

# Supervision

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Unfortunately many group work books neglect to adequately cover the role of supervision for group leaders. Supervision is an area where variation exists. Often supervision is primarily influenced by the organisational needs and context of the employer of group leaders. Supervision can take a variety of forms:

- Organisational supervision
- Clinical supervision
- Peer-group supervision

## **Organisational Supervision**

Organisational supervision usually addresses the administration and management issues involved in an organisation. It incorporates performance management issues, accountability and quality control regarding the services being provided.

## **Clinical Supervision**

Clinical supervision focuses on specific group work practice. It usually involves the leader, or co-leaders, and the supervisor developing a process of monitoring the group-as-a-whole and individual group member issues.

## **Peer-group supervision**

Peer-group supervision incorporates the issues of clinical supervision but uses a small group setting of colleagues engaged in a similar field of group work. The group may have a set supervisor or rotate the leadership responsibilities based on an established format. The process discusses the following issues:

- brief overview of current group situations and issues
- focused discussion on pressing issues that arise
- time for reflection on personal or countertransference issues that may arise in those groups

“There are several benefits gained by providing group therapy supervision in a group format. For one thing, it may be possible for a skillful supervisor to focus on the interaction and the group dynamics of the supervisory group. In addition, there are benefits of peer support, broadening one’s empathic capacity, galvanising one’s therapeutic perspective by articulating one’s rationale for a particular intervention and examining colleagues’ conceptualisations, and being exposed to a greater range of group therapy phenomena” (Yalom, 1995, p.518).

## Group work training and supervised placement requirements

The Association for Specialists in Group Work (2000) established the following minimum supervision requirements as part of group work training courses (see Table 1). These supervision requirements along with the previous ethical standards ensure the development of best practice skills and framework.

Table 1 Supervised practice requirements

<b>Group Work Specialisations.</b>	<b>Basic Training</b>	<b>Minimum hours of supervised practice/ facilitation as part of training.</b>
Task/Work Groups	Core Group Work Skills Training Course. Knowledge of organization context and subject theory.	30 hours minimum (45 hours recommended)
Psychoeducational Groups	Core Group Work Skills Training Course. Knowledge of subject theory.	30 hours minimum (45 hours recommended)
Counselling Groupss	Core Group Work Skills Training Course. Advanced Group Work Skills Training Course. Participant in similar group over an adequate period of time.	45 hours minimum (60 hours recommended)
Psychotherapy Groups	Core Group Work Skills Training Course. Advanced Group Work Skills Training Course. Adequate training in a psychotherapeutic model. Participant in similar group over an adequate period of time.	45 hours minimum (60 hours recommended)

Table 2 Clinical Supervision requirements for ongoing practice

<b>Type of Group Training/ Specialisation</b>	<b>Minimum hours of supervised practice/ facilitation for ongoing practice.</b>
Task/Work Group Facilitation	At least 3 hours supervision per 8 week group program, at the beginning, middle and termination phases of the group.
Group Psychoeducation	At least 3 hours supervision per 8 week group program, at the beginning, middle and termination phases of the group.
Group Counselling	At least 1 hour supervision every 2 sessions for the duration of group.
Group Psychotherapy	At least 1 hour supervision every 1 or 2 sessions for the duration of group.

Through combining the training courses and ongoing practice requirements, the American Group Psychotherapy Association recommends, in the training of group therapists, a minimum of 300 hours of group therapy clinical experience and 75 hours of supervision.

## **Supervisor requirements**

The chosen supervisor should possess a level of training and group work practice that is equal to or more than, most of the practitioners that they supervise. Unless outside supervision is sought, group leaders have little choice in their selection of supervisors. It is important for the group leaders to stress the importance of their supervision having a clinical focus rather than administrative alone. Alternatively, a group of leaders may establish their own peer-supervision group with either a formal or informal leadership structure.

Useful questions for a supervisor to explore (Benson, 1997):

- The internal life of a group
- What is not being spoken about?
- What is not being thought about?
- What is fearsome and to be avoided?
- How members are feeling?
- Why they might be feeling this?
- What the anger/silence/depression might be about?
- What members might be thinking about?
- Why the group is stuck?
- Why a behaviour/event is being repeated?
- What the loss of creativity means?
- Why there is difficulty sharing/trusting/deciding/working together?
- What is happening between people?
- What is not happening between people?
- What is unfinished?
- What is trying to emerge? (Benson, 1995, 244)
- Identify possible countertransference feelings and issues.

### **Key countertransference feelings that may need to be explored in a supervisory relationship**

- Feeling bored with the group as a mask for aggressive or competitive feelings
- Experiencing sleep disturbance
- Devaluing of your group work practice
- Jealous reactions about the group and over protectiveness about your group practice
- Feeling guilty about not having done enough
- Erotic and affectionate feelings towards a group member.

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