

Thoughts About Presentations in Reflective Group Supervision

The Outside View: Format for Presentations for Reflective Group Supervision

- 1) The presenter describes the questions/issues she's interested in having feedback on.
- 2) The presenter presents the case, drawing on the Guidelines for Presentations in Reflective Supervision (MiAIMH).
- 3) The group members listen (see below), trying to see the case material from the presenter's perspective.
- 4) The group leader responds to the presentation first, with questions and observations.
- 5) The presenter responds to the leader's comments
- 6) The group members raise questions and ask for clarifications of the case material.
- 7) A general discussion follows, with emphasis on the group's addressing the presenter's questions.

The Inside View: Tasks of Listeners in Reflective Group Supervision.

In describing the role of the supervisor in reflective supervision, Mary Claire Heffron states that the supervisor listens with empathy and attention and responds with questions and statements that are contingent on what the supervisee has presented. The supervisor tries to stay within and respond to the presenter's perspective, not to impose her own perspective. (Heffron, 2005).

A goal of group supervision is that all group members learn to do this. This is not always easy because we all have our own associations to the clinical material, as well as the perspectives we favor based on our training and experience. It may be especially hard to try to stay within the perspective of a person whose training or discipline is different from our own. For example, a clinical practitioner who is listening to an observation of a child by a Head Start teacher may quickly begin to view the case in diagnostic, clinical terms, while the presenter is more concerned about the child's behavior. In reflective group supervision, the demands on group members are high. As the presenter presents the case material, the group members listen, trying to take in the presenter's perspective and to reflect on the presenter's questions.

The other side of this discussion is that a goal of reflective supervision is to help the worker develop new perspectives, especially on work with a family work with a family she feels stymied by. The associations group members have to the material may contain ideas that, while different from the presenter's ideas about the case, will be very helpful to the presenter. So, group members need to pay attention to and hold in mind both the presenter's perspective as well as their own ideas. Ultimately, the clinical view of an IMH worker may be very helpful to the Head Start teacher in thinking about a child. However, it is important for group members to first try to hear the perspectives of the presenter and then try to raise questions and observations that appreciate the presenter's perspective,

before offering views based on her personal associations, her discipline, or her training.

References

- Guidelines for reflective supervision and consultation. (2005). Coppell: Texas Association for Infant Mental Health and Southgate: Michigan Association for Infant Mental Health. (www.mi-aimh.msu.edu).
- Heffron, M.C. (2005). Reflective supervision in infant, toddler and preschool work. In K. Finello, Ed. *The Handbook of Training and Practice in Infant and Preschool Mental Health* (pp. 114-136). San Francisco: Jossey-Bass.