not only do we want bypuck therapist, we know that we need to support by Puck There. These actions they need a supervisor who looks like that they need group, affinity group supervision is important.

Dr. Tara Sanderson: Yes.

Andrea Redeau: And so I'm telling all people if you are a bypok person who is new to this field, who is an associate or going to be associated or is going to graduate, There is a great new community program out there. So Portland mental health and wellness. They are an agency here in Portland and they got an amazing grant to serve QT by pop, folks. In an affinity group, you will have a cohort of an affinity group. Four other individuals who share your affinity with the supervisor,...

Dr. Tara Sanderson: Yeah. Yeah. Huge.

Andrea Redeau: who shares your affinity. That is a huge change. Somewhere to go somebody to say,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: you won't believe what happened to me today. And without that,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: we're never going to get above the 2%.

Dr. Tara Sanderson: Right. Absolutely.

Andrea Redeau: And so we want people and I'm encouraging people reach out. Find therapists, find other colleagues who may be graduating one day. Those people are gonna be people, you refer to

Dr. Tara Sanderson: Yes, they are.

Andrea Redeau: So we want to make sure that for the people who are coming out of graduate school, the people who are just now getting their associate, we want association, we want to support them.

Dr. Tara Sanderson: Yeah, absolutely. I think it is is vital that we support them because there are, I mean, the ripple effect is huge, right? Like if we don't have supervisors of color, if we don't have therapists of color, then we have whole communities without access to resources that really get them and we can't without all of the links in that chain. We, we can't support those communities. It's not enough to just have super not enough to just have therapists of color. Like we have to have supervisors who can give them what they need. So that they can. I mean, it's just, it's so all connected.

Andrea Redeau: It is right, and there's that systemic part, right of that. We also, I always tell people. We also need white therapists. There has to be dominant culture therapists. Who can see Bipot clients?

Dr. Tara Sanderson: Hmm.

Andrea Redeau: Right that even if we get to three percent of black and brown therapist, that is not enough. So while we are getting more by epox therapists offering them community,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: offering them to sport encouraging them to stay in Oregon. There are so dominant culture right therapists who have to see by Puck folks And to be able to serve the community that I care about,...

00:40:00

Dr. Tara Sanderson: Yeah.

Andrea Redeau: it means that we have to change it from a systemic standpoint with more supervisors,...

Dr. Tara Sanderson: Yeah, absolutely.

Andrea Redeau: more support for associates and then support for the dominant culture, who are therapist who are going to have to hold this until we can get enough numbers.

Dr. Tara Sanderson: We need to wrestle with this information because we need to figure out what story is back here in our own brain and what we have to untangle to be able to make our own change so that we can continue to support all of these other changes that that have to be made because we can't we can't continue on the path that we've been on.

Andrea Redeau: No, there's The way that we have it set up. Now, the community the most underserved community has no therapist. So to be able to serve the underserved community,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: we all have to wrestle with a really hard conversations. In a lot of my work,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: a lot of the Dei consulting that I do is outgoing in and helping people wrestle with these really hard conversations, everything from nursing program. Osued You appe to going and showing up at an agency because they're having an issue with people feeling like they're experiencing racism. And my job to say that,...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: it's not a feeling that is racism, that's what you are experiencing and I get to help you navigate that conversation. And then give that feedback in a systemic standpoint to the agency and community. And then how do we get you some support?

Dr. Tara Sanderson: Yeah. Yeah. Absolutely. Absolutely. Gosh, this has been so good to chat with you about all of these things and I loved hearing about that grant and the opportunities that are coming up through the state of Oregon. Tell us a little bit more about how people can get a hold of you. What things you've got going on? Bring it on.

Andrea Redeau: So amongst many things of my practice and being a board member, I have two really big projects that I'm working on in 2023. One of them is at Grant that I had talked about with Portland Mental Health and wellness. They have committed to 18 months of having a cohort for the LGBTQ community, as well as the Bypot community and maybe you live within the same intersectionally and that's okay. But what it is is a 16th month program during being an associate where people are going to show up for you. Based on your affinity that you're gonna have the supervisor...

Dr. Tara Sanderson: Wow.

Andrea Redeau: who looks like you, who understands you get to see the clients that you want to see and we are ensuring that you have the support that you need, while we are having that crack and foundation.

Dr. Tara Sanderson: Yeah. Yeah.

Andrea Redeau: Because it's going to happen and this is one of those great systemic things that comes when Oha decides to give grants, right? That we get to make some true. Systemic change that that means that we will have four bypass clinicians out there who would have had intensive supervision and...

Dr. Tara Sanderson: Yep.

Andrea Redeau: this program is not just about that minimum supervision. Right? I keep having these conversations at minimum.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: You have to see me for three hours, but we don't want to be in minimum, We want to be in. This is a comprehensive supervision. You are going to group, you are seeing me individually. I am working with other staff members here, maybe you're struggling with the admin staff. How do we negotiate that in a way? That is supportive of you. Instead of, Don't be you, stop talking. Right? We want to encourage people that buy public clinicians,...

Dr. Tara Sanderson: Yes, yes.

Andrea Redeau: can be within the system. We just need to be supported.

Dr. Tara Sanderson: Uh-huh.

Andrea Redeau: And so this is a great program. I'm telling everybody. Any associate. Apply, apply apply. We didn't have these back when we were in graduate school.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: So if you're interested, please apply applications. Go up in April and so get on there, check it out. The programs also looking for supervisors. So supervisors in that affinity group,...

Dr. Tara Sanderson: Awesome. Awesome.

Andrea Redeau: LGBTQ infinity by pocket, affinity so that we can show up and then give those community members because eventually You move on and you become licensed.

Dr. Tara Sanderson: Yep. Yep.

Andrea Redeau: And so we really, I want people to know that there are programs out there and if people show up and they're interested, right? Then we get to tell. Oh, but look, there's always great people, you need.

00:45:00

Dr. Tara Sanderson: Yeah. Yeah.

Andrea Redeau: In on the other side of it, there's a project that I'm doing with the Trauma Institute of Organ.

Andrea Redeau: Through PSU, the program of social work. And what we're doing is, we are partnering and finding a curriculum. That is systemic based in individual based when black and brown clinicians experience verbalize racism You experience racism in the workplace,...

Dr. Tara Sanderson: Yeah. Wow.

Andrea Redeau: when a client has verbalized to you and they have said something harmful, it's a microaggression. It's a macro aggression that we want to have a protocol that supervisors know how to show up in support.

Dr. Tara Sanderson: Yes.

Andrea Redeau: There is a plan that we follow these people are connected. This is how you are supported that right now. If I was to experience racism, in an agency that doesn't often fall within the harassment,

Andrea Redeau: Right. It doesn't the HR stuff gets complicated and so what we want is for black and brown clinicians when they experience racism and they get back from their agency. Like Yeah, clients say things don't take it to heart that we have a single form that says no,...

Dr. Tara Sanderson: Yes.

Andrea Redeau: This is what I've experienced I have now experienced trauma. This workplace isn't safe for me. This is what you need to do, but the supervisor needs to do with the agency needs to do and...

Dr. Tara Sanderson: Yes.

Andrea Redeau: what your peers need to do. How do they show up for you?

Dr. Tara Sanderson: Uh-huh.

Andrea Redeau: Oftentimes, I do these trainings and like, I don't know how to show up. Well, let me tell you. Give some people some time off,...

Dr. Tara Sanderson: Yeah. Yeah.

Andrea Redeau: that will really help after I've experienced racism. I'd like a time. Find somebody a therapist within their full meeting group.

Dr. Tara Sanderson: Yes.

Dr. Tara Sanderson: Yes.

Andrea Redeau: Don't send people to EAP.

Dr. Tara Sanderson: Nope.

Andrea Redeau: We all know that there are not enough clinicians of color, let alone clinicians of color within the EEP framework.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: Perfect. And so I'm kind of doing a twofold here. How do we support associates? So we can get some more people out there. And how do we in times that you are experiencing racism? How do we keep systems and how do we keep agencies accountable? That there is a form.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: There is a protocol that from collecting all the data that I'm going around to agencies. We're doing surveys.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: We're doing in-depth interviews. So if you are a clinician of color who's experience racism, who currently is experiencing microaggressions.

Andrea Redeau: If you are open and willing feel free to contact me, I would love to have you be a part of our survey experience our in-depth interviews? I'm going to a few agencies to kind of get the bike folks together and...

Dr. Tara Sanderson: Yeah.

Andrea Redeau: hear about their experience. The reality is is that we need a reckoning and...

Dr. Tara Sanderson: Yep.

Andrea Redeau: if anybody's gonna force this reckoning, it's going to be. So I'm going to

Dr. Tara Sanderson: I love it so so necessary. Like as you were as you were talking,...

Andrea Redeau: What?

Dr. Tara Sanderson: I recognized that I I have had those experiences being a supervisor trying to support, right and figuring out like, okay, what happened, What do you need, How can I do these things and recognizing that I don't have that manualized in my practice documents. I have what I did which was immediate time off which was immediate like Help you get a therapist which was immediate like support in. Like What do we need to reschedule this person with somebody else? How can I move things around to give you what you need? But I didn't manualize it. I just absolutely was like I I have how do I help protect you so that you can heal from this thing in the same way we would. If it was, you know, somebody got into a car accident, we immediately were like immobilize the neck. Like put them in the thing.

Andrea Redeau: Yep.

Dr. Tara Sanderson: Don't let him move yet. We have to like secure you and then we can figure out all the rest of the Details, right? But manualizing it like how easy of a process is that for me as a boss to be like, Oh all I have to do is write a policy and then we have, then we just continue to follow it when these things happen because I would love to say if those things happen, but it's on and if it's a win and we have to if we if we make that strategy as bosses for how we're going to support our folks like it, it makes everything so much easier to follow that protocol.

Andrea Redeau: Yes, right. And I think that what I've learned as I've gone to different agencies and done. Different trainings is that if you've never had the conversation of being a dominant culture, supervisor with your supervisy about race about power dynamics about, maybe how your social location and your presentation shows up for the person on the other side of the room. Well then a manual won't work. First step is having a conversation,...

Dr. Tara Sanderson: Very true. Yeah.

Andrea Redeau: right? And saying, Okay, it is likely you are going to experience racism, we live in Oregon and when it does happen, How can I show up for you? And oftentimes, we do what we teach our therapist not to do the clients is, What do you need? Well, I don't know. Somebody just verbalized racism to me.

00:50:00

Dr. Tara Sanderson: Right.

Andrea Redeau: I'm not really sure what I need. I'm afraid I'm going to lose my job.

Andrea Redeau: I'm not thinking about what I need. You should know what I need. You're the boss. Tell me what I need and then I get to decide what I need. Once you stabilize my neck, Right? And so a part of this is that we want to give people a manual.

Dr. Tara Sanderson: Yeah, yes.

Andrea Redeau: And the first part of this manual is have a conversation.

Dr. Tara Sanderson: Yeah, under percent. Hundred percent.

Andrea Redeau: And so we want to be mindful of taking on this initiative of getting more by puck therapist. It's not just bringing therapists in, it's recognizing that many of our bypuck therapists leave, they don't stay in this state.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: They don't get licensed here. And so we want to kind of keep hypocrapist here, get more bypuck therapists and then serve them so that they can serve our community.

Dr. Tara Sanderson: Absolutely. Absolutely, I love it. Oh, we will post your links on our show notes and I hope that people reach out to you, whether it's for consultation or to jump on those opportunities through that grant or through that research, that you're doing to help make some of these systemic changes because they are vital. And I, I can't wait to see where where we go, as a state, and where we go, as clinicians to help support the bypass community.

Andrea Redeau: Absolutely. Thank you so much for having me. Bringing me in letting me talk all day therapy. I love therapy, I love talking about it and absolutely anybody reach out if it's about the grant an opportunity, or you just need a place to put it, my email is a great place to put it.

Dr. Tara Sanderson: Yeah, that's awesome. Well, thank you so much for listening everybody and we'll see you next time.

Andrea Redeau: Bye.

Dr. Tara Sanderson: Yay, we did the thing.

Andrea Redeau: Well, who did it exactly in an hour.

Dr. Tara Sanderson: We did, yeah.

Andrea Redeau: Way to be a champ. Good work. I would not have been able to do that.

Dr. Tara Sanderson: Here. Oh, it was so good to chat about with you again, I had actually planned to connect with you about the grant that we got through the Oha as well, but it sounds like you are committed to other things.

Andrea Redeau: oh,

Dr. Tara Sanderson: So I am not gonna burden you with more stuff. But I do want to just what's that?

Andrea Redeau: I mean for what is it? But wait,...

Andrea Redeau: what is it?

Dr. Tara Sanderson: So mine is to build,...

Dr. Tara Sanderson: is to do a training program for supervisors. So instead of I know a lot of other grants did it for the supervises, which is, which is awesome. And I'm so excited for that, but mine is a training program for supervisors. So my group, my cohort of people is going to be people who are who are either lpcs getting at a place where they can get ready to do supervision and they would have taken that 30 hour course through, you know, wherever it is Portland.

Dr. Tara Sanderson: Whatever or associates who know that they're going to want to supervise in the future or postdocs, just because I happen to have a few postdocs that are going to go through it. But my my grouping of them is specific to the LGBTQ community bypass community and veterans. Mostly, I picked those three because I've got people who are interested in those three already in my group. So it just made it very convenient for me. And because those three, gosh are, it's such a need. So, all of the people who are in

Dr. Tara Sanderson: That cohort will get all the basics of the 30 hour course, but then they get these extra components specifically on that those diverse groups. So I'm looking for people to come in and do sections of training and I'm looking for people to do individual consultation meetings with them. So the first half of the year of those consultation meetings will be, You're learning all this stuff. How do you integrate it into you being a supervisor and the second half of those, they'll have an opportunity to supervise someone as an auxiliary supervisor, It won't be like for their actual provision...

Andrea Redeau: Well. That's cool.

Dr. Tara Sanderson: but then have them be able to talk to that consulting supervisor about now that I've got a person and they're actually talking to me and this is real now, how do I really put it all together? And like, own this part of being a supervisor and not in the way of like, you know, just the typical how-to's but the actual integration of all of this knowledge. Specifically to that community, I've got one woman who is who is helping me along this along those lines for the LGBTQ but is focused on rural LGBTQ support which is so I feel like so vital because that is just I can't imagine being in like Banks Oregon and being an LGBTQ therapist, trying to like work this out.

00:55:00

Andrea Redeau: If triple.

Dr. Tara Sanderson: Right. But anyway, I had I had, I had a little note in my brain about like, Oh, I'll just chat with her when I meet with her, um, but I can send you the info and if you think it will fit into your world, please feel free to let me know if you're like, Tara, I've got too much, but I love you and I want to support you anyway. I can like, let's just keep chatting. That is fine too. No pressure on my end.

Andrea Redeau: Look, first of all, it will absolutely fit into my world because this is important to me this these things.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: So actually the grant that I didn't apply for that, I halfway applied for and then realize I don't want to do my own grant that I wanted to offer by pocket inclusive only Improvisation 30.

Dr. Tara Sanderson: Yeah. Oh my gosh.

Andrea Redeau: Hour course. Is we don't have. We don't have enough now. The problem was is my kid.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: Got sick, life, got complicated. So I came in as in a consultant instead. but with

Dr. Tara Sanderson: Yeah.

Andrea Redeau: With Portland, mental health and wellness. I'm just doing consultation and helping them. Bring people in negotiating with them around. Like, How do we do this equity work? Because right now,...

Dr. Tara Sanderson: Oh yeah.

Andrea Redeau: they don't have a person. So, if it is that you want me, absolutely? I love all.

Dr. Tara Sanderson: Awesome.

Andrea Redeau: This is all within my wheelhouse, so let me know.

Dr. Tara Sanderson: Yeah, and if you decide that you would like to launch a bypak, only 30 hour training course, I would be more than happy to like Help you finangle making that happen, whether it's looking for funding to make that happen or figuring out ways to provide it. I love doing that back end work. So feel free to feel free to meet me up on that.

Andrea Redeau: Okay, great. I would love that. Absolutely, because it's the back end. I'm like, I can't do that. I can't read a manual.

Dr. Tara Sanderson: Yeah.

Andrea Redeau: I just show up. So yes.

Dr. Tara Sanderson: Yeah. Okay.

Andrea Redeau: Really. Yes. Well let me know. Send it over to me and if it doesn't work for me and I just see it, I I obviously have other clinicians who are supervisors, who may Be best for it.

Dr. Tara Sanderson: Yeah. Sounds good. Oh it was so good to see you. I'll send that stuff over later today.

Andrea Redeau: Okay, we'll take care of yourself. Hopefully everything's better at your house and if not, then you get to take break. okay, later Thanks.

Dr. Tara Sanderson: Yeah, sounds good. Already. Bye.

Meeting ended after 00:57:24 🙌