

# Four Reflections on a Gestalt Peer Consultation Group

*Jack Aylward, EdD*

JackatPCC@gmail.com

*Charles Bowman, MS*

aagtone@gmail.com

*Peter Cole, MSW*

peterhayscole@gmail.com

*Bud Feder, PhD*

**ABSTRACT** | This article describes and explores the benefits of Gestalt Peer Consultation Groups (GPCGs) for Gestalt therapy practitioners. Each of the four authors provides a personal account of his experience with a GPCG in which he participates on an ongoing basis. The authors find that GPCGs can be an essential support to Gestalt therapists in staying emotionally open and in good quality contact with their clients. They also suggest that GPCGs support the therapist's resilience in remaining emotionally available and responsive. A literature review and recommendations for forming GPCGs are presented.

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Our purpose in this article is to reflect on a Gestalt peer consultation group (GPCG) in which we have been engaged for the last seven years. We intend to (1) discuss the needs that GPCGs can address for Gestalt therapists; (2) provide the history of our own GPCG; (3) review the Gestalt literature on consultation and supervision; (4) offer each author's personal reflections, personally and professionally, on the impact of our GPCG; and (5) conclude with recommendations to Gestalt therapists for the formation of GPCGs.

## Why GPCGs?

We approach this matter with a simple but important proposition: the better supported and resourced we are in our lives and work, the better able we are to meet the demands of our work as Gestalt therapists. In making good quality contact with our clients, our humanity and vulnerability are inevitably evoked. As Gestalt therapists, we bring our full humanity to our clinical work. We balance this openness with a sense of healthy boundaries and professionalism. It is not always easy to bring forth one's humanity in Gestalt therapy practice while remaining "boundaried" with the emotional needs that are part of that humanity.

We seek to be fully present with our clients while being as supported as possible in our work so that, in bringing our humanness to our client relationships, we do not seek fulfillment of our emotional needs from our clients. Striking this balance requires that we be particularly well resourced. The better resourced we are, the more capable we are of being emotionally present while "boundaried" with our clients. As Gestalt therapists, we do not have the luxury of hiding behind a blank screen of transference, nor of protecting ourselves with techniques from manuals. Our humanity and creativity are the core instruments of our work. The GPCG is a particularly strong support for each of us in bringing our full humanity to the work; in the GPCG, we have cocreated a safe environment to process the deeply personal issues that arise for us in our clinical work, rendering us better resourced to operate creatively with all that the work brings up for us.

## Brief Personal History of Our GPCG

The authors of this article meet twice a month online for an hour-and-a-half GPCG session. We also meet approximately every other year for a five-day retreat. We began discussing the idea of a group early in 2011 and were drawn to forming a peer group that would allow us to connect around our personal and professional lives. We did not want a formal peer consultation format, although working together on our clinical work has become a core function of our GPCG. Although we each brought different needs and frames of reference to the GPCG, each of us wanted a place where we could talk about our lives and work with support, mutual respect, confidentiality, and good humor.

As we have developed, our process has developed and changed. We form a dynamic whole capable of supporting each of us in our lives and work. In our current form, we function as a peer consultation group, a writer's group, a think tank for workshops, a political action committee, and a support group for personal growth, relationships, health and illness, self-esteem, and friendship. Our collaboration has produced a number of workshops with topics ranging from training Gestalt trainers, to the therapist's aging process, to friendship. Noteworthy is one experience in the GPCG that served to deepen the connections among members. During an early face-to-face retreat, we developed an extended experiment whereby each member would take an entire evening to share his history from birth to present. Other members listened, witnessed, inquired, and supported with loving kindness. The results were significant in terms of healing and strengthening the bonds of friendship among us.

## Brief Discussion of the Literature

Richard Kitzler (2009) offers the following guidance for Gestalt process groups, and we posit that it fits for the GPCG:

What we are striving after is the form that requires a beginning, middle and end and makes its point creatively: the poem has its say, and that within a structure of rhythm and sound (words) that the form demands. We are freed for our best creativity by an edifice

into which we are invited and to which we agree as guests to join. This is obviously support in the best sense; I prefer to believe in the sense of Laura Perls. (146)

If, here, Kitzler is referencing structure that supports process, we have created an egalitarian structure that works to support our process as Gestalt therapists. In surveying a number of professional articles pertaining to psychotherapy supervision, Jerry Novack (2010) concludes that a common factor is a structure wherein a more senior therapist is involved with one or more less experienced therapists “engaged in an interpersonal exercise intended to optimize the supervisee’s clients psychotherapeutic experience” (29). In contrast to Novak’s definition, we have created an egalitarian structure that involves each of us both as supervisor and supervisee. Peer consultation groups help practitioners avoid isolation, provide psychoeducation, and prevent burnout (see American Psychological Association 2005). Our GPCG accomplishes those goals in our own way: within the structure of our meeting, we are free to explore as we please. Although most group sessions involve consultation, much of our time is devoted to our personal lives and issues of relationship, health, death, politics and social justice, disappointment, and celebration.

Rita Resnick and Liv Estrup (2000) identify eight areas of exploration in psychotherapy supervision from a Gestalt perspective: “the personality functioning of the therapist and the client; the relationships between client, therapist, and supervisor; theories of development, personality, and psychotherapy; clinical theory, diagnosis, and treatment; and professional, administration, and business” (135–36). The efforts of our GPCG are consistent with these eight areas and, in fact, much of our group’s deeply engaging, emotionally rich work involves the category of “personality functioning of the therapist”: the ongoing exploration of the ways in which each of our personal issues intersects with our work.

Yaro Starak (2015) offers this vision of Gestalt supervision:

Supervision in Gestalt therapy practice is therefore broadly defined as facilitating the process of the therapist’s response-ability in working with the client or the group. Gestalt therapy supervision

then is a here-and-now process that explores the contact-boundary between the therapist and the client system for the purpose of enabling the therapist to become more creative and fully alive in the therapy session. (224)

The GPCG focus is clearly here-and-now and our response-ability is broadened through the support we offer one another.

Novack (2010) concludes his review of dozens of supervisory models and approaches by stating: “Authentic, meaningful feedback runs the risk of approaching psychotherapy for the supervisee” (5). Many of the articles reviewed express this caution and identify feedback as a hazard or risk. The risk of slipping from consultation/supervision into therapy does not concern us. We are happy to have our GPCG be therapeutic. Perhaps what makes the therapeutic aspect of our work feel appropriate and safe in our GPCG is that our roles with each other are flexible and changeable, so that in a given moment one of us will be facilitating the growth process of another group member, and later in the same session the roles may well be reversed. This egalitarian approach to our roles matches our sense that there is a fluid boundary between our growth work as individuals and our professional development. It also matches our feeling that facilitating each other’s personal and professional growth can occur between us as equals. We neither want nor need to have one of us permanently designated as the senior member of the group. Each of us has both authority in the group as well as support to explore our vulnerabilities and stuck places.

## Personal Reflections

Each of us will share below his personal reflections on our GPCG, focusing in his own way on the intersection of personal life and life as clinician.

### ***Bud Feder***

The date was July 5, 2017. A Wednesday after a long four-day Independence Day weekend, during which I had been feeling quite blue. And I still was feeling that way. Recently, I had been having morbid dreams. The one I

remember most vividly ended with me holding a long spear-like weapon with a very sharp point—holding it hard against someone’s chest, threatening to impale him. And the victim looked a lot like me. I woke up very agitated.

I made the following connection with my client Ellen, whose mother had died when she was three. Ellen has just vague memories of her mother, though memories of being with her father are numerous, warm, and vivid. Her father had died three months prior to Ellen’s return to therapy. Her father had been her oldest and best friend, and she felt lost without him.

Ellen has had much experience of being in therapy, though not with me. Throughout her life, she has experienced much anxiety. Not that she let the anxiety stop her. She was an outstanding student athlete in both high school and college, her sport of choice being field hockey. She is still an avid runner and physically strong. After a successful career as a public school teacher, she earned a doctorate in educational administration/supervision and now has a responsible administrative position in a school system. She is married to a successful businessman who is also an elected town official, and they have two teenage daughters. She is also president of the town library board and currently spearheading its overhaul. Until her father’s death, a highlight of her day was talking with him on her cell phone on her half-hour drive home. She aired her concerns and asked his advice. They talked about family matters, both funny ones and serious ones. He was a dedicated, loving grandfather.

I, too, had lost my best friend not long ago. At our first session, Ellen cried frequently in a quiet sort of way. Often during the session, when she was tearful, I was too. Ellen noticed this reaction of mine and asked about it. So, I told her that her story was affecting me deeply in two ways: I felt badly for her; and I felt my own pain as her loss brought up the recent death of my longest and best friend: my brother Yale, who had succumbed to Alzheimer’s disease the year prior.

Yale and I were not quite twins, though pretty close to that. I was fourteen months older than he. We shared a lot: as kids, a bedroom, sports, the neighborhood gang of friends, going to movies, visiting grandparents, coping with our demanding father, untangling ourselves from his religious requirements, and even one girl friend; and as adults, intellectual and cultural pursuits, as well as a continuing interest in sports.

Ultimately, Yale settled with his family in Berkeley, California, and I with mine in our hometown of Passaic, New Jersey. On the telephone, people could not tell us apart. I think I visited him in Berkeley at least fifty times in his nearly fifty years of living there. In 2006, I took a one-year sabbatical from work and lived with him very satisfyingly. It was a wrenching decision for both of us when I decided to return to New Jersey, but by then I had a grandson there.

When the question came to me “Who is your best friend?” I always came back to Yale. I was missing him sorely. On the first and third Fridays of each month, my peer group meets online—four guys. I have come to respect, love, and trust the people of our GPCG. I had been feeling blue for about a week with disturbing dreams. By the time of the GPCG meeting, I knew why: it was Yale’s birthdate. This had triggered my blues and morbidity. I knew it and stuffed it. I mentioned it to no one, except off-handedly to Yale’s daughters, my two nieces, with whom I am quite close. I knew they were suffering too. They adored Yale, and for good reason as he was a wonderful father. I did not want to burden them with my pain.

I had my peer group though! At our initial check-in where we bring up anything we want, both personal as well as professional agenda items, I told the guys what was going on for me: the blues; I told them of my unsettling dream where I was threatening to kill someone (myself?). My relief was almost immediate; in fact the next day, I wrote them telling them I felt better than I had in a long time: lighter, more open with a more generous feeling. This feeling of relief has continued as I write this piece, ten days later.

As a Gestalt therapist, I know of course that we are social animals, relational beings. I also know that in order to grow and evolve, we must become aware of and challenge our fixed Gestalten, or patterns. And one of my unhealthier ones has been to “stuff my pain,” and to be emotionally “tough” (for instance, before I started Gestalt therapy at the advanced age of 41, I had not cried in about twenty-five years). Yet, even though I know about this unhealthy pattern, under stress I sometimes revert to it. My peer group has helped me “risk” being more open about my pain, though the risk is more an imaginary anachronism than a current reality. I take that risk sooner and more often than in the past, and I am more sensitive to clients who carry a similar burden. And I so treasure that I

can say “I love you” so much more freely to my kids, to my peer group, to some of my friends—another one of my long-standing inhibitions before my personal therapy.

With support from the GPCG in becoming aware of my own tender, more open, and vulnerable responses, I was better able to access those parts of myself in the therapy with Ellen. I believe that my openness with her, supported as it was by my connection with the GPCG, helped her feel understood and met. Additionally, the support I received in the GPCG helped me feel well resourced emotionally in sharing my grief with her: she could experience contact with me, but not feel a pull to take care of me, as I was already receiving much care and support from my GPCG.

### **Peter Cole**

One of the central fixed Gestalts in my life is that I must distance myself from a core set of feelings, as they will cause me debilitating grief and shame. I will call this aspect of experience my “Alienated Self.” From the vantage point of my Alienated Self, I must hide my uncertainties, guilt, self-doubt, and vulnerabilities in order to perform. I must manage my relationships so that I keep people at an optimal distance. I keep my feelings safely removed from myself and others. When I am triggered, have problems in my personal or professional life, and function with limited support and awareness, these fixed tendencies in my character tend toward the foreground of my self-regulation. These aspects of my character can be tiring, limiting, relentless, and boring.

When I am regulating with support and awareness, I have access to a broader range of experience. I will call this aspect of experience my “Relational Self.” From this vantage point, I am better able to feel my body and emotions. I can be available for more honesty and vulnerability in my connections with others. I can be original and creative in my work, and more caring and loving in my relationships.

In my experience, with now four decades (and counting) of personal therapy, I find that this fixed Gestalt of my Alienated Self has not dissolved. Instead, it is like a knot that loosens when I am feeling support and awareness. Sometimes I indulge the illusory feeling that this knot has become truly and permanently untangled. Yet, I find that the knot tightens again when I become triggered or fall into an anxious state,



reminding me that the knot had not so much become untangled as loosened.

I do not currently believe in enlightenment or in reaching an ongoing state of freedom beyond the confines of character. And while great thinkers from Buddha to Wilhelm Reich have sought a state of being beyond character structure, such freedom has been neither my client's, nor my, experience. What I find instead is a state of affairs in which I must embrace the need for ongoing support as the only way I know of to bring forth my Relational Self. Since Gestalt therapy is fundamentally relational and grounded in the contact between therapist and client, it is essential to doing my work as a Gestalt therapist that I be well resourced. These emotional resources allow me meet my clients with greater presence, inclusion, and commitment to the dialogue.

I feel fortunate to be a part of a Gestalt peer consultation group that has a powerful capacity to take me out of the more repetitive and confining aspects of my character, and to bring forth those relational aspects of myself that reflect a more expansive, open, empathic, and contactful me. It turns out that what I need is also what I want. I need connection with people who speak my language: the language of Gestalt therapy. I need connection with people who share with me a sense of their own vulnerability and humanity. I need connection with people who are willing to confront me and hold me accountable. I want all of these qualities for me as well. I feel that the GPCG is foundational to my practice of Gestalt therapy. I need what I give and receive in the group. I cannot do it on my own.

### ***Jack Aylward***

Traditionally, I believed that being in a peer supervision group was a somewhat practical decision mostly in terms of having some kind of a hedge against possible malpractice claims made by former clients or by one's professional association. It was a common warning, primarily touted by lawyers, that participating in one could be quite helpful at least from a legal standpoint. And, in fact, that has been my past experience in such groups, in which the talk focused metaphorically on ways of "cleaning up the dirty laundry" of our most difficult patients in a manner that was both clinically sound and legally innocent, thereby allowing professional complaints to disappear before they arose.

Given that background, I was surprised when it was suggested that Peter Cole, Bud Feder, Charles Bowman, and I form such an arrangement and meet online once every two weeks for an hour and a half. Having practiced Gestalt therapy for some time, just the idea of a “Gestalt peer supervision group” seemed somewhat paradoxical given my take on the Gestalt therapeutic process itself. For most years, I enjoyed “flying by the seat of my therapeutic pants” in working with clients in a more intuitive and spontaneous way: a process that did not encourage stopping to stop, review, and pick over what was going on in a frame temporally separate and apart from the “here-and-now.” For me, doing so stood in direct contrast to (and, to some extent, deadened) experiencing the existential excitement that emerged in the immediate moments of psychotherapeutic interaction. My eventual decision to join the group was primarily based on the strong and loving relationship I had enjoyed with Bud for so many years, on his excitement around the idea, and on his being a strong advocate of it.

Over the past few years, the term “supervision group” has remained our tacit definition, though I confess ignorance of the specific processes that justify such a label. Yes, we do talk about clients, although not by using the standard “case presentation” modality. The process itself feels very personal; a kind of evolving dynamic rhythm emanating from the interpersonal connections among the four of us. I subsequently decided to forget about labels and allow myself to get swept up into whatever was going on. When I allowed myself to abandon attempts at structural classification, I was better able to experience the ongoing dialog in a more organic fashion, while feeling a sense of being simultaneously “in” and “of” the group as opposed to quantitatively searching for its meaning.

And one day it hit me: this was not about definition but about experiencing. And yes, there was clinical talk of client matters, but only in the context of other concerns and issues that in some way were able to coexist and creatively feed each other. The personal meshed with the intellectual as boundaries were formed and de-structured. My option was either to keep watching and continue somehow to quantify what was going, or to join in and take my chances. Luckily for me, I chose the latter. It was in that space of meaningful confluence that I began to participate fully in and benefit from the “contactful” processes binding us together. It all ran together and came together: the clinical, the

personal, the intrapersonal and, most importantly, the interpersonal. Over time, we could lovingly call each other on our “shit” and work it out together. We were able to express anger or disappointment and take as much time as needed to work toward a sense of closure and mutual understanding.

In one session, for example, I worked on an issue I was having with a difficult client in order to gain a better clinical perspective. I had been challenged as to the somewhat circuitous way I may have been playing out my more personal issues in the therapy. It soon became clear that the problems were as much mine as those of the client. As we worked through the identified impasses, I was able to see my own culpability, not only with this particular client, but in more systemic terms with respect to psychological dynamics of a general and personal nature that were also interfering in other aspects of my life.

I remember thinking again of the term “supervision group” and realizing that at that particular point I was the case presentation! And that seemed fine. This particular experience resulted in a conscious decision to throw myself even more fully and uncritically into moment-to-moment experiencing both in my therapeutic practice and with my peer group. I also remembered Fritz Perls’s statement to the effect that he valued any therapist who embraced the courage to elevate him or herself to the status of a patient. Also, “hats off” to those experimental Gestalt psychologists at New York’s New School for Social Research in the 1940s for demonstrating that, indeed, a qualitative “whole” is larger than the sum of its individual parts—my most recent definition of our group.

### ***Charles Bowman***

I have enjoyed my membership in our Gestalt peer consultation group for many years. My first task in tackling this essay was coming to some understanding of this GPCG entity. Yes, it is about supervision/peer supervision. Yes, it is Gestalt therapy. And, yes, it is an important, integrated activity in my life. From a personal perspective, the consult group is a place where I experience intimate connecting. From a professional perspective, it guides my clinical work when I need guidance most, and it affords me the contact with Gestalt colleagues that I cherish and admire.

As Bud Feder mentioned, the GPCG has been together for seven years. When Peter Cole first invited me, I experienced a predictable resurgence of unfinished business—an invitation for contact that left me feeling like a fraud or an imposter. I clearly missed this warm and supportive contacting in my birth family, where contacting more often meant challenge, authority, and structure. As a child, I regulated with a plethora of creative adjustments, including living with the adage, “Fake it ’til you make it.” When I am invited into intelligent, intimate relationships my knee-jerk response is that I must be faking it. The GPCG provides me with options that allow this response to recede into the background by holding up a mirror of confidence in my work, and through the love and support of the group’s members. Appreciating both alterity and confluence results in a loving, growthful container where I can let my imposter-self be seen and assimilated. This, in turn, paves the way for me to accept the nourishing contact, to take it in and appreciate the “I-Thou” moments that occur in our meeting. In turn, I maintain these deeper connections with family and friends. It is this contact that keeps me lively and alive. And it keeps me growing: I can also experience this intimate connecting in my psychotherapy practice, my training, at Association for the Advancement of Group Therapy (AAGT) gatherings, and elsewhere. The GPCG offers benefits for me ranging from short-term solutions to hurdles in my professional practice; to softening contact with long-term relationships, such as with my wife, my children, and my dear friends. The enduring nature of my GPCG connection helps me build the emotional muscles I need for intimacy over the long haul, both personally and professionally.

I came to the consultation group through the professional practice of Gestalt therapy. I am the “newbie” in the group from a private practice perspective, having first completed a career in a Fortune 50 company managing and directing Employee Assistance Programs. In that organization, I was rewarded for the very creative adjustments I worked so hard to overcome in Gestalt therapy training and personal therapy. During my time in the business world, I maintained a small private practice and a fierce dedication to Gestalt therapy as trainer, student, and writer. Gestalt therapy kept me alive and pulled me out of the gray

isolation of the corporate culture that paid my bills and sent my five children through school.

The day finally arrived that I became eligible for retirement, and I moved into my second career as a full-time Gestalt therapist. Peter Cole's invitation to join the GPCG came as my practice was thriving, and I was facing multiple growing pains: clinical, administrative, legal, and personal. A peer group that was multifunctional sounded intriguing. From the beginning, I was intrigued, and I remain most interested in how our group functions as a supervision group, a men's support group, and the group-as-a-whole. I have evolved with and into this group. Over the years, I have experienced a relationship to the group-as-a-whole. Holding Peter, Bud, and Jack on my computer screen twice a month affords me a unique sense of the group as an entity in and of itself. I do not see patients on Friday, and it is generally my day to catch up with the demands of life and also to relax. The consult group is a huge part of my Friday.

The group-as-a-whole can annoy me with the time commitment required, it can intimidate me with the demand placed on me to be present and accountable, and it can push me to be involved when I do not want to be involved. The GPCG foils my attempts to avoid the level of intimacy that pulls at my heartstrings, and it strengthens my commitment to Jack and Peter and Bud. It is the group-as-a-whole that receives the brunt of my projections as I squirm into contacting. Once I am in contact I loosen the reliance upon those creative adjustments that allow me to keep my distance and stay protected and shielded from intimacy.

## Discussion

In this paper, each of us has discussed personal difficulties we have faced in our work that the GPCG has helped us to navigate. In order to assist readers in creating their own Gestalt Peer Consult Groups, we offer the following thoughts about the group culture we have worked to develop over the years. While we occasionally give each other advice on our cases, the advice is not most important. Below we will try to capture what *is* important.

First, the GPCG helps us get in contact with the stuck place. This is the emotionally vulnerable journey of taking a dive together into the unknown. When working with a case consultation, we often explore the following sorts of questions:

- What am I feeling?
- Where is this feeling in my body?
- What are my fantasies about the situation?
- What does this bring up for me in my own life?

These kinds of questions, along with the relevant case information, form a kind of hologram in which the whole situation, including the therapist and client's phenomenology, are fully in play. Our method is simply to be together in that exploration, and to let spontaneous responses flow from there.

Second, the GPCG is process oriented. No one person is in charge of the GPCG. We have a format: a check-in is followed by case discussion. Sometimes the check-in is long; sometimes it is short; sometimes we focus solely on the GPCG member who needs the time; other times we move from person to person. The process has certain qualities. We are prone to be open, accepting, and nonjudgmental toward one another. We tend to be supportive, yet confrontational when needed. We let the process take us where we need to go. The personal dimensions of our lives infuse all aspects of our work together.

Third, the GPCG is respectful and supportive. We do not take ourselves too seriously, and we laugh a lot. If we can tease each other gently, we are tuned into the underlying vulnerable feelings that each of us brings to the group situation, and we are fundamentally gentle and caring with one another. The group feels to each of us like a safe space in which to explore the at times painful, scary, tender, and sad places where we go in our work and lives. We do not over-analyze ourselves or our clients; rather, we hold each other with respect and support.

We hope this article will serve as a resource for Gestalt therapists who wish to create their own GPCGs. While the GPCG style and format described here has worked for us, we encourage Gestalt therapists creatively to generate GPCGs that meet their unique preferences and needs.

## Postscript

Our coauthor, Bud Feder, passed away prior to the publication of this article. We are honored that, of his many contributions to *Gestalt Review*, this was his last. His deeply personal reflections highlight the importance of connection and contact throughout the life cycle, even at its final stages. As he came to grips with advancing frailty and imminent death, he remained fully dedicated to our GPCG, showing up each at session and participating as he could, with humor, dedication, and wisdom. We miss him greatly, and we will carry his memory with us as we continue our work together.

**JACK AYLWARD**, EdD, is a psychologist currently in practice in Watchung, New Jersey. He has led training and supervision groups in the United States, Australia, and Europe and written numerous articles in the field of Gestalt therapy. He has authored two books: *Gestalt Therapy and the American Experience* (2012) and *The Anarchy of Gestalt Therapy: A Proposal for Radical Practice* (2018).

**CHARLES BOWMAN**, MS, LCSW, LMFT (Licensed Marriage and Family Therapist), is a Gestalt therapy trainer and has in private practice in Indianapolis and Noblesville, Indiana. A past president of the Association for the Advancement of Gestalt Therapy, he is currently copresident of the Indianapolis Gestalt Institute. Recent publications include a coauthored chapter, with Lynne Jacobs and Gary Yontef, entitled “Gestalt Therapy,” which appeared in the 11th edition of *Current Psychotherapies*, edited by Wedding and Corsini. At present, he is teaching an online course on the fundamentals of Gestalt therapy, whose content is forming the basis of a book on the same subject.

**PETER COLE**, MSW, is in private practice in Berkeley and Sacramento. He is codirector of the Sierra Institute for Contemporary Gestalt Therapy in Northern California, and an assistant clinical professor of psychiatry in the School of Medicine at the University of California, Davis. With his wife Daisy Reese, he is the coauthor of *New Directions in Gestalt Group Therapy* (2018).

**BUD FEDER**, PhD (1930–2018), was a psychologist in private practice in Montclair, New Jersey and a trainer of Gestalt therapists throughout the world. His training in Gestalt therapy was primarily with Laura Perls, and in 1981, he joined the faculty of the New York Institute for Gestalt Therapy. He was the author of *Peeling the Onion* and *Gestalt Group Therapy: A Practical Guide*

(1993), and of *Gestalt Group Therapy: A Practical Guide* (2006). He was coeditor (with Ruth Ronall) of *Beyond the Hot Seat: Gestalt Approaches to Group* (1980), and of *A Legacy for Fritz and Laura Perls* (1996); and (with Jon Frew) of *Beyond the Hot Seat Revisited: Gestalt Approaches to Group* (2008).

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