

Demystifying Reflective Practice:

Defining Reflective Supervision and Consultation for Infant and Early Childhood Professionals

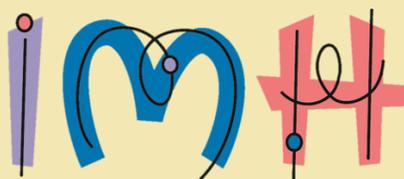


Working with and on behalf of infants, very young children and their parents/caregivers is rewarding, but it can also be emotionally taxing and stressful. Professionals across all systems and disciplines can benefit from developing and practicing a way to slow down and carefully examine their attitudes, beliefs, and perceptions.

Reflection is a tool that enhances a professional's capacity to recognize the mental states — feelings, thoughts, and intentions — in themselves and others, and link mental states to behavior. Regularly practicing reflection and integrating it into the routine structure of an agency has proven beneficial to direct providers, supervisors, consultants, and agencies, and thereby the children and families they are serving.

“I feel supported, it definitely helps with stress. [Reflective Supervision] has encouraged me and helped me grow as a home visitor and a person.”—Supervisee

Reflective practice recognizes that working with families is relational and thus complex, and that children develop, and people continue to strive and do their best, within the context of healthy relationships. When supervisors or leaders practice reflectively, this “way of being” contributes to a **healthier, more supportive environment** where staff can grow and develop. By gaining skills and practicing in a reflective manner, professionals carry forth these qualities with families—using their relationship to bring out the **family's strengths and resiliency**. *This effect of relationships on relationships is the essence of parallel process.*



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— Early Relationships Matter —

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Building Reflective Practice through Reflective Supervision

Reflective capacities are developed, supported and maintained through intentional and regular practice.

Participating in reflective supervision or reflective consultation is one way for professionals, and agencies, to consistently engage in reflective practice.

Reflective supervision is generally provided by a supervisor within the agency or organization. It can be provided individually or in a group. Another way to build professional reflective capacities is for an agency to contract with a consultant outside of the agency to provide individual or group **reflective consultation**.

Regardless of whether it is provided within an agency or through an outside consultant, the goal is to create an environment in which people do their best thinking about their work with young children, families, and staff members—one characterized by safety, calmness, and support.

Reflective Supervision is recognized as an approach that supports and aligns well with trauma-informed care principles. It helps to create an organizational climate and culture of safety, trust, collaboration, and shared exploration.

Note: In the context of this document, the words “supervision” and “consultation” are used synonymously.

What is Reflective Practice?

Reflective practice is a way of practicing in which the professional is able to step back from the immediate, intense experience of direct work with infants, young children and parents/caregivers to take time to consider what the experience means to the professional and the family.¹

Reflective practice begins with oneself. A person who is reflective in their work is not just looking back on past actions and events; they are taking a conscious look at emotions, experiences, actions, and responses, and using that information to add to their existing knowledge base to reach a higher level of understanding.² Building reflective capacities is an important skill set for anyone because it strengthens resiliency and helps maintain a balanced outlook, but it is critical for professionals working with young children and their parents or caregivers.



Parallel process recognizes that the various components (people) of a system are in relationship and influence one another. That influence can be positive or negative.

The benefits of Reflective Practice

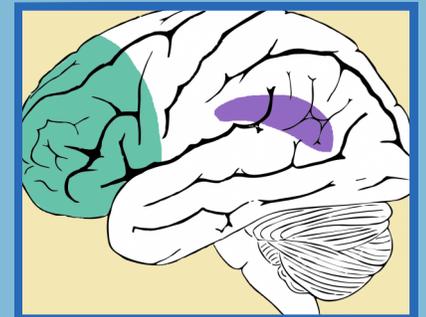
Engaging in reflective practices has a positive effect on agency practice and functioning. The use of reflective supervision is associated with increased client engagement and goal attainment;^{4,5} reduction in “burnout” and staff turnover; and increased job satisfaction.^{6,7}

Integrating reflective supervision within and throughout all levels of an agency helps to create a more effective, healthier workforce. Reflection increases self-awareness, the ability to pause and consider multiple perspectives, explore approaches and options, and maintain a curious stance. The act of pausing and considering what’s happening inside and outside of one’s body and mind utilizes the medial prefrontal cortex and posterior cingulate cortex;⁸ it also strengthens the prefrontal lobes.⁹

The prefrontal cortex (shown in green, right) is responsible for diverse cognitive functions including planning, flexibility, delayed responding and active problem solving.¹⁰ The prefrontal cortex is also associated with new learning, creativity¹¹ and emotional regulation and may play a key role in modulating anxiety.¹²

The posterior cingulate cortex (shown in purple, right) helps to regulate the balance between internally and externally-focused attention, making it a crucial structure in awareness and attention.¹³

Research clearly demonstrates that the brain responds to experience, positive or negative, and in the instance of reflection, this experience seems to target key regions of the brain that help us regulate, think more clearly and creatively, and feel less anxious.



How Reflective Supervision differs from other types of supervision

Administrative supervision focuses on oversight of federal, state and agency regulations, program policies, rules and procedures. It involves content around training and education, oversight of paperwork and documentation, rules and procedures, and monitoring productivity and evaluation benchmarks.¹⁶

Clinical supervision includes many or all of the administrative content listed above, as well as reviewing casework, diagnostic impressions, interventions, the treatment plan, and clinical progress. While there may be some administrative content, as well as reflective moments, these are not the focus of clinical supervision.¹⁶

Reflective supervision goes beyond clinical supervision to shared exploration of the parallel process.¹⁶ There may be times when the supervisor brings aspects of clinical case supervision into the conversation, especially if there are concerns about safety, yet the primary focus of supervision remains on the reflective process.

Who can provide Reflective Supervision or Consultation?

The ability to provide reflective supervision or consultation is based on knowledge, personal characteristics, reflective capacity, experiential learning and lived experience, and aptitude. A reflective supervisor or consultant should have a deep understanding of Infant Mental Health (IMH) competencies® as well as considerable experience receiving reflective supervision themselves.

Experts in the field strongly recommend that someone receives reflective supervision before providing it to others and continues receiving it while supporting others; this will honor the parallel process.

A Note About Safety...

Safety is essential for genuine reflection to take place. Individuals must have trust in themselves, their peers, supervisors and leaders to engage in a deeper exploration of the work. Without safety, the reflective process will likely stay at the surface, resulting in a practice that lacks authenticity and meaning and doesn't yield desired outcomes.

Reflective Supervision and IMH-Endorsement®

Reflective Supervision is a requirement for professionals seeking IMH-Endorsement® - an international credential that verifies professionals who work with or on behalf of infants, young children and families have unique knowledge, skills, experience, and attitudes to serve these populations.

For the purpose of obtaining IMH Endorsement®, it is highly recommended that an applicant receives reflective supervision from a supervisor/consultant who holds IMH-Endorsement®. For more information on IMH-Endorsement®, please visit <http://wiaimh.org/endorsement> or contact WI-AIMH.

Essential elements of Reflective Supervision

Emily Fenichel identified three key elements of reflective supervision.

Reflective supervision is:

collaborative,
regular, and
*relationship-based and reflective.*¹⁴

Reflective supervision is “a collaborative relationship for professional growth that improves practice by cherishing strengths and partnering around vulnerabilities to generate growth.” Through this way of being a holding environment is created—an emotional breathing space—where it is safe to explore accomplishments, insecurities, mistakes, questions and different approaches to working with young children and their families.³

Collaboration involves approaching a problem or shared goal by working together and exchanging ideas. Reflective supervision is based upon a collaborative relationship, which exists when both the supervisor and the supervisee view each other as partners, with each providing expertise and knowledge that will help the family reach their goals.¹⁵ The supervisor is not the expert about what is right or wrong for the professional, but rather a partner in shared exploration.

Reflective time is scheduled in a *regular*, consistent and predictable manner to allow staff, supervisors, and administrators opportunities to be together, talk about the work, and expand their practice. Staff members need to know when it will occur and how often. A sense of predictability will help establish safety and commitment, as well as deepen the practice.

Reflective supervision involves *thoughtful consideration of all the relationships*, perspectives and emotions of each person directly or indirectly involved with a family. It involves careful exploration of the parallel process.



How can I learn more about or receive Reflective Supervision/Consultation?

The following opportunities are some ways to expose infant/early childhood professionals to reflective practices through different domains of learning—content, experiential, application, observation, peer-based, and individual contemplation.

UW-Madison Infant, Early Childhood, and Family Mental Health Capstone Certificate Program: This is a one-year, interdisciplinary, graduate, credit-based continuing education program for professionals who work with children aged birth to six and their families. The coursework is grounded in IMH principles and participants receive both group and individual reflective consultation. <http://infantfamilymentalhealth.psychiatry.wisc.edu>

WI-AIMH Reflective Supervision Learning Collaborative: A 12-month process designed for Infant/Early Childhood program supervisors comprised of in-person learning sessions and active implementation phases, with built-in support throughout the process from experienced reflective consultants and trainers. <http://wiaimh.org/reflective-supervision-learning-collaborative>

FAN (Facilitating Attuned Interactions) Training: The FAN approach teaches professionals to track, regulate, understand, and use their own responses, thus building self-awareness and self-regulation. FAN has proved applicable as a conceptual framework and practical tool to support attunement and promote reflection. In Wisconsin, FAN training is offered through UW Milwaukee Home Visiting Training and Technical Assistance. <http://uwm.edu/mcwp/wp-content/uploads/sites/337/2016/06/2017-Home-Visiting-Calendar-002.pdf>

The safe space to express feelings and concerns, to grapple with challenges, and to look for support is incredibly helpful. The group has created a bond and trust between us as supervisors that is helpful for our work together and helps us support one another. The insight and thought provoking questions and reflections of [the consultant] has really helped me to grow in my role as a supervisor and in my reflective practice with my home visitors.—Supervisor

How can I or my agency get connected to a Reflective Consultant?

The Wisconsin Alliance for Infant Mental Health (WI-AIMH) can provide you with more information, and can help identify a qualified Reflective Consultant to support the work you do with children and families.

This publication was developed by the Wisconsin Infant/Early Childhood Mental Health Policy Committee chaired by WI-AIMH:

Abbe Braun Supporting Families Together Association	Linda Tuchman-Ginsberg, PhD Infant Early Childhood and Family Mental Health Capstone Certificate Program Department of Psychiatry, University of Wisconsin School of Medicine and Public Health
Roseanne Clark, PhD, IMH-E@ Infant Early Childhood and Family Mental Health Capstone Certificate Program Department of Psychiatry, University of Wisconsin School of Medicine and Public Health	Janna Hack, LCSW, IMH-E@ Peaceful Beginnings, LLC
Connie Dunlap, IMH-E@ Supporting Families Together Association	Cami Molenaar, MC/LPC WI-AIMH Northeast Region Chapter Chair
Julianne Dwyer Bureau of Prevention, Treatment and Recovery, Division of Mental Health and Substance Abuse Services, Wisconsin Department of Health Services	Lana Nenide, MS, IMH-E@ Wisconsin Alliance for Infant Mental Health
Carol Noddings Eichinger, MS, LPC, IMH-E@ Dance of Caring, LLC	Staci Sontoski University of Wisconsin-Milwaukee Helen Bader School of Social Welfare, Child Welfare Partnership
Carrie Finkbiner, MS, LMFT * (lead author) Wisconsin Alliance for Infant Mental Health	Design and layout by Melissa Minkoff, Wisconsin Alliance for Infant Mental Health

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