

Online Transcultural InterVision Group

Deze bijdrage werd eerder dit jaar gepubliceerd als hoofdstuk in het e-book *Cultural diversity, groups and psychotherapy around the world* dat is uitgegeven door het IAGP. De redacteurs Marcia Honig en Cristina Martinez-Taboada gaven toestemming om het in *Groepen* over te nemen. Het gehele boek is gratis te downloaden via de website van de IAGP: www.iagp.com/publications-new/iagp-books/. Een uitgebreide bespreking van dit boek over culturele diversiteit, groepen en psychotherapie staat verderop in dit nummer.

Door **Maria Van Noort**

In the summer of 2018, during the XX International Congress of the IAGP (International Association for Group Psychotherapy and Group Processes) in Malmö, Sweden, I facilitated a one-day workshop for seven colleagues; one from Northern Europe, two from Southern and one from Eastern Europe, one from South America and three from Africa. One person cannot participate because of the time we meet online after the workshop. The group consists of seven members, me included. The goal of the workshop is to spend one day face to face to get acquainted with each other's professional situation and background but also to learn a bit about the challenges and pitfalls that this kind of work creates, besides being interestingly exposed to people from other cultures. The workshop consists of a didactic part and case presentation. We discuss two cases participants bring in. All participants sign a training InterVision group agreement to participate for one year and to be aware of online etiquette. Such as being visible, audible and have no other creatures walking through the screen. Confidentiality and showing up on time as well as cancellation in advance are emphasized. After twelve sessions of two hours once a month online I will stop being a facilitator and the group will decide if and how to continue. All participants are invited by me, selected on living in different regions

of the world and because I know that they are interested in transcultural issues. Most are members of IAGP or became one. All have experience in working with groups and or systems.

Motivation

The reason I want to start this project is that in my home country, The Netherlands, InterVision came up at the end of the eighties in the previous century and I build up a lot of experience in and with InterVision groups. I have come to value this way of continuing learning as crucial for keeping up quality and change in one's professional work. In my two InterVision groups there are sometimes colleagues from different parts of the world that cannot find a group where colleagues are willing to speak English. In my practice in Amsterdam, I speak more English than Dutch due to the fact that the city has 180 different nationalities. Over the years, I worked during IAGP conferences with many colleagues from all over the world and noticed the palpating eagerness to get in contact with each other's ways of

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working. Especially during my three years of being the chair of the transcultural section in IAGP I noticed the value of sharing cultural values, differences and similarities. Currently in my role as senior executive member of IAGP, I want to make use of my transcultural experiences to create stronger

ties between IAGP members from all parts of the world. Most people connect during congresses but there is a need to have contact on a more regular basis and get the chance to learn new methods. Especially colleagues living in more remote areas, who do not have easily access to exchange with other professionals. Within our world right now, I see InterVision as a great method for creating safe spaces for colleagues from different cultures to learn from each other in a focussed meaningful way.

InterVision

InterVision is a method to preserve quality in the working field of psychotherapy. InterVision aims to learn to keep balance between professional norms and the current way of working as a psychotherapist in regular exchange with colleagues. It is not didactic and it does not involve official judgement. The method of InterVision, developed from practice, consists of systematised experiential knowledge. The concept practice theory can be defined as a connected whole of insights, techniques, guidelines and values generated from practical work and reflection upon that work. In this light, InterVision benefits from the possibilities of a small group setting. In a small group everyone can bring in material and it is easier to organise regular meetings and reach a more profound level (van Praag-van Asperen & van Praag, 1993). In the last two decades, many groups of caretakers in the field of mental health discussed alternating their way of working based on equality. For some people the term peer supervision is more known.

In my opinion, the word super means not equal, therefore I opt for the word InterVision.

In The Netherlands everyone who finishes his or her professional training has received supervision to learn a specific approach and theory as to treating patients/clients. After that training period, one still needs to have a place for exchange and continue learning.

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InterVision is not a didactic method like supervision. The focus in InterVision is on clarifying together complicated problems. Solving problems as soon as possible is not a priority. Exploring and looking for other perspectives and taking into account different cultural backgrounds is helpful and sometimes that contributes to solve a dilemma. It implies that one reflects on one's approach, method and attitude as a therapist or group leader in order to improve the quality of performance. There is no official judgement involved. Just sharing difficult or stimulating experiences or dilemmas in one's professional work, giving feedback in the shape of specific information, ideas, associations or literature. Favourable conditions for InterVision are: not too many participants, especially when one starts online 6-8; equality – this means everyone is his or her own leader and carries responsibility for his/her work. Privacy and safety are necessary to build a deeper level of connecting. Therefore, I refuse to record the sessions for the ones who cannot

participate because of safety and trust issues online, instead I send to a WhatsApp group a synopsis of the session. InterVision groups run also into pitfalls. Most common are babbling and gossiping, not asking for clarification of questions, saying just 'me too', overloading of information and advice, jumping from one topic to another and last, but not least, focus too much on the client and not on the therapist group leader. As contra indications I would mention thinking and being convinced that: one is not allowed to make mistakes and having problems means one is not good; one is responsible, so one has to do everything alone and what does InterVision mean for evaluation and judgement about me? Professional organisations require that caretakers have InterVision for accreditation purposes and preserve professional quality. In mental health organisations in The Netherlands, InterVision groups are formed and in private practice colleagues flock together to create their geographical bound space for InterVision. Besides healthcare organisations, InterVision is also applied as a useful approach in educational and business areas. Managers and consultants discover in the same time period the strength of so-called learning organisations. Only the difference is that more structured methods of doing InterVision are common according to the book by Bellersen & Kohlmann (2012).

Transcultural aspects

What makes this InterVision group transcultural? Not only the fact that group members are from different cultures. Group members have to work together and that

means that one becomes more aware of cultural differences. It does not automatically imply that group members will be culturally sensitive and behave as such. It takes time and practice to share and deal with differences and confrontations in mutual interactions.

My definition of culturally sensitive working in general is that, in contact with clients and colleagues, one is aware of aspects that are culturally dependent not only for the client but also for oneself. Those aspects have impact on intake, diagnosis, guidance and attitude. It requires that one develops a wider view on the social context of clients as to issues as gender, hierarchy, role of family and life transitions. Colleagues Jessurun & Warring (2018) define in their book intercultural competence is a quality of a professional which develops constantly nourished by study, InterVision and practical experiences. This competence encompasses a continuous enlarging and changing accumulation of knowledge, skills and attitudes. A professional acquires this by falling and rising. In everyday life I use a tripartite division as to culturally sensitive working (van Noort, 2012).

1. Knowledge. What do I know about my own culture and what about the culture of my clients and colleagues? Which theories do I value and which theories do my colleagues prefer? I rediscover the importance of thinking systemically and the knowledge of anthropology. For example, the model of Kluckhohn and Strobeck about relation with oneself, with the other, with time and with nature/ super nature. Religion and spirituality need to be taken serious in professional exchange, not judged.

2. Methods. Which methods does one use as a group therapist, one or a mix? Such as use of genograms which helps with looking for sources of strength within the extended family and society and figuring out who are important authority figures with a lot of power. Important addition for people who are born in more collective cultures. Or initiating a warming up exercise before starting a psychodynamic group process.

3. Attitude. How do I react towards clients and colleagues and vice versa? I know that I have to speak slowly in English and use short sentences, but I still need to be reminded when I am enthusiastic to slow down. The more I work in not Western individualistic cultures the more I learn as an addition to pose contextual questions. Psychodynamic (asking for causes): what do you want? Contextual (asking for results): who knows about your complaint? Psychodynamic: what do you feel? Contextual: who is doing something when you have your complaint? Psychodynamic: what does the complaint mean to you? Contextual: who in your family has similar complaints? Experience with this division helped me in my role as facilitator.

Themes discussed

In the whole day introductory workshop in Malmö, I explain that a transcultural InterVision group can run into specific issues that reflect the impact of a wider social context. These issues are put in the acronym social GRRACCEESS. This stands for: gender, race, religion, age, ability (dis), class, culture, ethnicity, education, sexuality and

spirituality. In our discussions, some of the here forementioned GRRACCEESS appear direct or indirectly. We run during a case presentation into misunderstanding and confrontation about different views on a case and ambivalence is vented about how much

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this would have to be a process group or just a place where, in a structured way, we only focus on cases. Openness in sharing helps us to deal with this phenomenon along the way. First, I will give a general impression on what topics we covered and after that I will describe some specific vignettes within the context of our development as a group. The cases we share have to do twice with problems around starting new groups and anxious fantasies in the mind of the group leader and tensions around behaviour of the co-therapist. The exchange enhanced by different contexts like starting groups in institutes or in private practice. Just as different ways of working like more psychoanalytic or psycho dramatic or system oriented and educational. The discussion runs parallel with our own starting InterVision group with stress and insecurities as to handling technological connection issues, time differences and dealing with real life insecurities. Other

topics during our year are complicated situations with co therapists and strong examples of transference and counter transference with clients in complicated systems. Sometimes we reflect on top of that traumatic issues in our countries that have great impact on our work and personal well-being. As one participant frames it as if in this small chatroom, the whole world politics is passing. Sharing of viewpoints on the effects of economic, political, social and natural systems with focus on mental health brought us closer together and made us feel less isolated despite our differences.

Vignettes

In the fourth meeting online, one member presents a situation where a co therapist with whom she works in several groups left the groups and she asks the InterVision group specifically to share feelings in similar situations. She tells us the best thing I got from the group is the feeling of togetherness and also the individual sharing from every group member. The importance of anger and the matching process for co therapists; the impact of anxiety for the future, as well as the perspective of parents. The difficulty of letting go of a co therapist and the idea of doing double work in a group. The concept of a good divorce and from everybody a child perspective. As a facilitator, I asked everyone to imagine to be a child in her group and share what you experience.

In the fifth meeting I ask for some evaluation of how we are doing so far and a need is expressed to have more structure and several suggestions are offered, such as record meetings for people who miss a meeting or to come back to what was told

previously. Give a minute to each participant for personal sharing after discussing a particular topic. I remind them again of what was agreed upon in the beginning, if there is someone with a crisis case that goes first, otherwise two people prepare a case because practicality shows us that two cases are reasonable to address. The funny thing is that when a case presenter forgets, there is always someone who has a case. The power of the here and now sharing is so apparent. Interesting is that concern and worry about disasters in each other's country gets expressed on the WhatsApp, as well as wishing well for holidays with short stories about local rituals. In the ninth meeting, the case that someone brings in is about difficulties to start a new group of people working in here and now. This group is supposed to start with a colleague who gets ill while the group leader has planned a needed vacation. The case presenter expresses the need to get support from the InterVision group in containing anxiety. We explore together fears and

What are our limits?

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anxiety and realise that, no matter what kind of group we have, they will always oscillate between life and death. Scary fantasies and negative feelings are coming out into the open. This stimulates a passionate discussion about how to manage the balance between fantasy and reality and to stay open and transparent also with the co therapist

and work on trust. A second case in this meeting focusses on the issue of the humanity of a therapist and the deeply felt need and right to take good care of oneself by taking a sabbatical year. The question comes up what the hardship of our profession means for one's health and soul. It is different from leaving a group or individual clients for a simple holiday. This theme resonates and flies over to the tenth meeting. We hear that one member stopped his business and takes rest for reflection and orientation as to another direction for work more in the area of groups around climate issues. Two other participants reveal their struggle with balancing work and study and work and a too big caseload due to not enough other colleagues to refer to. What are our limits? Do we wait till our body or soul tell us this is enough? We agree how crucial it is to make time for ourselves and listen to the soft voices deep down. Even interesting projects and activities consume energy. Everyone agrees to take care of our hearts, heads and souls.

Group dynamics

In InterVision, I try to do the same as in training or in therapy groups and that is facilitating first safety and cohesion. There is no clear distinction of phases in the group, more general ones like forming, storming and performing. Group dynamically, I move along the axis of containing and gaining understanding of the group while working on cases and themes which arise in the meeting. Sharing and helping each other on an equal base with complicated situations works to build a cohesive and safe group climate and takes away some stress

and tension that prompts to bring in a case. Along the way, the group becomes quite independent. At the end of our working term of 12 sessions, I will leave the group to start a new transcultural InterVision group. The independency of the group results in a decision that all members except one want to continue, while one member is willing to take over my role as facilitator. What is a surprise for me is how fast we reach together a deep personal level of sharing. As if people were waiting so long for an experience like this.

Role of facilitator of the InterVision group

InterVision takes place in a group of colleagues where everyone is responsible for their own work. The InterVision will be online, I ask everyone first to sign an agreement form. The experiment will continue for one year once a month, for two hours and an internet etiquette is offered to make the experience safer. I need to facilitate the technical side especially when the InterVision is online. The facilitator makes sure everyone gets connected visible and audible and sends a link to a WhatsApp group we have. We work with a program called Zoom. Everyone downloads this program and the facilitator takes care of sending an invitation to participate and notifies changes in time zones in order for everyone to start and finish on time. This is similar to the administrative role of a group therapist as to arranging place, room and good conditions. Some facilitators also share their own cases. I did not because many of the participants have no experience with InterVision and I want to 'teach the method' and first create a safe space to

share. I mention sometimes an example, but that is mostly to offer another perspective or because group members want to know how others handle issues in their countries. In the beginning at the face-to-face meeting, we already plan that we will work on Friday early evening two hours online. Each time online we chose which Friday most people can participate. The WhatsApp group is used for technical issues and planning meetings with summer and wintertime differences and halfway I start to send brief synopsis of themes discussed after every meeting. The other role I take is actively fostering the group process by giving everyone a chance to speak by picking up nonverbal signals from the screen, which is limited. I recognise very much what Weinberg (2020) mentions in his article about the disembodied environment of a group working online and the importance of trying to get through the screen and being present as group facilitator. We miss many nonverbal clues, which are so crucial for creating a feeling of being connected. Therefore, the expression of the face becomes so important. I realise that facial expressions are picked up more than in an offline group. Group members will pick up your subtle facial expressions like tiredness and being puzzled. Besides this, I get quickly annoyed when there are disturbances in sound transfer because I lose the ability to pick up clues from people's voices. I developed a tendency to speak more in metaphors and people associate to that. In this light, I can see the spontaneous initiative of the InterVision group to use images to underscore or clarify the topic or maybe because many participants are of a younger generation. After a meeting there are many

visual images on the WhatsApp group, which turns out to be very helpful for the ones who could not be present. These images form together with my synopsis of the themes discussed, a sort of bridge between meetings. Sometimes I pinpoint to other perspectives as to case presentations because not all cultures have the same way of approaching things. Not every country uses, for example, a diagnostic system. In some countries, the role of religion in mental health or education is very different than in other places in the world. I look if feedback given to a case presenter is helpful. Or I try to formulate a common theme. Crucial for the group to make space for building their own workable atmosphere. In the process, participants spontaneously make use of the writing button to provide data of a book or article around a topic. Last but not least, the education committee of IAGP organises every two months a meeting for all InterVision group leaders to share and discuss their experiences with each other.

Remarkable points

- The importance of group diversity lies in the exposure to different perspectives in dealing with work dilemmas. This can lead to discover sources of strengths in other cultures when it comes to existential issues, such as life and death, revenge and forgiveness and acceptance of transitions in life. The possibility to dip into a well of diverse rituals, family bonds, customs and support experienced from spirituality and nature make group members realise sources of strengths in other cultures, as well as appreciate and discover forgotten sources in their own culture.
- Make time as facilitator to let group members get acquainted with each other and hear about their professional backgrounds. When it is not possible, have a meeting online where people can communicate with each other, ask questions and then you explain what transcultural InterVision is before starting with presenting cases.
- Be aware of the intensity of a transcultural InterVision group and the impact of the diverse contexts with trauma, political instability and spiritual orientation on members life and profession. This requires for keeping a good balance between content and process. Afterall, InterVision is not therapy.
- Pay more attention to nonverbal communication online, such as using nonverbal signals, putting hands up for wanting to talk or hands against ears meaning cannot hear you; using the chat button to a person that has problems with sound or vision. It takes time for everyone to get accustomed to this.
- A WhatsApp group is very useful besides the InterVision session, not only for administrative purposes but also as a creative way to compensate for the lack of nonverbal clues. Group members send symbols and images such as pictures of hearts, flowers, muscled arms and funny faces. I think it helps to let concepts and suggestions sink in and give some notion of what was going on for the people.
- It is recommendable for transcultural InterVision to have facilitators who have experience with different group modalities because some modalities are easier to

grasp for some people than others. I found it an advantage that I have a lot of experience with InterVision in small and median size groups, even online. The difference between teaching supervision courses and being a supervisor helps to keep the boundary between supervision and InterVision. The main difference is equality, everyone is equal in contributions. No one is the expert.

Conclusions

Transcultural InterVision is a tremendous learning experience for becoming conscious of one's prejudices and privileges. Questions and stories can be confronting and shake members out of their comfort zones. It is a real challenge to stay curious and open and eager to know what is behind some charged reactions instead of drowning in guilt and shame. Curiosity can help to overcome ingrained judgements so that cultural knowledge can lead to adjustment of attitude and variation in methods and use of different theoretical concepts. The experiment was a more challenging and connecting exchange of similarities and differences than was expected in advance. It seems a valuable method to teach and let people experience themselves in a meaningful way with colleagues from different cultural backgrounds. This is affirmed because all participants would recommend transcultural InterVision to a colleague/friend. All had a positive learning

experience. One member formulated in a compact way what was helpful. 'Realise, one more time, a human being is the same all over the world, although there are different cultures. That means the professional who works with mental health has to have a safe place to share about his/her own subjectivity and own professional practices with other people.' Another participant said: 'My goal was to connect with people from several cultures with different perspectives to enrich my learning process and to widen my perspective about other backgrounds and cultures. This group enriched me so much and it met my goals, except that I expected more focus on differences and similarities of backgrounds. The most important and helpful was the deep authentic connection that we had as a group and to experience this. Being seen, heard, felt and supported as a human being despite all differences in culture, language, models in therapy and background, we could all share the deepest connection as human beings and the support of the group.'

There was some ambivalence about structuring case presentations and group process. We spoke about it and I will be more alert to this in the next InterVision group and be alert to discuss boundaries. In my view, this transcultural InterVision group has been experienced as a safe place where one can share with colleagues from different cultural backgrounds the intricacies and vulnerabilities of working as group leaders.

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