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Your Social Baby: Understanding Babies' Communication from Birth

Lynne Murray and Liz Andrews, edited by Sue Parish, designed by Clive Dorman. First published as *The Social Baby*, 2000, by CP Publishing, Richmond, Surrey UK. The revised Australian edition was first published in 2001 by ACER.

Soft cover, 178 pp. \$39.95.
ISBN 086431 3942

This is a charming and useful book that will appeal to a wide range of people from parents and grandparents to therapists, as well as professional people who care for mothers and babies. It would be a lovely gift for a new mother. Seven hundred colour images, taken from videos, showing babies between birth and three months interacting with their parents, make up a large part of the book and they are both beautiful and enlightening.

Lynne Murray has worked in the area of infant development since 1973. She is currently Professor of Developmental Psychology at the University of Reading, and Honorary Senior Fellow in the Department of Psychiatry at the University of Cambridge. She is co-director of the Winnicott Research Unit at the University of Reading. She has three sons and a stepson.

Liz Andrews, the co-author, is a maternal and child health nurse and counsellor who worked in the NHS for more than twenty years. Until 1999, she was a Research Health Visitor in the Winnicott Research Unit. She is also a mother.

In his Foreword to the Australian edition, Campbell Paul (Associate Professor, Mental Health Centre, Royal Children's Hospital, Melbourne) writes:

With amazing creativity and wisdom, Lynne Murray and Liz Andrews take us through the remarkable journey that is the early months of an infant's life with her family. It helps us to see something of that which the baby can see, hear, feel and taste; something of the rich mutual experience of the baby and the care givers.

The overwhelming message of the book is that babies are very different from each other; that they are very social creatures and begin communicating from birth; and that by having some knowledge of their language and behaviour right from the start, we can enjoy them so much more. There is a lovely series of photographs of baby Ethan's first moments with his mother and father, showing how he responds to his mother's voice by looking towards her when being held by his father.

This book is not, however, all about babies born under perfect conditions. There are sections on the premature baby in the humidicrib and babies born under conditions less than ideal.

It is fascinating to observe how sensitive a baby is to her mother's odour — the taste of the amniotic fluid, her mother's milk and her odour generally — in prefer-

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ence to that of another mother. The sound of her mother's voice is likewise important; having heard it in utero the baby is familiar with it and responds to it when born.

Mirroring a baby's movements and expressions gives a baby a 'sense of self', observed Winnicott fifty years ago. The 'natural' play and conversation between a baby and her parents is vital to her development as a social human being.

The authors talk about the baby's physical world, crying and consoling, sleeping, developing a sense of security, and about supporting parents, lifestyles and choices. Many new parents need help and assistance around how much babies 'should' cry and sleep, so these two chapters are particularly apt. It is good to be reassured that babies vary immensely in these areas, and from day to day, and as time passes. Parents who have a baby who cries a lot feel stressed by the crying. This is

acknowledged but it is also suggested that the crying is probably part of a spectrum of normal behaviour rather than that the parents are doing something 'wrong'. The reasons some babies cry more than others are explored although no firm conclusions are drawn. Some babies appear to be innately more sensitive than others. The authors give practical hints on 'helping the baby calm herself'.

The recent mushrooming of sleep clinics testifies to the lack of knowledge that new parents have in this area. A chapter describes how babies sleep, how this varies from baby to baby, how much sleep babies need and how to settle the baby down to sleep using proven strategies.

Developing a baby's sense of security is dependent on forming close attachments with the significant people in a baby's life. Parents need to be supported and educated as they engage in this important work.

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Birth and Beyond: Pregnancy, Birth, Your Baby and Family — The Definitive Guide

Yehudi Gordon. London,
Vermillion, 2002.

Hard cover. 576 pp. \$54.95 (GST included).
ISBN 0 0918 5694 9

This is a wonderful book for avid readers preparing for the arrival of their first child. *Birth and Beyond* provides a thorough and easy to read (although long) discussion about experiences and choices from pregnancy through childbirth and then the family's first nine months with their baby. The writing emphasises choice and options available: 'There is no right or wrong way to parent and the way that works best for you will depend on how your baby's personality matches yours', rather than the authoritarian tone of some older books about the topic ('You should ...' and 'It's best for you ...'). While *Birth and Beyond* is not about family therapy, there is more

exploration of the possible reactions and emotions involved at each stage for the mother, father and baby than in most other books on the subject.

Most of the book is addressed to the pregnant woman and mother but there are also sections addressed to the father on each topic, e.g.: 'Some men feel that they are fathers before the birth, but most don't really feel the reality until they hold their baby in their arms. It's amazing how much you learn as you go along' (295).

Single parenthood has a brief section, including positive as well as negative aspects, but is not the main focus of the book. Intergenerational factors are also discussed, both in terms of the parent's relationships with their own parents and current interactions with grandparents and other significant people. 'Adapting and entering an adult-to-adult relationship is part of your own journey of growing up and your mother or father may become a close, or closer, friend' (281). How different aspects of these relationships may influence the new family and relationships (with the baby and partner) is discussed and the possibility of change is raised at each point. Practical suggestions about how to make changes are given.

Difficulties in getting on with your parents may affect your self-esteem and the relationships you form. At some point, working through the feelings may help you heal parts of yourself and move forward ... If you feel issues may be important or that obstacles exist between you and your parents, you may identify with one or more of the thoughts listed below (282).

Some other books do include brief discussions of this, although it is given less of a priority than physical care. For example *Baby Love* (Barker, 1997) has a chapter on this entitled 'For Parents' later in her book. *Birth and Beyond* also addresses how other aspects of life may be affected by pregnancy and the arrival of a new baby, including work, finances, social relationships and recreation.

Normal physical changes, their variability, and problems that may occur for both the pregnant woman and mother and the baby are described clearly, and there is an extensive reference section. There is much more about maintaining good health with yoga, massage, exercise and diet during normal pregnancy and birth, than in comparable books. The

balance between ensuring safety and offering choices is carefully placed for the majority of the book, and the discussion about 'Emotions, Advice and Support' starting on page 459 is generally excellent.

Birth and Beyond includes practical advice and then briefly describes counselling and psychological therapies. I do have reservations about the comments about some alternative therapies. For example, 'St John's wort is a traditional remedy for anxiety and moderate depression, with a therapeutic effect similar to anti-depressant drugs but far fewer side effects' (461). While I would agree that St John's wort is effective for treating adults with moderate depression, and that it is 'natural', in that it comes from the plant *Hypericum perforatum*, there is not yet enough evidence to say that it has fewer side effects for the babies of women taking it during pregnancy or breastfeeding (Klier, Schafer, & Schmid-Siegel, et al., 2002).

For pregnant or breast-feeding women with mild to moderate depression, therapeutic approaches without medication (mainstream or complementary medication) may be very effective when applied by appropriately trained therapists. Family (or couple) therapy may be very relevant, particularly given the predisposing factors such as not feeling supported by one's partner or extended family (Brugh, Sharp & Cooper et al., 1998). Unfortunately, there are many more studies of medication-based therapy than for family therapy.

My other reservation would be in recommending such a large book to someone who was sleep-deprived, had low self-esteem or who already felt pressured by multiple demands on their time. For a new parent, *How to Stay Sane in Your Baby's First Year* (Fowler & Gornall, 1996) may be more approachable.

References

- Barker, R., 1997. *Baby Love*, Sydney, Pan Macmillan Australia.
- Brugh, T. S., Sharp, H. M., Cooper, S. A., Weisender, C., Britto, D., Shinkwin, R., Sherrif, T. & Kirwan, P. H., 1998. The Leicester 500 Project. Social Support and the Development of Postnatal Depressive Symptoms, A Prospective Cohort Survey, *Psychologica Medica*, 28, 1: 63–79.
- Crowe, S. & McKeating, K., 2002. Delayed Emergence with St John's Wort, *Anesthesiology*, 96, 4: 1025–1027.

Fowler, C. & Gornall, P., 1996. *How to Stay Sane in Your Baby's First Year*, Sydney, Simon & Schuster Australia.

Patel, S., Robinson R. & Burk, M., 2002. Hypertensive Crisis Associated with St. John's Wort, *American Journal of Medicine*, 112, 6: 507–8.

Klier, C. M., Schafer, M. R., Schmid-Siegel, B., Lenz, G. & Mannel, M., 2002. St. John's Wort (*Hypericum perforatum*) — Is it Safe During Breastfeeding? *Pharmacopsychiatry*, 35, 1: 29–30.

Wisner, K. L., Gelenberg, A. J., Leonard, H., Zarin, De & Frank, E., 1999. Pharmacologic Treatment of Depression During Pregnancy, *Journal of the American Medical Association*, 282, 13: 1264–1269.

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The Socially Constructed Organization

David Campbell. London, Karnac,
2000. (Systemic Thinking and
Practice Series. Work with
Organisations.)

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ISBN 1 8557 524 5X

David Campbell, co-editor of the Systemic Thinking and Practice Series, introduces Social Constructionism, distinguishing it from systems perspective and process consultation. Social Constructionism is essentially concerned with how meaning is made; the central premise is that knowledge is constructed between people. While Social Constructionism shares with the Systems perspective the concepts of feedback, recursiveness, meaning systems and seeing the whole is more than the sum of its parts, its focus is on social discourse, joint action and dialogic communication.

Constructionists question the prevailing western view that the individual is the source and discoverer of meaning, seeing instead that meaning emerges from discourse. Campbell views an organisation as 'a political arena in which the dominant discourses organize daily activity in an

environment in which alternatives have been devalued and marginalised' (23). The consultant's aim is to create dialogue; both the theoretical and applied descriptions of this powerful tool are outstanding.

The organisation is an entity that has the capacity to shift its own conceptions. Those who have had a powerful role in establishing the dominant construct (those at the top) will be most threatened by the introduction of Dialogue. Yet, it is only in the juxtaposition of differences that we can grow. 'We cannot learn or progress from shared meaning' and '...what we share is not as interesting as what we do not share' (33).

Even though the organisation, or its culture, is seen as the pervasive shaper of possibilities for action, individuals are not relieved of their responsibility to act. Each staff member is seen as having feedback responsibility: '... everyone in the organisation should be regularly appraised for his or her ability to generate dialogic interactions' (31).

As risk-taking is an essential part of success, the balance between taking risks and creating a safe environment is critical. The success of the work is also seen as a joint responsibility and the author cautions about aiming too high. He makes a distinction between 'the work the organisation will do with me', and 'creating the right environment before the work can be done' (53).

Respectful consultant behaviour requires balancing between addressing conflicts which have been raised, and taking care that people are not hurt in the process. I totally support Campbell's injunction against cathartic 'getting all the feelings out'. Real change will only result if personal experiences of participants are adequately addressed. Consequently, a strengths-based approach is promoted, and 'appreciative enquiry' is mentioned. Unfortunately, no detail about this approach is provided. I have added references for the curious.

Case examples include 'learning the hard way' from a consultancy that wasn't successful. The main learning is: maintain the right to change the working contract, according to the situation, rather than feeling bound by the prior contract.

From my reading, I have become stronger in resisting the seductive invitation offered to all consultants — 'Tell us what's happening and give us the remedy'. I enjoyed Campbell's skilful gliding through the paradoxes of consulting in agencies where people are stretched and

stressed, and time is all too precious. I did feel frustrated that while he frequently identifies paradoxes, he gives limited detail on how to respond; '... paradox paralyses routine thinking and behaviour — but if the consultant can allow the tension to be tolerated new ideas will emerge' (79).

A concise book for those who want to know about the application of Social Constructionism in organisational consulting, or for those who are interested in how we social beings make meaning of life.

References

- Cooperrider, D. L., 1999. Positive Image, Positive Action: The Affirmative Basis of Organizing. In S. Srivastva & D. L. Cooperrider (Eds), *Appreciative Management and Leadership*, Cleveland, OH, Williams.
- Cooperrider, D. L. & Whitney, D., 2000. Appreciative Inquiry: A Positive Revolution in Change. In P. Holman & T. Devane (Eds), *The Change Handbook*, San Francisco, Berrett-Koehler.

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Supervision in the Helping Professions: A Practical Approach

Mary McMahon & Wendy Patton,
Eds. Frenchs Forest, NSW, Pearson
Education Australia, 2002.

Soft cover. 346 pp. \$49.95.
ISBN 1 74009 619 3

Perspectives on Supervision

David Campbell & Barry Mason,
Eds. London, Karnac, 2002.

Soft cover. 226 pp. £19.99.
ISBN: 18557 528 08

If supervision is about widening the lens of practice for the supervisee as well as providing a set of skills for stuck situations, whilst simultaneously creating a process for accountability in professional practice, then *Supervision in the Helping Professions* addresses all of these. In his foreword, Michael Carroll sums up this book:

... it has the best of what is common, what is different, what is old, what is new, what is taken for granted, what is questioned, what is the past and what may be the future of supervision (vi).

It has a range of helpful, informative tables, comprehensive references at the end of each chapter and McMahon's chapter on 'some supervision practicalities' whilst brief, is the most useful check list of questions and issues to address in supervision that I have come across in the supervision literature.

Although *Supervision in the Helping Professions* has a section on solution focused supervision, it does not cover the full range of systemic and narrative family therapy frameworks. It is therefore more of an important additional text for family therapy supervisors rather than *the* text; Mason and Campbell's book in many ways is more directly relevant to family therapy supervisors.

Supervision in the Helping Professions is set out in five parts.

Part one covers ethics, group supervision, and obtaining supervision in rural settings, as well as a history of supervision across the helping profession. Most importantly the chapter on 'the domain of learning goals in professional supervision' (Lizzio & Wilson) comes closest to a framework for supervision across models and include the sometimes controversial issues of dual relationships, ethics and personal development. Hawken and Worrall introduce the advantages of mutuality and equality as essential ingredients in the supervision process. The constraints of hierarchy and power differential are replaced by decreased dependency and increased honesty in their 'reciprocal mentoring' model. The best of this process is summarised as 'We give what we would like to receive'. Their honest account of the advantages and difficulties is an invitation to consider peer supervision as a legitimate and useful practice rather than as default option in the absence of an 'expert' supervisor. Similarly the chapters on self supervision (Lowe) and supervision in the country (Crago & Crago) address these challenging areas creatively and with considerable practice wisdom which could be used in any supervisory practice.

Part two begins with Embelton's chapter on 'dangerous liaisons and shifting boundaries'. Five chapters in this section

deal with supervision in the context of therapeutic frameworks, with Crocket in her Narrative letter questioning the use of the term 'supervisee' (which to her denies the supervisee's autonomy), and asserting that the supervision process needing to be equally from the perspective of both the supervisee (or as she prefers, '*the counsellor*'), and the supervisor.

Part three presents a range of professional viewpoints on supervision. Most family therapists either come from a previously established helping profession or work in contexts that privilege their professional label. In order to be an effective systemic supervisor, one needs to be familiar with what has gone before and what continues to influence us from the past.

Part four deals with supervision in different organisational settings, both where counsellors are in the majority and where they are in the minority. The final section, 'Issues in supervision', consists of a single chapter, which is unfortunately not as comprehensive as it could be. Controversial questions are raised on how supervision might be at once egalitarian and accountable.

Family therapy supervisees are encouraged, enriched and empowered by sound theoretical notions as well as stories of rich clinical experiences. Additionally supervisees are inspired and challenged by the invitation to reflect on their own practice. In their *Perspectives on Supervision*, Mason and Campbell have gathered together seventeen predominantly British (a few European) Systemic supervisors, to weave a complex tapestry depicting the supervisory process.

Not uncommonly, supervision can become therapy by proxy, i.e. the supervisor suggesting what the supervisee ought to be doing in therapy. Laura Fruggeri addresses this phenomenon by alerting supervisors to the 'the levels of individual construction and co-construction' as central (9). She proposes two models of supervision based on this idea: supervision as teaching and supervision as reflecting on one's own practice. Although this is not a new idea (see Williams, 1996; Carroll, 1995), the analysis of the supervisory process in terms of the aims and the roles of the supervisor is articulated specifically from a systemic perspective.

Queenie Harris and John Burnham introduce the centrality of culture in supervision. They introduce the acronym

GRRAACCES as a helpful reminder that gender, race, religion, age, ability, class, culture, ethnicity and sexuality ... create culture and ... each one is important and may become foreground or background at different times (25).

They make a plea for old ideas in systemic practice to be 'refurbished and refreshed' rather than creating 'cultural obsolescence where only the new is privileged' (ibid.).

Frequently, supervisees and students will say how awkward they feel when unfamiliar with the culture of their clients. Harris and Burnham urge practitioners to move towards cultural competence, even if they are awkward at first. Unfortunately this chapter skims the surface of cultural complexity, especially in the practical aspects. Specific questions, areas for exploration between therapist and client family and between supervisor and supervisee in exploring GRRAACCES could have been clearly articulated.

Mason's 'reflective recording format' is one of the most comprehensive systemic tools for supervision to emerge in the systemic supervision literature (45). Mason's chapter proposes the notions of 'authoritative doubt' and 'safe uncertainty', which aim at taking the role of the expert with requisite gravity and humility so as to best serve the clients' expectations of therapy, and to honour their own resourcefulness. Interestingly, Mason does not in fact suggest that the supervisor take a parallel stance of authoritative doubt or safe uncertainty with her supervisee. Including this as part of the record keeping would have contributed to consistency and congruency in the therapy and supervisory process. The recording format and its diligent implementation is the key aspect of the supervisory dialogue and hence the supervisees' learning. The elegance of Mason's tool is its attention to accountability, transparency and reflexivity in the therapeutic work of the supervisee but not sufficiently in the supervisory process itself.

Charlotte Burck and David Campbell give a detailed description of their five part supervision course. The details, including specific examples and relevant questions, are helpful especially for a beginning live supervisor. The section on personal professional development is challenging to the supervisor in its attention to accountability and reflexivity. It promises the possibility of areas that could be raised for rich discussion in the area of personal pro-

fessional development, one that is not often attended to in systemic supervision. However, aspects of how to conduct supervisory dialogue behind the screen, and dealing with differences between live and reported supervision have not been addressed.

The final chapter on 'supervision and clinical governance' is a piece de resistance, in which the authors, Bennett, Gower, Maynerd and Wyse give a lucid outline of the supervisor being critiqued by supervisees. A dialogue on the differences in styles of supervision is welcomed. This is an important aspect of congruency and consistency in postmodern, second order cybernetic/systemic practice. Not only is therapy scrutinised and appraised, but supervision is also subjected to the same rigour and accountability.

The authors in this book have for the most part painstakingly attended to issues of transparency, reflexivity, collaboration and cultural sensitivity. Issues of hierarchy are addressed by trainees as a matter of course and they are invited to interview the trainers, identify their own areas for further development, and keep a reflective journal. The section on practice has a chapter on working with refugees, particularly topical as the world becomes more of a global village and the movement of peoples across nations becomes increasingly fraught. The fact and fear of terrorism in working with refugees is perhaps one that has not yet been taken into account but needs to be, when working with refugee families.

Neither text addresses difficulties in the relationship between supervisor and supervisee, assessing and failing a supervisee, or managing sexual attraction between supervisor and supervisee (and client and supervisee) from a process perspective rather than in a prescriptive manner (Axten in McMahon & Patton). However, these criticisms do not detract from the very significant contribution both books make to the practice of supervision.

References

- Carroll, M., 1996. *Counselling Supervision Theory, Skills and Practice*, London, Cassell.
- Williams, A., 1995. *Visual and Active Supervision: Roles Focus Techniques*, NY, Norton.

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