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The transition from participation to facilitation of supervision: an autoethnography

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The Transition from Participation to Facilitation of Supervision:
An Autoethnography

By
Daniel Maffia
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requirements for the degree of:

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EVALUATION PAGE

The undersigned members of the Graduate Faculty of Western Oregon University have examined the enclosed thesis entitled:

The Transition from Participation to Facilitation of Supervision: An Autoethnography

Presented by: Daniel Maffia

A candidate for the degree of: Master of Arts, Interpreting Studies

And hereby certify that in our opinion it is worthy of acceptance in partial fulfillment of the requirements for this master’s degree.

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This autoethnography examines the journey from being a participant of supervision to a facilitator of supervision. The researcher documents his journey using journals to express his experiences facilitating supervision for a group of medical interpreters working in the hospital setting. The purpose of this study is to gather data that could guide future trainings for facilitators of supervision. The supervision group consisted of both American Sign Language/English and Spanish/English medical interpreters. As a newer interpreter to the field with limited medical interpreting experience, it was expected that the researcher might face difficulties successfully facilitating supervision sessions for that staff. It was found that limited experience in the setting and being a newer interpreter did not have any impact on the facilitating process. The findings from this study can be used as one potential guide for future individuals interested in becoming a supervision
facilitator and can also be used for those interested in developing materials to train facilitator.
INTRODUCTION

Background

As a newer interpreter with just over five years in the interpreting field, I have experienced and witnessed many changes. Throughout my process of becoming an interpreter, I experienced many conflicting philosophies. Quickly I began to realize the complexities of the work, which intrigued me to continue pursuing an interpreting career. The one aspect of the field that interests me most is ethics. I felt as if I had never been given a formula for decision-making but instead was given a set of codified rules that I had to follow exactly. It was not until I had the opportunity to take a workshop about demand-control schema, a decision-making model for interpreters, when everything began to make sense to me. At that moment I felt this schema needed to be the foundation of any interpreter training program’s ethics course. Now as an interpreter educator, mentor, and practicing interpreter, the motivation for this topic is still strong, and it has fueled me to engage in this research study.

Over the past decade many changes have taken place in the field of American Sign Language/English interpreting. Technological advancements have allowed interpreters to work in new and formerly unchartered settings such as the Video Relay Service industry. Changes in the way in which we approach our work as interpreters have occurred throughout this young profession. These changes consist of philosophical change that will be expanded upon further. In addition, advances in research such as occupation health risk, biomechanically friendly approaches to work, and changes to our national certification system have contributed to significant changes in the field.
Working within a field that is still in its infancy and ever-changing, we face the difficulties of “ready, fire, aim” instead of “ready, aim, fire” (Peterson & Monikowski, 2010). Established professions use a different approach than that of the interpreting field, since those professions have a longer history behind them. In professions such as teaching, psychology, and medicine, it is the training programs that influence and guide the field into new practices.

One notable advancement in the interpreting field has been the development and advancement of two constructs: *demand control schema* and *supervision* (Dean & Pollard, 2001; 2005; 2009; 2011). Demand control schema (herein referred to as DC-S) is based on an occupational health theory called demand control theory (Karasek, 1979; Karasek & Theorell 1990). DC-S is based on an approach that looks at the interactional relationship between the demands of the job and the controls (or resources) the interpreter employs. Demands are the requirements of the job or challenges faced by the worker that may impact them. In the interpreting profession we categorize demands into four categories: environmental, interpersonal, paralinguistic, and intrapersonal. Controls are decisions the worker makes in response to the demands of the job. Demands and controls are best understood as a noun rather than a verb. Controls do not mean that one is necessarily “controlling” something but rather is a label for decisions made by the interpreter.

The interaction of interpreting demands and controls produces consequences that in turn can create resulting demands (Dean & Pollard, 2013). Demands are based upon contextual factors including the individuals who are involved, the setting in which the
interaction takes place, and the interpersonal dynamics that occur. The totality of demands in a given situation is known as the constellation of demands.

DC-S is the framework by which supervision is conducted. Supervision is a recognized form of professional development used in professions, such as nursing and other clinical professions, as a means to reflect on the workplace (Driscoll, 2007, p.8). Studies have shown the benefits of supervision including reducing occupational stress and burnout for school counselors (McMahon & Patton, 2000). Benefits that school counselors experienced while actively participating in supervision included reduced feelings of isolation, stress, and burnout. These benefits, in addition to a supported network, helped participants become accountable for their practice (Borders & Ushers, 1992; Roberts & Borders, 1994; Shanks-Pruett, 1991).

Supervision can be defined as the following in clinical professions, and this process is one from which the interpreting profession can benefit:

Clinical supervision is considered to be a reflective process whereby colleagues of a similar profession regularly engage in a prepared meeting for the intention of developing understanding, skills and a professional orientation, while concurrently focusing on enhancing client wellbeing. Such supervision has both a preventative and corrective function.

Pelling, Barletta, & Armstrong, 2009, p. 29.

**Statement of the Problem**

Currently, there is no official infrastructure or set path to becoming a facilitator of
supervision; as a result, there is a scarcity of interpreter trainers who know how to lead supervision. This lack of facilitator training is the genesis of this research. The goal of this autoethnography is to develop a better understanding of the steps necessary to become a facilitator of supervision. It is my hope that the findings from this study will lead to the development of materials used to train the trainers. One of the reasons for the lack of materials could be, as Dean and Pollard (2009) described, that “practice professions develop their skill sets and standards of practice over time, based on the developing research and scholarship of the field which further emphasizes the need for on-going, formal and collegial discussions of interpreting work” (Dean & Pollard, 2009, p. 1).

With the lack of facilitator training and the obvious need for formal and collegial discussions of interpreting work, I have undertaken the task of learning and sharing the steps I experienced to become a trained facilitator of supervision.

According to Dean and Pollard (2005), at the expense of our consumers, interpreters are graduating without the skills necessary to make proper and effective decisions on the job. One successful way to bridge the gap and help foster reflective practices requires trained facilitators of supervision, and reflective practices such as supervision must be embedded in interpreter training programs. This can be seen in the successful implementation of D-CS and supervision for the Fund for the Improvement of Post-Secondary Education (FIPSE) project in which 15 Interpreter Training Programs participated. As a result of this successful implementation, participants of the project reported improvement in student decision-making, improvement in students’ ability to
discuss and analyze an interpreting situation, and increased knowledge of demands and strategies for addressing these demands (Institute for Assessment and Evaluation, 2003).

Since its inception in 2001, the theory of DC-S and supervision has slowly worked its way to being adopted by some of the interpreter training programs worldwide (Dean & Pollard, 2011). It has been more than a decade since the first article about DC-S was published; additional publications and further research on its effectiveness are available, yet DC-S has still not influenced the practices in pedagogy for all interpreter training programs.

In addition to the lack of pedagogical practices related to supervision in ITPs, according to Hetherington (2012), there is a lack of supervision in the field of ASL/English interpreting. The Registry of Interpreter for the Deaf (RID), the national organization for interpreters providing interpreting services between deaf and hearing consumers in the United States, has not established a number of hours of supervision needed to maintain certification or sit for certification. However, it is common in other practice professions such as nursing, law, and counseling to engage in reflective practices such as supervision both pre- and post-graduation.

Supervision is expected of some professions as ongoing professional development to maintain licensure (Page, 2008). Professional organizations such as the British Association for Counseling and Psychotherapy (BACP, 1996) and the New Zealand Psychologists Board require that members engage in ongoing supervision post-licensing. Within the United States, 49 states require licensure for psychologists, and in order to apply for and maintain licensure, one must provide evidence of supervised experience for
their internship along with supervision hours (Pelling, Barletta, & Armstrong, p. 229, 2009). The American Counseling Association leaves it up to states to determine the number of hours one must satisfy in order to obtain licensure (American Counseling Association, 2010).

A reflective practice is “the capacity to reflect on action so as to engage in a process of continuous learning,” which is “one of the defining characteristics of professional practice” (Schön, 1983, p. 28). Davies (2012) identified both benefits and limitations to engaging in reflective practices. Some benefits include increased learning, acquisition of new knowledge and skills, encouragement of self-motivation, and improvements to confidence. Limitations include the fact that not all practitioners are skilled at the process of reflecting, that the process requires a lot of time, and that the process can be challenging and uncomfortable. Finally, as it stands with the lack of trained facilitators, the desire to facilitate supervision, and the availability of supervision, it is difficult for practicing interpreters to partake in this form of effectual reflective practice.

**Limitations of the Study**

In any study it is important to not only know the strengths of the research, but also it is important to acknowledge the limitations. Some of the limitations of this study are specific to autoethnographies as a research approach. Autoethnographies, being a study about the researchers, only allow the researchers to be able to interpret their own experience. Since this is only one person’s experience, the study cannot be generalizable to the larger population. At the same time, this type of research approach can allow for a
more authentic and valid form of research (Reed-Danahay, 1997). Because the researcher is exposing himself to vulnerability, and, in essence, since it is coming from the self, the researcher will be revealing his own experiences.

There is a lack of standard methods in collecting the data. There is not a specific time limit to record the data, no designated questions, and no format to follow on how the data should be document. The lack of standards can raise questions about the validity of the study. Lastly, there is the fact that this particular experience is completely unique to me. If the setting or the participants been different, the results of my study might have been different.
LITERATURE REVIEW

The ability of interpreters to identify situational demands and make decisions develops as a result of on-the-job experience (Dean & Pollard, 2001). Regardless of their training background, interpreters have reported that their on-the-job experience has provided the tools necessary to make decisions. Of those who attended a formal education program, why is it that they do not credit their education as the reason they know how to make decisions, but instead they refer only to their on-the-job experience? These anecdotal reports suggest that interpreters are learning at the expense of consumers of interpreting services both hearing and deaf. Many interpreters work in isolation, unsupervised, without adequate access to mentoring (Humphrey, 2007; Metzger, 1999). During their work, ASL/English interpreters are making ethical decisions moment to moment autonomously (Dean & Pollard, 2001; Gish, 1990; Hoza, 2003). The consumers are at risk when interpreters are not adequately prepared, making the need for supervision and reflective practices an imperative.

History of the Interpreting Profession

To put the field of interpreting into context, it is a young profession with much to learn. Starting before the creation of the national organization, the Registry of Interpreters for the Deaf (RID) in 1964, interpreters have changed the philosophical approach to interpreting numerous times. To fully understand the current approach to ethics and decision making, we must look back to the beginning and the various philosophies we have embraced.
Before the establishment of the RID, interpreters were seen as “helpers” to the Deaf community. Interpreting was not one’s main source of income but was a side job for other professionals such as social workers or people in the ministry. When working from this paradigm, interpreters overstepped the boundaries of the ethics that many of us value today by making decisions that may have been considered too liberal. Decisions were made on behalf of the Deaf consumers because of the beliefs that they were helpless, handicapped, and limited. Examples include when family members would assume the responsibilities of interpreting for Deaf people in situations such as a medical appointment. Family members would feel comfortable interjecting their opinions or even making decisions on behalf of the Deaf person. In addition to being selfless, interpreters may have ignored their own needs in order to accommodate Deaf consumers. Baker-Shenk (1986) suggested that since interpreters are typically a part of the oppressor group (hearing people), Deaf people may perceive interpreters as being powerful and having the capabilities to “make things go the way you want them to,” ultimately setting high expectations for interpreters. This idea also left out the hearing individuals who are also our consumers (Humphrey & Alcorn, 2007).

**Ethics for Interpreters**

Following the establishment of the RID and the creation of the first code of ethics for interpreters, a shift occurred in interpreter paradigms from helper to the machine or conduit model. At the time, this robotic form of interpreting, where interpreters simply transposed information from one language to another, was radical (Frishberg, 1990). Interpreters were not expected to worry about the effectiveness of the end of their translation. This approach left interpreters devoid of any responsibility for the outcomes
of the communication event. Interpreters cloaked themselves in a sense of invisibility by denying that their presence had any influence on the situation (Humphrey & Alcorn, 2007). However, this sense of having to be invisible yielded ethical decision making that was too conservative. This belief that interpreters are invisible can lead to unethical decision making. As posed by Dean and Pollard (2006), “How can one take responsibility for his/her decisions when one (ideally) is not even there” (p. 124).

Perhaps in an attempt to find a middle ground, interpreters began to work from a paradigm known as communication facilitators. As communication facilitators, interpreters started to see themselves as professionals, and being a professional brought in professional responsibility. Problems such as continuing literal translations remained from the conduit/machine model (Humphrey & Alcorn, 2007).

Interpreters shifted away from literal translations perhaps after realizing that cultural differences require cultural mediation. It also was suggested that much information can potentially be lost in literal translation, which lacks meaning that can come from idiomatic expressions and body language (Mindess, 2006). With this realization, interpreters shifted toward a philosophy of the bilingual-bicultural mediator model (Bi-Bi model). Within the Bi-Bi model, interpreters are expected to be both linguistically and culturally competent in the languages to which they will be interpreting to and from (Humphrey & Alcorn, 2007). In a text used in many training programs for ASL/English interpreters, it states that interpreters are primarily following the Bi-Bi model (Humphrey & Alcorn, 2007).

Philosophical changes are known for having influence on the education-for-work
of other professions; therefore it can be applied to the pedagogy of ITPs (Miller, 1994).

This means that the ITPs can have an impact on how interpreters approach their work.

ITPs have been criticized for focusing on the technical skills needed for interpreting work, thus leaving the contextual factors or soft skills out of the curriculum (Dean & Pollard, 2001). In response to this insufficiency, Dean and Pollard (2001) sought to develop an alternative framework, DC-S, which encompasses a more holistic scope for interpreting. Contextual factors that have an impact on the work of interpreters have been noted not only by Dean and Pollard but also by other interpreting scholars. They all agree that analyzing the context of the situation must be done in order to make informed decisions (Cokely, 1992; Gish, 1987; Humphrey & Alcorn, 1995; Metzger & Bahan, 2001; Namy, 1977; Pöchhacker, 2004; Roy, 2000; Turner, 2005; Wadensjo, 1998; Winston, 1989).

From my own experiences of mentoring and teaching, and having been a recent student in an interpreter training program, I took note of my feelings and my classmates’ reactions to ethics for interpreters. We interpreting students would come into the classroom with a mindset of, “please provide me with the answers.” Our only approach to ethics in interpreting is black and white and that there is a right and a wrong answer. This experience is limited to me and my peers in only one ITP. However, we may fail to appreciate the importance of contextual factors such as the participants of the assignment, relationships with the participants, the specific setting, the goal of the setting, and many other factors that can impact an interpreter’s decision (Humphrey & Alcorn, 1995). This black-and-white approach to ethics remains with students post-graduation according to a study comparing novice interpreters’ ethical decision making with expert interpreters.
According to Mendoza (2010), “experts displayed a multi-layered level of analysis. Experts asked probing questions, considered multiple perspectives and illustrated a firm understanding of the ethical consequences” (p. 3). In this study it was noted that when trying to determine the course of action in an ethical dilemma, the interpreting students involved in the study asked their teachers and mentors about the proper course of action. These interpreting students were given the typical response from teachers, “it depends on the situation”, and students are expected to handle situations with that response (Winston, 2005). According to Dean and Pollard, “This type of response is an indication that the prevailing, primarily technical schema of interpreting work is insufficient to guide dialogue and education about interpreting practice” (2003, p. 12) (see also Dean & Pollard, 2004, 2006, and Winston, 2005).

Ethical codes, such as, the RID’s Code of Professional Conduct (2005), are used as a tool in ethics courses for interpreters; however, the usefulness can be limited. Just having the code is not sufficient. In order to make ethical decisions, one is required to think critically (Humphrey & Alcorn, 2007). The code is limited because it is written using an approach to ethics known as deontology. “This approach to ethics focuses on adherence to rules” (Dean & Pollard, 2009, p. 2). Rule-based approaches to ethics do not allow for behavioral flexibility. This restriction on flexibility contradicts the practice interpreters use of being open minded to variety of options (Humphrey & Alcorn, 2007). This can be compared to a consequence-based approach to ethics, also known as teleological, which focuses on weighing the consequences of a decision.

Such a deontological or rule-based approach has been criticized by interpreting scholars (Cokely, 2000; Fritsch-Rudser, 1986) who have instead suggested that a
teleological or consequences-based approach is more effective in interpreting practice (Cokely, 2000; Dean & Pollard, 2005, 2006, 2011). Although a response from an educator of “it depends” does indicate that considering contextual factors is necessary, it fails to provide students with the necessary critical thinking behind the words (Dean & Pollard, 2005). The “it depends” answer can throw students into confusion when confronted with a code of professional conduct that is written using a rule-based approach, and they also are given the idea of flexibility with the statement “it depends.” This is how my fellow classmates and I felt during our ethics course. I have also witnessed this phenomenon when mentoring soon-to-be-graduating students. In the profession of interpreting, students should not expect black-and-white answers to ethical dilemmas but instead be taught that many situations will require critical thinking, and these future professionals need to learn how to handle being in that flux (Tate & Turner, 1997). Within the field of psychology, scholars have recognized the limitations of such deontological tools and their impact on the development of decision-making skills (Snyder 2005; Dean & Pollard, 2011). Instead, interpreters have reported that DC-S has helped to bridge the gap between graduation from ITPs and their readiness for work (Dean & Pollard 2001, 2005).

**Effectiveness of DC-S**

The results from the US Department of Education’s Fund for the Improvement of Post-Secondary Education (FIPSE) project show the benefits of infusion of DC-S and supervision into ITP curricula (Institute for Assessment and Evaluation, 2003). These results revealed the value of infusing DC-S throughout the program for students to receive the maximum benefit. Thus far, according to the results of the FIPSE project,
DC-S has had a positive impact on the interpreting field and in interpreter training (Dean & Pollard, 2003). Many ITPs in the US have already incorporated DC-S constructs into their curricula and report seeing the benefits to their graduates, particularly in the area of decision making (Dean & Pollard, 2011).

According to faculty who participated in the post survey for the FIPSE project, students decision-making skills benefitted from infusing DC-S into the curricula (Institute for Assessment and Evaluation, 2003). One question on the post survey asked, “How has the DC-S project impacted student outcomes (knowledge, skills, etc.) at your institution? (Please cite specific changes or examples.)” Faculty responded with the following:

- Students are more aware of how concurrent demands are relevant when considering decision-making in response to a main demand.
- Students are able to identify a constellation of demands when confronted with ethical dilemmas. It has encouraged global thinking and critical thinking. Likewise, they are able to see that each situation will call for different controls based on the demands presented.
- I’ve seen an improvement in student decision-making skills and independent thinking.
- Students are now better able to examine situations from a professional perspective.
- Better able to assess situations and construct possible choices for action.
- Our students are far more aware of how DC-S is used to talk about their interpreting decisions.

**Supervision/Reflective Practice**

Interpreters are constantly making ethical decisions (Dean & Pollard, 2001; Gish, 1990; Hoza, 2003), which then debunks the former ideology that interpreters are simply
conduits. Since interpreters are constantly making decisions, this gives credence to the philosophy that interpreters are better understood as active participants in the communication process (Turner & Harrington, 2001). However, in order to make effective practice decisions, one must be a “reflective practitioner” (Schön, 1983, 1987, p. 23). Reflective practitioners critically analyze and reflect when confronted with the complexities of the job in addition to reflecting on their actions and the impact of those actions.

In clinical professions, ongoing supervision is used as a means of reflecting upon one’s decisions and to gain support and encouragement from colleagues, in order to avoid becoming stagnant professionally and feeling isolated from colleagues, as well as issues relating to self-care (Pelling; Barletta; & Armstrong, 2009).

“Supervision is a recognized means of professional support and development in professions such as counseling and social work and other professions taking place in clinical settings” (Hetherington, 2012 p. 2; see also Carroll, 2007; Cutcliffe, Butterworth, & Proctor, 2001; Hawkins & Shohet, 2006; Inskipp & Proctor, 1995; Morton-Cooper & Palmer, 2000; Page & Wosket, 2001). The structure that is used in supervision and case conferencing for interpreters incorporates the framework based on DC-S’s dialogic work analysis method (Dean & Pollard, 2006, 2008). The structure is used to evaluate the effectiveness of decisions made by the interpreter and to discuss other potential effective decisions.

Supervision also uses an egalitarian approach to looking at the work (Dean & Pollard, 2009). There is not one “master” or one who has all the answers who informs the
group, but rather the group as a whole provides the superior vision. Superior vision refers to the group’s collaborative discussion that is valued rather than one particular person’s contribution. Therefore, with this egalitarian philosophy, interpreters with a wide range of backgrounds, skills, and experience are all appreciated as having something important to contribute. In addition, the group collectively establishes a series of group rules or group norms such as unconditional positive regard, where each person’s opinion is regarded as valuable (Rogers, 1957). Other sources used in ground rules come from the Talmud and that, “We see the world, not as it is, but as we are or, as we are conditioned to see it” (p. 63), which means that our single perspective is limited, but with multiple perspectives we can have a better idea of how things truly are (Covey, 2003).

The benefits of supervision for the interpreting profession are numerous. First, it allows interpreters the ability to talk about their work in a structured manner. A supervision group is designed to allow for a safe and sacred environment, where participants feel free to discuss their work to seek improvement. Historically, interpreters have been afraid to confide in one another for fear of being perceived as a gossiper or for fear that discussing the work is taboo (Dean & Pollard, 2009). Because of this fear interpreters may only feel comfortable talking with close colleagues. This approach does have merit; however, friends may be more reluctant to challenge one another, thus not exploring other options, and this could lead to stagnation. With formal supervision, trust can be developed within the group so that challenge is welcomed and even sought out. One can also see the benefits of supervision related to reducing the amount of occupational stress that comes with the interpreting field.

The idea of supervision for the interpreting profession is not at all new. The push
for supervision was made over 25 years ago, when the correlation between occupational stress and the feelings of role conflict was made.

Fritsch-Rudser published an article in the RID’s Journal Of Interpretation in 1986, where the author points to a then current study by Heller, et al. (as cited in Fritsch-Rudser, 1986) on interpreter occupational stress where sign language interpreters reported strain due to role conflict, isolation, and frequent exposure to emotionally charged situations and dynamics. As a result, interpreters sought out other colleagues to talk about their work, ‘to get feedback and to lessen the impact of emotional experiences’ (Fritsch-Rudser, 1986, p. 50). Given the Code of 1979, this was perceived of as a breach.

(Dean, 2012, p. 1)

As a solution to this dilemma, Fritsch-Rudser (1986) suggested that formal supervision similar to that of the mental-health profession be incorporated into interpreting practice. Fritisch-Rudser (1986) goes on to suggest, “The Registry of Interpreters for the Deaf (RID) would have to approve formal supervision of interpreters for it to become a reality. I hope this paper will provide the impetus for discussion within our organization and profession to make that possible” (Fritsch-Rudser, 1986, p. 51).

Since the time of this suggestion, little has been done to adopt formal supervision as a necessary professional development tool.

**Facilitator Training**

In order for supervision groups to be effective, the groups must have trained facilitators. The purpose of having a trained facilitator is to guide the group and ensure
that the ground rules of supervision are followed and that the group sticks to the structure. The facilitator needs to be well versed in the constructs of DC-S in order to effectively guide the group through the supervision process. “A model of supervision referred to as ‘consultative’ or ‘professional’ supervision, in which the essence of effective supervision lies in the quality and character of the relationship between supervisor and supervisee” (Hetherington, 2012 as cited in Feasey, 2005, p. 41). This statement emphasizes the fact that the role of a facilitator is critical and should not be taken lightly.

Dean and Pollard stress it is necessary that a facilitator have training to lead an effective supervision session.

It is not recommended that supervision or case conferencing be conducted without education and training for facilitators. There are many concepts and skills that must be learned prior to this undertaking, including how to nurture the development of critical thinking (versus tell someone how to behave), how to restructure work discussions in accordance with the ground rules, how to present cases in a way that maintains confidentiality and at the same time includes all salient aspects of the case, and most notably, how to operationalize this new topic of conversation so that interpreters willingly return to the conversation.

(Dean & Pollard, 2009, p. 30).

According to Dean and Pollard (2009):

A facilitator’s role is to jump in during learning moments; redirect, restate,
restructure the interaction or reflect back to the group. It is essential to clarify and establish the role of the facilitator – participants discuss and agree on a dynamic set of ground rules. Remember, the facilitator is responding to maintain the structure of the interaction acknowledging the potential for perceived interruptions and taking the floor as rude and disrespectful, which needs to be clarified.

(Keller, K. as cited in Dean, R., 2010, personal communication).

The concept of having facilitators trained is not unique to the interpreting profession. In professions such as education, facilitators of groups similar to supervision known as “Critical Friends Groups” are required to complete training (Allen & Blythe, 2003). Critical Friends Groups require an aspiring facilitator, also known as a “coach”, to attend a five-day training offered by the National School Reform Faculty (NSRF) (Nefstead, 2009). The NSRF offers the ability for coaches to become National Facilitators in order to train coaches. Certain requirements must be met prior to becoming an NSRF National Facilitator. As you can see, the value of structured reflective practices with a trained facilitator is standard practice in other practice professions like education.

Clinical professions like educators see the necessity of having trained facilitators or supervisors when leading supervision. Pelling, Barletta, and Armstrong (2009) describe the role of a “clinical supervisor” and emphasize the importance of this individual having appropriate training:

The clinical supervisor has a dual role of ensuring the quality of services, as well as the development of the counsellor, is indeed a challenging task for the clinical
supervisor. Essentially, this form of supervision enables a practitioner to have a supportive colleague help them to examine their clinical interventions and the effectiveness. Due to the significance and magnitude of the role, and the reality that supervision is often recognised as a professional specialisation, clinical supervision is now usually only carried out by an accredited individual, or a senior professional, who has recognised training and expertise in supervision theory and techniques. This chapter serves as an introduction to this specialty.

(Pelling; Barletta; Armstrong, p. 29).

Most interesting regarding supervision in other fields “is that those who are deemed to be ‘master’ clinicians may not always make the best supervisors of supervision without additional training in the process” (Smith, 2009). Smith goes on to say that “The concept of ‘master-apprentice’ supervision evokes a hierarchy of power that favors the master as the ‘authority,’ a dynamic that is not supported in today’s literature on supervision” (p. 17). It is evident that the process of supervision is complex and requires a strong commitment from a facilitator; in addition, the role of a facilitator is one that is sacred.

In an article in the RID’s newsletter, “VIEWS,” Dean and Pollard (2009) state: We would like to see reflective learning practices such as case conferencing and supervision: a) employed routinely with students in interpreting preparation programs; b) codified by requiring a specific number of supervision hours before sitting for certification (common in other practice professions); and c) highly desired and available formally and widely throughout interpreters’ careers.
In order to effectively accomplish these goals, it is imperative that there is an infrastructure in place to train facilitators so that supervision groups are available and plentiful, which in turn exposes more students and practitioners to the constructs of supervision. With that in place, over time there will be more of a push toward instituting supervision as part of the interpreter’s normal scope of practice and education (Dean & Pollard, 2013, p. 149).

**Introducing Me, Situating the Author**

In autoethnographies, it is customary to give a short explanation of the researcher’s life as it relates to the research, so that readers may fully understand the context with which the researcher presents the data (Ellis & Bochner, 2000). My journey to finding supervision and benefitting from the process is one that is unique, since not many students are afforded opportunities to engage in this type of supervision. After graduating from my interpreter training program in 2009, I moved quickly in many ways. I began to work full-time as a staff interpreter in the post-secondary setting, began work as a VRS interpreter, became certified, and started my pursuit of a graduate degree. My experience as a practicing interpreter was limited at this point to post-secondary education and VRS. I feel it is important to mention that the amount of medical interpreting experience I had was limited prior to this study, and this will be discussed further as it relates to the setting in which I chose to facilitate supervision sessions for this study.
Living in Rochester, New York, the birthplace of supervision for interpreters, has afforded me a plethora of opportunities to continue developing myself professionally. My first exposure to DC-S was in 2008 at a workshop given by Dean during my senior year in my ITP. My college’s Student Interpreter Association sponsored this workshop. Since it was my senior year, I had some practical interpreting experience under my belt. As the workshop progressed, the concepts of DC-S all came together and the “it depends” statement I heard often throughout my ethics class began to make more sense to me. I thought to myself, “Why was I not taught this before?” I have always been eager to continue my development as an interpreter. When the opportunity arose to participate in supervision using the structure of DC-S, which fascinated me, I jumped on it. According to the flyer I responded to at the time, the concept supervision was so new that few interpreters had participated in it.

Part of my reasoning for joining this particular group was the gap I experienced post-graduation, so it was fortunate that this opportunity came when it did. The gap to which I am referring is graduating from my interpreter training program and having no formal means of discussing the ethical situations I faced. The ongoing supervision groups being offered were led by different facilitators. I was familiar with the facilitator who later became my mentor during this study, so with the support of my department I joined the ongoing group. After seeing the immediate benefits of being engaged in reflective practices, and recognizing the importance and need for supervision, I continued to actively search for opportunities to become involved in on-going supervision groups.

One reason for choosing Western Oregon University’s Master’s in Interpreting Studies program for my graduate studies was due to the fact that the program is infused
with DC-S concepts and various forms of supervision and reflective practice. In addition, I was fortunate to take various courses related to the constructs of DC-S directly from one of its developers, Robyn Dean. Outside of the academic setting, I have had the opportunity to be involved in various types of supervision groups with various types of participants, such as on-going, drop-in, and one-on-one. While there were trained facilitators in the Rochester area who facilitated some of the groups mentioned previously, I had never been trained as a facilitator.
METHODOLOGY

An autoethnography is an emerging form of qualitative research methods that allows the author to draw on his/her own experiences (Wall, 2006). They “are highly personalized accounts that draw upon the experience of the author/researcher for the purposes of extending social understanding” (Sparkes, 2000, p. 21). The term autoethnography has been in use for more than 20 years (originated by Hayano, 1979) and is used for studies similar to this one. Chang (2008) notes that autoethnography has become an important form of research for practitioners in other professions such as education, counseling, social work, and religion.

Autoethnographies follow similar approaches to collecting data as ethnographies, by collecting personal narratives. This form of data collecting is an interpretive story or narrative about a group of people (LeCompte, 1999). One must recognize that using this form of research as a method requires the researcher to be vulnerable in sharing one’s internal perspective with readers. The readers of this type of study may find this form of research writing more appealing than traditional scholarly writing, because the data includes the researcher’s reflections intertwined in the analysis. It is my hope that readers of this study will be able to relate to my experiences and inform their practice (LeCompte, 1999).

In an autoethnography, the researcher is the subject, and the data consists of the researcher’s interpretation of their experience (Ellis and Bochner, 2000). Fortunately, because the researcher is the subject of the research, the data is readily accessible. Chang
(2008) refers to this easily accessible data as being privileged since the data is that of the researcher’s own perspective in both collection and analysis. However, as the main data source, we cannot ignore the idea that these studies are not solely focused on the researcher alone, but that the researcher is the main character with others as supporting actors in the “lived experience” (Chang, 2008).

For this study, autoethnography was the choice of methodology because it allowed me to share my experiences regarding my transition from participant of supervision to a facilitator of supervision. Therefore, the main data source for this particular autoethnography will be my reflective journals completed at the conclusion of each supervision session. These journals come in a variety of forms from traditional written journals to video-recorded journals, also known as vlogs. This method of data collecting is in line with other autoethnographies that employ the same means of data collecting (Duncan, 2004). In addition, I have used other sources to support my data such as notes taken by my mentor and notes I make during the supervision session. Both are used to help me recall the session when reflecting. I also have employed suggestions made by Chang on how to record data of past memories through systematic self-observation and journaling (Ellis, 2009 as in Chang, 2008).

The next step in the process involves analyzing the data by categorizing it into patterns and themes. The analysis of my supervision will then aid me in systematizing qualities and training necessary for me to become a solo facilitator. With these systematized items, I can then begin to start developing tools for aspiring facilitators of supervision based on my experiences.
Critics of autoethnographies state that, “The focus on biography rather than formality is a concern for some, because experiences are placed on a pedestal and separated from other discourses in their contexts” (Wall, 2006, p. 21). In addition, it is also noted by some that the lack of standard methods has been a cause to question their validity. In defense of this method, Wall (2006, as cited in Reed-Danahay, 1997) writes that “in response, those who support autobiographical inquiry have argued that autoethnography is more authentic than traditional research approaches, precisely because of the researcher’s use of self, the voice of the insider being more true than that of the outsider” (p. 21).

The argument that this form of research only allows a single perspective is false, since much of the author’s insights have been co-constructed, and meaning has created the singular perspective. This means that not only is the researcher involved in the development of the data, but also there are many other factors that can impact the data such as the setting and the participants. The interactions between the researcher and participants afford the researcher the opportunity to collect and interpret the data of those interactions. The purpose of an autoethnography is to record, examine, and interpret the meaning of the researcher’s experiences (Ellis, 2004). My research allows the reader to understand the process I took in becoming a trained facilitator, which, in turn, can guide others in their training as facilitators.

**Participants**

Although this study is an autoethnography, I feel it is important to mention the participants of the supervision sessions I have led. The participants are all medical
interpreters working either as full-time or part-time staff members at a hospital. These individuals were paid for their time as part of their job for attending supervision sessions. Attendance in supervision sessions is highly encouraged but not required by their manager as part of their normal scope of practice. The individuals consisted of both American Sign Language/English interpreters and Spanish/English interpreters. The participants ranged in experience from 5 years to over 35 years. Lastly, I have been fortunate to be working with a mentor who is a trained facilitator of supervision. Her role was to not be a participant of the group, but she has been there simply to observe my actions as facilitator and provide feedback before and after each session. The feedback sessions that we engaged in were essentially supervision of supervision in which we analyzed the process of facilitating supervision through the same structure as participating in supervision.

**Data Analysis**

For this study, I used a variety of methods in order to gather data to formulate themes and categories from my experiences. The bulk of my data comes from journals that were either written or recorded videos of me using American Sign Language to reflect on my experience. These journals were created within an hour after I had finished facilitating a supervision session. The journals were a freewrite, a timed, 10 minute writing exercise that was structured using Elbow’s (1973) description.

[W]rite for 10 minute... Don’t stop for anything. Go quickly without rushing. Never stop to look back, to cross something out, to wonder how to spell something, to wonder what word or thought to use, or to think about what you are
doing. If you can't think of a word or spelling, just use a squiggle or else write, “I can’t think of it.” Just put down something. The easiest thing is just to put down whatever is in your mind. If you get stuck it’s fine to write “I can't think what to say, I can’t think what to say” as many times as you want; or repeat the last word you wrote over and over again; or anything else. The only requirement is that you never stop (p. 3).

The purpose of a freewrite exercise is to help the writers access their “inner speech” (Vygotsky, 1962, p. 148). Notes were taken during sessions by both my supervising mentor and me to help trigger my memory when writing my journals. In addition to journal reflections, I had the opportunity to meet with my mentor before and after sessions to discuss the supervision session.

In order to generate a grounded theory from my data, I choose to use a constant comparative method developed by Glaser and Strauss (1967). Glaser and Strauss (1967) described the process of the constant comparative method as:

- Identifying a phenomenon, object, event or setting of interest.
- Identifying a few local concepts, principles, structural or process features of the experience or phenomenon of interest.
- Making decisions regarding initial collection of data based on one's initial understanding of the phenomenon. Further data collection cannot be planned in advance of analysis and the emergence of theory.
• Engaging in theoretical sampling—the key question is what group or subgroups does the researcher turn to next to collect data? Subsequent sampling decisions should be purposeful and relevant.

• The rationale for selecting comparison groups is their theoretical relevance for fostering the development of emergent categories.

(pp. 28-52)

Strauss and Corbin (1990) described three processes for basic coding: open coding, selective coding, and axial coding. This process requires the researcher to break down the data and begin to examine, compare, and categorize it. It is suggested that using index cards are both effective and efficient when comparing codes and categories, which was done for this particular study (Craig, 2009).

The specific procedures used in writing and analyzing the six reflective journals can be broken down into six steps adapted from the process of action research (Mertler, 2011).

1. After each supervision session the researcher will reflect upon his experience by documenting his thoughts in a freewrite journal for 10 minutes.

2. Once all six reflective journals were complete, the researcher read each journal and took notes regarding possible broad code categories.
3. The researcher then created a set of primary code categories (see Appendix A). A working description was created for each code category, as well as examples of the data from the reflective journals that would be placed within a given category.

4. The researcher then read through each reflective journal a second time, using a notation system to assign sections of the data to one or more code categories. Common in other forms of qualitative data, data coded for one category was also relevant to another category. In these instances, the data was double or even triple coded for one category. Once the code categories were assigned, they were noted in the margins of the reflective journals.

5. The same process was repeated for the data that included notes in the margins. The reflective journals were carefully read, additional notes were taken if necessary, and the data was subcoded to further organize and divide the material. The researcher then wrote a detailed code memo that described the subcodes used to organize the journals and how the summary applied to the researcher’s experiences of the transition process of facilitating supervision sessions.

6. Themes emerged across code categories through tracking double- and triple-coded journals. The coded data was then put together to form a “code map” that helps to facilitate exploration of the connections across codes. This code map has allowed the researcher to visually see connections across the codes, which then enables the researcher to analyze the contradictory reflections in the journals.
FINDINGS

Through this process, I found three main themes that occurred in my analysis of my journals:

1. Limited experience was not a barrier,

2. spoken language interpreters were more willing to share cases than sign language interpreters, and

3. a progression of increased confidence was noted as time passed.

As a practitioner with limited years of experience in limited practice settings, I learned that neither the amount of years of experience I have working as an interpreter was not a barrier to my ability to facilitate a group of interpreters who have more than ten times the experience in the field, nor did it negatively impact group dynamics. This is something I had not expected prior to the study.

I had expected to either not be well received by the participants of supervision or that my limited experience would hinder the supervision process. The individuals for whom I have been leading supervision have a wide range of years of experience; for example, some have 35+ years of experience. Yet there is no evidence that my limited experience in medical settings and as a practitioner, in general, negatively impacted the effectiveness of the supervision sessions. In my journal dated August 2012, I state, “The responses I am getting from participants are very positive. Comments from participants that are made throughout supervision sessions relating to trust, thankfulness, and appreciation all lead me to believe the supervision facilitating services I am providing are
satisfactory.” This particular entry helped to build my confidence as a facilitator and also helped me to see that not only are my facilitating skills effective but that the process of supervision has been beneficial for the participants. I also had originally expected that the number of participants would decline over time if they were not pleased with my skills, but the number of participants in each session remained consistent and actually grew over time. The return rate of participants is another factor that leads me to believe that both my facilitation skills and the benefits from the process of supervision have kept the group running. Out of all the participants who were in attendance, 83% remained for all four sessions.

I have found that I am highly respected for accomplishing so much in such a short amount of time. This can be seen in my journal entry on July 2012, when I note that:

I had never once realized the amount of impact I would have on the participants of this group. Seeing their reactions to cases and the process has truly given me a new sense of inspiration for our field. I come out of each session inquisitive and humble regarding the complexities of our work. I have only three years of experience, yet having this opportunity is lucky. I am fortunate to have a mentor guiding me through this process, because as amazing as it is, there is still a lot to learn.

It also is interesting to find that participants have stated because I am a newer interpreter, they see me as coming in with fresh ideas and perspectives that are new in the field. This is reflected in my first journal entry in May 2012, where I state, ‘I am shocked at how excited the group is to have me facilitate supervision. During the sessions I can
feel eyes on me waiting for me to help participants frame cases and connect the language of DC-S to those cases.’ Prior to beginning the data collection phase of this study, I had been concerned that the difference in years of experience would be a barrier.

Prior to beginning this study, I imagined that the cases being presented in the medical setting would stump me. In my journals, it can be seen that my concerns in the beginning were that cases would be presented that I would not know how to handle. After one particular session I write,

There was a lot of medical terminology being used, and I sat there for quite some time letting it all wash over me. It kept going over my head, and when I finally snapped back into reality I threw my pride out the door and asked for clarification. Clarification was given to me without hesitation or judgment. Looking back I am glad I clarified and was able to use that moment for discussions in supervision of supervision. Trusting the process of supervision was important to me in this instance, because I did not have to necessarily have all the answers, but I was able to effectively guide the group to possibilities rather than me having all of the answers.

The second theme I have noticed is not only applicable to the ASL/English interpreting community but also the spoken language interpreting community. My reaction to witnessing individuals present cases for supervision has been that I am surprised to see more spoken language interpreters willing to share cases rather than the ASL/English interpreters. In my second journal, June 2012, I state,
I am in awe by how open the Spanish-speaking interpreters are to presenting cases. It seems that the ASL/English interpreters were hesitant due to not knowing what a case would look like. The spoken language interpreters seem more eager to talk about their work, which makes me wonder why would I, as an ASL/English interpreter, feel hesitant to open myself up to supervision.

Speaking from my own experience as an interpreter, I can conclude that, for myself, I sometimes felt judged by my colleagues, was afraid of negative criticism, and had some negative experiences from previous sharing with colleagues, and I recognized how sharing a case can be difficult. Data collecting and the analysis of this data is still a work in progress.

Other examples of the most common themes in my data include anxiety, success, group management, and knowledge. I chose to focus on these particular themes because I believe these could be addressed in the future development of facilitator training materials. In addition anyone mentoring someone going through the process of becoming a facilitator should be aware of the themes I experienced, to help better prepare them in the mentoring relationship. June 2012’s journal reflects many of the themes mentioned earlier surrounding anxiety:

Wow, I felt like I was in an oven today. I could almost feel the perspiration fall from my head. The eyes were getting to me, as I am sure in any mentoring relationship one can be nervous. Knowing my mentor is such a phenomenal facilitator, I wanted to make her proud, but at the same time I know that she is there to help me. I know that participants are entrusting me with very deep
conversations; the pressure I feel is pretty high. My thoughts are not only am I representing myself, but, more importantly I am representing the process of supervision.

The number of occurrence of these themes changes over time as I become more comfortable and more familiar with the process of leading supervision. Tables 1-4 show the frequency and percentages of themes found in the reflective journals. The first column on the left lists each theme, the next column indicates the frequency of each theme, and the last column is the percentage that each theme occurred. I have chosen to display the data using a graphic representation so that the distribution can be seen more easily. Figure 1 is from the first month’s reflective journal, and each subsequent figure is a subsequent month. Each code has been designated a specific color and shows the percentages of themes found in the reflective journals.
TABLE 1

<table>
<thead>
<tr>
<th>Value Label</th>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limited Experience</td>
<td>1</td>
<td>23</td>
<td>25%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>2</td>
<td>21</td>
<td>23%</td>
</tr>
<tr>
<td>Group Management</td>
<td>3</td>
<td>18</td>
<td>19%</td>
</tr>
<tr>
<td>Surprise</td>
<td>4</td>
<td>17</td>
<td>18%</td>
</tr>
<tr>
<td>Knowledge</td>
<td>5</td>
<td>8</td>
<td>9%</td>
</tr>
<tr>
<td>Success</td>
<td>6</td>
<td>6</td>
<td>6%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>93</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

FIGURE 1
For the first journal, the data shows that limited experience and anxiety were the two most common themes. First I will expand on limited experience. There are sub themes under that specific category which consist of limited life experience, limited interpreting experience, and limited experience working in the medical setting. There can be many reasons as to why anxiety was the second most popular theme. One reason may be, in fact, that this was the first time I was leading a supervision group, and one might expect some degree of anxiety trying something new for the first time.

At the same time, the little confidence that I did have in the beginning of my research is directly related to my knowledge and training of the constructs of DC-S and my experience being a participant of supervision. Although having a trained facilitator present is a cause for my nervousness, it also aids in my confidence level. Knowing that I am not alone and that I have someone there to support me after the sessions was key. This can be illustrated in my first journal May 2012, where I state,

I am so thankful to have supervision of supervision after each session. All of my questions can be answered, and I am grateful that I am not walking on this journey alone. Most importantly trusting the process and that I have seen and experienced firsthand success from engaging in supervision.
### TABLE 2

<table>
<thead>
<tr>
<th>Value Label</th>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group Management</td>
<td>1</td>
<td>22</td>
<td>23%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>2</td>
<td>20</td>
<td>21%</td>
</tr>
<tr>
<td>Limited Experience</td>
<td>3</td>
<td>18</td>
<td>18%</td>
</tr>
<tr>
<td>Surprise</td>
<td>4</td>
<td>15</td>
<td>15%</td>
</tr>
<tr>
<td>Success</td>
<td>5</td>
<td>11</td>
<td>11%</td>
</tr>
<tr>
<td>Knowledge</td>
<td>6</td>
<td>12</td>
<td>12%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>----</td>
<td>98</td>
<td>100%</td>
</tr>
</tbody>
</table>

### FIGURE 2

![June Journal Pie Chart](chart.png)

- Limited Experience: 18%
- Surprise: 15%
- Anxiety: 21%
- Success: 15%
- Group Management: 23%
- Knowledgeable: 11%
Group management and knowledge are other themes that are seen throughout the journals. As you can see in the numbers, the theme group management started off lower in May and then increased in the second month. This could be due to the fact that the group started to feel more comfortable with me and with each other. Given this new comfort level, the participants may have felt freer to interact with each other, which required me as the facilitator to employ more group management strategies. Some examples of these strategies that are reflected in my journals are asking people to not talk over one another, interrupting the speaker to get them back to the structure, and having to use certain cues such as eye gaze or a body shift to indicate it is now my turn to talk.

An example of group management appeared in my June journal when I stated, “I struggled to interrupt the speaker when they were straying from the structure, because I did not want to minimize their point.” Group management refers to my ability to maintain control of the group and guide everyone to follow the structure. Knowledge refers to being able to first understand the interpreter’s case presentation and being able to fit it into the structure of DC-S. This can be seen in my journal as, “I sat there dumbfounded on how to proceed with the case, because I really was unsure how to fit it in the structure. Was this case a real case? How does one define what a real case is?”
### TABLE 3

<table>
<thead>
<tr>
<th>Value Label</th>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group Management</td>
<td>1</td>
<td>19</td>
<td>20%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>2</td>
<td>17</td>
<td>18%</td>
</tr>
<tr>
<td>Success</td>
<td>3</td>
<td>16</td>
<td>17%</td>
</tr>
<tr>
<td>Surprise</td>
<td>4</td>
<td>15</td>
<td>16%</td>
</tr>
<tr>
<td>Knowledge</td>
<td>5</td>
<td>14</td>
<td>15%</td>
</tr>
<tr>
<td>Limited Experience</td>
<td>6</td>
<td>13</td>
<td>14%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>-----</td>
<td>94</td>
<td>100%</td>
</tr>
</tbody>
</table>

### FIGURE 3

![Pie chart representing the distribution of values labelled as Group Management, Anxiety, Success, Surprise, Knowledgeable, and Limited Experience. The chart indicates that Group Management has the highest frequency (20%) followed by Anxiety (18%), Success (17%), Surprise (16%), Knowledgeable (15%), and Limited Experience (14%).]
The coding done for the July journal seemed to be well rounded. The different categories carried roughly the same weight; this may be common toward the middle of an experience, having a balance of both positive and negative categories. For the surprise code, there were also sub themes, surprise in negative meaning and surprise in a positive meaning.

What is noted in the journals as an example of a negative surprise were unexpected barriers that came up in the process. Particularly, this can be seen in the journal when I stated, “I was baffled by the case that was being unfolded. I was not really sure where it was going, or how we would even begin to digest this particular case. I kept writing on the whiteboard in shock and wondered how we might proceed when the case presenter is finished.”

A positive surprise was not realizing my own capabilities. There were examples in my journal reflecting when I state, “As we were going through this case, I was at first surprised at the fact that this could even happen, and I wondered to myself, how can I handle this? However, when I started to see the connection between the decisions the interpreter made and the consequences of those decisions, I was able to effectively employ the dialogic work analysis to help the group understand the cyclical process of interpreters’ decisions.”
### TABLE 4

<table>
<thead>
<tr>
<th>Value Label</th>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Success</td>
<td>1</td>
<td>19</td>
<td>22%</td>
</tr>
<tr>
<td>Knowledge</td>
<td>2</td>
<td>17</td>
<td>19%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>3</td>
<td>14</td>
<td>16%</td>
</tr>
<tr>
<td>Group Management</td>
<td>4</td>
<td>14</td>
<td>16%</td>
</tr>
<tr>
<td>Surprise</td>
<td>5</td>
<td>12</td>
<td>14%</td>
</tr>
<tr>
<td>Limited Experience</td>
<td>6</td>
<td>11</td>
<td>13%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>-----</td>
<td>87</td>
<td>100%</td>
</tr>
</tbody>
</table>

### FIGURE 4
As you can see from the final chart, which displays themes that occurred in my final session of supervision, there were changes over time. The images show the amount of anxiety, and codes related to anxiety decreased significantly over time. Examples of anxiety in my data include, “I felt very nervous and intimidated by such a large group of seasoned interpreters. My heart raced and I realized the amount of medical interpreting experience they all had and the lack of medical interpreting experience I had.” This can be compared to data from my final journal, which consisted of comments such as, “Regardless of not having experience in the hospital setting, I feel confident in my ability to effectively lead this group of seasoned interpreters, especially with a case that consisted of experiences I have never had.”

In addition, I suspect the numbers for group management decreased, because I was able to employ group management strategies more efficiently and effectively given my prior experiences with this group. Another potential explanation is that the group had grown accustomed to the process and knew what to expect and how to behave appropriately according to the established ground rules. This can be seen in my last journal when I state, “I felt a lot more comfortable interrupting a speaker to get them back on track. I was better able to find a point to jump in, but at the same time not diminish their comment. It felt effective given the response of the participant. This statement also supports why the theme of success appeared more frequently. Having had prior experience with this group, I was better able to see success from the strategies I was using.”
CONCLUSION

Summary

The importance of supervision in other practice professions is highly valued. The structure is in place for well-established professions such as medicine and education to engage in reflective practices, as is the process to become a trained leader to support others in those reflective practices. At this time the interpreting field is not prepared to require these practices without having the infrastructure to support it. In light of this dilemma, it is my hope that my experiences will eventually lead to the development an infrastructure of supervision within the profession. As stated earlier, supervision requires a trained facilitator to be effective, and it is my hope that the findings from this autoethnography will aid those wanting to develop materials to train facilitators of supervision.

Limitations

The limitation of this study is this is only one person’s experience of becoming a facilitator and may not be generalizable to all aspiring facilitators. With no prior research in the area of becoming a facilitator of supervision, I began this study walking into the unknown. Further autoethnographies need to be done in order to validate the results from this study. The results of this study, in general, support the notion that given the appropriate training in the framework and application of DC-S, the appropriate mentoring with a trained facilitator, and supervised practice conducting supervision, one is able to successfully become a facilitator. As further autoethnographies are completed, it is
recommended that the commonalities between results be used to develop training materials and a structured path for aspiring facilitators.

The original intention of this research study was to support the institution of supervision within the interpreting profession both pre- and post-certification. Looking ahead, it seemed a daunting task to establish requirements without any way of ensuring that the requirements are met. Instead of putting the cart before the horse, I looked into what needs to happen first. It was at this point I realized that having individuals trained as facilitators was necessary. Thus, the research question, “What does it take for someone to become a facilitator of supervision?” came to fruition. This particular question cannot fully be answered and generalizable without knowing the background of the aspiring facilitator.

My particular experience may be unique in comparison to other aspiring facilitators; however, the experience that I have can be used as one path to becoming a facilitator of supervision. Being a resident of Rochester, I was fortunate to learn the foundational information of DC-S from one of the co-researchers, Robyn Dean. In addition, I had many opportunities to engage in conversations with Dean and her close colleagues regarding the process of supervision and DC-S. The amount of plentiful opportunities to be engaged in supervision allowed me to fully immerse myself in the process.

It must also be noted that my experience becoming a facilitator also is unique to this particular supervision group and its participants. There are many factors that could impact the process. Much like the contextual factors that impact interpreters’ decisions,
these same factors, such as participants in the group, the setting in which the session is conducted, and one’s relationship with the participants also could impact the facilitator’s process. My particular experiences with the interpreters in this supervision group I led were all very positive. Had these experiences been something other than positive, I may have not seen the success that I did.

**Future Research**

Looking ahead to the future, it may be beneficial to research other professions and compare the different approaches used, since this study has only barely scratched the surface of that topic. This research would be helpful in aiding the development of training materials that can be used for potential facilitators. Those materials can then be tested and evaluated for its effectiveness. Another approach to future research could be replicating this study, and comparing the results to see if the themes that were most prevalent in this study are commonalities. It may be wise to create a tool to collect data from future facilitators so that the results can be compared. Lastly to add an additional layer of complexity it would be interesting to have data from both the participants of supervision and the mentoring facilitator, to see their perspectives regarding the facilitator training process.

**Recommendations**

Once further research is done on the process of becoming a facilitator of supervision, it is my recommendation that an infrastructure be established for people to become trained. An infrastructure could be modeled after already existing models used by other practice professionals. Once that infrastructure is fully functional, I then
recommend the focus should be on instituting requirements of engaging in the process of supervision within the interpreting profession. These requirements can follow practices in other practice professions such as the psychiatry, where supervision is expected both pre- and post-licensure.
References


the 16th National Convention of the Conference of Interpreter Trainers (CIT) (pp. 119-31). Monmouth, OR: CIT.


APPENDIX A

Informational Summary of Research

Informational Summary of Research

{Supervision}

You are invited to be in a research study regarding the structure of Supervision. You were selected as a possible participant because you are an employee of Strong Memorial Hospital and are a working interpreter. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

Principal Investigator:

This study is being conducted by: Daniel Maffia, MA in Interpreting Studies Candidate, Western Oregon University

Purpose and Design:

The purpose of this study is to analyze my progress from being a participant of reflective supervision groups to a facilitator of supervision groups. Supervision is talking about your work for the purposes of improvement and is a type of reflective learning practice that has many other names, including peer consultation and case conferencing. This type of practice is used by many professions as a tool for professional development and the maintenance of ethical behavior. Given the parallels that the interpreting field shares with other professions that utilize this technique, it is noteworthy that this common practice is rather new to the field of interpreting.

In order to conduct this research, I will collect my own personal data regarding my experiences of leading supervision sessions. I will engage participants, as a normal scope of practice, through reflective practices regarding their work as interpreters. For this study, I will be reflecting on my experiences as a facilitator. In addition I will use materials such as personal recorded video logs (vlogs) to help aid in the process of recalling my experiences. These recorded vlogs will be done after the supervision session, and will only include recording of myself. I also plan to journal my reflections as a means of collecting data.
Confidentiality:

The records of this study will be kept private. In any sort of report we might publish, we will not include any information that will make it possible to identify a subject. Research records will be stored securely and only researchers will have access to the records.

Voluntary Nature of the Study:

Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with the hospital {or with other cooperating institutions}. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

Contacts and Questions:

The researcher conducting this study is: Daniel Maffia. You may ask any questions you have now. If you have questions later, you are encouraged to contact him at 161 Desmond Road, Rochester, NY 14616, 718-839-0163, and dvm6031@yahoo.com or contact his Advisor, Amanda Smith, at 345 N. Monmouth Ave. Monmouth, OR 97361, 503-838-8650, and smithar@mail.wou.edu.

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher(s), you are encouraged to contact the Western Oregon University Institutional Review Board at irb@wou.edu or 503.838.9200.

You will be given a copy of this information to keep for your records.
APPENDIX B

CONSENT FORM

WESTERN OREGON UNIVERSITY
Division of Special Education
Informed Consent for Research Involving Human Subjects

Title of Project:
The transition from participation to facilitation of supervision: An autoethnography

Principal Investigator: Daniel Maffia

I,___________________________, hereby give my consent to participate in this research study details of which have been provided to me above, including anticipated benefits, risks, and potential complications.

I fully understand that I may withdraw from this research project at any time without prejudice or effect on my employment. I also understand that I am free to ask questions about any techniques or procedures that will be undertaken.

I also understand that the information about me obtained during the course of this study will be kept confidential. (Return signature page to researcher; keep remaining pages for your records.)

Participant Signature:___________________________ Date: ___________

I hereby certify that I have given an explanation to the above individual of the contemplated study and its risks and potential complications.

Principal Investigator: ____________________________ Date: ___________

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