

**Teaching and Learning Reflexivity within clinical training programmes: A Study on Counselling  
and Counselling Psychology Trainers and Trainees**

A PhD

by

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For Cooper: always dream big, work hard, play harder, be kind and enjoy your precious life on Earth.

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## **Abstract**

Across clinical training programmes, the science and art of reflective practice is almost always deeply embedded within the philosophy and teaching, both systemically and individually. As a general premise, trainers approach this through the inevitable intertwining of theory and practice, with the learned knowledge that deep learning may well be better mastered through a more personal involvement in the subject. The theoretical side most often takes the form of a critical analysis of the theoretical literature on reflexivity across professional contexts and systems, within professional and personal interpersonal relationships, and within the self. The practical side focuses on a deeper understanding of the self through one's own eyes and through the eyes of others within ever-expanding concentric circles, from their more intimate relationships to their relationships with society, culture and religion.

This thesis was inspired by my own experiences: first as a secondary school teacher in a deprived inner-city school, then as a counselling psychology trainee, and finally as a trainer on clinical training programmes where there remains a lack of clarity around the link between the understanding of what reflexivity is and why we adopt the training practices we do in order to teach this concept to – or, indeed, embed it within – our trainees and ourselves. It is as if the term 'reflexivity' is a space that is filled with theories, experiential groups, personal therapy, process reports and finally with grades. How do we know what we are measuring? How do we know what we are teaching? How do we know what we are learning?

In response to a gap in the literature, which acknowledges a lack of an adequate definition of reflexivity – reflecting similar uncertainty in how we apply it to trainees themselves and training contexts – this thesis seeks to examine the concepts already within the definition of reflexivity and to consider what reflexivity is, and how we can teach it better within the contexts of counselling and counselling psychology clinical training.

This thesis employed a phenomenological mixed methods research approach to aptly reflect the research question whilst acknowledging that the synergy between quantitative and qualitative methods enhanced the overall understanding. This approach was selected for its capacity to comprehensively explore the complex concept of reflexivity by capturing both depth and breadth, thus improving the rigorousness of the results. The phenomenological mixed methods approach was comprised of an overarching framework which wholly informed the research question, the methodologies employed and the integration of the results.

This phenomenological mixed methods study was novel in its comprehensive examination of key aspects across the relational models of reflexivity. It considered the personal attributes of trainees, the insights from trainers skilled in reflexivity, the pedagogical strategies believed to enhance reflexivity, and the comparative effectiveness of various teaching and learning methodologies in fostering reflexive practice as viewed by trainers and trainees.

In the quantitative study, 118 participants (all trainees on professional clinical training programmes) completed five online questionnaires at two time points: at the start of their clinical training in Year 1 (T1) and in Year 2 (Y2). Higher reflexivity scores were reported by trainees (1) with a prior clinical background; (2) those rated high on Conscientiousness and Agreeableness personality categories; (3) those with secure attachment; and (4) those who preferred conceptual change, student-focused teaching approaches. In line with our hypothesis, reflexivity increased significantly between T1 and T2. Furthermore, a secure attachment style and those rated high on Agreeableness predicted reflexivity in Time 1 as well as an increase in reflexivity between T1 and T2. With reference to training elements, higher levels of self-rated reflexivity were positively correlated with independent and university-led teaching methods with a higher relative contribution of independent teaching methods.

In the qualitative study, eight clinical trainers participated in 45–60 minute semi-structured interviews that were then subject to interpretative phenomenological analysis. Qualitative results identified the emergence of eight key themes: Self-Reflective Inquiry and Personal Awareness; Emotional Awareness and Continual Growth; Emotional Intelligence in relation to Dynamic Personality Characteristics ; Influence of External Factors on Emotional Expression and Coping; Enhancing Self-Awareness and Reflexivity; Cultivating Critical Skills in Creativity; Reflective Learning and Support; Pedagogical Approaches and Educational Effectiveness; and Cultivating Reflexivity Through Critical Assessment and Engagement. Further discussion of each theme was critically evaluated within the thesis.

The integrative results contributed to the relational models of reflexivity by providing further evidence for the dual action process of reflexivity and by exploring the components within it as relevant to this context. The results also highlighted the importance of trainee diversity in the development of reflexivity; promoted more personalised teaching and learning approaches; emphasised the significance of experiential learning in reflexivity; and established the importance of incorporating creativity into pedagogical methods. Finally the research also advocated for fostering more transparent, critical-thinking, and open learning environments in which both trainers and trainees actively participate in shaping training structures and processes.

The research outlined both its limitations and the possibilities for future research.



## **CHAPTER 1: Reflexivity: Definition, History and Contemporary Applications**

### **1.1 The Practitioner's Definition of Reflexivity**

Across theoretical models and types of practitioners, it has long been acknowledged that the therapeutic relationship is fundamental to the art of counselling. Relationships, whether therapeutic or otherwise, may be said to comprise a sharing of physical, emotional and symbolic space between the self and the other. Within the therapeutic relationship, there is a particular emphasis on the therapist's role in facilitating the client's understanding of both the self and the other, and it is the therapist's intrapersonal and interpersonal knowledge of their own self within the therapeutic relationship that mediates this understanding. This process of understanding the self as we relate to ourselves and others, as well as the capacity to utilise this knowledge, may be broadly defined as 'reflexivity'.

Throughout their professional lives – from trainee to qualified practitioner – counsellors inherently consider reflective practice to be the most fundamental part of effective and ethical counselling (Hawkins & Shohet, 1989). Irving and Williams (1995) suggested that counsellors do not follow models or methods pertaining to reflexive development; rather, they tend to adhere to an intuitive or common-sense approach to decide for themselves which are the most helpful processes that enable others 'to explore, discover and clarify ways of living more resourcefully and towards greater well-being' (British Association for Counselling & Psychotherapy, 1984). This perspective is cohesive with the more contemporary notion of reflexivity, which acknowledges that reflexivity is an act. Reflexivity may be defined as the experience of the self turning back on itself and examining the history of self, other and world (Lonergan, 1990).

However, the notion of reflexivity has a complex history, which is mirrored in the lack of an absolute definition. This, in turn, has a substantial impact on the understanding of reflexivity in clinical practice, for it may be argued that the lack of a conclusive definition has given rise to a parallel confusion in its application (Christensen, 2009). The literature asserts that any model of reflexivity within clinical practice must allow for reflection within the present moment, where thought and action become fully integrated. This integration may occur only by bringing together the art and science of practice (Saylor, 1990) as well as a deeper analysis of professional clinical practice (Imel, 1992).

Indeed the existing literature lays a substantial foundation for understanding relational models of reflection as they apply to the fields of counselling and counselling psychology, anchored in the broader disciplines of psychology, social work, and education which will be explored here, from the

initial conceptions of the definition of reflexivity (Mead, 1934) through to Schön's (1983) pivotal discourse on reflexivity, and later academics who have expanded the exploration of reflexivity within the complex tapestry of social and cultural settings challenging clinicians to rigorously analyse power dynamics, societal structures, and personal biases (Aron 2000; Giddens, 1992). Thus this Introduction will serve to explore the definitions and relational models of reflexivity in the context of this research. However, despite the extensive discussion these models have received, there remains a gap in the literature regarding a comprehensive understanding of reflexivity itself. It is hoped that this thesis will serve to bridge the well-documented gap between theory and practice (Burton, 2000) through an exploration of the origins, function and process of reflexivity. As Giddens stated, 'the self today is for everyone a reflexive project' (1992, p. 30).

Within his theory of mind, Mead (1934) was one of the first to use the term 'reflexivity' as a means to describe how individuals turn thoughts back in on themselves: a process that is, in his terms, uniquely human. It is by means of reflexiveness – the turning-back of the experience of the individual upon himself – that the whole social process is thus brought into the experience of the individuals involved in it (Mead, 1934, p. 134).

In this context, reflexivity was seen as the ability to access previously stored responses from others and utilise these as templates to speak to one's own mind in the absence of others. In Mead's writings, 'subjectivity' and 'reflexivity' were treated as interchangeable terms, indicating that reflexivity was solely a means of reflection on the self. As Adams states (2003), Mead's theory of self provided a context for an understanding of the origins of reflexivity by asserting that reflexivity can be developed in a social context only via social interaction. In this sense, reflexivity was seen as inseparable from the social and cultural context as it was 'impossible to conceive of a self arising outside of social experience' (Mead, 1934, as cited in Callero in 2003, p. 247).

Callero (2003) notes that, according to Mead's theory, the self is something that undergoes development; it is not initially present at birth, but gradually emerges during the process of social experience and activity – that is, it develops in an individual as a result of their relation to that process as a whole and to other individuals within that process.

Mead's theory was dependent on the action of the reflective process, which was later expanded to consider the consequences of the interruption or disruption of this process. This became fundamental in terms of understanding how reflexivity may be involved in the development of psychopathology and, according to Aron (2000), is exemplified within Winnicott's psychoanalytic writings and summarised by Stern's (1985) definition of the gradual development of a core self in response to adequate affective attunement of the caregiver.

With his keen interest in the development of reflexivity and systems of learning, Donald Schon (1983, 1987) offered one of the most influential descriptions of reflexivity, describing it as a form of artistry. This artistry may be present within any human interaction; however, there is general acknowledgement that particular interactions require a higher level of reflexivity. Two examples of interest within the scope of this research are the interactions between therapist and client, and between trainer and trainee. Schon (1983, 1987) focused his attention on the process of reflexivity, building on his earlier concepts of reflection *on* action and reflection *in* action (1983) whereby the individual thinks and acts on a situation only whilst engaged within it (Argyris, 1982; Schon, 1983, 1987). However, Schon's (1983, 1987) model is open to criticism because he does not offer a rigorous approach that is applicable to understanding the origins or process of reflexivity. He made a conscious choice to avoid the deconstruction of reflexivity, instead advocating the artistry over any technical examination of reflexivity. Schon (1983, 1987) argued that an exploration of the constituent parts of the art of reflexivity would be reductionist and fail to understand the overarching system. This is reflective of a systemic approach whereby the whole takes on an importance greater than the sum of its parts. In contrast to this perspective, it may be argued that it is crucial to unpack the origins and process of reflexivity in order to enhance its application where higher levels of reflexivity may be required.

By the 1990s, reflexivity increasingly constituted the self, as evidenced primarily in the works of Anthony Giddens (1991, 1992) and Ulrich Beck (1992). The sociologist Giddens (1991) contributed to the debate on reflexivity in his work on the 'reflexive project of self'. His earlier work proposed that reflexivity was an intrinsic part of the self and the self's relationships with others, noting that 'nothing is more central to, and distinctive of, human life than the reflexive monitoring of behaviour, which is expected by all 'competent' members of society of others' (Giddens, 1976, p. 114). Giddens asserted that the self is 'routinely created and sustained in the reflexive activities of the individual' (1991, p. 52). Reflexive agents were responsible for monitoring, appropriating, and driving behaviour and cognition by assimilating the external world with the internal narrative of the self (Giddens, 1991).

Interestingly, as Giddens (1991, 1992), in his profession as a sociologist, observed the changes in modern society, he posited that reflexivity had evolved in response to society and that this has had an increasingly significant effect on the formation of the self. Giddens (1991, 1992) argued that in societies with traditional boundaries, self-reflexivity was limited in direct correlation to the constraints of society and culture. In this view, individuals within a narrow society would possess a relatively limited understanding of the self. This is not to suggest a limitation of intelligence or imagination, but rather a constriction of the self's identity without access to a substantial and rich external world. Within an ethnological framework, Giddens (1991, 1992) observed that as society has evolved, the

boundaries have become increasingly flexible. This increasing flexibility, in turn, has caused the individual to become unfixed within their identity, resulting in the need for a corresponding increase in reflexivity to enable the individual to locate a stable sense of self within the social environment. Giddens (1991, 1992) posited that this has led to a more complex identity. He termed this process 'the reflexive project of the self' (Giddens, 1991:52–5) whereby the autonomous individual has the responsibility to construct self-identity, which may be seen as both liberating and threatening. Giddens (1991, 1992) defined reflexivity as a capability with an unbounded capacity for growth and change in the construction of self-identity and the self's interaction with others. This position may be said to align itself with a neo-modernist approach, which attempts to bridge the tensions between modernism and postmodernism. Giddens's (1991, 1992) views on the changes within modern society were paralleled in the works of his peers who proposed similar views on the extended role of reflexivity and the impact of modern society, including Castells' 'network society', where self-identity was seen to be actively organised by the individual; Beck's 'risk society', which described the process of individuation where the self is released from specific social roles; and Lash's 'reflexive modernity' (for details on these, please see Adams, 2006). These stances understand reflexivity to have an unknown capacity, which may be seen as unrealistic and problematic within the literature.

Giddens's (1992) definition of reflexivity as 'a self-defining process that depends on monitoring of and reflection upon, psychological and social information about possible trajectories of life' has been criticised for its emphasis on the individual's role and power within this dynamic. Indeed, Giddens's theory was in direct contradiction to Mead's work, particularly in relation to Mead's adherence to psychoanalytic principles. As Elliott (2001) asserted, this individualistic theory of the reflexive self failed to recognise the interaction between the wider system of society and the individual, and instead places the individual as the sole agent. This, in turn, diminished the role of society and culture. Systemic problems become individualised rather than considered as the consequences of relations between individuals and social structures (Kemshall, 2002).

In further opposition to Giddens (1992), Alexander (1995) countered that Giddens's (1992) dichotomous understanding of the shift from traditional to modern societies, and the associated expansion of reflexivity, is overly simplistic. Alexander (1995) posited that Giddens's view was reductionist in that it adopted a purely westernised and categorical view of society – a criticism that may be equally applicable to the theories on the network society and the risk society. Alexander (1995) rejected Giddens's (1992) view of limitless reflexivity that is detached from culture, stating that culture naturally constrains reflexivity and that reflexivity varied cross-culturally. This view was supported by Mestrovic (1998), who noted that reflexivity varied cross-culturally based upon the predication that reflexivity is a product of culture itself.

Adams (2003) further contradicted two central tenets within Giddens's work. First, he questioned the concept of 'an unbounded reflexivity' (2003, p. 224); Adams denounced the tendency to position reflexivity as the primary factor in the formation of self, noting that culture may not be wholly detached from the individual and thus will continue to shape identity. Adams concluded that reflexivity is only a partial understanding of identity. He further argued that Giddens (1992) failed to fully understand the process of identity formation and that other likeminded theorists have misinterpreted the post-traditional society. Adams (2003) posited that the extension of reflexivity within the post-traditional society remains embedded within the society and, thus, that the individual and the reflexive capacity are not fully liberated. He supported this argument by suggesting the impossibility of a juxtaposition between the dissolution of a traditional society and the rational, choice-making, bounded individual. Second, Adams (2003) stated, in agreement with the criticisms of Alexander (1995, as cited in Adams in 2006) and Mestrovic (1998), that the concept of reflexivity is itself a way of embedding the individual within a particular cultural framework, and that reflexivity should not be placed external to the culture and society, for these factors are integral in shaping the self; reflexivity is in itself culturally situated in both concept and practice. Adams (2003) concluded that reflexivity is contained within language; thus, both are culturally situated. As such, because the language used to define self and other is not considered to be objective, the self's reflections will always encapsulate information about the self and the external environment. (Toulmin, 1982). As Von Foerster (1981) stated, the observer is inseparable from the system under reflection. Reflexivity is thus ensconced within its own subjectivity and therefore is inherently incomplete (Antonacopoulou & Tsoukas, 2002). This may be seen as a post-modernist approach. Interestingly, this strongly emphasises the importance of reflexivity in that it accentuates a need to be aware of our partiality and thus increase the objectivity as far as possible. Indeed, it is suggested that if the self is not objective towards the system, then the observer must get as close to the system as possible – that is, they must be an engaged observer (Antonacopoulou & Tsoukas, 2002).

At this stage, it is evident that there was a broad consensus on the significance of reflexivity; however, the process remained only weakly understood. Indeed, reflexivity was claimed as a 'source of superior insight' (Lynch, 2000, p. 26), despite the absence of (1) explanatory processes and (2) inclusion of the significance of the 'other' (whether that refers to other individuals or wider systems such as society and culture).

In his works on reflexivity within education, Bleakley (1999) sought a more comprehensive understanding of reflexivity by analysing the epistemologies that underpin reflective practice in an attempt to define how the function of reflexivity is acquired and thereby unpack its components. Armstrong and Thompson (1998) note that, according to Bleakley, reflexivity stemmed from an 'aesthetic value complex', implying that the development of reflexivity is dependent on an individual's

knowledge as well as their understanding of how learning is acquired. This is essential to the examination of the development of reflexivity because it raises fundamental questions regarding the impact of early development on one's capacity to learn or enhance reflexivity.

Aron (2000) also offered an extensive exploration of reflexivity, which he considered a critical psychological capacity. In line with prior theorists, Aron (2000) defined reflexivity as 'the capacity to maintain the dynamic tension between experiencing oneself as a subject and as an object'. In his writings on reflexivity, Aron (2000) asserted that the capacity for reflective functioning can be improved and further argued that this process of improvement must be relationally focused. He utilised psychoanalysis as an example of the action of reflexivity whereby the action of therapeutic process necessitates a bidirectional shifting between subjective awareness and objective self-awareness from analyst to patient. This process may then be internalised by the patient, thereby eliciting a heightened reflexivity. Aron defined reflexivity as a:

Reflexive self-awareness is both an intellectual and emotional process; involves conscious and unconscious mentation; draws on symbolic, iconic, and enactive representations; and involves the mediation of the self-as-subject with self-as-object, the 'I' and the 'me', the verbal and the bodily selves, the other-as-subject, and the other-as-object. Self-reflexivity is not the achievement of an isolated mind in private contemplation, as the traditional concepts of insight and self-analysis may have implied; rather, self-reflexivity always involves an affective engagement, a meeting of minds. (2000, p. 667)

Reflexivity is seen to develop only within this relational context. From this perspective, reflexivity is dependent on the capacity of the individual to hold the subjective and inter-subjective modes of experience in tension simultaneously. This tension is sustained through the individual's ability to integrate thought and emotion, i.e. the observational and the experiential (Aron, 2000). Aron (2000) concluded that reflexivity is the capacity to experience the self and the other as both the subject and the object in a dialectical process: greater capacity indicates greater reflexivity. Fundamental to this understanding is the acknowledgement that capacity can be expanded through a learning process.

With this emphasis on the integration of theory and practice, it is useful to examine the definitions of reflexivity within the context of a variety of professional discourses. In their examination on clinical and health psychology training, Pilgrim and Treacher (1992) stated that trainees have typically learnt within the positivist environment, utilising the scientific ideology to observe the client and excluding the knowledge that may be gained from adopting a dual approach via the process of reflexivity. They concluded that this might disadvantage the trainees in that they would be unable to utilise

themselves, the other, and wider society or culture within the tensions of the subjective and objective self. Within professional training programmes, it is of course a necessity to adopt at least a partially empirical approach (Bolam & Chamberlain, 2003); however, to employ the positivist approach to the exclusion of reflexive practice is counterintuitive. In essence, the practitioner should be enabled to move flexibly between the objective scientist and the reflexive practitioner. This assimilation is most notable within the contemporary accounts of reflexive researcher, particularly in Bourdieu's (1990) influential writings on epistemic reflexivity.

In their consideration of reflexivity within health psychology, Bolam and Chamberlain (2003) proposed two types of reflexivity: 'dark' and 'light'. Light reflexivity referred to the ability to reflect on the role of the practitioner, encompassing the practitioner's values as well as personal attributes, and their impact on practice. Dark reflexivity was defined as the introspection and examination of clinical practice from an epistemological standpoint. This makes the important distinction between reflecting *on* practice (which may operate to improve clinical practice) and being reflective *about* practice. Taylor and White (2000) stated that reflecting on 'practice at the time (reflection-in-action) or after the event (reflection-on-action)' (p. 198) is quite different from being fully reflexive.

Within the school of social care, D'Cruz et al. (2007) also offered an understanding of reflexivity within clinical practice, offering a review of three types of reflexivity within the context of social work. First, reflexivity is defined as an individual's reflection on the external world where the self utilises the environment in terms of self-development and decision-making. Second, reflexivity is seen as the self's reflection on the relationship between social worker and client as a means of identifying how knowledge is generated and used by the practitioner. Here reflexivity is defined as a critical approach to professional practice that questions how knowledge is generated and, further, how relations of power influence the processes of knowledge generation. In this way, knowledge is not accepted within a positivist stance but rather as 'a topic worthy of scrutiny' (Taylor & White, 2000, p. 198) and therefore a resource within clinical practice. Sheppard et al. (2000) asserted that the fully reflexive practitioner must adopt an epistemological and an ontological approach in order to understand the process of clinical practice. In this view, reflexivity is defined as a process of looking 'outward, to the social and cultural artifacts and forms of thought which saturate our practices and inward to challenge the processes by which we make sense of the world' (White, 1997, p. 102). Third, D'Cruz et al. (2009) describe reflexivity as the self's capacity to reflect on how knowledge and theory about practice are created, rather than accepting traditional notions. These associated schools of thought, social work, and clinical and health psychology provide a foundation for understanding reflexivity in practice within the psychotherapeutic world.



Within the fields of counselling and psychotherapy, therapists use the skill of reflection for the successful development of reflexivity and self-awareness in a client (Chigwedere et al., 2019). It is of interest that Chigwedere et al. (2019) posit the notion that reflection is used in tandem with other skills, including empathy, suggesting that empathy and other interpersonal skills can be placed separately from reflexivity; this may be questionable when set against the backdrop of other research that presents a complex picture of reflexivity incorporating empathy within the subjective use of reflection. It is, however, a commonly held notion that reflection aids individuals – both therapists and clients – in maintaining their well-being and mental health. As Heneghan et al. (2014) state, reflection is used equally with psychiatric staff members, clinicians, trainees and trainers to achieve beneficial outcomes. Furthermore, the dominant position within the current literature has suggested that there is a constant need for research evidence about reflective processes in personal life and professional training in the last decade (Fisher et al., 2015).

In almost all other fields where the working environment demands stress management, reflection serves as a tool to encourage understanding and coping with challenging situations as a professional trainee (Miller, 2020).

Importantly, as Archer (2007) points out, reflexivity is a component of everyday intrapersonal and interpersonal functioning. However, it is also important to note that no consensus exists within the literature as to a universal definition of reflexivity, which parallels the current lack of understanding on the nature of the content and process of reflexivity. The shift towards practice has tended to focus on the 'nuts and bolts' (i.e. naming which type of reflexivity is in action). For example, reflection has been defined as what happens when a client hears back what he or she said during counselling as the therapist reflects the client's dialogues, allowing them to analyse their own statements with logical reasoning (Cendon, 2020). This process of unpacking is extended to the practitioners where reflection is seen to empower practitioners, as well as aiding in rapport-building to heal all the members involved in this process (Ng et al., 2020). These examples emphasise the research gap between adequate understanding of reflexivity and its position in training and practice today, which appears extremely well defined – albeit without, in this researcher's view, a significant foundation.

This set of circumstances recalls the 'house of cards' analogy: once so many storeys have been built atop a potentially unstable foundation, it feels as though any probing inquiry of lower storeys – or of the foundation itself – may risk toppling the entire structure. Yet perhaps toppling is not necessary; it may be feasible to merely add or move cards within and between levels. Although recent theory has shifted its focus to a discussion of theory in practice, as in the former examples, Ecclestone's original statement on reflexivity still holds true: There is 'a lack of reflection upon reflection' as well as a need



to propose 'much clearer accounts of different interpretations and values which underpin reflection and to structure its forms and focuses more coherently' (Ecclestone, 1996, p. 152).

## 1.2 The History of Reflexivity

The notion of reflection has been prevalent since ancient times. In Classical Greece, reflection was conceptualised as a means of distinguishing between the engagement in physical activity (*praxis*) of the labourer and the engagement in mental activity (*theoria*) of the philosopher. The latter concept was expanded on by Aristotle, who described the figurative stance of the philosopher as necessitating a detached reflection on the world. The roots of reflection are also firmly embedded within the language of Ancient Rome, where the Latin term *reflectere* may be defined as 'to bend back' or 'to bend again'. Since the time of these ancient civilizations, the definition of reflection appears to have been limited to the tangible world until the abstract definition in relation to the mind was restored during the 17th century. Sorrel notes that this is evidenced in the writings of the French philosopher Descartes (Descartes, 1637, as cited in Sorrel in 1987) and his ruminations on the nature of cognition, in which he described reflection as an introspective bending in, or a review of one's mental life. Descartes' position has been popularly embedded in the phrase 'I think; therefore, I am' (Descartes, 1637, as cited in Sorrel in 1987, p. 15) where he asserted that the body and mind are distinct components and that mental activity is intrinsic to human functioning. However, it was only in the 20th century that the term 'reflection' underwent substantial evolution to serve as a catalyst for related terms, including 'reflexivity', 'inter-subjectivity' and 'subjectivity'. Writing at the start of the 21st century, it is a testament to the abstract nature of reflection no consolidated definition or unified developmental narrative has established itself despite the passage of two millennia since its first inception during antiquity.

The industrial revolution, with its roots in technological innovation, had a profound effect on 20th-century society. One such effect was the shift in the discussion on reflection beyond the remit of philosophers into the realms of science, sociology and education. Historically, philosophers had challenged the classical division between physical and mental activity; these societal changes extended that argument across these various professional discourses. The specific term 'reflexivity' appears to have come into usage in the early 20th century by the sociologist William Thomas (Thomas, 1923, as cited in Archer in 2007), who proposed that an individual's actions were altered by their subjective interpretation of situations. This definition of self-reflexivity was adopted both as an issue within the positivist stance in terms of its impact on predictive hypotheses and in the social sciences, where the debate over structure versus agency in human behaviour had been prominent since the work of the first-generation German sociologist Georg Simmel (Levine, 1971).

From the initial classical propositions on the interdependency of the worlds of action (*vita activa*) and reflection (*vita contemplativa*) as termed by Toulmin (1982), the continued advancement of cognitive science following World War II proved the artificiality of this dichotomy beyond doubt (Kuhn, 1962, as cited in Kuhn in 1996). Each action, from the simple to the complex, involves the interplay between reflection and cognition: this position was empirically supported by early studies on cognition (Bateson, 1979; Polanyi, 1962; Wenger, 1998). As Antonacopoulou and Tsoukas (2002) affirmed, action and thought are jointly constituted. On this empirical basis, the concept of reflexivity embraced both an intrapersonal and interpersonal dimension with various theorists attempting to explain its development, nature and process. Throughout the 20th century, the traditional theories of self and related notions of reflexivity became increasingly complex (Callero, 2003) with the proliferation of social contact, perhaps most notably via the internet. As such, the self was opened up to broader influences across wider cultures, leading to an expansion of social roles (Frank & Meyer, 2002), the individualization of social life (Beck & Beck-Gernsheim, 2002), and the impact of choice whereby individuals may be seen to actively participate in the construction of identity. The latter can be seen very clearly in the present era of social media. Indeed, this may be considered a postmodern concern with the self, which is free from the constraints of modernist definitions constrained by language.

### **1.3 The Nature of Reflexivity**

The nature of reflexivity may be broadly defined as the reflective capacity of the individual on the self and on the other. Indeed, it may be argued that the concept of reflexivity rests principally on the concept of self and that the former may be argued to be integral to the development of the latter. The nature of reflexivity is wholly dependent on the concept of self, which encompasses not only the self's identity and attributes but also the self's ability to relate to others. With this in mind, this section will seek to understand the development of the self's reflexive capacity, termed 'subjectivity' within this context, as well as the subsequent acquisition of the capacity to reflect on others, termed 'intersubjectivity'. It is important to note that the aspects of reflexivity may often be defined by both their presence and their absence. In addition, it is essential to consider the factors necessary for the development of reflexivity, which may be broadly defined as individual differences.

#### **1.3.1 The Self and Subjectivity**

The concept of self has been studied extensively across professional discourses, perhaps most notably within the philosophical and scientific communities. One of the most popular definitions of the self is that of a conscious and reflective individual. The earliest conceptualisation of the self within the field of psychology distinguished between the self as *I* (i.e. the subjective position) and the self as *me* (i.e. the objective observer). More contemporary psychology views the self as an integration

between cognition, affect and social identity, and there is a growing trend of research within the neuropsychology community on the interdependence between neural pathway formation, cognition and affect. Indeed, the notion of self has evolved from a singular definition to a complex position where the self was seen as comprised of multiple identities that may be both static and in continuous evolution.

Discourse on the self is abundant across theoretical fields; indeed, its ubiquity is a testament to the stubborn complexity of the concept, which is still not fully understood. Literature exists pertaining to every aspect of the self: the physical, the emotional, the conscious and the unconscious, the cognitive and the existential, as well as the intrinsic and delicate links among these aspects. The understanding of the concept of self is far from exhausted and, indeed, the existing knowledge base is subject to continuous examination in step with the inexorable advance of technology. For example, the 'newer' science of neuropsychology aims to understand how the function and structure of the brain relate to psychological processes.

Within the realms of this study, a number of aspects of the self are intrinsically linked to reflexivity; the concept of subjectivity is of principle importance. Subjectivity is, in essence, the self's knowledge of itself, and this is arguably the starting point for reflexivity. Without an individual's perception for its existence, there can be no reflection. Furthermore, the development of subjectivity enables the self to develop individualised cognitions and emotions, which may then be utilised in the self's view of the other and the world. It is here that we may see the most direct link with reflective practice, where the practitioner may utilise their knowledge of their own self.

Subjectivity may be defined as the self's interpretation of experiences that are available to its consciousness. The introduction of subjectivity necessitated a shift from Descartes's dichotomous theory of mind toward a more relational understanding of the self's development. In his discussions on self-consciousness, the German philosopher Hegel may be seen to have pre-empted an acknowledgement of the interdependent nature of thought and action and the existence of subjectivity, as he proposed that the mind existed only from a process of recognizing itself from external states (Auerbach in 2001). The notion that thought and action were inseparable offered theorists a fundamental stepping-stone in the theory of self. The concept of subjectivity provided theorists with a framework to explain this continuous interplay between thought and action.

According to Aron (2000), William James's 1890 text *Principles of Psychology* offered one of the earliest considerations of subjectivity, wherein James outlined four factors – agency, distinctiveness, continuity and reflection – which, he argued, provide the operational foundations for the development of human subjectivity. The first factor, agency, may be defined as the autonomous self. The second,

distinctiveness, was a precursor to subsequent work on individual differences where the self has a sense of individuality. The third, continuity, refers to the stability of self. As Aron (2000) observes, Winnicott (1963) alternatively elaborated on this sense as the experience of 'going-on-being' (1963, p. 86). The fourth factor, reflection, was described by James as self-consciousness where there is the recognition of one's own awareness, namely the ability for an individual to make sense of themselves and their experiences. This fourth aspect distinguishes between the self-as-known (where an individual learns about the self through observation and feedback) and the self-as-observer (where the self views itself objectively) (Aron, 2000). James's (1890) definition of subjectivity inherently portrays an active self where the individual is highly engaged in both the internal and external worlds. This is indicated by the evolution of James's factors in later theories, such as distinctiveness, which is central to the notion of 'the psychic center of the interpersonal self' (Wolstein, 1983 p. 347), and reflection, which has come to be termed more broadly as 'meta-cognitive awareness' (Main, 1991) or 'representations of representations' (Fonagy & Target, 1998). Thus, the *Principles of Psychology* worked towards a more modern definition of self (Aron, 2000), thereby advancing a definition of subjectivity.

Following on from James's (1890) seminal work, as noted earlier, Mead (1934) substantially influenced the theory of self by proposing that the self and the mind are the products of communication and are therefore wholly dependent on the external environment of social relationships. In line with key aspects of contemporary psychoanalytic thought, Mead (1934) disregarded the notion of the rational mind placing equal emphasis on cognition, affect and behaviour (Antonio & Kellner, 1994). Mead was a leading proponent of symbolic interactionism whereby the act of subjectivity is proposed to emerge from social experience and enabled the self to bring the social process into its realm of experience. In this sense, the self was seen as inseparable from the social and cultural context as it was 'impossible to conceive of a self arising outside of social experience' (Mead, 1934, p. 247).

The self is something that undergoes development; it is not initially there at birth but arises in the process of social experience and activity, that is, develops in the given individual as a result of his relation to that process as a whole and to other individuals within that process (Mead, 1934, as cited in Callero in 2003, p. 199).

Mead's self may be defined within the action of the self – that is, one who is continuously engaged in reflection through a sophisticated communication system designed to both perpetuate and constrain perception, reflection and action (Perinbanayagam, 1991). This process serves to enable the individual to achieve self-awareness and self-regulation. Within this social communication, Mead proposed that this fully formed self-aware individual was formed through a process of objectification.

In his examination of Mead's theory, Adams (2003) outlined this process describing how the infant self uses the presence of others to begin a process of splitting. This in turn enables the self to develop objective self-awareness. The infant continues to use others to maintain this process, learning how to shift between multiple selves and eventually to integrate these selves, thereby developing self-consciousness. In this way, 'the self has to divide in order to view itself from a distinct position' (Adams, 2003, p. 232). Mead's central tenet (i.e. that the development of self is a product of the social environment) rested on the need for the infant to utilise others in order to initiate the process of splitting.

Mead's (1934) theory of self holds a prominent place within the literature: contemporary research acknowledges that the self is in part socially constructed and that it can be defined only by itself and others in terms of reflexivity. Mead's theory offered several hypotheses that served as a basis for later, more sophisticated theories of self. First, he posited a construction of self, which incorporated an understanding of subjectivity and offered an early, albeit unformed, definition of reflexivity as it relates to the self (i.e. self-reflexivity). In particular, he asserted that the process of reflection enabled the development of self-awareness where the self recognises itself as separate from the environment and others. Second, Mead's description of the infantile development of self through the process of splitting has been mirrored within the psychoanalytic school of thought. It is important to note that psychoanalytic theory shifted Mead's emphasis on the subjective self towards the inter-subjective self. Third, symbolic interactionism proposed that individuals have the capacity to act independently with free will. Fourth and finally, Mead's theory hinged on the action of the reflective process, which was later expanded to consider the consequences of the interruption or disruption of this process. This became fundamental in terms of understanding how reflexivity may be involved in the development of psychopathology and is exemplified within the psychoanalytic writings by Winnicott (1963) and summarised by Stern's (1985) definition of the gradual development of a core self in response to adequate affective attunement of the caregiver. Notwithstanding his influence on later theories, because Mead's definitions of awareness and reflexivity were essentially limited to the subjective self, they offered neither an understanding of inter-subjectivity nor a more sophisticated definition of reflexivity.

Sheldon Bach (1985), who examined such shifting between the perspectives of the self, labelled the two positions 'subjective awareness' and 'objective self-awareness'. Within subjective awareness, individuals are conscious of their agency embedded within their cognitions and behaviours, whereas within objective self-awareness, one is the observer of oneself. It is this shift between self as *I* and self as *known*, suggested in James's work and unpacked by later theorists, that serves as a means to advance towards a definition of reflexivity. The action of shifting between subjective awareness and objective self-awareness has been described as an action of self-reflexivity by Auerbach and

Blatt (Auerbach, 1993; Auerbach and Blatt, 1996). This capacity is the beginnings of reflexivity, where one is able to view both themselves and the other by holding the objective and subjective positions together. A high level of self-reflexivity would demonstrate a fluid capacity to shift perspectives bidirectionally.

Thus, the literature on the theory of self has evolved substantially from the Cartesian dichotomy to the recognition of subjectivity. The later development of the related notion of inter-subjectivity, which can be defined as the sharing of these subjective states between individuals, may be said to work towards a more complete theory of self. Indeed, as Aron (2000) explained, it is a necessity to first offer a comprehensive understanding of subjectivity in order to understand the dual nature of inter-subjectivity (Aron, 2000), as the emphasis shifts from the self to the other. This progression from subjectivity to intersubjectivity is paralleled by the development of the notion of reflexivity as it is reciprocally connected to any sophisticated notion of self. The self is, in essence, reflexivity, as it is only through reflection that the self can be defined either by itself or by others. Thus, the discussion turns to this integral factor of intersubjectivity.

### **1.3.2 Self, Other and Inter-Subjectivity**

It is important to note that this discussion evolves from the same source as the above section on subjectivity, namely William James's 1890 text *Principles of Psychology*, as it may be proposed that James's text offered a tentative suggestion of the notion of inter-subjectivity. In doing so, there was an implication that subjectivity, with its sole emphasis on conscious experience, was insufficient to explain the self and that, therefore, James's text potentially offered a tentative shift towards an examination of the other – and indeed, the unconscious. The unconscious is not directly addressed within James's text due to its relative obscurity at the time; however, his later works moved increasingly towards a psychoanalytic stance, rejecting positivism and making reference to multiple selves and unknown mental states while acknowledging the limitations of knowledge on consciousness (Aron, 2000).

The notions of the other and intersubjectivity were conceptualised within the dual discourses of psychoanalysis and philosophy. Based on prior conceptions of the other, the Austrian philosopher Husserl (1931) was the first to introduce the notion of the other as a component of consciousness by employing the term 'inter-subjectivity' within his phenomenology. From this perspective, inter-subjectivity is embedded within the experience of the self in relation to others.

Within the psychoanalytic field, both Sullivan and Kohut are credited with embedding the notion of the other within the literature of classical psychoanalysis. The psychiatrist Harry Sullivan (1954)

introduced the term 'the significant other' and was the first to formulate the notion of interpersonal psychoanalysis as a means to emphasise the significance of understanding the self interactionally, namely in relation to others. Through his canonical 1954 text, 'The Interpersonal Theory of Psychiatry', Sullivan proposed that an individual should be conceptualised through an understanding of their interpersonal relationships (i.e. the nature of their intersubjectivity). In a similar shift away from the Freudian intrapsychic concept of the unconscious mind, Kohut is credited with widening the scope of interest of psychoanalysis. Classical psychoanalytic thought is founded on the notion of the intrapsychic. Although later psychoanalytic theorists remained loyal to the importance of the intrapsychic, there was a movement towards a parallel emphasis on the inter-subjective (Aron, 2000). As Benjamin stated (1995), these concepts of the relationship to the self (intrapsychic) and to the other (inter-subjectivity) may be seen as complementary modes of experience in which individuals relate to the self and the other as both subject and object.

The notion of the other became an increasingly key notion within contemporary psychoanalysis, stemming from Kohut's writings on the relational approaches following the discourse on the societal implications of World War II. Indeed, Kohut's observations on the self's relation with the other led to a shift in his own philosophy, as he critiqued Freud's structural theory of the self and the focus on drives in favour of a model of a tripartite self that incorporated an intersubjective framework wherein the needs of the self are met in only relationship to others. Building on Kohut's works, Robert Stolorow (Stolorow & Atwood, 1984) proposed a theory of intersubjectivity, alternatively termed 'intersubjective-systems theory', which may be said to symbolise a fundamental turning point from a solipsistic view of the self to one that acknowledges the essential social nature of the self in relation to others. It is of note that Stolorow and Atwood (1984) posited that affect takes place solely within intersubjective systems.

Following Stolorow, subsequent theorists sought to unpack the concept of inter-subjectivity and indeed offer diverse understanding of its content and process. For example, the psychoanalyst Donald Winnicott (Winnicott, 1971/1982) offered a substantial contribution to the definition of inter-subjectivity. In his work on the holding environment, Winnicott (1963) proposed that the origins of inter-subjectivity could be observed in the process of mirroring within infancy. This theory asserted that the infant observes the mother's face and embodies her in order to achieve a sense of wholeness. Once this wholeness is achieved, the infant can operate reflexively, thereby seeing the self and others as independent. Inter-subjectivity is therefore defined as the interaction in the space between the self and the other. Winnicott (1963) further hypothesised that this process of inter-subjectivity mediated the development of the self. In summary, Winnicott (1963) concluded that the self is not dependent on one's own mental activity but instead on the responses of others, thus asserting that reflexivity is developmentally acquired through the process of inter-subjectivity. This



may be epitomised in Winnicott's ironic (and oppositional) variation on Descartes's famous edict: 'When I look I am seen, so I exist' (Winnicott, 1971/1982, p. 114).

Since Winnicott's writings, it has been widely accepted that the development of the self is dependent on the caregiver acknowledging the infant as an independent object (Benjamin, 1998) and that any understanding of inter-subjectivity must be firmly embedded within the interpersonal interaction, wherein both parties recognise the other as independent (Aron, 2000). It is from this basis that the contemporary definition of inter-subjectivity began to take shape with an understanding of the evolution from subjectivity to inter-subjectivity.

Within this contemporary discussion, it may be proposed that two prominent contrasting hypotheses have dominated the discourse. First, in a tradition cultivated by the anti-traditionalist psychiatrist and psychoanalyst R.D. Laing (1961), inter-subjectivity was understood as deriving from the self's conscious experience of others. The second tradition, advanced by psychoanalyst Jacques Lacan (Lacan, 1977a, as cited in Forrester in 1985), proposed that inter-subjectivity was situated in unconscious communication through discourse. This hypothesis was in direct contrast to Laing's (1961) phenomenological approach. In this way, the notion of inter-subjectivity expanded from the discourse of philosophers to psychoanalysts. In order to move towards a unified definition of inter-subjectivity, it is imperative to trace the evolution of these contrasting traditions.

Laing (1961) has been credited as a major contributor to the term 'inter-subjectivity' within the literature of psychoanalysis; later he was an outspoken critic of his contemporary colleagues for their failure to explore and emphasise the importance of inter-subjectivity within both the theory and practice of psychoanalysis. Laing (1961) defined inter-subjectivity as the active and conscious experience of an interaction between self and other. Within this perspective, Laing aligned himself with Freud's notion of the vulnerability of the patient within the power dynamics of the patient-analyst relationship and concluded that the action of inter-subjectivity was necessary to protect the patient from the power of the analyst. Conversely, according to Forrester (1985), Lacan – influenced by Hegel – described inter-subjectivity as an unconscious experience whereby one's interpretations of the self and others evolved from unconscious modes of understanding. As opposed to vulnerability, Lacan (1977), prioritised Freud's (1919) notion of abstinence in a consideration of inter-subjectivity in action where the psychoanalyst is responsible for disabling the patient's attempts to gain power within the relationship. It is important to note that Freud (1919) advocated the necessity of holding the concepts of vulnerability and abstinence in tension, whereas Lacan and Laing dissolved this tension by adopting opposing unipolar positions. It is worth noting that in seeking to expand psychoanalytic thought through a definition of inter-subjectivity in action, Lacan and Laing assumed a reductionist stance with respect to Freud's theories. This dynamic is fundamental to later



understandings of inter-subjectivity wherein a form of tension is the foundation for any definition. Thus, although both Lacan and Laing proposed a definition of inter-subjectivity that encompassed the need to share subjective states between patient and analyst in regards to power dynamics, neither analyst offered a comprehensive understanding of inter-subjectivity. The discussion of inter-subjectivity was not a central component of their overarching theories and, as a result, these initial advancements towards inter-subjectivity were neither fully formed, nor were the contradictions resolved.

Empirical research on cognitive development expanded the understanding of inter-subjectivity by offering a distinction between the recognition of the other as a separate physical entity (the body) and the other as an independent cognitive being (the mind). As Auerbach and Blatt (1996) stated, it is the latter that defines inter-subjectivity:

It is this mutual recognition, by caregiver and child, of each other's mental states, that ultimately constitutes the inter-subjective situation. Thus, inter-subjectivity as an interpersonal interaction...and inter-subjectivity as a psychological capacity are deeply intertwined concepts, with the former constituting the transactional matrix from which the latter emerges. (Auerbach & Blatt, 1996, p. 429)

Inter-subjectivity, in essence, is the capacity to understand the other's independent subjectivity. Noam and Fischer (1996) note that an individual's inter-subjective capacity develops from the tension between the self's need for self-definition and its need for relatedness. As such, this definition demonstrates an evolution from the development of subjectivity when the infant develops a subjective sense of self and the other is separate from the self, between the ages of 18 and 24 months (Auerbach & Blatt, 1996), to a later developmental stage where the self's capacity encompasses the ability to appreciate the mind of the other. Cognitive research holds that this capacity is developed between the ages of five and six years (Mayes & Cohen, 1996). Several studies have supported this notion, notably research indicating that at this stage children are able to recognise that an individual's beliefs about the world can be false (Perner et al., 1987); to distinguish between how things look and how they actually are (Flavell et al., 1986); and can understand the concept of lying (Astington, 1993; Meares, 1993). In psychoanalytic terms, this transition from subjectivity to inter-subjectivity is seen as the shift between the rapprochement sub-phase, where the infant experiences a loss of omnipotence, and the later developmental stage where transitional object usage becomes integrated with realistic cognition (Fonagy & Target, 1996; Target & Fonagy, 1996).

This theoretical understanding of inter-subjectivity has been increasingly applied to practice within a relationally based psychoanalytic model. In his exploration of this model, Aron (2000) described how the intra-psychic and the inter-subjective are interdependent modes of experience, which may be seen in the action of therapy. He proposed that the discovery of the separateness of one's mind is a crucial step in the development of reflexivity and that it is here, within this interaction between the subjective and inter-subjective, that reflexivity develops.

#### **1.4 Individual Differences**

Individual differences have traditionally encompassed a broad range of variables, including personality, intelligence, ability and capacity, all of which have been central to the unavoidable tension between nature and nurture. Within the field of developmental psychology, this process has been termed 'individuation'. Individuation may be defined as the process of psychological integration whereby the distinct components of the self are formed biologically, as well as through experience, and become integrated into a coherent and stable whole as the individual personality. 'In general, it is the process by which individual beings are formed and differentiated [from other human beings]; in particular, it is the development of the psychological individual as a being distinct from the general, collective psychology' (Jung, 1971).

Within the scope of this research, it is necessary to highlight the particular aspects involved in the development of reflexivity, whether they relate to early experiences or adult education. To that end, this section will address the variables of mentalisation, personality theory, psychopathology and intelligence. First, it is important to note that the development of an individual's capacity to employ subjectivity and inter-subjectivity is dependent on a number of these variables intertwined within the interplay between nature and nurture. Furthermore, the progressive acquisition of these capacities is a developmental process, not only in terms of the progression from the subjective to the inter-subjective, but also in that each of these has the capacity for continuous evolution. However, it remains uncertain how early development impacts this evolution, as reflected by the variation in capacity to form and sustain relationships among individuals. As Auerbach and Blatt (1996) stated, the ability to integrate the capacities to define oneself and to form relationships with others through holding in tension of the demands of the self and the other is an interactive and continuous process. It is proposed that a multi-faceted and integrated self is contingent on interpersonal relationships and, conversely, that increasingly positive interpersonal relationships are dependent on the development of a more mature self. Pointedly, greater capacity indicates greater reflexivity. From this perspective, subjectivity and inter-subjectivity are developmental models and, inherent within this definition, a central property is the capacity for growth throughout the lifespan.

Within the psychoanalytic literature, this learning process is largely agreed to be dependent on a pre-existing capacity for mentalisation (Fonagy & Target, 1995; Target & Fonagy, 1996). The work of Allen and Fonagy (2006) has focused on the concept of 'mentalisation', a term often used interchangeably with 'reflexivity'. Originating as a psychoanalytic term, 'mentalisation' may be defined as an individual's capacity to understand their own cognitions and emotions, as well as to infer those of others, in a systemic manner that enables them to predict thoughts and behaviours (Allen & Fonagy, 2006). This process is operationalised as reflective function (Fonagy et al., 2004). Because the concept of mentalisation assumes an integral circular feedback between cognition and emotion, the capacity for reflexivity is held to be dependent on the dual development of cognitive capacity and emotional regulation (Fonagy & Target, 1997; Fonagy et al., 1998). Fundamental to this understanding is the acknowledgement that capacity can be expanded through learning.

Based on a mentalisation premise stemming from Winnicott's work, the development of intersubjectivity is dependent on both the psychological capacity of the infant to recognise the autonomy of the caregiver (and thus its own independent subjectivity), as well as on a similar psychological capacity within the mother that has been subsequently termed the 'motherhood constellation' (Stern, 1985). These capacities are dependent on an evolutionary cognitive affective capacity (Stern, 1985; Povinelli & Prince, 1998). Although this may be a singular example of the variable mentalisation, it is indicative of one of a multitude of variables both from physiological and psychological viewpoints, which must be taken into consideration.

The field of attachment theory has produced a substantial volume of literature on the links between attachment type and the development of psychopathology. Central to this literature is the concept of reflexivity, which is viewed as a sophisticated form of mentalisation. Attachment theory proposed that the caregiver's reflexive capacity has a substantial impact upon the child's mental state, noting that reflexivity operates as a mediator of attachment. Thus, a high level of reflexivity (whereby the caregiver is able to respond reflexively to the child) would be predicted to produce a more secure attachment style (Koren-Karie et al., 2002; Meins et al., 2003). A secure attachment style enables individuals to consider both themselves and others objectively (Fonagy & Target, 1996). This process begins with the caregiver's capacity for reflexivity, which dictates their ability to comprehend and respond to the child's mental states and thereby enable the child to experience the conditions inherent in developing emotional regulation. This process has been termed 'second-order representation' (Fonagy & Target, 1996). By learning the skills of emotional regulation, the child understands that they can manage their cognitions and emotions as they are not congruent with reality, which enables the child to then recognise and respond to others; this completes the cycle of reflexivity. In fact, reflection has been found to enhance cognitive functioning and achieve optimal

decision-making. It shows that personality has been linked with reflection in different real-life individual performances (Juanchich, Dewberry, Sirota & Narendran, 2015).

Given the ethics of experimentation within this area, the empirical evidence is most often based on the opposite in studies on infants and children deprived of caregiver resources. Such studies quite consistently find that a deficit in the caregiver results in an impairment in the child's reflective capacities (Beeghly & Cicchetti, 1994; Schneider-Rosen & Cicchetti, 1984, 1991). Thus, Fonagy et al. (2004) concluded that securely attached individuals tend to have had a mentalising primary caregiver, and as a result, have a heightened capacity to represent the states of their own and other individual's minds. One study on mentalisation and attachment status indicated that reflective function was the only predictor of attachment status, leading to the assertion that early exposure to mentalisation can serve to protect the individual from developing psychopathology. Further results indicated that attachment insecurity was related to the presence and number of axis I diagnoses, and that high levels of reflective function were associated with a decrease in axis II (Bouchard et al., 2008). This locates reflexivity firmly within a constructivist tradition, as one's capacity to develop reflexivity is directly correlated to the quality of early attachment relationships, and a deficit in reflexivity is proposed to lead to psychopathology. The literature in this area presents a strong case for the links between attachment history and the strength of an individual's reflexive capacity.

Fonagy's (2003) more recent work proposed a model for the development of psychopathology where the failure of reflexivity occupies a central position. He suggested that attachment in infancy has the evolutionary function of developing a secure sense of self and other with the aim of ensuring social skills essential for physical survival. Fonagy (2003) asserted that extreme personality pathology is the result of the failure of the psychological mechanism involved in attachment, leaving the self incapable of sustaining a secure sense of self. In support of this understanding, Fonagy offered evidence from prior research on attachment. He noted the correlation between early attachment style and later cognitive functioning; the poor predictive relationship between early and late attachment styles; the empirical evidence on the positive correlation between levels of secure attachment and the capacity of mentalisation; and finally the factor analytic studies of adult attachment scales that implied the independence of attachment style and attachment quality.

In respect of abnormal psychology, it may be proposed that reflexivity plays a central role in the development of psychopathology. Although a biological component is evident within genetic research on psychological disorders, the role of nurture may be seen as equally fundamental. Essential to the constructivist literature, attachment theory seems to offer a key to understanding the link between reflexivity and psychopathology (Fonagy et al., 2004).

In terms of personality development aside from psychopathology, the current research base proposes a lifespan theory of personality based on neuroplasticity, which posits that personality traits are influenced by the environment over an individual's lifespan (Roberts et al., 2010) and are malleable (Damian et al., (2019). Longitudinal research has contradicted theories of early personality development by indicating that the period between 20–40 years old appears to be the most active stage of personality change, with a period of increased stability reached at the age of 50 (Roberts et al., 2010). The research bears out that personality consistency is positively correlated with increasing age, although it is continuously subject to growth, which is unsurprising given the plasticity model. (Roberts & Mroczek, 2008; Roberts & DeVecchio, 2000).

Indeed, extensive prior research has investigated the broadly agreed-upon definitions of personality traits (Costa & McCrae, 1992), and it is of interest here that one particular personality trait (i.e. Agreeableness) is seen as – and has been empirically validated as – a pro-social trait (Graziano & Eisenberg, 1997; Habashi et al., 2016). The personality trait of Agreeableness is associated with the attributes of co-operation, kindness, consideration, trust and altruism (Graziano & Eisenberg, 1997) as well as with pro-social motivation (Graziano et al., 2007).

## CHAPTER 2: Teaching and Learning

### 2.1 Teaching and Learning Methods in Adult Education

*Learning rests not upon the teaching skills of the leader, not upon scholarly knowledge of the field, not upon curricular planning, not upon use of audio-visual aids, not upon the programmed learning used, not upon lectures and presentations, not upon an abundance of books, though each of these might one time or another be utilized as an important resource. No, the facilitation of significant learning rests upon certain attitudinal qualities that exist in the personal relationship between the facilitator and the learner. (Carl Rogers, 1989)*

It is of particular significance that there is no overarching theory of adult education, perhaps reflecting the more impassioned debate within child and adolescent education, where societal and cultural beliefs have led to disparate educational systems both within and among cultures. Similarly to the breadth of beliefs underlying educational systems, some have argued that it is the presence of an overwhelming multitude of variables that contributes to the lack of a cohesive theory of adult education (Brookfield, 1986). In line with the previous chapter's discussion of differential psychology, that multitude of variables accounts for the individual differences between adult learners, namely cognitive styles, physiology, learning styles, culture and personality.

Within the wealth of research on adult education and these variables, theorists have put forward several teaching and learning concepts, or methods, that have pointed to problem solving as one of the most beneficial educational opportunities, or tools, for adult learners. The idea of doing whilst learning is a highly recommended approach in adult education (Vella, 1994). With an emphasis on constructivism, Knowles (1980) suggested that the presentation of a context is an essential aspect of teaching adults because it is the context that gives rise to the flexing of problem-solving skills. The constructivists opined that learners developed a deeper understanding when they applied their present knowledge to new information and resolved any incongruities that emerged (Cruikshank et al., 1995). Through this process, learners develop their problem-solving skills through a process of implementation and adjustment. It may be fairly assumed that the acquisition of problem-solving skills is universal; the baby's cry and latching onto the breast might be intuited as the earliest of these skills. However, the distinction lies in the individual's capacity to develop advanced problem solving skills. The importance of problem solving is reinforced through the presence of other variables that are intrinsically linked. Turoczy (1996) posited that variable of dialogue is paramount, noting that questions that adult learners benefited greatly from questions that allowed them to construe and

integrate facts into their experiences. In this way, language may be seen as the most influential mediator for the development of problem solving skills within adult education, in terms of the use of language between trainer and trainee, as well as the language of the interwoven systems (i.e. peers), educational setting and professional setting.

Specific to this thesis, it is argued that the language of counselling is shared and reflected within training, employment and professional bodies and that this shared language acts as a catalyst for learning via problem solving. This precipitates another interrelated variable, namely the training environment, which this researcher would argue is often an extension of the principles underlying the professional body. Focusing on group work, Kerka (1995) proposed that the social environment was also a critical component of adult education, noting that peer groups of comparable maturity levels enabled adult learners to retain motivation and advance within the learning process. Indeed, the more recent research on lifelong learning has now started to pay considerable attention to the concept of creativity; Sahlberg (2009) argues that creativity or readiness to work with innovation can be improved through lifelong learning when learners experience changes to their daily routines or learning environments.

Based on humanistic notions of autonomous learners and teachers as facilitators, Knowles (1984) used the term 'andragogy' to define the various assumptions of adult learning, namely readiness-to-learn, self-directedness, active learner participation, and solution-centred. It is notable that almost 30 years later, the majority of standardised adult learning techniques incorporate these components (Trivette et al., 2009) In particular, there are four adult learning methods that have gained considerable attention within educational fields, namely accelerated learning, coaching, guided design and just-in-time training (Trivette et al., 2009). Initially referred to as 'suggestopedia', the accelerated learning approach seeks to create a relaxed emotional state that serves as an orchestrated multisensory environment for the learner. This method includes role-playing, group activities, practice exercises and journal writing. Interestingly, in reference to Sahlberg's (2009) notion of creativity developing from novel environments, it may be argued that these teaching methods provide the new context for learning. Indeed, the accelerated learning approach is considered to be a holistic learning process that promotes creation (Trivette et al., 2009).

Hargreaves and Dawe (1990) described coaching as a method of transmitting skills and expertise from more knowledgeable practitioners to less experienced ones. This method involves joint planning and goal setting, information gathering, practicing, sharing, reflection on the learners' experiences and coach feedback, and it is believed to enhance a learner's self-confidence and collegial relationships (Trivette et al., 2009). Of particular interest within the context of this research is the guided design approach. This approach includes decision-making and problem-solving processes



that are believed to promote high-order problem-solving skills and meta-cognitive thinking abilities (Trivette et al., 2009). Importantly, it may be proposed that the capacity for reflexivity may be mediated by these skills and abilities. Furthermore, it may also be argued that the guided design approach is fundamental in the development of reflexivity because it enables the individual to grow through their own self and other discoveries. Finally, the just-in-time training method incorporates various methods and strategies applied in the framework of real-life challenges; its key outcome is situation-specific improvements in knowledge and performance (Trivette et al., 2009). Bearing in mind this more generalised background to adult education, an examination of the current teaching and learning methods in the area of counselling and psychotherapy will help reveal the different patterns as well as their implications for the future of teaching and learning in the field of adult education. Given the limited research within this area, it has also been useful to consider the equivalent within the related fields of family therapy, social work and nursing.

Research into counselling training is sparse, particularly within the United Kingdom. With its humanistic roots, the United States has contributed more prominent research in this area. In his examination of counsellor education, McAuliffe (2002) identified a number of concepts prevalent in training, including experiential education, connected teaching, developmental instruction, behaviour instruction, autonomy-enhancing instruction, dialogue, and dialogue-enhancing instruction. Experiential education promotes learner involvement and allows trainees to present inductions and inferences (McAuliffe, 2002). The concept of connected teaching insists that learners relate with one another, themselves, and their society through education. McAuliffe (2002) asserted that this concept promoted self-directedness in trainees and helped learners identify social disparities. Developmental instruction takes into account mental readiness and the age-related needs of individual learners (McAuliffe, 2002). Behaviour instruction focuses on individual learners' rate of performance at each level of sequences in tasks; it requires trainers to enable trainees to construct their own performance charts. Autonomy-enhancing instruction methods encourage trainees to generate their own ideas and course structures through inquiry and group action, thereby reinforcing the importance of active learning methods (McAuliffe, 2002). It is of particular note that such 'autonomy-increasing' instruction method has been argued to produce 'hyperautonomy', which psychologists have identified as the essence of mature adulthood (McAuliffe, 2002); this necessarily involves participation in the social construction of knowledge. Finally, the method of dialogue-enhancing instruction utilises the 'inductive inquiry approach', similarly to problem-solving skills, and involves the presentation of concrete instances and unclear situations for group investigation (McAuliffe, 2002). Significantly, there appear to be many overlapping facets among these methodologies and the broader aspects of adult education, which speaks to the importance of integrating an investigation of the components of current counsellor training programmes into the research on adult education. The need for such an endeavour is underlined by the knowledge that few counsellor educators are trained to teach – as



such, the vast majority of counsellor educators are mental health practitioners and not teachers (McAuliffe, 2002).

One of the more wide-ranging research projects by Frank et al. (2020) aimed to provide an update on the effectiveness of therapist training through a systematic review of the literature over the previous decade (2010–2020) in order to assess the impact of the type of training component on trainees' knowledge, beliefs and behaviours. Their study concluded that therapist training has evolved significantly since prior systematic reviews over a decade ago from the use of more traditional teacher focused learning activities to more intensive training models. However they noted that further examination of training models was problematised by methodological issues, namely the lack of consistency of models between training programmes.

Johnson et al. (2023) study on mentoring within graduate psychology clinical training programmes argued for that a relationship-rich training environment was a necessity for the trainees personal and professional development and for the efficaciousness of the training programme as a whole. In their work, they propose a working model for developing and enhancing a mentoring culture which is deeply embedded within the clinical training programme. This relational model proposed key tenets of 'a communitarian ethos, frequent growth–fostering interactions, and mentoring relationships' (Johnson et al., p. 63). It is of interest that both the two aforementioned research studies demonstrate an evolution in the teaching and learning methodologies within the clinical training programme, adopting more individualised approaches to the trainee's relational beliefs, knowledge and experiences as central to their training.

One of the most prominent training features for trainee counsellors, psychotherapists, psychoanalysts and counselling psychologists is the stipulation to undertake personal therapy. For example, trainee counsellors are required to attend 40 hours of personal therapy or otherwise must have equivalent experience as a client in order to be recognised as a registered practitioner by the British Association for Counselling and Psychotherapy (BACP) (Grimmer & Tribe, 2001). However, there are many other methods; one of them is filling a reflective journey of oneself as a professional in the training (Cologon et al., 2017). A personal change that is prominent in this case is awareness of one's struggles and acceptance of imperfections (Kissil et al., 2018). This strongly exemplifies that trainees receive multiple benefits when they intend to participate together in the hard work (Aponte & Ingram, 2018) and intuition (Donati, 2016).

The importance of personal therapy is well established for the credibility of the practice in the teaching of reflection (Chigwedere et al., 2019). This serves as an alternative to reflection and vice versa (Bennett-Levy & Finlay-Jones, 2018). Personal therapy seeds the roots of reflection, thus eliminating

the gap between personal and professional enhancement (Hildebrand, 2018). Personal psychotherapy allows the trainees to compare the skills they have learned, their strengths, weaknesses and challenges, and to monitor their progress (Edwards, 2013). The major influence is seen in finding the solutions to challenges that the trainees may encounter during the reflection learning; process analysis is carried out using the personal therapy (Nurmi et al., 2019). Furthermore, personal therapy allows measurement of the experiential behaviours and cognitive functioning of the trainees with the use of reliable and valid scales (So et al., 2018).

Explaining its importance, Grimmer and Tribe (2001) note that the active ingredients of the therapeutic process are the therapist's interpersonal skills and their use of the self; therefore, personal therapy is one of the means assumed to enable the development of these facets of the self. Additionally, personal therapy is widely believed to offer the greatest potential for the therapist, in terms of both enabling them to understand and empathise with any client narrative and of minimising the probability of blind spots and other forms of unethical behaviour (Grimmer & Tribe, 2001). The British Psychological Society has also included the same requirement in its accreditation procedure (Murphy, 2005). Grimmer and Tribe (2001) provided six rationales for the use of personal therapy for trainees and therapists: (1) improvement of emotional and mental functioning of the practitioner; (2) in-depth understanding of personal dynamics and interpersonal elicitations; (3) mitigation of emotional stresses and burdens; (4) socialization experience; (5) development of the therapist's experience as a client; and (6) an opportunity to experience first-hand clinical methods. Grimmer and Tribe's research (2001) suggested that this approach promoted greater reflexivity by facilitating the development of reflection as well as knowledge of the process and content of therapy. Murphy (2005) argued that personal therapy leads to the development of empathy, which supports the emergence of conscious awareness in the therapist.

Of particular interest is the fact that there is often a contradiction within the available literature on the functionality of personal therapy in terms of both its purpose and its usefulness. Some analyses of the existing research have indicated that during the early stages, personal therapy may keep the trainees preoccupied with their own emotional turmoil – which may, in turn, have a negative impact on client outcome (Strupp, 1958, 1973; Gareld & Bergin, 1971; Grimmer & Tribe, 2001). Conversely, it has been found that a vast majority of therapists have expressed positive feelings about the sessions, with satisfaction rates varying between 66% and 94% of those surveyed (as cited in Grimmer & Tribe, 2001). The positive consequences reported by trainee psychologists included symptomatic improvements and characterological changes, as well as improvements in self-esteem, work function, and social and sex life (Grimmer & Tribe, 2001). According to Macran and Shapiro (1998), some therapists viewed personal therapy as the most important part of their training and recommended it as a beneficial training experience for future psychotherapists. Indeed, in their wider

qualitative work on the role of personal therapy, Rizq and Target (2008) described the absence of existing research in the area. Most significantly, Rizq and Target's (2008) IPA study found that trainees identified the development of reflexivity as the primary outcome for personal therapy, with the researchers offering potential links to attachment experiences. Although comparisons among studies are made difficult by their differences – such as in rating scales, population studied and research focus – the notion of personal therapy as a learning tool is paramount, as are its links to attachment.

Therapist attributes are strongly connected with the reflection process, and reflective functioning can compensate for the attachment styles during therapy. Although a study by Cologon et al., 2017 showed that reflexivity predicted therapist efficacy, it is interesting to note that attachment style did not predict therapeutic outcome. This revealed that a trainee's attachment style must be considered while the selection process. Results indicated that therapist reflective functioning predicted therapist effectiveness, whereas attachment style did not. However, there was evidence of an interaction between therapist attachment style and therapist reflective functioning. Secure attachment compensated somewhat for low reflective functioning, while high reflective functioning compensated for insecure attachment. The data of the study relate an insecure attachment style with the highly reflective process and a secure attachment style with the low reflective process. However, other research (Compare et al., 2018) concluded that reflection is effective for change in attachment dimensions among people suffering from various mental health issues, including eating disorders among women and personality disorders among men. Thus, reflection is also a promising method for healthy functioning and emotional regulation in trainees in counselling and psychotherapy. The reflection mediates between personality and attachment styles. Psychological functioning and the development of therapeutic interventions are both influenced by reflective processes (Nazzaro et al., 2017).

Given the paucity of research in counsellor training – particularly in the UK – it is useful to consider the recent research within training programmes in related disciplines such as family therapy, social care and nursing. Educators in the field of family therapy have been placing particular emphasis on systemic supervision, which, according to Simon (2010), can be considered a transgressive partnership. The practice is continuously evolving, and systemic training courses require that trainees be sufficiently connected to systemic ideas (Simon, 2010). The notion of relational reflexivity within this framework proposes a 'method' in which trainees may be invited to enter into a dialogic relationship with knowledge offered in the family therapy course, which in turn yields a range of techniques for generating education-centric conversations (Burnham & Neden, 2007). This dialogic method, which has been referred to as the 'patchwork partners' approach, seeks to build a concept of collaborative and dialogical research (Wrate, R. & Forbat, L., 2008). This method has enabled

trainees to share their work and utilise one another's ideas as catalysts while also providing opportunities for self- and peer assessment (Wrate, R. & Forbat, L., 2008).

The long-standing profession of nursing has seen a wave of changes transform its training process, many of them driven by research findings originating from other professional fields. It is interesting that nursing, like the social care profession, may be said to incorporate to a greater or lesser extent many of the components of the counselling relationship. The status of nursing as a profession and an academic discipline has been significantly enhanced in recent years (Lees, 2009). Timmins (2006) proposed the application of critical practice in professional healthcare and recommended that health professionals exercise skills such as critical analysis, critical action and critical reflexivity to meet the challenges of professional practice. Critical practice requires nurses to respect others as equals in order to address the power imbalances that prevail in healthcare settings and to adopt a 'not knowing' approach so as to be able to work with openness (Timmins, 2006). This is very much in alignment with the definition of the counselling relationship and seeks to delineate the skills necessary. First, critical analysis would enable nurses to question practice and examine the strengths and weaknesses of theories that form the foundation of practice and local policies (Timmins, 2006). This necessitates the importance of evidence-based practice, not just in terms of the medical model, but also in terms of theories of care. As Timmins (2006) stated, nurses often value the need for implementation of an evidence-based practice yet lack the authority to introduce such a change. Second, the critical action approach might serve to empower the nursing profession and patients alike, and to improve the quality of information provided to patients (Timmins, 2006). Third, the skill of critical reflexivity is defined as the method of questioning one's own beliefs and assumptions in order to further both personal and professional practices; in essence, this latter skill is reflexivity, and it may be argued that an individual's capacity for the prior two skills hinges upon their acquisition of critical reflexivity. Again, it is interesting to note that this capacity is somewhat assumed and is not sufficiently unpacked or critiqued.

Within the field of social care, Satka and Karvinen (1999) argued not only that social work requires adequate and immediately applicable practical skills, but also that it represents an expert activity in which a social worker's intellectual and moral capacity plays a vital role. Anastas (2010) opined that social work education includes not only classroom instruction, but also field instruction and advising. Furthermore, Mumm and Kersting (1997) consider critical thinking skills (which are important for good decision-making) to be an essential component of social work education – and, echoing the importance of critical reflexivity within nursing education, they also proposed that understanding how theory can be applied to practice depends on critical judgment, which is why the ability to think critically is considered important within social work training and practice settings alike. These theorists suggested an approach for teaching critical thinking in social practice that incorporated

many of the more traditional adult education methods, such as (1) reading assignments to help trainees understand the components and purposes of prescriptive and descriptive social work theories; (2) lectures to help trainees learn the major components of theory and how each theory will guide social work practice; and (3) in-class discussions to encourage trainees to think critically about applying theory to practice. However, the skill of critical thinking is conceptualised as developing successfully within this framework, such as by setting assignments in the form of theory-driven case assessments and critical analysis of theory assumptions (Mumm & Kersting, 1997). Again, it is of interest that the skills of problem solving are considered essential in the development of reflexive skills. For example, 'reasoning in practice' games can be used to show how good decisions are based on logical reasoning and poor decisions on flawed reasoning (Mumm & Kersting, 1997).

It has been proposed that adult learners become ready to learn if they feel that such learning would help them to deal more effectively with their real-life tasks or problems (Fidishun, 2000). Fidishun (2000) concluded that educators should facilitate reflective learning opportunities that will enable trainees to examine prevalent biases or habits on the basis of their life experiences whilst also providing them with a new perception of the information presented. As Latta (2007) stated, creating a technical how-to manual for teaching is impossible because educators must employ implicit knowledge of process and content as they live through learning situations. The question for this thesis is whether this implicit knowledge base can be made more explicit. The importance of this cannot be overestimated, given that reliance on one's own internal bearings is not considered a reliable evidence base (Latta, 2007), particularly considering both the concept of the wounded healer and the vulnerability of the other within the counselling relationship.

## **2.2 Reflexivity in Child and Adolescent Education**

*Children have real understanding only of that which they invent themselves, and each time that we try to teach them too quickly, we keep them from reinventing it themselves. (Piaget, 1972)*

Child and adolescent education is a matter of continuous and vigorous debate, resulting in a system that shifts between static and fluctuating. As Epstein (2003) observed, one of the more recent developments in the field has been greater emphasis on improving children's reading and mathematics skills in order to meet ever-rising academic expectations. Interestingly, it may be observed that children's observable skills (e.g. literacy and numeracy) may serve as indicators for levels of reflexivity. For example, research has shown that children aged three to six are able to make thoughtful decisions about their behaviour as well as enthusiastic observations about their surroundings, which establishes the importance of promoting children's broader thinking abilities

(Epstein, 2003). These abilities shape a child's development and help them learn to make decisions, control their own behaviour, meet difficult challenges, and take accountability for their actions (Epstein, 2003). Describing planning and reflection as 'thoughtful activities', Epstein (2003) explains the fundamental role of planning and reflection in child education and suggests that these tools aid in the development of artistic and social competencies, beyond the traditional remit of educational attainments.

Reflection has emerged as one of the most popular concepts in education today (Grossman & Williston, 2001). The previous chapter sought to present current definitions of reflexivity, yet a further definition may be considered in respect of child and adolescent education. Dewey (1933, as cited in Hsieh et al., 2011) defined 'reflection' as an active, continual, and careful consideration toward self-constructed knowledge. Later scholarship has added that reflection is generated through one's experience, thinking, assessment and exploration of issues, opinions, feelings or behaviours (Carver & Scheier, 1998, as cited in Hsieh et al., 2011). Reflection has also been defined as a learning process that enables students to express and appraise their attitudes and feelings while also expanding their learning cognition; additionally, it is believed to be intimately related to a holistic conception (Chirema, 2007; Ladewski et al., 2007; Ward & McCotter, 2004). Furthermore, reflection may also be conceptualised as giving students opportunities to scrutinise the knowledge they have acquired (Etkina et al., 2010).

In a classroom setting, reflection is commonly found to result from teacher–student interactions triggered by questions that stimulate students' reflective thinking (Davis, 2000; Ladewski et al., 2007). Lee and Chen (2009) reached a similar conclusion, suggesting that higher-level questions that encouraged reflection resulted in deeper understanding. Reflection has been identified as a meta-cognitive process that enables the study and exploration of constructed knowledge and experience (Dewey, 1933; Boyd & Fales, 1983, as cited in Hsieh et al., 2011). As such, reflection is a high level meta-cognitive activity that may be assumed to require a very specific skill set (Gill & Halim, 2006). Because reflection promotes critical thinking (Gill & Halim, 2006), it follows logically that critical thinking, metacognition and reflection should be tied by the same thread. This, in turn, implies that the teaching methods that help to improve a child's metacognitive abilities and critical thinking will work to improve reflectivity as well.

The concept of scaffolding has gained currency within the field of educational psychology for adults, literacy and numeracy, and early childhood education (Verenikina, 1998). Vygotskian socio-cultural psychology and the zone of proximal development (ZPD) have been commonly identified as the theoretical groundwork for scaffolding (Verenikina, 1998). Introduced by Wood et al. (1976), ZPD has been variously applied in educational research and practice (Verenikina, 1998). The scaffolding



metaphor also describes the way teachers or peers supply learning tools to the students (Verenikina, 1998). In the wider literature on scaffolding, Greenfield (1984) studied the common features of informal instruction in different settings and recognised some common elements of 'teaching', namely: (1) the degree of scaffolding is adjusted to the current skill level of the learner; (2) the level of scaffolding falls with the rise in the learner's skill level; (3) a learner at a particular skill level is likely to gain greater support if the difficulty of the task increases; (4) scaffolding is packaged with shaping (i.e. the method involves local correction and aid in response to the student's performance); and (5) scaffolding is ultimately internalised, which facilitates independent skilled performance. Furthermore, according to Mercer and Fisher (1993, as cited in Wells, 1999), to be considered scaffolding, a teaching and learning event should: (1) enable a student to complete a task that they would not have been able to handle on their own, (2) be dedicated towards building competencies that will ultimately help the learner complete a task on their own and (3) be accompanied by proof of development of greater competence that resulted from scaffolding.

Based on the works of Hogan and Pressley (1997), Lange (2002) has proposed five methods of instructional scaffolding: (1) modelling of desired behaviours, (2) providing explanations, (3) encouraging student participation, (4) verifying and elucidating student perceptions, and (5) inviting clues from students. These methodologies of scaffolding are very interesting because they suggest a framework for the early development of reflexivity, and it is within similar literature that one may begin to understand one of these processes. Read (2008) advanced the notion of combining drama and storytelling techniques as effective measures for strong and flexible scaffolding. In his supposition, drama and stories generated a strong influence on children, and different storytelling and drama techniques enabled children to develop and discover their own learning styles (Read, 2008). This notion is of particular interest given its focus on understanding the differing narratives of others – that is, alternating perspective between the self and other – and as such may well exemplify how reflexivity is developed within child and adolescent education.

Metacognition has been a major topic of research in cognitive psychology for nearly three decades (Metcalfe & Shimamura, 1996), evincing a growing acceptance that metacognition (or self-awareness, including awareness of ourselves as learners) helps catalyse more effective learning (Scottish Consultative Council on the Curriculum, 1996). This trend mirrors the earlier theories of Vygotsky (1962), one of the first researchers to recognise the value of conscious reflective control and deliberate mastery in school education, and who concluded that students must reflect on the types of thinking that have occupied them and consciously identify the processes that have either supported or hindered their progress. The research on metacognition within child education has consistently indicated that metacognition is an essential developmental component of the evolving mind. In essence, prior research on education sought to take account of metacognition with a

recognition that all educational competencies – academic, social and emotional – are interdependent on the child's capacity to acquire and develop the skills of metacognition, which play a part in every task, from the simplest to the most complex. For example, early literature found that intervention strategies based on metacognitive principles were highly successful in improving performance on a series of academic tasks (Reeve & Brown, 1984), including written composition skills (Bereiter & Scardamalia, 1982). It is worth noting that researchers at this stage were equally interested in the improvement of metacognitive skills and that Scardamalia and Bereiter's wide-ranging research on teaching metacognitive processes in the educational framework supported the fundamental role of an interactive approach in the improvement of metacognitive skills (Bereiter & Scardamalia, 1982; Scardamalia et al., 1984).

The early research on metacognition is valuable because it was then that theorists began to unpack the factors necessary for acquiring and developing metacognition. Bereiter and Scardamalia (1982) noted that the role of the other is imperative in the development of the self; Reeve and Brown (1984) suggested that the improvement of conscious self-recognition, which is essential for the efficient use of metacognitive skills and can be taught – provided the educator takes into consideration the student's entry skill level; and others have concluded that metacognitive skills may depend on task type (Brown et al., 1983; Chi, 1981), which implies that different intervention procedures may be needed for each child. According to Bloom (1984), educational researchers found it challenging to design group teaching techniques that were as effective as one-to-one tutoring. However, this does not mean that group settings are inherently unsuitable for conducting interventions (Reeve & Brown, 1984); indeed, Palinscar and Brown (1984) established that reciprocal teaching methods can be applied effectively in a group classroom setting to develop the metacognitive skills of children with different skill entry levels. These early studies largely sought to understand the components of metacognition and preceded a wealth of empirical based research on the teaching and learning methods for metacognition in child and adolescent education.

The inquiry-based learning approach, which exerted tremendous influence on science education, came into existence during the discovery learning movement of the 1960s. Hmelo-Silver et al. (2007) cited several studies that shared positive views on constructivist problem-based and inquiry learning methods. Problem-based approaches enabled students to learn by solving problems and by reflecting on their experiences (Barrows & Tamblyn, 1980, as cited in Hmelo-Silver, 2004). Indeed, these approaches served a dual purpose by helping students to develop strategies while also building their knowledge base (Hmelo & Ferrari, 1997, as cited in Hmelo-Silver, 2004). In practice, problem-based learning is an interactive and shared process whereby students are organised into small groups that collectively acquire the knowledge needed to solve a problem (Hmelo-Silver, 2004). The teacher acts as a facilitator who guides student learning throughout the learning cycle (Hmelo-



Silver, 2004). The problem-based learning process begins with (1) problem identification, which leads to (2) discursive interaction culminating in (3) a solution; finally, the process ends with (4) student reflection (Hmelo-Silver, 2004). It is notable that the problem-based learning process can be viewed as a cyclical approach because the process of reflection may be said to inform the commencement of the next problem-based learning task. This type of cooperative learning requires students to work in groups and complete tasks through a collective effort, thereby enabling students to take advantage of one another's skills and resources (Chiu, 2000). These metacognitive skills of group problem solving and decision making mirror the teaching strategies within adult education settings and thus suggest that reflexivity may be part of this cyclical process.

Interestingly, the fuel that fires the various belief systems that support the breadth of different educational systems is often characterised as a humanistic principle – difficult to conceptualise, yet often associated with creativity, individuality and sociability. The Austrian philosopher Rudolf Steiner first introduced a humanistic approach to pedagogy known as 'Waldorf education', which emphasises the role of imagination in learning (Nielson, 2004). Waldorf education promotes thinking that includes creative as well as analytical elements (Easton, 1995), and in Waldorf schools, early childhood learning is facilitated through imitation and example (Rist & Schneider, 1979). During the years of elementary education, Waldorf instructors use stories and images to introduce concepts and the methodology includes visual and plastic arts as well as music and movement (Easton, 1997). At this phase, there is little dependence on standardised textbooks, but at the secondary education level, the focus turns to more traditional academic subjects (Rist & Schneider, 1979). Respecting individual variations in the pace of learning, Waldorf education expects that a child will understand a concept or develop a skill when they are ready (Uhrmacher, 1995).

Conversely, and more aligned with mainstream educational institutions, Rogoff (1990, as cited in Rodd, 1999) suggested that children can engage in sophisticated cognitive processes when given appropriate opportunities. As part of the process to develop the most effective strategies to encourage learning in the classroom, researchers turned their attention to particular metacognitive skills, namely the development of children's critical and creative thinking skills (Rodd, 1999). In this process, researchers developed a number of specific programs aimed at the development of children's thinking and learning skills (Rodd, 1999), such as Lipman's philosophy programs, de Bono's CoRT materials, and Feuerstein's Instrumental Enrichment programme (Fisher, 1995, as cited in Rodd, 1999). This acute interest in critical thinking has persisted, with a variety of methodologies and strategies utilised across educational setting, and lively debate continues as to how metacognitive skills are best cultivated. Indeed, for many teachers, it is a continuous struggle to engage learners in critical thinking activities (Tempelar, 2006, as cited in Snyder & Snyder, 2008) and students rarely apply critical thinking skills to address real-world complexities (Rippin et al., 2002,

as cited in Snyder & Snyder, 2008). The instructional methods currently in use may provide an answer to this question (Snyder & Snyder, 2008). Clement (1979, as cited in Snyder & Snyder, 2008) argued that students are taught 'what to think' rather than 'how to think', whilst Snyder and Snyder (2008) made a similar argument in a more contemporary setting, positing that both content and the process of learning carry equal importance for the students. According to Snyder and Snyder (2008), traditional instructional methods such as lecture and rote memorization do not encourage critical thinking, whereas essay questions and case studies allow students to apply their knowledge to new situation; as such, they are to be preferred over objective-type questions or standardised multiple choice assessments (Snyder & Snyder, 2008). Fundamentally, critical thinking allows students to discover information on their own (Snyder & Snyder, 2008) as evidenced by Nokes et al. (2007), who found that students who applied heuristic techniques to solve problems consistently secured higher marks on content-based assessments compared to students who learned by traditional methods such as textbooks and lectures.

In summary, the literature indicates that child and adolescent education lays the foundation for the development of reflexivity, and that this development is dependent on the student's level of metacognitive skills. It is of particular interest that one of the most extensively researched metacognitive skills within this age range is the acquisition and use of critical thinking, namely problem solving and decision-making. However, this is not to say that the educational literature makes no reference to reflection. Indeed, in a discussion on the process of reflective learning, Gill and Halim (2006) proposed that reflection may be actively seen at the point of the student's interaction with new information, because this reflective activity activates mental models and gives birth to a process of inquiry that produces thinking and evaluation. Some teachers find that reflection translates to this process of in-depth learning and adds value when educators encourage student reflections with their contributions by using engaging learning strategies and motivate students to take charge of their own learning instead of relying on authoritative ideas (Gill & Halim, 2006). Most pointedly, Gill and Halim (2006) stated that reflection in education has emerged as a powerful tool for lifelong learning, rather than for immediate education. Nevertheless, the best method to improve learners' reflective ability has yet to be completely unpacked within any educational setting (Hsieh et al., 2011). Indeed, educators of children and adolescents have long been engaged in their own reflective practices, seeking to discover the best methods to improve children's reflexivity.

### **2.3 Teaching and Learning Methods for Reflexivity Within Adult Education**

Reflection is recognised as a vital ability both for learning (Rolfe et al., 2001) as well as professional practice (Adams et al., 2002). Reflective practice seeks to turn professional situations into potential

learning opportunities for the practitioners (Jarvis, 1992) and is strongly associated with long-term professional development and lifelong learning (Rutter, 2006). As discussed in depth in the preceding chapter, Schön (1983, 1987) introduced the term 'reflection-in-action', which he suggested acts as mediator between theory and practice; he also emphasised the role of reflection in transforming knowing-in-action into knowledge-in-action. The amalgamation of theory and practice is no simple application of particular technical skills in predictable practice situations (Fisher & Somerton, 2000); rather, it is a highly reflective experience that generates a professional's own knowledge for practice (Rutter, 2006).

Within adult education, trainers adopt a variety of methods to promote reflexivity. Indeed, the structure of the course itself may serve as a framework for reflexive development. For example, course content and materials that reflect the diversity of lived experience can help promote reflexivity by revealing the multiple dimensions and complexities of human life (Sinacore et al., 1999). Furthermore, the stance of the training team may be useful in modelling reflexivity, provided that the trainers utilise their own reflexive capacity to consider the impact of personal and professional history on their teaching choices (Sinacore et al., 1999). In terms of the more directed methodologies of learning reflexivity, it is widely recognised that traditional classroom teaching methods have been found to be less than effective in preparing learners for the challenges presented by the teaching strategy of reflexivity (Sinacore et al., 1999). More open learning strategies include (1) understanding that learners can develop reflexivity in the class by clarifying what professional and personal knowledge, which directs their perceptions of others' lives as well as their own (Sinacore et al., 1999); (2) utilizing class discussions to generate a way for students to share their understandings of course content and use their personal experience to disclose the points of parity and disparity with course content (Allen & Farnsworth, 1993); (3) giving assignments that encourage awareness of self and others and highlight the significance of academic scholarship (Sinacore et al., 1999); and (4) motivating students to combine course content with lived experience as a means to enable them to question and potentially discard their old conceptions (Sinacore et al., 1999). It also must be acknowledged that within the field of counsellor education, learning and teaching extend beyond the training programme and are necessarily practice-based.

Here it is useful to draw on research on social work training and education programmes. As Taylor and White (2001) asserted, one of the most challenging parts of the social work profession is the need to make judgements about cases: moral questions are inevitable and dangers in moral judgments must be debated. It is within this particular context that the need to utilise reflective practice is integral – and, indeed, ethical. However, similarly to the wider academic community, researchers of social work education have noted that the concept of reflection appears to suffer from a lack of empirical understanding and have expressed concerns on the lack of knowledge about

reflection or how its cognitive processes can enhance learning in the area of social work education (Rutter, 2006). Across the different professions, it is widely acknowledged that the main outcome of reflective learning should be the evolution of the self as a critical practitioner (Adams et al., 2002) and that this is potentially achieved through a continual process of reflexivity.

Due to its emphasis on reflective practice, social work research is held in high regard for its ability to create tools for critical reflection and its role in building the dialogue and discussion forums that reflection requires (Satka & Karvinen, 1999). Historically, social work researchers have highlighted the interrelationships among liberatory practices (Freire, 1973), adult education (Knowles, 1980), experiential learning (Kolb, 1983), and reflective processes for professionals (Schön, 1983); this has been utilised as a comprehensive framework for social work training programmes in addition to supporting lifelong learning (Lay et al., 2006, as cited in Lay & McGuire, 2010). Moreover, critical thinking has been identified as a key skill for social work practitioners (Gambrell, 2005, as cited in Lay & McGuire, 2010) and may be vital for the development of reflection that employs intellectual standards for interpretation (Lay & McGuire, 2010). Knowles et al. (2005) asserted that social work graduate students are motivated by practical knowledge that is linked to their past, present and future experiences – and that, therefore, the academic content must be contextual.

With the aim of incorporating reflexivity in learning process, educators must adopt a liberatory stance towards learners and learning (Roche et al., 1999, as cited in Lay & McGuire, 2010). This approach requires the educator to engage learners in practices for empowerment (Lay & McGuire, 2010). Dialogue is considered to be equally important in the learning process (Lay & McGuire, 2010) and may indeed be the point of access for empowering trainees. However, it is imperative to propose that these concepts of reflection, critical thinking and dialogue are intrinsically linked, because trainees engaged in critical reflection become critical co-investigators in dialogue with the teacher (Freire, 1973). Because the combination of liberatory posture, critical thinking and dialogue among co-learners paves the way for reflexivity (Lay & McGuire, 2010), educators must create assignments that will not only promote critical thinking, but will also provide opportunities for questioning power relations and development of knowledge (Fook, 2002). According to Lay and McGuire (2010), the DEAL model (Ash & Clayton, 2004) provided such an opportunity. According to Satka and Karvinen (1999), however, the actual workplace (i.e. clinical practice) is the best learning environment for social work students who interact with practice teachers and learn to initiate changes in existing work practices.

The need for reflective practitioners in the field of nursing emerged from the multicultural framework triggered by globalization (Torsvik & Hedlund, 2008) and the growing awareness that nurses should be equipped with the necessary competencies to provide a high level of care to patients across the

world (Torsvik & Hedlund, 2008). Under such circumstances, it is vital to acquire new understanding of what promotes reflective thinking in nursing practice (Torsvik & Hedlund, 2008). According to the existing knowledge base on personality, reflection may function as an approach to understanding one's own and others' personalities for better interpersonal relationships. This predicts that the provision of care may improve with greater understanding of personality (O'Reilly & Milner, 2020). Another noteworthy link between reflection and personality is the power of reflective skills in the bond of trust between healthcare professionals and patients suffering from personality disorders such as narcissism (Hallet, 2020), further underscoring the benefits – to professionals and patients alike – of using reflective processes in organizations (Ryan et al., 2019).

A variety of teaching methods have been proposed to help nurses develop reflexivity, including (1) the use of systematic feedback and supervision to provide opportunities for reflecting on clinical practice situations (Torsvik & Hedlund, 2008); (2) utilizing trainers as coaches in cultural competence (Fitzpatrick, 2007); (3) visiting other countries to enable students to acquire cultural competence and new perspectives on global health issues (Parker 1999, Kollar & Ailingner 2002, Walsh & DeJoseph 2003, Sandin et al. 2004); (4) encouraging log entries as a means to support trainee reflection on a patient's problems, methods of nursing, and the type of nursing care required (Torsvik & Hedlund, 2008); and (5) using nursing stories in the process of learning, which has highlighted the importance of promoting systematic reflective thinking (Evans & Bendel, 2004, as cited in Torsvik & Hedlund, 2008). It is posited that such teaching methods promote critical cognitive thinking, understanding and reflection (Fonteyn & Cahill 1998, as cited in Torsvik & Hedlund, 2008). It is of interest that the methodologies employed within nursing and social work education are mirrored within the field of family therapy, where there is emphasis on creating coherence and transparency in the association existing among teacher, model of adult learning, and the subject (Neden & Burnham, 2007). Neden and Burnham (2007) further suggested that, in the field of family therapy, relational reflexivity offered an essential 'method' to invite learners into a dialogic relationship with the knowledge provided by the training programme.

Trainees in the field of counselling and psychotherapy are trained to learn reflective practices for professional development (Knapp et al., 2017). The development and inclusion of reflective processes help the students (Quiñones et al., 2017) deal with issues related to a particular aspect (McDonald et al., 2018). In trauma healing cases, while dealing with the survivors, therapists who apply reflective skills have been shown to possess competency during trust-building, displaying emotional expression and compatible attachment style (Anvari et al., 2019). Apart from developing a working alliance as the first step of therapy and counselling, reflection helps motivate individuals in almost every area of their lives (Pack et al., 2019).

One of the aims of reflection is to facilitate a deeper understanding of clients' psychosocial perspectives (Losey & Norman, 2016) whereby the clinician can focus on differences that may significantly influence the quality of the counselling process and outcomes, as well as the quality of interventions (Pérez-Rosas et al., 2019). Studies have consistently shown that engaging in reflective practices positively impacts trainees' confidence, skills and knowledge (Bennett-Levy & Finlay-Jones, 2018; Chen & Giblin, 2017; Ivey et al., 2017). Indeed, one qualitative study found that trainees' perceptions of their own reflection skills, as well as counselling and therapy competencies, improve as the learning processes progress, perhaps also indicating the importance of self-efficacy in the learning environment (Davis & Pereira, 2016).

In McAuliffe's work on constructivist and development education strategies for counsellors, trainees reported that their reflexivity was significantly enhanced by observing co-learners during their thinking and idea generation process (2002). Alongside this teaching strategy, McAuliffe (2002) further suggested the introduction of multiple viewpoints within the learning process in order to enhance reflexivity as this exploratory mode offset trainees' tendencies to thoughtlessly depend on authority for solutions to problems. In essence, McAuliffe (2002) proposed a teaching and learning approach to enhance learners' reflexivity by working to engage trainee counsellors in an open-ended mental search to explore possibilities and instructors who helped students identify the 'personal' sources of their knowledge through the process of showing doubt and thinking 'out loud'.

Collaboration between teachers and students in supervision plays a supporting role in learning and teaching reflection processes (Higgins et al., 2018). Furthermore, according to Gordon (2019), educational supervision is necessary for professional growth; therefore, reflection skills must be promoted to achieve success in personal life and career (). Many recently introduced approaches to enactment seek to improve supervision of trainees' reflection skills, including dialogic spaces and educational opportunities during mentorship (Grimmett et al., 2018). Roleplay and skill demonstrations are powerful tools in the hands of teachers and supervisors to facilitate the reflective process (Kennedy, 2018). The objective is to develop a supervision space as an intervention that induces reflection upon one's own professional competence (Jorge, 2019). Individuals may perceive the role differently; practice is the key to opening the doors for the growth (Mårtensson et al., 2016). Another concern in supervision is to give exposure to learning considering the cultural values of trainees and clients (Willey & Magee, 2018). One should pay attention to teaching reflection based on the present situation, advancements and needs of the person with whom a supervisor is dealing or teaching to deal with (Jiang et al., 2016). Reflection aids healing with or without supervision (Messina et al., 2018). On the other hand, interpersonal conflicts with team members or supervisors may lead to stress (Cassidy et al., 2019).



Beyond teaching techniques, educators must create coherent and reliable assessments for experiential and reflective learning, such as by providing practical instructions and examples of work to interpret the available evaluation criteria (Rutter, 2006). However, Rutter found that social work students experienced difficulty expressing reflection (2006). Moon (2004) stated that educators should start by drawing a distinction between reflective assignments and traditional essays; the former requires more intensive questioning, challenging and input from the work of others to achieve greater increases in critical reflection (Rutter, 2006).

To conclude, teaching and learning techniques that seek to achieve critical practitioner status are not well studied within the literature, possibly because the notions of developing practice and learning are inseparable (Rolfe et al., 2001) and because reflecting on the self is an individual process of, which builds reflective competencies (Rutter, 2006). Interestingly, the available literature indicates some of the potential costs and limitations of reflexive learning. First, reflection may give birth to new understandings, but reflecting on practice may also provoke anxiety in many individuals (Rutter, 2006). Second, Hargreaves's (2004) research within the nursing discipline suggested that good performance is not necessarily associated with overt reflective behaviour. Third, within the social work training, Rutter (2006) proposed that students who adopt reflective practice do so only retrospectively for appraisal and not as a vital part of their continuing learning.

According to Huntington and Moss (2004), reflection cannot – and, thus, must not – be avoided within the present-day educational setting. The notion of reflexivity, in its many guises and terms, is intrinsically woven into the philosophy of counsellor training programmes and the accompanying learning, teaching and evaluation strategies (Rutter, 2006). Thus, this thesis aims to contribute to the definition, understanding and application of teaching and learning methods of reflexivity – not with an absolutist or impossible aim of defining in the absolute sense, but rather with the 'good enough' frame of relationships whereby reflexivity understanding is moving towards its most useful, yet with room for continued evolve in its teaching and learning. As Callahan and Watkins (2018) emphasised, clinical training is a 'system-level intervention into the mental well-being of a society which should be evidence-based, just like any other intervention'. Thus, the teaching and learning of reflexivity as a fundamental component of clinical training programmes must be rigorously evidence-based for the benefit of trainees, trainers, clients and society as a whole.



## 2.4 Summary of Research Focus

In summary, within the existing body of research, the relational models of reflection in counselling and counselling psychology have their foundations within the fields of psychology, social work and education. As explored within this introduction, Schön's (1983) seminal writing on reflexivity explored the concepts of reflection-in-action and reflection-on-action which are pivotal components within the relational models of reflexivity as they uphold the process as both a present action and also one that requires retrospective exploration. Later theorists, such as Aron (2000) and Adams (2003, 2006) expanded this notion of retrospective exploration in their work around the reflexivity of self as situated within the social and cultural domains. Indeed, within their cross-disciplinary work, Fook & Gardner's (2007) critical reflection model served to further illustrate how this worked within practice by encouraging practitioners to critically reflect on how power dynamics, social structures, and personal biases could be understood and inform their practice.

As outlined within the introduction, there are multiple relational models of reflection. Some which serve to guide the nuts and bolts of reflection-in-action (Ash & Clayton, 2004; Fook & Gardner, 2007;); some which are purely theoretical models focusing on the reflection-on-action (Aron, 2000); some where the theory and practice is integrated (Adams, Dominelli & Payne, 2002; Kolb, 1984); and others that offer models specific to their fields within all these areas (Callahan & Watkins, 2018). Against the background of these existing relational models, the concept of reflexivity behind them still emerged as not fully known within the literature. As such, the relational model of reflexivity is conceptualised as a framework which contains within it a multitude of interlinked theoretical and practical models.

The aim of this research was to explore the concept of reflexivity through a novel phenomenological mixed methods study, focusing specifically on the depth of experiences possessed by trainers and the breadth of information held by trainees. The nature of the research questions were firmly rooted in and guided the choice of a phenomenological mixed methods research approach. In particular, the research questions sought to further understand the overarching framework of reflexivity within this specific context; the components that may facilitate or limit reflexivity; and explore the teaching and learning methodologies that may be most beneficial to reflexivity. The research questions were:

1. What is Reflexivity?
2. What helps develop Reflexivity?
3. What do you need to teach and learn Reflexivity?

## CHAPTER 3: Methodology

### 3.1. Phenomenology, Epistemology and Ontology

It is particularly important to this researcher to explore the concepts of phenomenology, epistemology and ontology as they provided the overarching framework for this thesis on reflexivity, and therefore informed the process and content throughout the research process as a whole. Phenomenology, epistemology, and ontology are, of course, foundational concepts primarily in the field of philosophy, although they are widely relevant to and utilised within other fields including psychology. In summary, each of these concepts addresses distinct aspects of knowledge and existence and yet they are all intricately interconnected (De Santis et al., 2021).

Firstly, phenomenology, founded by Husserl (1913, as cited in De Santis et al., 2021), was interwoven deeply within this mixed methods research in its focus on the study of the lived experiences from the intimate first-person perspective. In line with phenomenology, this study sought to understand how individuals perceived and made sense of their experiences. From this initial conceptualisation of transcendental phenomenology, the later re-conceptualisation of this concept in the form of hermeneutic phenomenology (Heidegger, 1927, as cited in De Santis et al., 2021) was also deeply embedded within this study in its interest in participants within the context of their own social and cultural worlds, both more personally and professionally.

Secondly, the introduction of hermeneutic phenomenology led phenomenology in a new direction which had a stronger focus and link with the field of ontology. Thus this mixed methods study sought to not just observe the participants from a detached objective viewpoint but always from within their own contexts. As Brakel (2013) outlined, ontology may be defined as a field that seeks to question what entities exist and how such entities can be grouped or related within a hierarchy according to their similarities and differences. In simple terms, ontology is about what things are and how their existence is conceptualised thus my ontological view from my personal and professional background is concerned with the fundamental nature of what it means for an individual to exist in the world and is grounded in the belief that reality is multi-layered and multi-dimensional. As such, my experience and my view on the experiences of others is that they are deeply subjective yet interconnected, and bi-directionally informed within the broader contexts of our own worlds. My researcher stance was that the essence of an individual's reality cannot be fully comprehended through quantitative measures alone, nor can it be entirely captured by qualitative narratives. Indeed, I believe one would miss invaluable data for this study within a singular model. Thus my beliefs are that the nature of existence is best understood through a methodological pluralism that respects and mirrors the complexity of life and indeed the complexity of the systems within which life takes place. These

beliefs laid the foundation for the nature of this research and thus provided the rationale for using phenomenological mixed methods research. Therefore, I utilised quantitative data with the knowledge that there are observable patterns and that there was value in identifying those patterns in order to serve my research aims. In addition, qualitatively, I immersed myself into the lived experiences and the personal meanings that shaped the trainers' realities which are, of course, not quantifiable. My phenomenological and ontological positions informed my research design, prompting me to seek convergence and complementarity between statistical data and personal subjective stories to construct a more nuanced understanding of reflexivity within clinical training programmes.

Thirdly, epistemology also played a significant role within the framework of this thesis. According to Audi (2010), epistemology is the study of knowledge and understanding which seeks to ask fundamental questions around the nature and the scope of knowledge. For example, what is knowledge and how is it acquired? It is notable here that the research question directly reflected these epistemological concerns in its emphasis on understanding reflexivity further in the context of clinical training programmes. In reference to epistemology, this study explored the historical and current conceptualisation of reflexivity both theoretically and in practice, and then sought to understand this in relation to the specifics of trainers and trainees within counselling and counselling psychology training. In so doing, this research examined the processes through which the knowledge around reflexivity was constructed, including its definition; its process; and its relationship to other constructs. As a counselling psychologist researcher who employed mixed methods, my epistemological stance is one that included both the quantifiable known aspects and the qualitative knowing of personal experiences. In summary, I believe that knowledge is multifaceted and that a comprehensive understanding of reflexivity could only be achieved by integrating objective data within the longitudinal study with the subjective narratives from the IPA interviews. Therefore, my epistemic approach is pluralistic, acknowledging that both objective and subjective knowledge contributed to a more holistic and collaborative understanding of the participants within this thesis.

In conclusion, through my informed choice to use phenomenological mixed methods research, this thesis reinforced its interest into the realities of both trainers and trainees within this context, as it combined the consistent repeatability of quantitative methods with the depth of qualitative phenomenological understanding; both providing rigorousness to this study. This philosophical understanding led to the development of this comprehensive phenomenological mixed methods framework.

### 3.2 Positionality Statement

My interest in reflexivity is rooted in a deep engagement with various aspects of my 'self'. This includes my personal understanding of self-identity; the interplay between self and others; the recognition of the self as a composite of numerous identities; and the dichotomy of being distinct yet interconnected with others. My experience has been a constant movement between being in spaces similar to myself and being in spaces created by the majority other. As Baysu & Palet (2019) explored, dual identities may be conceptualised as dual commitments to the majority and minority cultures and indeed the majority culture may often be complicated by presumption and privilege (Pollitt et al., 2021). Interestingly as I have moved from child to adult, and young adult to older adult, I have found that there are more of these spaces as my identity has expanded, particularly around the differentiation of experience, such as ableism (Dirth & Branscombe, 2019) and sexuality. Thus this overarching understanding of multiple identities and multiple spaces informed my choice to engage in phenomenological mixed methods research which sought to both broadly and deeply examine reflexivity. One such example is that as a second-generation UK immigrant and the first generation in my family to not only attend university but also to work within the middle class professional sphere, my journey has been one of holding multiple identities (Pittinsky, Shih, & Ambady, 2002) and bridging worlds (Wiley, Fleischmann, Deaux, & Verkuyten, 2019).

This unique vantage point is the foundation upon which I constructed my research. Malterud's (2001, pp.483-488) statement "a researcher's background and position will affect what they choose to investigate, the angle of investigation, the methods judged most adequate for this purpose, the findings considered most appropriate, and the framing and communication of conclusions" resonates deeply with me. My heritage and subsequent life experiences with both visible and non-visible differences, which as Santuzzi et al. (2019) noted often require more effortable behaviours in the workplace, has given me a lens that is acutely sensitive to the nuances around the continued development of the self; the self's relationship with others; the social, cultural and political systems at play within identity; and the role of reflexivity as a catalyst for intrinsically connected personal and professional growth (Newheiser, Barreto, & Tiemersma, 2017). To note, sensitive is here used in a positive context as I believe it should always be. I have been mindful of Hsiung's (2008) explorations on reflexivity, which calls for self-examination of my "conceptual baggage" (Kirby & McKenna, 1989), i.e. my own assumptions, beliefs and preconceptions. This introspection has been critical as it has influenced every part and process of my research, from its philosophical foundations to framing my research questions and to engaging with participants through diverse methodologies.

My research in reflexivity is an apt mirror of my life's narrative, informed by nearly 30 years (from my initial reflexivity training as a ChildLine volunteer when I was 18) of diverse professional experiences

across mental health and educational settings. These experiences, from working within mental health organisations and universities have enriched my understanding of reflexivity's multifaceted nature. Academically, my journey through counselling and psychology has been marked by an evolving interest in the human mind and behaviour, leading to a specialisation in counselling psychology. This academic path has equipped me with theoretical knowledge and research skills, while also instilling a critical appreciation for evidence-based practices. Thus, my research has been guided by a commitment to scientific rigour, alongside an awareness of the complexities and subjectivities inherent in all psychological research which led to my choice of a mixed methods design.

Further, informed by my own personal and professional non-majority experiences, I have purposefully made professional choices to work with clients from varied backgrounds, including children who are disempowered; those with intellectual disabilities; neurodiverse clients; and children with visible differences (disfigurements), which has served to highlight the uniqueness of each individual's story to me. This experience has been pivotal in shaping my research perspective, which has emphasised the importance of intimate, subjective approaches whilst also understanding the need to ensure that my research was also broad enough to provide generalisability.

In my research, I am particularly conscious of the potential biases stemming from my own background and experiences, just as I have aimed to be within both my personal and professional lives, therefore I have actively continued my reflective process throughout this research process. It is therefore important to note that, just as my participants sit within their own broader social and cultural contexts, so do I, and by extension so does this research. Thus I have managed this significant aspect by continuing my journey of reflexivity through acknowledging my biases and individual perspectives and by integrating them into the process of research through many means, including keeping a reflective journal; engaging in regular reflexive research supervision both with my supervisor and externally; and presenting my thesis at various stages to professional audiences with an emphasis on critical feedback. It is noteworthy that my understanding from my personal and professional experiences of bridging different spaces and worlds informed my choice of utilising a phenomenological mixed methods approach as, the process itself, bridged the quantitative and qualitative worlds to engage with the participants in a way that more fully explored and mirrored the complexity of reflexivity.

### **3.3 Phenomenological Mixed Methods Research**

This thesis on reflexivity sits within the framework of a phenomenological mixed methods approach which is an innovative approach that combines the subjective depth of phenomenology with the objective breadth of quantitative methods, and thus provided the most opportunity to explore the

complex concept of reflexivity. As Moustakas (1994) originally noted, phenomenological research methods have been an essential tool across multiple academic fields in investigating the subjective, in-depth exploration of human experiences as central to phenomenology. In more contemporary literature, phenomenological research methods have maintained and indeed strengthened their substantial place through significant and meaningful findings across disciplines (Hoffding & Martiny, 2016). In parallel, contemporary approaches have also propositioned and examined the use of phenomenological mixed methods approaches. As Martiny et al. (2021) stated, the relevance of phenomenological mixed methods in contemporary research lies in its' ability to bridge the worlds between qualitative and quantitative paradigms, enabling researchers to capture the richness of human experience, i.e. the phenomenological aspect, while simultaneously allowing for generalisability and replication of the results, i.e. the quantitative aspect. Therefore in this study, each part informed the other and provided more than the sum of its parts in its integrative findings on reflexivity.

This integrative phenomenological mixed methods approach is particularly significant in many fields, particularly counselling and counselling psychology, where understanding the subjective human experience is, in my view, as crucial as measuring outcomes quantitatively. For example, in counselling and counselling psychology research, this research approach has been continuously utilised to explain and clarify client experiences (qualitative) alongside clinical outcomes (quantitative), which in turn has offered a more comprehensive understanding of the outcomes of clinical interventions. Similarly, in education and teaching research, phenomenological mixed methods approaches are also repeatedly utilised to understand students' lived experiences around education alongside quantifiable academic outcomes, which has provided outcomes that neither approach could achieve alone.

As Creswell (2022) noted, the selection of the research approach stems from the researcher, the nature of the research question and indeed the intended audience. Within this specific research framework on teaching and learning reflexivity, a phenomenological mixed methods approach was chosen as it complemented the researcher's philosophical framework; it complemented the complex nature of the study's topic; and it also addressed some limitations that would have arisen through the use of purely qualitative or purely quantitative methods. As Creswell and Plano Clark (2017) stated, phenomenology's deep engagement with participant experiences can sometimes lack generalisability, while quantitative methods might overlook the nuanced, subjective aspects of human lived experiences. By combining these approaches, this phenomenological mixed methods approach enabled a more balanced and inclusive research study (Creswell, 2022), which is of particular importance both to the researcher and also the research question.

Therefore this study adopted a thoughtful design where the researcher's philosophical underpinnings informed the very framework of the thesis and are embedded into the research question, the methodological choices and data generation, and finally guided the integrative discussion. As Martiny et al. (2021) stated, this framework approach was required to ensure methodological rigour which involved clearly outlining the phenomenological aspects (i.e. the thematic analysis of the IPA trainer interviews) and the quantitative components (i.e. the statistical analysis of the longitudinal data of the trainees), ensuring that each complements the other. Lastly, the presentation of integrated findings within the discussion posed a challenge to the researcher, as it required a cohesive narrative that combined the depth of qualitative insights with the breadth of quantitative data. Within this study, this necessitated a high level of skill in data interpretation and the ability to communicate integrative multidimensional results effectively. Indeed the very existence of the developing and evolving nature of phenomenological mixed methods research reflects an increasing recognition of the multifaceted and multidimensional nature of psychological concepts and the need for diverse methodological frameworks and approaches to more fully understand them (Martiny et al., 2021).

Now there has been an exploration of phenomenological mixed methods research and the rationale for its use within this research, it is important to explain the process of phenomenological mixed methods research as it related to this study in particular. The use of this approach involved a multifaceted process that included several distinct stages within this study, all of which were crucial as stepping stones to the next stage and to the research's outcomes around reflexivity. As explored by Martiny et al. (2021), the process started with stage one where a thoroughly crafted and thoughtful research design, led by the complex nature of reflexivity, laid the foundation for how the qualitative and quantitative methods of analysis occurred broadly concurrently and eventually informed the integrated discussion. Thus the researcher chose a broadly concurrent design where both qualitative and quantitative methods were conducted without one informing the structure of the other, which allowed for a more dynamic interaction of the data in line with this phenomenological approach.

The next stage was the collection and analysis of the quantitative and qualitative data. For the former, a longitudinal study gathered measurable data from trainees that through statistical analysis provided patterns of data which shed light on the research questions. This stage was critical in providing a broader and more generalisable understanding of reflexivity in relation to the trainees. For the latter, this involved employing Interpretative Phenomenological Analysis to conduct and analyse in-depth semi-structured interviews with the trainers, as this method enabled the researcher to deeply focus on the participants' subjective lived experiences, which served to capture the nuances and complexities that the quantitative longitudinal study might have overlooked. Each approach provided a counterbalance and complemented the other; thus qualitative and quantitative analyses here were mutually enhancing.



The most significant stage for this research was the integration of findings from both the qualitative and quantitative phases into an integrative discussion. As Martiny et al. (2021) stated, this stage required a reflective synthesis of all of the data in order to ensure that the depth of the qualitative insights mutually informed the breadth of the quantitative data. As a researcher, it was necessary to approach the integration of the data with skill, of course, but also sensitivity, ensuring that the integrity of both data types were maintained, particularly given the very personal nature of the IPA, and that the combined findings offered a comprehensive understanding of reflexivity. Thus this final stage in the phenomenological mixed methods process involved the integration of the results within the discussion, further informed in reference to the existing literature, which provided a joint contribution in answering the research questions around reflexivity.

### **3.4 Methodological Ethics**

This section will discuss the management of the methodological ethics in relation to this thesis in terms of the ethical steps taken by the researcher both in terms of the wider framework of using a phenomenological mixed methods approach and in terms of the processes of the study on reflexivity itself. The researcher was fully aware that phenomenological mixed methods research posed particular ethical challenges, primarily due to the deeply personal nature of qualitative data within the IPA interviews, and the integration of this with the quantitative methods. The researcher addressed the potential ethical challenges involved by adhering to established ethical guidelines and best practices in mixed methods research (Teddlie & Tashakkori, 2015). In particular, as Poth (2018) stated, the integration of data within mixed methods research should respect the ethics of both qualitative and quantitative methods.

First, the researcher gained ethical approval for this study on reflexivity from Goldsmiths, University of London. The process included submitting a comprehensive research proposal to the university's ethics review board which outlined the research objectives, methods, and potential risks to both sets of participants. This approval process and the researcher's adherence to the ethical standards outlined in the proposal ensured that this research adhered to ethical principles throughout as well as respecting and safeguarding participants' rights, and upholding the highest standards of research integrity.

Second, in the journey through this mixed methods study, the researcher diligently adhered to the BPS ethical guidelines (British Psychological Society, 2021) that outlined responsible research practices. These principles guided every aspect of the research, ensuring that the study was

conducted with integrity and respect, and also prioritised the dignity and rights for all of the qualitative and quantitative participants.

In particular, the area of informed consent in this mixed methods study required careful consideration. This was managed by the researcher ensuring that participants were fully aware of the research's nature, including the implications of mixed methods integration and how their data would be used initially within either the qualitative and quantitative analysis and then how their data would be further utilised within the discussion, which was based on an integration of the qualitative and quantitative results. The process here included the researcher maintaining clear communication about the study's purpose, the methods, and the potential risks and benefits as part of the process of informed consent which the participants agreed upon within the consent form. Therefore, the researcher ensured here that informed consent processes were robust and transparent, and also clearly explained the research's mixed methods nature in terms of how participants' data will be used in both qualitative and quantitative analyses.

In addition, the researcher ensured that confidentiality was rigorously maintained, and the potential impact on all of the participants was always conscientiously considered. The data was confidential but not anonymous because (1) the qualitative interviews were face-to-face interactions, and (2) the longitudinal study necessitated that the data between Years 1 and 2 needed to be matched; thus, the researcher was aware of the participants' names and references numbers. All data was treated in accordance with the Data Protection Act 1998 (DPA, 1998) and the General Data Protection Regulation (GDPR) in 2018. Therefore, in terms of confidentiality, all participants in the study were given a unique alpha-numeric study code to ensure confidentiality and any materials that had identifiable information such as name, age and email address were kept separate from other study materials such as test measures, audio-recordings, interview transcripts and questionnaires.

In terms of the qualitative study, there was an additional ethical concern around ensuring participant confidentiality especially when dealing with the sensitive personal experiences of the trainers. In light of this aspect of the mixed methods approach, it was especially important that the integrity of the phenomenological aspect was maintained through the use of rigorous ethical considerations around confidentiality and informed consent. As Poth (2018) noted, qualitative data from interviews can often be rich in detail making anonymity challenging, particularly in respect of these participants who might well share professional and personal spaces with other participants or indeed other readers of the research. Therefore, the researcher was stringent in using strategies to protect identities, such as using pseudonyms or carefully editing data excerpts in terms of identifying data such as locations.

Further stringent measures were also implemented to ensure secure data storage and the appropriate use of anonymisation and encryption to protect the participants' personal data in line with the relevant professional bodies and organisations as mentioned above. This served to safeguard the participants' information throughout and beyond the study, and also maintained the highest ethical standards throughout the research process.

The NHS advises that if the research is to be published, most scientific journals require original data to be kept for five years. As it is the intention of the researcher to publish articles reliant on the generated data, the data will be stored for five years following the final publication. Participants were fully informed of this within the Consent Form and consent for publication was diligently sought. Participants were informed that they could withdraw from participation at any time during data collection which did not occur. If participants had wished to retroactively withdraw their data, the researcher had placed steps in place to manage this safely for the participant which would have included having a meeting with the participant to sensitively and transparently communicate the potential consequences of this withdrawal on the project and to explore the possibility of retaining data if the participant's specific concerns could be addressed. It should be stressed here that respect for the participants would have been paramount.

The well-being of all participants was of course the primary priority. All participants were either trained professionals within the fields of counselling, psychotherapy and psychology, or trainees on an accredited training programme that had vetted their suitability and resilience within the recruitment process. While it is essential to emphasise that no adverse situations arose during the study, pre-planned actions were in place to manage such situations sensitively and professionally, in collaboration with my supervisor. The researcher was active in ensuring participants were aware that if they experienced any distress in relation to the study, they should either approach the researcher or the research supervisor for debrief and signposting or, if they preferred, to seek direct signposted support via their GP or a recognised mental health professional. In addition, trainees were signposted to university wellbeing services and it was a conditional requirement of the courses for trainees to be in therapy. Further, the researcher was vigilant during the qualitative interviews to signs of distress and would have been well equipped to provide immediate support if needed. Moreover, there was no deception either intentionally or unintentionally due to rigorous and transparent processes which furthered the confidence in the study.

My professional competence is built upon a foundation of knowledge, skills, and training as a Chartered Counselling Psychologist as well as prior academic roles as a research supervisor and internal examiner for doctorate level theses, which has enabled me to navigate the complexities of ethical research. This has led me to ensure that the principle of responsibility guided every phase of

my study, from phenomenological framework to design to analysis and finally the integrated discussion, and I remained mindful of the broader consequences of my research on society and the environment. In addition, my own personal experiences as well as my training and professional experience have ensured that the content and processes of the study were highly respectful of cultural and social contexts given the diverse backgrounds of all participants.

Through adherence to professional guidelines, transparent communication with all participants, clear ethical strategies, and upholding high quality data management practices, I ensured that this study provided valuable insights and also upheld the ethical principles and standards crucial to mixed methods research in the fields of psychology and counselling.

## Chapter 4: Qualitative Methodology

### 4.1 Qualitative Design

The qualitative design component of this study utilises semi-structured interviews guided by interpretative phenomenological analysis (IPA) (Smith & Osborn, 2003; Smith et al., 2009). Qualitative design is the most suitable approach for this part of the study for several reasons. Although both quantitative and qualitative research are concerned with detail, each approach focusses on different details Silverman (2005). Qualitative research is concerned with detail in particulars of such matters as people's understandings and interactions, whereas a quantitative design would not be able to provide the level of detail necessary to answer the exploratory components of the research question; moreover, no tool has yet been developed that could aid quantitative exploration.

IPA is a particular approach to qualitative research that aims to explore in detail 'participants' personal lived experience and how participants make sense of that experience' (Smith, 2004, p. 92). IPA's emphasis on the 'individuals' experience' (Smith, 2004) of events makes it ideal for answering the proposed research question in this study; IPA would enable detailed exploration of how trainers experience and understand reflexivity when working with trainees. As highlighted by MacDonald et al., the IPA approach provides an opportunity to 'explore sensitive and highly complex experiences, attitudes and interactions' (2003, p. 121), making it ideally suited to studying reflexivity.

IPA has been shown to be extremely useful in relating subjective experiences on a range of issues (Osborn & Smith, 1998). For example, IPA has been used to identify shared themes in participants' accounts of reflexivity through a consideration of recurrent issues, assumptions and attributions expressed in interviews (Smith et al., 1999; Smith, 2003). Although some researchers maintain that underlying cognitions are not accessible through this verbal interviewing technique (Coyle, 1995), IPA assumes that meaningful interpretations can indeed be made about thinking (Smith et al., 1997). Thus, IPA is integral to the central research question because this methodological approach stresses the importance of understanding the way each individual participant thinks. IPA recognises that each participant will attach different meanings to their experiences, and it is precisely these personal meanings that interest the researcher. Any attempt to elicit these meanings must entail a process of interpretation by the researcher; this has been termed 'symbolic interactionism' (Denzin, 1995). By facilitating such engagement with each participant, IPA seeks to envisage an insider perspective on the participants' experiences (Smith, 1996; Smith e. al., 1997), whilst acknowledging that this interpretative process is guided by, and contingent upon, the researcher's interpretative framework.

The exploratory nature of IPA also makes it compatible with under-researched areas – another primary concern of this research (Smith & Osborn, 2004). IPA studies are usually based on data from semi-structured interviews, as this approach to interviewing aids the researcher in following up interesting and important issues that may emerge, in addition to facilitating rich verbal accounts.

#### **4.1.1 Aims**

1. To understand how trainers interpret the concept of reflexivity
2. To explore how trainers understand their own process of acquiring and developing reflexivity
3. To explore how trainers understand the methods of teaching reflexivity

#### **4.2 Participants**

Eight participants were recruited through purposive, self-selected sampling. All participants were accredited counsellors, psychotherapists or practitioner psychologists, and all were trainers within an accredited clinical training programme in counselling or counselling psychology. Participants were aged between 35–69 years and had a minimum of 10 years of experience working on clinical training programmes; seven of the participants identified as female, and one identified as male. Five of the participants identified as White British, two identified as Black African, Black Caribbean or Black British and one identified as Other Ethnic group.

As Smith and Osborn emphasised, there is ‘no right answer to the question of sample size’ (2004, p. 23). Sample sizes range considerably with anything from one to sixteen participants (Silverman, 2005). As Mason (2010) stated, the primary challenge facing qualitative researchers is saturation, and Ritchie et al. (2003) proposed that 12 interviews will provide sufficient data for analysis, stating that an excess of data will not necessarily lead to further or richer data. Eight participants reached saturation of themes within the thesis.

#### **4.3 Measures**

Data were collected using a semi-structured interview schedule (Appendix D). Basic demographic variables (i.e. age, gender and ethnicity) were also recorded. The semi-structured interview schedule, which was designed in line with recommendations from Smith and Osborn (2004) and Silverman (2005), contained 16 prepared questions and as many as 10 improvised questions based on the research model. These open-ended questions were aimed at eliciting the personal experiences of the participants. The interview schedule had a tripartite structure, with each of the three sections (‘Understanding of Reflexivity in Action’, ‘Origins of Reflexivity’, and

'Teaching/Learning Methodologies') being devoted to one of the key theoretical variables.

The creation of the Interview Schedule in order to explore the complex concept of reflexivity was a fundamental component of the research process, which required a systematic and thoughtful approach, particularly around the various methodological aspects. The first step in developing the Interview Schedule involved an extensive review of the existing literature on reflexivity to establish a conceptual framework and identify relevant themes (Smith et al., 2021). As Smith (2015) proposed, this literature review served as the foundation upon which the interview questions were constructed. Thus it was important to find a balance between the exploration of broad themes and the specificity required to understand the participants' individual and subjective lived experiences around their own understanding of reflexivity and their understanding of reflexivity within the clinical training environment.

The second phase of the process entailed a pilot study which enabled the researcher to evaluate and refine the Interview Schedule prior to the main study. As Smith (2015) stated, this process allowed for the modification and adaptation of the interview questions based on feedback from participants and ongoing analysis, as well as ensuring the recruitment protocols and content were appropriate.

#### **4.4 Pilot Study**

The researcher chose to conduct a pilot study in this instance due to the complexity of the existing literature on reflexivity and therefore the need to ensure that the Interview Schedule was rigorous. As Smith (2021) noted, pilot studies play a critical role in adjusting interview schedules in order to ensure that the open-ended questions capture the richness within the participants' narratives and also provide a structured approach to validate research designs, especially when involving smaller participant cohorts. Indeed within this study, the pilot study was instrumental in refining research questions, particularly around the nature of reflexivity; ensuring rigorous data collection methods; and also ensuring that the research design and processes were sensitive to the trainers' experiences and wellbeing.

This thesis' pilot study involved three participants who were recruited utilising the planned recruitment process and procedures as these were also subject to revision based on the pilot study's outcomes. The researcher then conducted the semi-structured interviews based on the pilot Interview Schedule. Following this process, the researcher critically evaluated the recruitment process and procedures, and the Interview Schedule; the latter of which involved the process of refining the open-ended



questions to ensure that they were capturing the depth of the data. Overall these adjustments during the pilot study process increased the overall methodological rigour.

#### **4.5 Recruitment and Procedures**

Once ethical approval was granted, potential candidates were invited to participate in the study via online advertisements (Appendix A) on websites affiliated with the professions of counselling, psychotherapy and counselling psychology. Initially, the researcher communicated with participants via a dedicated email contact. Interested candidates who met the inclusion criteria received an e-Information Recruitment Sheet (Appendix B), which explained the purpose and process of the study to ensure that their consent, if granted, would be informed. They were also given the opportunity to contact the researcher for further details.

Candidates were invited to attend individual interviews of 45–60 minutes in a private setting on a university campus. Participants were required to complete the consent form (Appendix C) prior to the interview, which advised them that the study is completely confidential, and that they could withdraw at any point up until submission. This also included the collection of demographic variables. Participants were informed that excerpts from their interview might be used in the report, but also that these would redact any recognizable details that could potentially identify them. They were further advised that the hard copies of the data will be stored in a secure setting, and that the results would be made fully available to them on request.

After completing the consent form, participants completed the semi-structured interviews. During the interview, the participants were asked to respond to structured and improvised questions. The interviews were audio-recorded, and I also took notes throughout the interview. Participants were thanked and debriefed at the end of each interview, and my primary impressions were recorded immediately thereafter. The data were then analysed using IPA (Smith & Osborn, 2003; Smith et al., 2009).

#### **4.6 Analytic Procedure**

Interpretative Phenomenological Analysis was selected within this mixed methods research as it is a qualitative phenomenological approach that is particularly suited to exploring complex psychological concepts like reflexivity. This section will fully outline the IPA analytic procedure utilised within this study as the adherence to the analytic procedure itself was essential in maintaining a high standard of credibility throughout the study (Smith et al., 2021). Within the analytic process, the researcher chose to use a combination of written information and audio recorded information which

is a process that involved several distinct but interconnected steps, which were fully integrated to ensure depth and rigour in the overall analytic procedure.

Prior to commencing the semi-structured interviews, participants were anonymised using alphabetic pseudonyms to protect their identities. In the ensuing interviews, trainers provided rich and detailed accounts which were audio-recorded with informed consent, ensuring authenticity and allowing for an engaged and focused interview process free from any disruptions from written note-taking. As part of the analytic process, the researcher recorded both written and audio recorded reflections immediately after the interviews to enhance the depth of analysis. In addition, the researcher kept an audio-recorded research journal over the course of the thesis which included helpful reflections on the IPA study that were utilised within the analytic process.

Once the interviews were recorded, the researcher engaged in a rigorous listening process which involved multiple playbacks of the recordings, allowing the researcher to more fully immerse within the participants' narratives. During this listening phase, the researcher paid close attention to the language used, emotional nuances, and also any underlying themes or patterns that emerged. It is of interest that the researcher is particularly familiar with audio recorded information within daily life, thus this process was perhaps enhanced by this familiarity, enabling the researcher to integrate even more deeply into the narratives. Furthermore the researcher repeatedly read the written transcripts, as well as engaging with the written and audio recorded reflections, and the research journal, which further enhanced the understanding of emerging themes.

Subsequently, the researcher engaged further in the process of the interpretative analysis. This stage was characterised by a hermeneutic process, where the researcher interpreted the meanings embedded in the data. As part of this process, the researcher committed to a structured process of written and vocal annotations. Within this process, the research redacted any identifying information from the transcripts in order to protect confidentiality. Unlike traditional IPA, where transcripts are fully annotated, the researcher relied on a combination of written annotations and audio recorded note taking to identify key themes and patterns. Interestingly, this method proved particularly effective in capturing the essence of the participants' experiences, as it enabled the researcher to remain closely connected to the content and tones of the spoken word. In addition, this interpretative process was fully iterative and reflexive as the researcher continuously revisited the audio recordings; the written and audio reflections; the written annotations; and the reflective journal which enabled a progression within the interpretations whilst ensuring that the analysis remained true to the participants' narratives. Indeed, this iterative cycle was crucial for developing a nuanced and comprehensive understanding of reflexivity.

Following this stage, the researcher integrated the interpretations into a coherent narrative in order to present the findings in a way that accurately represented the participants' experiences. The iterative process continued here within the data until the superordinate themes, the subthemes and the experiential examples emerged.

Overall, it is noteworthy that using a combined written and audio recorded method in the analytic procedure offered several advantages. Overall, in my view, it allowed for a more engaged interview process; captured the nuances of expression; fostered a deeper connection between myself and the participant's data; and therefore enhanced the process as a whole. However, it also presented challenges, such as the need for acute auditory analysis skills and a skilful balancing of the written and audio information. Despite these challenges, a combined written and audio-based IPA analytic procedure was a rigorous tool for exploring the depth and richness of reflexivity.

Finally, the researcher also employed additional methods to rigorously ensure the credibility of the analysis and results as participants were also invited to comment on the analysis, in line with prevailing best practices of respondent validation, which aims to ensure that analysis accurately reflects the data derived from participants' responses (Silverman, 2005). It is worth noting that all participants reported that their responses were accurately represented. This process was also audited via the supervisory process, which further examined the analysis process.

## CHAPTER 5: Quantitative Design

### 5.1 Quantitative Design

The quantitative component is a longitudinal study that tests the relationships among time, level of reflexivity, attachment status, personality, teaching and learning approaches, and self-rated reflexivity.

### 5.2 Participants

A power analysis was conducted to determine the necessary number of participants. The recommended sample size for multivariate analysis was 126 (Cohen's  $d = 0.5$  [medium effect size], power = 0.8, probability = 0.05) (Soper, 2011).

Overall, 185 participants were recruited in Time 1; however, due to a high attrition rate between Time 1 and Time 2, a total of 118 participants were ultimately recruited for the full study. Because this number is below the established minimum sample size of 126, this discrepancy must factor into a consideration of the quantitative results.

In Time 1, participants ranged from 21 to 53 years of age with a mean of 33.33 years ( $SD = 8.25$ ). In Time 2, participants ranged from 23 to 59 years of age with a mean of 33.64 years ( $SD = 8.22$ ).

Participants in Time 1 comprised 113 females (61.1%), 46 males (24.9%) and 26 individuals who preferred not to say (14.1%). In Time 2 Group, there were 71 females (60.2%), 27 males (22.9%) and 20 individuals who preferred not to say (16.9%).

In Time 1, Caucasian was the predominant ethnicity ( $n = 89, 49.1%$ ) followed by Other Ethnic Group ( $n = 25, 13.5%$ ). Twenty-two (11.9%) participants identified as Asian/Asian British, 7 (3.8%) participants identified as Black African, Black Caribbean or Black British, 5 (2.7%) participants identified as Mixed or Multiple ethnic groups and 37 (20%) preferred not to say. In Time 2, Caucasian was also the predominant ethnicity ( $n = 60, 50.8%$ ) followed by Asian/Asian British ( $n = 15, 12.7%$ ). Twelve (10.2%) participants identified as Other Ethnic Group, five (4.2%) participants identified as Black African, Black Caribbean or Black British, four (3.4%) participants identified as Mixed or Multiple ethnic groups and 21 (17.8%) preferred not to say.

In Time 1, 52 (28.1%) participants reported previous clinical supervision, 43 (23.2%) participants reported previous personal therapy and 46 (24.9%) participants reported completing clinical hours

with a client. Thirty-six (19.5%) participants reported prior training or a degree in a therapeutic modality. In Time 2, 33 (28%) participants reported previous clinical supervision, 38 (32.2%) participants reported previous personal therapy and 31 (26.3%) participants reported completing clinical hours with a client. Twenty-four (20.3%) participants reported undergoing prior training or holding a degree in a therapeutic modality.

In Time 1, 28.1% of participants reported prior clinical supervision, with 23.2% reporting prior personal therapy. When the data is adjusted for Time 2 participants only, the percentage of those who reported prior clinical supervision was similar (28%), although the percentage of those who reported prior personal therapy was 32.3%.

### **5.3 Measures**

Data were collected using four quantitative measures and a Training Questionnaire (Appendix L), which also solicited data for three basic demographic variables: age, gender and ethnicity.

The four quantitative questionnaires were used to measure (1) personality, (2) reflexivity, (3) learning and teaching preferred styles, and (4) adult attachment. The selection of quantitative questionnaires was based on clear rationales, particularly the Reflexivity and Adult Attachment questionnaires. Reflexivity is measured through the use of a Self-Reflection and Insight Scale because both reflection on the self and internal state awareness (termed 'Insight' within this scale) are the most comprehensive definition of reflexivity, as discussed in the Introduction chapter of this thesis. As defined by this study, reflexivity is being measured by the Insight scale, whilst the Relationship Scales Questionnaire (RSQ), as the reasoned choice for the measure of adult attachment, was necessary for two reasons. First, as yet there exists no measure designed to offer a categorical approach to identifying adult attachment styles on a large scale. The researcher considered (and ultimately rejected) the use of the Adult Attachment Interview (George, 1984), which was developed to identify internal working models of adult attachment in relation to the family of origin. This measure comprised a 60-minute semi-structured interview and therefore was not appropriate for investigation of a large sample size. Second, the selected measure of adult attachment is not designed to be used categorically and instead adopt a dimensional approach, which indicates the participant's tendency towards a particular adult attachment style.

#### **5.3.1 Self-Reflection and Insight Scale (SRIS)**

The SRIS is a 20-item questionnaire with answers given on a five-point Likert scale, developed by Grant et al. (2002). It is based on cognitive and meta-cognitive theories. The questionnaire consists

of 20 items loaded into two factors: insight (SRIS-IN), and self-reflection (SRIS-SR). SRIS-IN is a measure of reflexivity, while SRIS-SR is sub-divided into engagement in self-reflection (SRIS-SRE) and need for self-reflection (SRIS-SRN). This instrument is mainly for measuring reflexivity of self with self. Individual items are rated on a six-point scale, from 1 (strongly disagree) to 6 (strongly agree). Internal reliabilities of the subscales' respective Cronbach's alphas have been reported to range from 0.71 to 0.91 for the SRIS-SR, and from 0.82 to 0.87 for the SRIS-IN (Grant et al., 2002). The SRIS consisted of 20 items, and the value for Cronbach's alpha in the thesis reached an acceptable reliability ranging between 0.758 and 0.848.

### **5.3.2 BFI 10 Personality Inventory (BFI-10)**

The BFI-10 is a 10-item scale that measures the so-called 'Big Five' personality traits: Extraversion, Agreeableness, Conscientiousness, Emotional Stability, and Openness. As the text within the scale notes, 'The scale was developed based on the 44-item Big Five Inventory (BFI-44; John et al., 1991; Rammstedt, 1997) and designed for contexts in which respondents' time is severely limited. Test-retest correlations suggest acceptable reliability. Correlations with other Big Five instruments, correlations between self and peer ratings, and associations with sociodemographic variables suggest good validities of the BFI-10 scores' (Retrieved 13 September 2014, <https://www.gesis.org/en/services/planning-studies-and-collecting-data/items-scales/bfi-10>). The BFI-10 consisted of 10 items, and Cronbach's alpha reached an acceptable reliability ranging between 0.745 and 0.822.

### **5.3.3 Preferred Teaching Approaches Inventory (PTAI)**

The PTAI (Zhang, 2003) was designed to study university students in Beijing and was adapted from Prosser and Trigwell's Approach to Teaching Inventory (1999). The PTAI is a self-report test consisting of 16 items that fall into two scales: conceptual change and information transmission (eight items each). Each scale is further divided into two subscales, with one containing four intention items and the other containing four strategy items. Therefore, the four subscales are conceptual-change/student-focussed/intention (CCSFI), conceptual-change/student-focused/strategy (CCSFS), information-transmission/teacher-focussed/intention (ITTFI), and information-transmission/teacher-focussed/strategy (ITTFS). Each item is a statement describing students' preference for their teachers' teaching approach. The respondents rate themselves on a seven-point Likert scale, with '1' indicating that they absolutely disagree that the statement describes the way they prefer that their teachers conduct their teaching and assessment, and '7' indicating that they absolutely agree that the statement describes the way they prefer that their teachers conduct their teaching and assessment. In Zhang's (2006) study, although the alpha coefficients for the four subscales were

mediocre (ranging from mid-.50s and high .60s), the alpha coefficients for both of the overall preferred teaching approach scales reached a satisfactory level (both being .73). Exploratory factor analysis at the subscale level showed good construct validity of the inventory (Zhang, 2006). The PTAI consisted of 16 items and Cronbach's alpha was 0.790.

### **5.3.4 Relationship Scales Questionnaire (RSQ)**

The RSQ was designed as a continuous measure of adult attachment developed by Griffin and Bartholomew (1994). The RSQ contains 30 short statements drawn from Hazan and Shaver's (1987) attachment measure, Bartholomew and Horowitz's (1991) Relationship Questionnaire, and Collins and Read's (1990) Adult Attachment Scale. Participants are prompted to rate each statement on a five-point scale according to their perception of the statement's accuracy in describing their characteristic style in close relationships. The statements relate to a particular attachment pattern. For example, of the 30 statements, five are related to the secure and dismissing attachment patterns and four are related to the fearful and preoccupied attachment patterns. A participant's characteristic attachment prototype is determined by calculating the mean score for the related statements; this attachment prototype can then be used to understand a participant's orientation to close relationships, romantic relationships and peer relationships. The scores from the RSQ were a measure of adult attachment for each participant, which were used within the analysis. The RSQ consisted of 30 items and Cronbach's alpha was 0.761.

### **5.3.5 The Training Questionnaire**

The Training Questionnaire, which was designed specifically for this project, sought to measure trainees' evaluation of training components and how much each component impacted their level of reflexive development. The training components included university-led training components such as lectures, seminars, case discussions, roleplays, video work, video observations, professional practice observations, case studies, process reports and theoretical essays. Independent-led training components included individual supervision, group supervision, peer discussion, clinical practice, service user input and personal therapy. Trainees used a rating scale where -1 = Reduced levels of reflexivity, 0 = No effect on levels of reflexivity, 1 = Some improvement on levels of reflexivity, and 2 = Extensive improvement on levels of reflexivity.

## **5.4 Procedure**

Once ethical approval was granted, potential candidates were invited to participate in the longitudinal study via online advertisements (Appendix E) on websites affiliated with the professions of



counselling and psychotherapy, as well as via e-mail to relevant training institutions. Communication with participants and dissemination of materials was via Survey Monkey. In order to increase recruitment, I also visited institutions in person and presented the research proposal directly to potential participants. Participants were provided with an online Consent Form (Appendix G) explaining the study's purpose and process to enable them to give informed consent.

Participants were also provided with an Information Sheet (Appendix F), which advised them that (1) the procedure is completely confidential, (2) the report would be anonymous, and (3) they could withdraw at any point up until submission. Participants were further advised that their emails and the hard copies of the data would be stored in a secure setting, and that the results would be made fully available to participants on request. It was necessary to collect participants' email addresses so that they could be contacted in Time 2.

Once they had completed the e-consent forms, participants were invited to complete the BFI 10 Personality Inventory, the Self-Reflection and Insight Scale (Grant et al., 2002), the Relationship Questionnaire (Bartholomew & Horowitz, 1991) and The Relationship Scales Questionnaire (Griffin & Bartholomew, 1994) in Years 1 and 2, respectively, of their training.

In order to match the data from Years 1 and 2, each participant's questionnaire pack was assigned a unique reference number for Time 1; this reference number was recorded and the participant also received the Time 2 questionnaire pack marked with their own reference number. I then matched the reference numbers.

Following the return of questionnaires in Years 1 and 2, the participants were thanked and debriefed through a Debrief Sheet (Appendix M) following the collection of the Year 2 data. The data was analysed using SPSS 19.

## **5.5 Hypotheses**

Hypothesis 1 predicts that participants with a prior clinical background will score significantly higher on Reflexivity in Time 1 than those without a prior clinical background.

Hypothesis 2 predicts that participants rated high on the personality categories of Openness to Experience, Conscientiousness and Agreeableness [KC1] will score significantly higher on Reflexivity in Times 1 and 2.

Hypothesis 3 predicts that participants scoring higher on the Secure Attachment variable will score significantly higher on Reflexivity in Time 1.

Hypothesis 4 predicts that factors on the Self-Reflection and Insight Scale will increase significantly between Times 1 and 2.

Hypothesis 5 predicts that higher levels of self-rated Reflexivity will be positively correlated with university-led and independent-led training components with a higher relative contribution of independent training components (i.e. supervision, peer discussion, clinical practice, service user input and personal therapy).

Hypothesis 6 predicts that Secure Attachment style will predict Reflexivity in Time 1 and increase in Reflexivity from Time 1 to Time 2.

Hypothesis 7 predicts that participants preferring student-focused teaching approaches will score significantly higher on Reflexivity in Time 2 than those preferring teacher-focused teaching approaches.

## CHAPTER 6: Qualitative Results

### 6.1 Introduction

In this section, the thesis will explore the qualitative results from the Interpretative Phenomenological Analysis in order to offer a critical analysis of the superordinate themes that have emerged. This analysis is pivotal for unpacking insights into the complex lived experiences of the trainers within this study, which emerged via thorough immersion and engagement with the data in a continuous iterative process. The full Thematic Table can be seen in Appendix N.

The qualitative results presented below demonstrate a depth of exploration where the experiences of each trainer are interpreted to uncover the essence and core of their lived reality of learning and teaching reflexivity within their personal lives and within their clinical training programmes. In navigating their personal narratives and their shared human experiences, the analysis has been fully guided by the principles of IPA, ensuring a loyalty to the participants' voices around reflexivity whilst also engaging with the interpretive component. This process has been characterised by the very process that this study examines, that of reflexivity, ensuring that the analysis is not merely descriptive but also interpretative, thereby affording the findings a level of depth which is representative of IPA. In essence, the researcher has maintained a phenomenological commitment to the life stories and life histories of these trainers, which necessitated an awareness of potential researcher biases and an openness to the emergence of new understandings. A position which is particularly aided by my professional experience.

The Superordinate Themes that emerged from the data are Self-Reflective Inquiry and Personal Awareness; Emotional Awareness and Continual Growth; Emotional Intelligence in relation to Dynamic Personality Characteristics; Influence of External Factors on Emotional Expression and Coping; Enhancing Self-Awareness and Reflexivity; Cultivating Critical Skills in Creativity; Reflective Learning and Support; Pedagogical Approaches and Educational Effectiveness; and Cultivating Reflexivity Through Critical Assessment and Engagement.

Each theme will be examined in detail alongside examples from the participants' data and the analysis will also importantly highlight their relevance to the broader context of relevant psychological constructs to further elucidate their understanding. The qualitative results will further offer a critical examination of how these themes interact with each other.

## 6.2 Self-Reflective Inquiry and Personal Awareness

The superordinate theme Self-Reflective Inquiry and Personal Awareness emerged from four subthemes: reflection of self; internal processes and the world around you; understanding of self; and the self as implicated at the fundamental level of reflexivity. This superordinate theme explored the trainers' concepts of self-understanding and the profound connection between an individual's identity and their reflexivity. Within the data, the superordinate theme served to illustrate how self-reflective inquiry and personal awareness played a central role in shaping how the trainers perceived themselves and engaged with their surroundings. This exploration deeply connected with the broader psychological construct of subjectivity as self-awareness and reflexivity play pivotal roles in an individual's cognitive and emotional framework, shaping subjective experiences and the interpretation of reality in various contexts. The analysis of this theme provided valuable insights into the subjective aspects of reflexivity.

The theme of Self-Reflective Inquiry and Personal Awareness revealed how reflexivity, as an intrinsic action within the self, emerges and evolves through subjective experience and interaction with the external environment. Participant L's reflections provided an intimate glimpse into the natural and intuitive process of self-discovery. They articulated a pre-verbal understanding of reflexivity, a form of self-awareness that predates formal learning: "I think I've had an understanding of reflexivity long before having any knowledge of a word for it" (L:48–51). This acknowledgment affirmed their understanding that reflexivity is an inherent aspect of human consciousness, one that is present and active even before it is recognised and named through language and education. Participant L's experiences pointed to an inherent reflective capacity within oneself, which initially operates unconsciously and then becomes more recognised and intentional through engagement with the world around them. Participant L acknowledged that the way an individual recognises and engages with reflexivity is the definitive factor in the growth of reflexivity:

By way of emancipating your own thoughts and feelings from those that have been... erm, that you may have been indoctrinated or constructed by and through, that might not belong to you. So it enhances the kind of, moral and emotional responsibility, to heighten looking inside yourself, rather than outside yourself, for answers and truth. (L:251-261)

The emergence of this superordinate theme as a central pillar throughout the iterative analysis served to highlight its pivotal role in the development of reflexivity. Participant J articulated this concept with clarity, noting that the essence of our understanding is intimately tied to our subjective nature: "The subjective foundations of all knowledge and err, interactions and the process of understanding, is always subjectively based" (J:119–122b). This observation is consistent across the

participants' shared experiences which recognised self-awareness as the starting point for reflexivity, in a process that they described as one that originated internally initially but soon extended outward thus shaping the trainers' perceptions and interactions with the world through the lens of their individual subjectivities.

Participant J further explored more deeply into the role of the self in shaping an individual's perception of the world by emphasising how important it was to recognise and acknowledge their subjectivity in the pursuit of knowledge:

That means that you as an enquirer, are part of the process itself. And that to understand the implications that has for the knowledge you generate, you have to identify the influence or attempt to try and identify the influence that your subjectivity has on the process. (J:131–138c)

Participant J's reflective stance here acknowledged the dynamic interaction between the enquirer and the subject of inquiry, which suggested that reflexivity is a continuous and an active process that evolved in response to both internal insights and the external environment.

The reflections of Participants E and C further illustrated and clarified the findings of this theme. They explored the fluid nature of self-awareness which they described as shaped by the constant interplay of thoughts, judgments, biases and interpretations through a "process where one will accept the way the assumptions and actions and how it influences certain situations that we find ourselves in" (E: 67-70b). This acceptance signified a recognition of the limitations inherent in understanding the self for this participant and may also be seen through the overarching construct of subjectivity. As such, Participant E conveyed the idea that an individual's limitations are influenced and indeed constrained by subjective perspectives, which may then have an impact on life as a whole, or at least the situations contained within daily life. Moreover, Participant E insightfully identified their own experiences of the dynamic nature of subjectivity, revealing how their understanding of the self is one where the self is in a state of constant flux, influenced by their experiences and surroundings.

Meanwhile Participant C offered a more personal understanding of how this process was embedded for them in terms of "what's going on for me and my internal thinking, my own judgements, my own interpretations, incorporating my theory" (C:114a-116b). Thus here, the participant characterised this dynamic process in terms of a growing awareness of the assumptions driving their thoughts and actions, and proposed that this awareness enabled them to have a deeper understanding of themselves and indeed their place within the broader social and cultural context. As is exemplified

by the data, the participants recognised that gaining more self-knowledge brings with it a recognition of the persistent nature and presence of their own biases.

The data that emerged from the participants further explored the concept of reflexivity through this theme, shifting from the initial focus on the internal world to a more profound engagement with the external world. Thus participants explored the concept of reflexivity by detailing the inner origins of reflexivity which, despite being an internal act, was closely linked to the surrounding external environment. Indeed, this duality is lived and intimately experienced by the participants. The participants' narratives highlighted how the psychological construct of subjectivity acted as a bridge between the internal act of self-reflective inquiry and the external world, which was emphasised by Participant J:

And there is this kind of moment of, I don't know, almost a kind of transcendental moment of realising that there are these massive questions in life that are so meaningful and powerful and, having a positive relationship to that kind of way of enquiring about the world. (J:283-289)

Indeed Participant L's perspective within the narrative contributed further to this dual focus: "Well I think it's something to do with engaging the inner life and subjectivity in a process of reflection. So that you are looking inwards (pause) as well as outwards" (L:159-164). Participant L's understanding here encapsulated the essence of reflexivity in these narratives which encompassed the entire spectrum of self-reflective inquiry and personal awareness, from the most intimate and vulnerable corners of internal experience to the broadness of the external world as it is seen in relation to the self, both in its physical and also abstract components. Furthermore, Participant J's statement about "interactions and the process of understanding" (J:121–122a) underlined the idea that all relationships and all interactions with the environment were integral to deepening the understanding of the self.

This relational dimension of reflexivity is further explored by Participant H's understanding of how professional roles can influence self-reflection which is illustrated within their statement noting that "the process of looking at one's self and understanding one's own internal processes that occur in psychology in reaction to work that we do" (H:7–11). Here, reflexivity is depicted by Participant H as a responsive process, where self-reflective inquiry and personal awareness have been both triggered by and shaped through their engagement with the external world, specifically their professional role in this context.

The richness of the data here is in its portrayal of reflexivity as a process that encompasses both the internal and the external across all contexts. As clinical professionals and trainers navigate their internal worlds, they are also reacting to and interacting with the external, i.e. clients, trainers, colleagues, the course content, the clinical training programmes, the academic institutions and the broader social-cultural environments. This interplay revealed that the trainers overarching experience of learning and teaching reflexivity is as much about understanding the self in isolation as it is about situating the self within a larger context.

The significance of moving beyond the inherent process within the superordinate theme is further examined by Participant A who, similarly to Participant H, also utilised their own lived experience as a clinician to offer their understanding here by noting the importance of the “capacity of therapists and other health professionals to think about their interactions with a patient, both behavioural interactions and internal interactions” (A:56–62). This understanding further highlighted aspects of this dynamic process of reflexivity which involves both the actions that can be seen and the mental processes that can't be seen. Participant C further added to this data through their focus on the social and cultural contextual aspects of client interactions, noting the fundamental importance of “thinking about the client within their own culture and context of their life” (C:119–121). These understandings of reflexivity acknowledged the importance of the client's background and life experiences in shaping interpersonal interactions, just as it is for the trainers and trainees.

Of particular interest was the data that emerged around the blockages or limitations around Self-Reflective Inquiry and Personal Awareness. Although the data indicated an inherent cognitive capacity for self-reflective inquiry and personal awareness, and by extension reflexivity, the narratives also served to explore the potential limitations to this process. Specifically, Participant E pointed to the limitations related to the lack of examination of reflexivity itself; “Everybody in, say, my practice or - I think so. I think it's something that is not highlighted but it's something that we do. It's a process that we go through all the time (E:196–300). Here, Participant E suggested that through embracing reflexivity, they recognised that it was a continually fluid process of internal inquiry and awareness which was inextricably intertwined with the same ever changing inquiry and awareness in respect of the external world. Further, Participant L understood that an overreliance on objective information limited personal freedom, and thus self-inquiry and personal awareness as “ sometimes all the facts in the objective world can push people back in, to a box, rather than liberate them to trust their own (pause) instincts and thoughts and feelings” (L:193-197).



In addition, in Participant J's discussion around reflexivity's reach, they also highlighted the role of developmental experiences in shaping an individual's capacity for reflexivity: "If you've had developmental experiences, which haven't modelled this reflective capacity, or helped you develop it, then it's going to be very difficult for you to have a natural inclination to do that, or be another way" (J:460–472). Participant J's understanding highlighted the importance of the environment and external experiences in fostering reflexivity suggesting that, without these, the capacity for self-reflective inquiry and personal awareness would be significantly limited or absent. Building on this, Participant E further explored the notion that individuals are not always consciously engaged in reflexivity, especially in the earlier stages of development: "The environment we grow up in can, in itself, bring about those things. If you don't know about reflexivity, or you'll be going through a process, you might not realise what exactly" (E:327–332a). Here Participant E affirmed the wider data that reflexivity can be either enhanced or hindered by the environment in which an individual finds themselves in.

Together, the participants' data weaved a complex picture through the theme of Self-Reflective Inquiry and Personal Awareness of reflexivity as both an internal process of self-exploration and an external process of relational interaction. They held the concept up as a fundamental component of clinical practice, which demanding a nuanced understanding of the self that was aware of its own biases and shaped by its own interactions with others.

In essence, the data contributed to a picture of reflexivity as a journey that must begin with the self but extended far beyond it into the external environment, specifically for these participants its extension encompassed the relational spaces where their personal and professional identities were continually constructed and reconstructed. The overwhelming narrative from this theme emphasised that Self-Reflective Inquiry and Personal Awareness were essentially understood as a task, one that was at times welcomed and at other times not welcomed, yet all the time as valuable. The participants described this task of the dual nature of reflexivity requiring continuous internal and external processes. For them, the theme encompassed a continuous engagement with themselves through a critical examination of their biases and assumptions, and a recognition of the impact that personal subjectivity has had on their professional practice and their understanding of others.

Collectively, these insights from participants demonstrated that Self-Reflective Inquiry and Personal Awareness was an ongoing, multifaceted journey. It encompassed the recognition and examination of an individual's internal world and, in so doing, acted as a catalyst for an understanding of how this internal world interacts with and is shaped by external experiences, and the realisation that the subjective lens influenced every aspect of self-inquiry and personal awareness. This superordinate theme, therefore, emphatically emphasised the significance of the continuous development of a self-

aware, reflective practitioner who is cognisant of the subjective nature of their experience and knowledge. Thus the theme, as explored by the participants in the study, engaged deeply with the introspective and interactive nature of reflexivity. It was seen as an indispensable component in the professional growth and personal development of trainers, clinicians and trainees.

### **6.3 Emotional Awareness and Continual Growth**

The superordinate theme of Emotional Awareness and Continual Growth originated through a iterative synthesis of three underlying subthemes. The first subtheme, continuum, illustrated the perpetual and evolving nature of personal development; the second, emotional functioning, explored the intricate notion of managing emotions and highlighted the importance of understanding the normative flux of emotions; whilst the third subtheme, personal experiences, emphasised the profound influence of specific life experiences in shaping each individual's emotional world and also their personal development. In this section, the superordinate theme will be explored in reference to the participants' narratives.

Within this context, the data highlighted the dynamic and progressive development of an individual's psychological and emotional competencies, with a particular emphasis on the crucial role of emotional functioning in terms of its ability to enhance an individual's willingness and capacity to navigate and, indeed, expand their emotional understanding and self-regulation through their own personal experiences. Thus, the overwhelming data that emerged explored the potential of the concepts within the theme itself in terms of a deep examination into emotional capacity and the skilful self-navigation of the trainers in negotiating this. The theme also examined the trainers' experiences and perspectives in terms of their ability to nurture and progressively enhance these attributes through ongoing learning and the nature of their interaction with their own personal experiences. Within this section, this overarching theme was intricately intertwined with, and further elucidated by, a deeper exploration of the psychological construct of capacity.

At the very beginning of their interview, Participant H acknowledged the variation in this capability among individuals, stating, "Certain individuals possess a greater capacity for this compared to others" (H:24–26). This statement acknowledged the inherent differences in individuals' ability to engage in self-reflection and emotional processing, which Participant H conceptualised as a natural predisposition that may make the journey of emotional growth more accessible to some individuals than to others, whether trainees or trainers. In contrast, Participant E offered a perhaps more optimistic explanation of this journey, asserting that the potential for such capacity is not necessarily limiting: "Everybody has that capacity to learn it and it's just about whether they've been, perhaps, specifically trained or it's been brought into their awareness in another way" (E:361–365). The overall

data here reinforced the notion that while capacity may vary, the capability for development of reflexivity is universal, dependent largely on exposure and education. This is further exemplified in the earlier superordinate theme Self-Reflective Inquiry and Personal Awareness.

Exploring the nuances of learning reflexivity, Participant A provided a pragmatic perspective, suggesting that the initial lack of reflexive capacity does not preclude the acquisition of such skills through their development. In reference to assessing capacity within the interview process, Participant A stated: “but it doesn’t mean they can’t be trained to reflect, but if you really had to pick people who could reflect from day one, then, you know, you’d have to exclude somebody like that” (A:1111–1129).

This pragmatic view is expanded upon through Participant A’s observation of older individuals within clinical training programmes who may not have followed a conventional academic or professional path, perhaps attaining a Masters or working as an AP, but bring a wealth of life experience that, in Participant A’s experience, naturally cultivated reflexivity:

Well, I suppose reflexivity. Erm, obviously they have to be right, erm, you know, the people around counselling psychology courses are very different, you know, they usually don’t have first class degrees but they’re older, more thoughtful. They’re no worse at it, you know, by any means, but they have... If you like, it’s more understandable for them to be reflexive, you know, because they’re older, they’ve been through life experiences. Many of them have had therapy. (pause) These very young ones – the vast majority had not had therapy, my understanding is. (A-1083–1097)

The implication here is that the process of emotional and reflective growth is not linear and is not confined or limited to the formal learning environment. The data here proposed that it is also significantly shaped by personal life experiences, as well as the accompanying self-inquiry and exploration.

Within the data, Participant A also addressed the challenges of teaching reflexivity, particularly to those who may appear disengaged or emotionally unresponsive:

I suppose I would just ask them how they feel in certain situations and see how they respond to that question because often people who can’t answer those questions would, you know, who find it, erm (pause), I mean, I notice that in my patients, you know, sort of ‘How did you feel about the fact that you had to move school yet again?’ and they look at you blankly and

say 'Well, my father had to move and so we just went'. You know, that kind of thing in a trainee might make me think 'Hmm'. (A:1108–1126)

As Participant A proposed, the capacity for reflexivity can be nurtured through targeted questioning that encouraged trainees to connect with their emotional responses, highlighting the role of inquiry as a tool for fostering emotional awareness and the driver for continual growth.

However, Participant H interestingly explored the notion of limitations noting that while some individuals can enhance their capacity through education, others may struggle potentially due to personal concerns about professional competency or fear of negative self-judgment:

So some people you can teach and their capacity can be improved. But other people, I think they just don't get it and maybe that's because they're more concerned about what it might say about them as a clinician. So they're worried about owning maybe negative emotions or scared about what that would mean to their supervisor. (H:44–55)

This conceptualisation brought to light the potential psychological barriers that can impede the development of reflexivity, suggesting that capacity is not solely a matter of potential but also of overcoming internal obstacles such as emotional functioning that that may limit continual growth. A perspective mirrored across the data.

This superordinate theme is further enriched by the acknowledgment that every individual has the potential to reach a higher level of emotional functioning, as suggested by another participant: "I think anybody can achieve a higher level of emotional functioning in some ways" (G:1037-1040). Moreover, the change in emotional interpretation of external events is highlighted as a key aspect of emotional growth: "Like, from an emotional point of view, they can change the way they are interpreting what's going on around them, that emotional component" (G1057-1060). This reflected their understanding of the dynamic nature of emotional capacity, which can be reshaped and refined through introspection and the reframing of external experiences.

The narratives of the trainers merged together to form a detailed analysis illustrating the overarching theme of Emotional Awareness and Continual Growth. This superordinate theme was intimately tied to the human experience and is acknowledged within the data as being deeply shaped by a multitude of factors that significantly influence both its emergence and continuing development. Indeed, emergent aspects such as personal growth; the extent and rigour of clinical training; the individual responses to life's more difficult experience; and the existence of psychological limitations collectively served to highlight and unpack the complex picture of the capacity for reflexivity here. The trainers'

experiences and perspectives emphasised that reflexivity is a skill that must be deliberately honed, in order to reach its potential for both trainees and trainers. Through this superordinate theme, the participants offered a comprehensive view of reflexivity, portraying it as a dynamic equilibrium between inherent potential and the formative experiences of an individual's emotional awareness, and explored how the later development of reflexivity within clinical training is one of expanding emotional awareness through a process of continual growth.

#### **6.4 Emotional Intelligence in relation to Dynamic Personality Characteristics**

The superordinate theme of Emotional Intelligence in relation to Dynamic Personality Characteristics emerged fluidly from the data via the initial subthemes which included flexible throughout life, baseline traits/styles and emotional capacity. This superordinate theme, explored through the trainers' worlds, examined their understanding of personality in reference to reflexivity, exploring its continually evolving nature; some of its foundational components; and also most emphatically highlighting its relationship to emotional intelligence. As such, the particular emphasis that emerged most strongly from the data was the focus on emotional intelligence as it related to their dynamic comprehension of personality characteristics and thus the impact on the development of reflexivity. This theme was strongly linked to the prior superordinate theme of Emotional Awareness and Continual Growth, however the concept of emotional intelligence as connected to personality through the trainers' understanding of its influence on self-awareness strongly emerged as a superordinate theme in its own right. It can also be seen in relation to the theme of Self-Reflective Inquiry and Personal Awareness which explored the concept of reflexivity in and of itself however, equally strongly in the data, emotional intelligence as it related to personality emerged as one of the most integral components in the trainers' narratives around personal and professional development, specifically reflexivity.

The data from the interviews indicated that emotional intelligence was considered by the trainers to be the most crucial factor influencing personality development and characteristics. This perspective was a prominent recurring theme in participants' reflections especially when they explored how, in their experience, emotional intelligence and dynamic personality traits intersected within the broader concept of reflexivity. This superordinate theme emerged through the trainers' narratives around how emotional intelligence functions, which was essentially described as functioning as a group of evolving skills that developed and matured throughout an individual's life, reflecting and indeed influencing the dynamic nature of personality. The data revealed that these skills were seen as interwoven in intricate ways through diverse experiences and contribute to the reflexive processes.

The narratives from the trainers painted a vivid picture of emotional intelligence's dynamic qualities. Participant C's observation captured the core and essence of this adaptability:

Some people are much more into reading, looking at the theory and just memorising it, they just rote learn it. They don't necessarily understand the depth of what they've learned but they have that information. Other people are much more likely to look for the understanding of it and not necessarily remember, erm who wrote what or what research paper that they've looked at. (C:370–381)

According to this participant's experience, these variances in learning approaches served to highlight the flexible nature of emotional intelligence, emphasising how it can manifest differently in each trainee's approach to learning and how they are able to manipulate that knowledge for themselves. Thus the depth of understanding emotional intelligence was understood as dependent on the acquisition of information and then, far more so, on an individual's more natural inclination towards the use of that knowledge for themselves.

Indeed, Participant E's statement, that "style and personality does play a great role" (E:711b–712), further emphasised the significant impact of emotional intelligence on individual expression and interaction. Their understanding suggested that the way emotional intelligence is integrated into or impacts on an individual's personality profoundly affects both self-concept and also social dynamics, thus linking with the dual action process of reflexivity's internal and external mechanisms. The integration of emotional intelligence into the core of an individual's personality highlighted its influence on personal identity and interpersonal relationships, which are fundamental in the reflexive process.

Moreover, the data also provided a further unpacking of this dynamic nature of emotional intelligence. For example, the dynamic nature of emotional intelligence was queried in terms of its accessibility or adaptability universally, as noted by Participant H: "some characters can't tap into that and can't access it" (H:396–398). This insight acknowledged the existence of limitations that can prevent individuals from fully engaging with the emotional aspects of their personalities, which can then place limitations on their self-awareness and awareness of the external world, and thus limiting reflexivity overall. As the data summarised, the recognition of these limitations was crucial in understanding the diverse experiences of individuals in relation to emotional intelligence here.

Emphasising the malleability and adaptability of emotional intelligence as it related to personality characteristics, Participant K reflected on the transformative potential that they have witnessed both in themselves and in others, and which they view as inherent in an individual's emotional faculties:

"but that personality... can mould and kind of be moulded and changed, and shaped throughout your life" (K:708–711). This highlighted the possibility of significant evolution in an individual's emotional capabilities which the data suggested may be driven by introspection, personal subjective experiences, and deliberate efforts and attempts at personal development whether inside or outside of clinical training programmes. The notion of malleability and adaptability within the data also indicated that emotional intelligence was not understood universally by the participants as fixed but rather was susceptible to change and growth over time, particularly with effort and guidance.

Adding depth to this discourse, Participant C discussed the practical application of emotional intelligence through experiential experience which, in their case, they have experienced in prior clinical trainings both within and external to counselling and counselling psychology, which adds a further depth to their experience: "Well, it's attitude to, because I know for me actually one of the things in my learning, in my study was my field work experience and applying it" (C:425-429).

This participant elaborated on their understanding of the transformative nature of emotional intelligence and specifically proposed the transformative effect of experiential learning on an individual's emotional intelligence, showing how direct engagement with real-world scenarios, like experiential placements, can refine and also enhance an individual's emotional intelligence. Thus this practical application of emotional intelligence emphasised its importance in real-life settings and therefore its potential to be shaped by direct experiences within these trainers' contexts.

Collectively, the trainers provided a complex narrative around Emotional Intelligence in relation to Dynamic Personality Characteristics, framing it as a multifaceted construct that encompassed both inherent predispositions and the formative influences of life's diverse experiences, both positive and negative. This perspective positioned emotional intelligence as both a foundational element and an evolving aspect of the self, perpetually redefined in the trainers' experiences through continuous personal growth and complex interactions with external environments. Here, again, the links with other superordinate themes providing a fuller picture of reflexivity was evident.

Thus emotional intelligence was understood by the participants as a dynamic trait which was central to personal and professional development, and the ability to navigate the complex network of interpersonal relationships within the external world. It also reflected a more dynamic view on the components of emotional stability that make up personality. Therefore, it was through this lens of emotional intelligence that the trainers proposed that individuals, both themselves within their own experiences, and others, navigated the nuances of emotions and adapted to the dynamic bidirectionality of interpersonal interactions.



In conclusion, the superordinate theme of Emotional Intelligence in relation to Dynamic Personality Characteristics encapsulated a critical understanding of how emotional intelligence influenced and is influenced by the dynamic aspects of an individual's evolving self, and thus their evolving reflexivity. The data suggested that it was not just the knowledge of emotions but the flexibility and the success in their application that shaped an emotionally intelligent personality, one that is ever-changing, responsive, resilient, stable and above all motivated to grow. Thus emotional intelligence was posited within the narratives as a dynamic attribute at the core of an individual's growth which was inextricably linked to reflexivity as emotional intelligence was understood in terms of an individual's ability to engage in self-reflection as the self relates to its self and the external environment, and also self-motivates within a growth/change model. This link emphasised that emotional intelligence enabled individuals with the capacity and ability to perceive their own emotions and also to analyse their fundamental influence on their own thoughts and behaviours.

Therefore, emotional intelligence as a dynamic characteristic within personality was seen as crucial to reflexivity here as it allowed for a critical evaluation of an individual's responses; the regulation of emotions in response to experiences; and the ability to gain further self-awareness from these experiences. Thus emotional intelligence was proposed through the data as a fundamental component that strengthens reflexivity, enabling an individual to manage their emotional internal world as it relates to the external and, as such, was posited as the most significant component in relation to dynamic personality characteristics. Most significantly, the data strongly emphasised the need for motivation in terms of an individual's drive for personal and professional development, as well as an understanding of how to achieve this development, particularly in relation to the development of reflexivity.

## **6.5 Influence of External Factors on Emotional Expression and Coping**

Through the process of analysis, the superordinate theme of Influence of External Factors on Emotional Expression and Coping emerged from four subthemes. The subtheme of supportive environment examined the influence of nurturing spaces and relationships which acted as catalysts for the trainers in fostering emotional growth and coping. The subtheme of expressed emotions explored the many ways in which individuals communicated and processed their emotional states, which was found to be influenced by varying degrees of environmental feedback and support. Exposure described the extent of the trainers' understandings of how encounters with new situations either expanded an individual's emotional repertoire or exposed them to vulnerabilities, and thus limitations. Finally the subtheme of trauma and difficult experiences explored the impact of adverse events on individuals where the trainers' narratives emphasised how such experiences could have either a positive or negative impact on reflexivity dependent primarily on coping strategies and

individual emotional factors. Together, these underlying subthemes merged in the iterative process within the overarching theme of Influence of External Factors on Emotional Expression and Coping, which will be explored here. Within this theme, the participants' data highlighted the significance of external influences in shaping an individual's emotional responses and also proposed the fundamental importance of an individual's ability to manage life's challenges, often helpfully using their own personal experiences as tools of exploration here. Thus their understanding suggested that these aspects play a significant role in an individual's overall psychological growth, and specifically the growth of reflexivity.

The data presented a thorough examination of how external factors, particularly the environment and those aspects within it, shaped the development of reflexivity, specifically the ability to self-regulate emotions and to engage in reflexivity. In their discussion on external factors, Participant A made a critical observation about the environment's role, encapsulating the idea that an environment lacking in attunement and reflexivity can impair the development of crucial psychological abilities: "People who've had parenting which was not attuned, not reflexive, if you like have difficulty with emotional self-regulation and mentalisation and so on" (A:485–488b). They posited that this lack of early emotional attunement and reflection led to both immediate and enduring consequences, which affected an individual's ability to engage with their internal psychological states and to interpret the mental states of others effectively.

Indeed, Participant J echoed and expanded upon this understanding in their consideration of the long-term impact of such early experiences. They suggested that without the foundational experiences that cultivated reflective capacities, later exposure to these concepts may be insufficient to instigate a natural inclination towards reflexivity:

If you've had developmental experiences, which haven't really modelled this reflective capacity, or helped you develop it. Then it probably doesn't matter how much you get exposed to the idea of it later on. If you haven't developed the fundamental capacity, or there are deficits in your ability, then it's going to be very difficult for you to kind of have a natural inclination to do that, or be another way. (J-460–472)

This theme continued in its exploration with Participant K, who introduced a counterpoint by describing a conducive environment for developing reflexivity. In their description, Participant K highlighted the necessity of emotional literacy and communication, i.e. emotional knowledge and expression: "being in an environment where emotions are expressed, good or bad. Where discussions about emotions take place" (K-607–611a). This perspective accentuated the importance of an appropriate emotionally expressive and emotionally responsive environment in fostering the

conditions necessary for healthy psychological growth, and thereby the conditions for reflexivity both internally within the individual and externally within the environment. Building towards this theme, the participants collectively emphasised that an optimal early environment was one that supported emotional regulation and thus allowed children to express their emotions, especially those emotions that are typically negatively labelled by society or culture, within a safe and nurturing context. In addition, they proposed that the training environment was conducive to the further learning of emotional regulation and thus encouraged a group atmosphere that promoted safety in expressing thoughts and emotions, thereby enhancing the reflexive process. As Participant A stated:

So really, it's just about an atmosphere in which things are safe and talking about, you know, saying to people, you know. And, erm, you know, having an atmosphere in the group where people do feel safe to say things so they're not constantly trying to appear more competent than they are or not bringing to the group something or other that's happened in the session so people can bring confusion. (A:611-626)

Thus, this theme provided a connection to the superordinate theme Emotional Intelligence in relation to Dynamic Personality Characteristics. Whereas this theme discussed emotions as imperative within the external environment, the earlier theme provided an understanding of the internal world of emotional intelligence, thus indicating again the dual nature of reflexivity as the narratives have jointly unpacked and explored these key components within the dual action process of reflexivity.

This superordinate theme also encompassed an understanding of the complexities and dichotomies of real-world external environments. As Participant K observed, individuals who struggled with reflexivity often emerged from environments where positive impression management is maintained at the expense of authentic emotional expression: "People that I've dealt with, who struggle to become reflective and understand what it is, in my experience they come really from environments where err it's like, everything just has to appear good" (K:630–636).

In addition, the data explored the role of trauma in reference to one specific component around the influence of external factors. From the narratives, there emerged a spectrum of trainers' responses on the influence of trauma on emotional expression and coping; some expressed these as personal experiences which added to their depth. For some participants, personal traumatic experiences acted or were seen as catalysts for introspection and growth in reflexivity, such as for Participant L who shared their lived experience: "I think trauma, trauma really. That's how I went into therapy... But it was a trauma that initiated my erm, me into the context of having to look inside" (L:306–313b) and "I had experienced a trauma which was, which broke me down, in some ways. And a lot broke through, in that process, particularly around subjectivity" (L-333b–338). For other participants, they

acknowledged and highlighted trauma's potential to negatively impact emotional expression and coping, and thus in turn reflexive capacity. Participant J articulated this concern clearly by noting the deeply adverse effects of negative developmental experiences: "Developmental experiences are such that that person's psychological development has been so fundamentally compromised, that they haven't even developed that ability" (J:530b–536).

Upon exploring the data, an unexpected level of coherence emerged, revealing a temporal dimension to the participants' views. While trauma was initially thought to impair emotional expression and coping abilities, there was an optimism within the data that the negative impacts could be transient, and even transformative in the case of Participant L, particularly if the individual engaged with, or was placed within, an environment that counteracted the negative repercussions and hopefully even fostered greater personal growth, such as personal therapy or indeed clinical training programmes.

This superordinate theme stemmed from the participants' insights into how external factors, including the environment, profoundly influenced their understanding and experiences of emotional development and coping mechanisms. It highlighted the essential role of nurturing environments in fostering reflective capacities through the encouragement of emotional expression and also acknowledged the transformative potential of life experiences, under the right conditions, where reflective capacities and the freedom to express emotions were pivotal in shaping how an individual responded to the challenges of life. Thus these factors formed a complex interplay in their views on the effect of the environment on an individual's development of reflexivity.

In summary, the superordinate theme Influence of External Factors on Emotional Expression and Coping deeply explored the powerful effects that external factors, such as the surrounding environments, exerted on an individual's emotional development and their abilities to navigate challenges in life. The data emphasised that environments which were richer in emotional nurturance were critical for cultivating an individual's capacity for reflection as they influenced the expression of emotions in a healthy way and leveraged the transformative power of life's experiences. Indeed, the presence of supportive conditions was seen by the participants as instrumental in shaping their responses to adversity, with the ability to reflect and express emotions emerging as fundamental and independent factors in the development of an emotionally healthy, adaptive, and thus reflexive self. Thus it was proposed by the data that it is within this type of environment that reflexivity can best develop, particularly in terms of the creation of this environment inside clinical training programmes.

## **6.5 Enhancing Self-Awareness and Reflexivity**

The superordinate theme of Enhancing Self-Awareness and Reflexivity emerged from the subthemes around self-awareness; the development of reflexivity; and the role of reflexivity. This superordinate theme encapsulated the participants' explorations of their deepening understanding of their internal worlds, as well as those of their trainees, through an exploration of their thoughts, emotions, and behaviours, and also tracing the evolution of this understanding through the various components of clinical training. Thus the participants examined here the progressive development of their reflexivity and their understandings of how trainees enhanced their reflexivity.

The interplay between these subthemes and the emergence of the superordinate theme is particularly exemplified through, but of course not limited to, the participants' engagement with the concept of personal therapy; a concept that repeatedly emerged within the data as one of the foundations for enhancing an individual's self-awareness and thus increasing their reflexivity. Personal therapy, from the trainers' perspectives, emerged as a driving force in nurturing self-awareness and, in so doing, driving reflexivity as well. The wealth of qualitative data derived from the narratives of these trainers, who had all of course engaged in personal therapy and also engaged others in personal therapy within their clinical work, proposed that personal therapy is one of, if not the, most significant drivers in their view for enhancing reflexivity. The dialogue with the self catalysed through therapeutic interventions, was explored within the very personal narratives of the participants, which also resonated deeply with the superordinate theme of Self-Awareness and Reflexivity. Participant L highlighted the pivotal role of therapy in self-exploration:

So probably therapy, and I went into therapy very, in my late teens, personally. So I think I started my journey of reflexivity in therapy in my late teens, starting to reflect on myself and live as I understood it, and the world as I experienced it and perceived it, in that context.  
(L:66–74)

Participant L's understanding of their early immersion into reflexivity through personal therapy during their formative years explored how this therapeutic engagement facilitated a metacognitive dialogue where they examined their perceptions, experiences, and indeed their life within the context of the world as a whole. Within their experiences of immersing themselves in the process of personal therapy, participants described being on an introspective journey or process that provided them with insights that further fostered their reflexive abilities. They conceptualised this process of self-exploration and critical self-examination as a reciprocal process where they, as active participants, became more self-aware and thus their reflexivity in turn was further enhanced. Therefore, personal therapy emerged as a fundamental element in the participants' journey toward enhanced self-awareness and, consequently, reflexivity. It served as the core of this overarching theme, adding

another dimension to the data for comprehending the intricacies of reflexivity in its conceptualisation and development, both within the individual and within the context of clinical training.

Participant G's reflection broadened this concept by highlighting the relational dynamic inherent in therapeutic reflexivity:

You see, I think I learned in a lot of personal therapy, rather than through teaching. Erm, I think it's only when you experience somebody doing that for you, or doing it with you, that you appreciate the feeling that it evokes. What's needed to contain somebody. (G-24–32b)

This trainer here proffered an understanding of the therapeutic relationship as a mediator for self-awareness, where emotional resonance and containment provided by the therapist enhanced the reflective process.

Expanding on the social ramifications of therapeutic reflexivity, Participant K stated, "Personal therapy... helped me to be more reflective about myself, and my relation to other people around me, you know, in my environment." (K:773–777). Here, the therapeutic process is depicted as a conduit for intrapersonal reflection and also for understanding an individual's relational dynamics within a broader social and cultural context. The transformative potential of therapy for self-knowledge was further articulated by Participant K: "if they've had personal therapy, that usually is an indicator that they may have got some more self-awareness" (K:1446b–1449). Thus the therapeutic experience was considered a predictor of enhanced self-awareness, suggesting that engagement in therapy was, for Participant K, a discernible pathway to developing a clearer self-concept, and also a primary method to enhance reflexivity.

Building upon this, Participant G discussed the freeing effect of therapy on reflexivity: "Experience of personal therapy that sort of, I think, unlocks some of that ability to understand what it feels like to be working in a reflexive, you know, a reflective way" (G:560–564). Here, personal therapy was portrayed as an unlocking mechanism that facilitated a deeper understanding of reflexivity which was seen by Participant G as a fundamental aspect of both personal growth and professional practice.

Moreover, Participant C's description of their practice of actively seeking feedback at the conclusion of each clinical session and at the end of treatment was portrayed as a clear embodiment of reflexivity; "I always ask for feedback from my clients at the end of every session and the end of every treatment" (C-293b–295). By soliciting feedback, Participant C examined how they engaged in a form of self-assessment and also they valued the clients' perspectives, which was understood as instrumental in enhancing self-awareness and thus refining reflexivity. This bidirectional feedback

loop was also understood as vital for professional development, as it allowed Participant C to adapt and evolve their techniques to better meet the needs of their clients. Thus, this highlighted here a real-world component which the trainer understood as enhancing their reflexivity and also illustrated their comprehension of the importance of this component for professional practice as a whole.

Overall, the data examined the significant interplay between the micro and the macro as by being open to learning from the experiences of each interaction, the trainers are opening themselves up to wider learning about the self through reflexivity. Thus the data also highlighted this concept in a broader manner, as it emphasised the importance of trainees opening themselves up to all training experiences, from interpersonal interactions to critical assessments to peer discussions, as a means to progress reflexivity. Here the trainers proposed joint responsibility for this process where the trainers must provide opportunities for progression from the micro to the macro, whilst the trainees must be motivated to participate. Further, the data emphasised that this was a dynamic process rather than a static one, indicating that enhancing self-awareness and reflexivity as a part of professional development was an ongoing process which was shaped by each interaction and experience.

The superordinate theme of Enhancing Self-Awareness and Reflexivity encapsulated the intertwining of personal and professional growth through continuous self-examination and learning, which has emerged most profoundly within the data in regards to personal therapy as one of the strongest and most significant enhancement factors. The data described personal therapy as pivotal in fostering a deep understanding of the self within a process that involved drawing from and contributing to interpersonal relationships and the wider social and cultural contexts. Thus, the trainers' narratives explored the crucial importance of elevating self-awareness through personal therapy and through comparable processes as a means to cultivate deep reflexivity which, in turn, played a pivotal role in fostering personal growth and professional competence. Indeed, the mutually reinforcing relationship between self-awareness and reflexivity through the mechanisms of enhancement propelled a cycle of personal and professional development.

### **6.7 Cultivating Critical Skills in Creativity**

The superordinate theme of Cultivating Critical Skills in Creativity was driven initially from the raw data and then derived from the subthemes. First the subtheme of imagination explored the process of creative thought and the power to conceive the unseen, which was understood by the participants as playing a vital role in innovation and problem-solving. Second the subtheme of tacit knowledge examined the concept of experiential knowledge. Third, there was the subtheme of multiple points of view where the trainers emphasised the importance of exposure to multiple perspectives to enhance



understanding and evaluation. Finally, the fourth subtheme was evaluative feedback which focused on the critical aspect of the evaluative process. These subthemes merged together within the iterative process to form the superordinate theme.

This superordinate theme emerged as a central and compelling theme in the data, highlighting the participants' collective perspectives on the profound role of creativity in expanding reflexivity. The data revealed that the concept of creativity, broadly defined by the trainers as the use of imagination to create, was a key driver for fostering reflexivity. The participants primarily drew upon their experiences as clinical trainers in order to articulate how creativity served as a powerful tool for enhancing reflexivity. Within this theme, the trainers also explored the multifaceted dimensions of creativity, i.e. its role in facilitating reflexivity and the implications for their clinical training approaches.

Within the data, collaborative perspectives emerged regarding the synthesis of creativity and critical thinking as essential in cultivating comprehensive reflective abilities. The participants understood this synthesis as a process of dynamic interplay. Participant L's notion of the simple but weighty term "freedom" (L:130b) was embedded within in the wider data, reinforcing the narrative that in this context, creativity was not about the form of the art itself but about the embodiment of the freedom to explore, question, express and process. The wider data here proposed this conceptualisation as foundational to critical thinking, where freedom acted as the catalyst and essential background for self-reflective inquiry and innovation. This simple yet complex notion was expanded upon here: "My long-term interest, has been in the creative process and the imagination, the human imagination. Erm, (pause) and the inner life really, and tapping into one's experience of oneself and the world through the imagination" (L:119–125). Participant L here emphasised the significance of creativity in personal and professional development, and highlighted the transformative power of the imagination in understanding and engaging with the world which is a critical aspect of developing critical thinking and which, in turn, is essential for reflexivity.

Participant L's narrative explored the core of creativity, positioning it as fundamental for self-exploration and other or world understanding. Overall the data proposed that the creative process via the human imagination was fundamental in cultivating personal and professional development. Thus, their perspective here advocated the necessity of accessing experiences through imagination in order to shape a more nuanced understanding of the self and the environment around the self. Indeed, this introspective process, facilitated by creativity, was understood here as vital for personal growth as it allowed individuals to transcend conventional thinking and explore new cognitive perspectives. Moreover, Participant L also emphasised the role of creativity in fostering an intimate connection with one's inner self, which would then inform and enhance the professional roles as clinician and trainer. Thus, the trainers' data strongly upheld the fundamental significance of

engaging with the external world through a creative lens as it was seen as serving to enhance cognitive abilities and to lead to innovative critical thinking skills that are essential to reflexivity. Participant L's reflections thus encapsulated the deep interconnection between the imaginative capacity of individuals and the breadth of individual experiences, and therefore highlighted creativity as a profound influencer on reflexivity.

Furthermore, Participant L's focus on disseminating this understanding of creativity further emphasised its significance:

So I want to try to get (pause) to those people, some of the knowledge and expertise that needs to be disseminated more widely, around emotional literacy and creativity and imagination, applied therapeutic thinking. So that they can feel a bit more supported and well resourced. (L:1463–1471)

Here, Participant L captured the essence of fostering an extended environment that values and nurtures creative thought as a means to enhance emotional literacy and therapeutic skills. Thus, this idea was considered pivotal in the trainers' clinical training programmes as it aligned with their goal of developing trainees who enhance their emotional intelligence and critical thinking skills; both of which they understood as critical to reflexivity.

Furthermore, Participant H emphasised the need to employ diverse methodologies and perspectives in this creative learning process: "You've got to try to think creatively. Use storyboards, or whatever you can do to kind of get the information from a different point of view" (H:864–868). Participant H emphasised that it is through such multifaceted approaches that trainees can engage with information more deeply, thus fostering a more critical and nuanced understanding of the subject matter. This understanding was also echoed later on: "It was amazing, and it all came from, yeah this kind of opportunity of hearing about tacit knowledge and try and be creative about how you get people to learn" (H-1001–1005b). The reflection here highlighted the revelation that creative teaching strategies can be utilised to tap into the implicit knowledge that trainees possess and often unlock innovative ways of thinking and understanding. Indeed, the data proposed that the trainers partially attributed their success as trainers to using creativity as a means to convey tacit knowledge.

Overall the trainers proposed an understanding that creative approaches are essential for teaching and learning complex, intuitive information that is, of course, not easily conveyed through traditional didactic techniques. By creatively engaging trainees, trainers emphasised that they could facilitate a deeper, more experiential form of learning that resonated on a practical level. Thus, this suggested that when trainers adopted inventive methods, they can enhance the potential in trainees and make

the process of understanding implicit knowledge more accessible and engaging; a process which is an essential part of reflexivity.

The expansive statement "Play and all the arts, drama, music, movement, sound and play, puppetry, poetry, dance. It could be anything at all that enables that freedom of expression and self-inquiry" (L:127–131) suggested that creativity was not domain-specific but rather a universal medium through which critical skills were developed. By engaging in various artistic and playful activities, individuals could explore different facets of their personality and knowledge, thereby promoting critical self-inquiry and personal awareness. The reflection here stressed the importance of diverse creative outlets in fostering self-expression and introspection, and further the data also suggested that creativity, manifesting through mediums like play, arts, and movement, served as a versatile tool for reflexivity as it allowed trainees to explore deeply into their identities within the broader context.

Thus, it is understood by the trainers that these activities provided a broad canvas where freedom of expression was usefully experienced through a spectrum of approaches, each offering unique ways to engage with and reflect on the self, others and the world. By embracing these various forms of creativity, it was proposed that trainees could enhance their cognitive flexibility, emotional intelligence, and critical thinking, which were seen within the data as crucial for fostering reflexivity. Indeed this expansive view of creativity highlighted its role as a catalyst for a deeper understanding of the self and as a fundamental component in cultivating critical thinking capacities.

Finally, the idea that creativity referred to doing "whatever you can do to kind of get the information from a different point of view" (H-866–868) encapsulated the core of critical thinking, of which creativity is a part. Thus the data proposed that to understand a concept from multiple perspectives, it is essential to engage with it critically and thereby analysing and synthesising the information to form a more holistic perspective. Therefore, the core of critical thinking is understood within these narratives as the ability to understand and analyse information through various lenses. Here, Participant H proposed that creativity was an active process where information was interacted with and reimagined in a variety of ways. Indeed, this re-evaluation from diverse and multiple perspectives was seen by the trainers as crucial for ensuring a comprehensive understanding within training. Hence, creativity in this sense was described as a dynamic and investigative process that fostered deeper cognitive engagement with the aim of promoting a multifaceted understanding of complex issues, including the self.

Thus, the data highlighted that creativity served as a pathway to adopting a dynamic and integral process-oriented approach to nurturing the trainees' critical skills. The participants emphasised the necessity of freedom within this approach; the value of imagination; the power of diverse teaching

strategies; and the importance of engaging with information from multiple perspectives. The interweaving of these elements fostered, in their view, an environment conducive to the development of critical thinking which is, of course, fundamental in the development of reflexivity as well.

It was somewhat remarkable that the participants gravitated towards the concept of creativity as a foundational element in the development of reflexivity. They perceived creativity as a mode of thinking that facilitated reflexivity and also acted as the pathway through which early childhood development of reflexivity was initiated, and also through which it may be further highly enhanced through the clinical training programmes and the content within them, including the facilitation of this content by the trainers.

In conclusion, the analysis of the superordinate theme of Cultivating Critical Skills in Creativity posited creativity as a fundamental and necessary component in the development of reflexivity. Creativity, broadly defined here as the use of imagination to create, was viewed by the participants as a powerful catalyst for reflexivity as it created an internal space of freedom which enabled the exploration of multiple perspectives, tacit knowledge, self-inquiry, and an understanding around interpersonal interactions with the other. Indeed, creativity was perceived as essential within teaching and learning environments and thus should be further deeply embedded within innovative teaching methodologies. In sum, this very process was conceptualised as an accessible and fundamental tool for expanding reflexivity and therefore offered a more multifaceted approach to enhancing reflexivity within training and education.

## **6.8 Reflective Learning and Support**

Within the narratives, the superordinate theme Reflective Learning and Support encompassed three sub-themes, reflection, guidance and feedback cycles, which together formed the foundation for this theme and overall highlighted the significance of introspection and self-awareness in the learning process. Through the subtheme of reflection, the data proposed that trainees could evaluate their comprehension; acknowledge their strengths; identify areas needing growth; and reconcile new information within their existing experiences. Whilst the subtheme of guidance amplified the necessity for structured support from trainers and also institutional frameworks. Finally, the subtheme around feedback cycles highlighted the importance of a reciprocal flow of insights and assessments in order to cultivate an environment of ongoing improvement and adaptation. In addition, this feedback cycle dynamic was seen as essential in delivering timely and pertinent feedback to trainees which would serve to shape the course and speed of their development. All of these subthemes are aptly reflected in the superordinate theme which is discussed in detail here where the participants' understandings illustrated that the path for professional and personal development was oscillating

within a cycle of experience and evaluation, all guided by the supportive other; whether that be a trainer or the components of the clinical training programme or the overarching frameworks of the institution and wider social and cultural contexts. Thus this superordinate theme highlighted the mechanisms of effective reflective learning and also emphasised the transformative power of combining reflective practice with supportive environments containing constructive feedback and expert guidance.

The data highlighted and explored the profound impact of reflective practices, particularly within the domains of clinical supervision and peer support, on the process of reflective learning. The assertion that "Clinical supervision developed much more my reflexivity in terms of my clinical work" (K:771–772b) emphasised the transformative potential of supervision in honing Participant K's reflexive abilities. Here it is propositioned that supervision acted as a catalyst, enhancing the trainer's self-awareness and fostering a deeper understanding of their professional practice. Indeed the trainers' data continued to highlight the recognition of supervision as an external methodology that encompassed both reflective learning and reflective support. Throughout the data, the trainers repeatedly observed how supervision served as a catalyst for these components with participants sharing their personal experiences and perspectives on the rationale behind their effectiveness.

The statement, "I think the best reflection happens with another in a supervision or peer supervision situation" (A:75–77), further highlighted the value of collaborative reflection, suggesting that the presence of another individual can provide alternative perspectives and challenge biases, and therefore facilitate deeper insight. Thus, Participant A suggested here that optimal reflection occurs within a collaborative context, such as clinical supervision or peer supervision. Expanding on this, the interaction with another individual in the reflective process was emphasised as the means to significantly enhance the depth and quality of introspection. Thus this collaborative approach was explored within the wider data in terms of its ability to present and examine multiple perspectives in order to identify inherent biases, and thus promote a deeper understanding. The data proposed that through engaging with the insights of another individual, individuals are essentially exposed to more diverse thought processes and strategies, which can then serve to contribute to more engagement with the process of reflexivity. This concept, mirrored throughout the data, emphatically emphasised the importance of reflective learning and support in reflexivity.

This notion of collaborative reflection is reinforced by the description of peer supervision groups:

But it would be like little peer supervision groups, where let's say the tutor would be the supervisor. Erm, and through the facilitation of the group and the questions being asked, and

so on, it would get, gradually students to be thinking in a more reflective way about themselves, about the clients and others would all be learning. (K-1183–1191)

Here Participant K explored how such a setting promoted collective learning and further nurtured a reflective culture within the educational environment of the clinical training programme. In this type of learning environment that emphasised collaboration, it was clear to Participant K that joint educational growth must be encouraged and that the cultivation of a reflective mindset must also be supported. In their discussion around this type of training environment, it was seen as essential across the data to allow for the sharing of diverse ideas and experiences, as they were integral to deepening the learning process and fostering critical thinking amongst the trainees. Thus the data explored the creation of an environment and an atmosphere which was conducive to self-assessment and mutual feedback, where both trainees and trainers could critically evaluate the teaching and learning methods including the assessments, and indeed by extension the overall training structure. By promoting a holistic culture of reflection, the participants proposed that clinical training environments become catalysts for continuous personal and professional development, where trainees are encouraged to look within and around themselves to enhance their personal and professional development.

In addition, Participant C highlighted the power of reflective learning: "What did you find helpful today? What was not helpful? Is there anything we could do differently next time? Erm, so it's constantly getting that feedback cycle" (C:300a–304). The narrative here explored the value of a continuous feedback cycle in learning. In effect, the process emphasised that through regular prompting of self-assessment and reflection on what was and wasn't effective, trainers could create a responsive learning environment that adapted flexibly and intuitively to the oscillating needs of the trainees. Within the data, the participants importantly did not see this in reference to correction but more about evolving the training environment to better suit the dynamic nature of learning, and indeed particularly the learning of reflexivity.

Further, Participant C celebrated the benefits of group supervision in a peer-based setting in their statement: "It's group supervision so they just teach each other, it's brilliant" (C-71–73). This method was seen within the data as aligning with constructivist learning principles, where knowledge was passed down but far more importantly was actively constructed through trainee interaction. The participant described here how by teaching one another, the trainees reinforced their own learning; gained new insights; and indeed solidified their individual understandings through exploration. Thus, this peer teaching approach was seen as leading to a more profound grasp of the subject matter, as it promoted critical thinking and the application of knowledge in a collaborative context.

The importance of providing space for personal expression in supervision was captured by Participant K in their statement around "allowing the supervisee the space to say what they feel" (K-335–336). This highlighted further the need for supportive and non-judgmental training environments and contexts that encourage openness and vulnerability, as they are seen as key for reflexivity. The participants emphasised that such an environment facilitated transformative learning within the trainees' clinical training.

Moreover, Participant C's statement "Allowing opportunity to make mistakes, I guess. And that journey of 'Oh now I've got the deeper meaning of what that means and how to apply it'" (C:754–758) reflected a pivotal breakthrough in the learning process. It emphasised that reflective learning aimed to have its goal and value rooted in the trainees' capacity to internalise and apply theoretical knowledge in real-world contexts, i.e. clinical practice. Indeed, the data emphatically emphasised the significance of deep learning or deep knowledge, where trainees comprehend concepts in the abstract and thus are also adept at applying them from theory to practice. Expanding on this understanding, the data found that this deeper cognitive engagement enhanced the trainees' capacity to implement this knowledge and process within their own development of reflexivity.

In conclusion, the theme of Reflective Learning and Support emerged as emphasising the importance of supervision, peer interaction, feedback, and expressive freedom as integral components of reflective learning. Indeed, the data emphatically emphasised the importance of integrating these elements at both the personal and systemic levels of clinical training programmes with the rationale that they served to optimise the trainees' reflexivity.

## **6.9 Pedagogical Approaches and Educational Effectiveness**

Within the superordinate theme of Pedagogical Approaches and Educational Effectiveness, the emergence of four subthemes, role modelling, reflective teaching, integrative thinking, and structured feedback, formed the foundations for this superordinate theme which will be explored here. The subtheme of role modelling emerged within this framework as an example of setting professional standards within clinical training and thereby shaping trainees' professional identities and practices. Reflective teaching was a further process embedded within this theme where the data encouraged trainees to critically engage with their own cognitive and emotional narratives in the teaching approaches. Moreover, the subtheme around integrative thinking focused on equipping trainees with the skills to synthesise multiple perspectives and theories as a means to cultivate their critical thinking skills. Finally the subtheme of structured feedback explored the process of structured routes for constructive critique and adaptation. The subtheme around feedback has interestingly emerged across the data though in very distinct capacities and furthermore in relation to very differing



components related to the development of reflexivity. Thus, feedback, in its different dimensions, emerged within different superordinate themes. This, in turn, solidified its significance overall and extended the understanding of feedback's roles within reflexivity.

Together, these subthemes merged within the iterative process to form this superordinate theme which explored the shaping of the teaching and learning methods within counselling and psychology training programmes, and explored their effectiveness in training professional clinicians, specifically in reference to the training of reflexivity.

First, it is of interest to explore Participant A's observation, "I think also a trainer is a role model, inevitably" (A-1317–1318), as they succinctly encapsulated the dual aspect of trainers as role models. Participant A shared their exploration of how trainers fulfilled the traditional role of setting a benchmark of high standards and, in addition, were responsible for embodying the more qualitative aspects of being a clinical trainer, that of being a human being with a commitment to personal growth and a willingness to learn. This conception within the wider data emphasised the notion of clinical trainers as professionals to aspire to and positioned them as active individuals who purposefully enhanced their own personal and professional reflexive development. Here, Participant A highlighted the importance of trainers who are seen to be visibly engaged in the learning process and therefore demonstrating qualities in line with a growth model of the self. Thus, the overall data aligning with this approach emphasised the application of this same growth model to be deeply embedded within the clinical training programmes and the trainees themselves in order to create a training environment where mutual learning and development are central.

Complementing this, the assertion that "it's difficult to teach reflexivity when you're not very reflexive" (A-1309–1311a) confronted the trainers with the challenge of ensuring the ongoing embodiment of the very practices and attributes that they aimed to impart. In essence, Participant A further emphasised here the helpfulness of trainers as role models and the necessity of all trainers as role models within these training environments. This further reiterated the data's universal perspective that trainers must continue to engage with the development of reflexivity as much as, and partially in service to, the trainees. Thus the data supported a reflective teaching model predicated on the belief that trainers' abilities to enhance reflexivity in their trainees is subject to their own reflexive development. By engaging in this, trainers explored how they provided authentic examples of reflexivity in action, thereby creating a more effective training process.

Participant A further highlighted the pedagogical challenges and responsibilities of teaching reflexivity:

I mean, you know, some of the people that I've supervised haven't been very reflective and you have to teach it almost from scratch in the way that you would with certain patients. Erm, I mean, it doesn't mean they can't learn it and get it, but it takes longer. (A-1326)

For Participant A, trainers often encountered trainees at various stages of reflective ability where some trainees required instruction in reflexivity from an earlier stance. Thus the process described further emphasised the importance of both a growth model of reflexivity within training programmes, and most importantly, a growth model that is applied at the level of the individual. This process emphasised that while reflexivity is understood as a cognitive skill from early life, its later and ongoing development is very much influenced by the individual's life experiences. Thus the data overwhelmingly presented the development of reflexivity as a gradual and individualised journey. Here, the trainer's role is conceptualised throughout all the narratives as one that is responsible for cultivating an environment where reflexivity can be learned and nurtured over the course of clinical training; this responsibility was understood as shared across the trainers, the clinical training programmes and the academic institutions. Furthermore the data highlighted the adaptability required in these particular training environments, as was exemplified through the focus on the broadness of teaching and learnings methods.

Moreover, Participant E discussed the importance of feedback as a two-way street in these clinical training programmes and noted the necessity of: "Feedback on how people are receiving your information, where they're going with whatever is happening within the setting" (E:419–422). They examined how the process of feedback was pivotal for trainers to understand the impact of their teaching and also for trainees to influence the teaching and learning process. In this sense, feedback informed the trainers about the trainees' comprehension and engagement which would then, of course, allow for adjustments in pedagogical strategies. Participant E also proposed that this empowered trainees to take an active role in their educational journey as it enabled them to further adopt reflexivity as a means to reflect on their learning and thus further contributing to the collective learning process. The narratives emphasised that this dynamic interaction ensured that training was responsive and tailored to the needs of the trainees, facilitating an environment where learning is actively shaped by the participants within the clinical training programmes.

Furthermore, Participant K addressed the nuanced interplay between content as a learning method and the development of reflexivity within their narrative: "What influences your response, you know. What is it about you or what is it about maybe where you're working and so on, that erm, affects how you're thinking and your response to this article" (K-997–1001b). Participant K here directed the trainee to consider primarily the wealth of personal and contextual elements that may have impacted their comprehension and critical engagement; "what could have influenced the ideas that they got

from the article, or the opinions that they formed about the article'" (K-958–961). This notion, reflected widely within this superordinate theme, emphasised the importance of the other in learning, where the other is sometimes an abstract 'other' such as in the form of an article in the example above. Thus the trainer here exemplified the use of any 'other' material for the development of reflexivity, almost irrelevant of the tool itself as the whole focus was on the process. Moreover the overall data supported the proposition that the trainer's use of any teaching tool was deeply rooted in the process and, in so doing, emphasised the need for trainers to create learning experiences through their teaching tools that consider the trainees' current levels of reflexivity, thereby facilitating a more individualised and process orientated clinical training environment.

The notion of integrative thinking is related here and was elaborated upon within the data from Participant K: "teaching people how to erm, trainees or qualified therapists, but err, particularly trainees about thinking integratively, so not just thinking within a particular model" (K:26–31); and Participant C, who focused on the outcome: "Oh now I've got the deeper meaning of what that actually means and how to apply it" (C:754–755). These reflections and the wider data supported a pedagogical approach to reflexivity which adopted a process focused, individualised and developmental methodology within the training programmes. The data also encouraged the use of integrative thinking as vital for cultivating flexibility, as it encouraged trainees to move from the boundaries of perhaps one set framework and instead interweave concepts from various disciplines. This synthesis of knowledge broadened the trainees' understanding and further, according to the trainers, enhanced the trainees' abilities to apply theories in clinical practice. In particular, Participant C's explorations epitomised a moment of attainment in reflexivity, where knowledge is not just understood but is deeply embedded.

The superordinate theme Pedagogical Approaches and Educational Effectiveness comprehensively explored the personal and professional perspectives on the content, process and efficacy of the pedagogical approaches in the experience of these trainers. The data acknowledged that teaching and learning methods served a dual purpose of evaluating knowledge and also acted as a catalyst for deepening understanding and consolidating learning. Within the framework of reflexivity, the latter of these was seen as necessary both as a tool and as an outcome. Overall, this theme emphasised the necessity of dynamic and multifaceted pedagogical approaches, proposing that a deeper level of reflexivity can and should be amplified within the teaching tools and the process of learning.

### **6.10 Cultivating Reflexivity Through Critical Assessment and Engagement**

The superordinate theme Cultivating Reflexivity Through Critical Assessment and Engagement encapsulated the trainers' narratives on the comprehensive process of enhancing trainees

understanding and development of reflexivity within the context of assessments. This theme emerged from the subthemes; knowledge and application of theory; increased reflective awareness; and assessment feedback. Central to this theme was the recognition that it was necessary for the assessments to, of course, include but also move beyond the measurement of theoretical knowledge in order to work primarily as pivotal tools for both solidifying learning and more importantly, in their own right, for enhancing reflexivity. For trainers, the ongoing scrutiny of critical assessment as well as increasing engagement in reflexivity through this process was seen as critical to the development of reflexivity.

Thus the employment of feedback to fine-tune the precision of an individual's reflexivity was paramount, as highlighted by Participant J:

When somebody is given very clear feedback about problems, deficits, and then they still aren't able to develop that area of competence, to an adequate level, that's a pretty clear indicator that they are at a developmental stage, about that competence, that means they're not ready to continue this programme. (J:1656–1665)

This theme also highlighted the importance of deep reflexivity through engagement in critical assessments, where trainees were encouraged to engage in an assessment of their reflexivity based on external assessment feedback; "I think that they shape you into wondering about what occurs for you. And because the feedback you get from them is about how, how accurate your reflexivity is" (H:125–127). Within the narratives, this is further examined through the experiences of trainees completing critical assessments, such as process reports and case studies, which also involved their recognition of missed opportunities for reflexivity within these assessments. As Participant G stated, "I do really think they are useful towards your learning, helping you understand your own ways of expressing reflexivity, but also making you realise when you have missed opportunities to do so" (G:234a–239). This aligned with the perspective previously emphasised by Participant H above.

The data's exploration of the iterative relationship between theory and practice was integral to this theme. Participant K discussed how engagement with critical assessments was understood as an enriching experience and one that deepened the reflexive process for them; "These kind of pieces of work forced me, to look at my own processes and what's going on, and what's happening in the room let's say, with a client" (K:80b–84). In addition, Participant C reflected on an appreciation of the depth that theory added to professional thought: "I think the theory and all the research and all the study that I do, just gives more depth and, and more variation on how I think" (C:244–248).

Indeed, the act of writing critical assessments is emphasised as a mechanism for embedding reflexivity, as Participant C reflected:

Because you can listen to somebody talking and you think, 'Oh yes I know that'. But the combination of reading it and you get more depth from the reading and then the reading somehow links back into the conversation. Erm, but then writing assignments, when you go to write something down you think, 'Actually, I have no idea what I'm talking about'. It does make you start to read with more depth and more reflectivity because you're having to repackage it and reconstitute it into another, into your own words and your cognitions. So, I think it embeds it. (C:274–290)

This statement reflected on the transformative impact of engaging with content through multiple modalities, whether that be listening, reading or, of course, writing. Here, the participant explored how whilst listening may give a sense of familiarity with the topic and reading allowed for a deeper understanding, the process of writing almost acted as a force for the individual to process and articulate their understanding in their own words. Therefore, the act of writing, represented by written assessments like case studies and process reports, was seen as a process of internalisation and subsequent externalisation to both the trainee's internal world and the external assessment context, thus illustrating reflexivity in action. Within this process, the overall data proposed that requiring trainees to confront gaps in their understanding of the self through the assessment process was a further catalyst for reflexivity. Thus the participants found that from their experiences these written assessments, where information is actively worked through and expressed personally, were critical and led to a more profound and embedded form of deep reflexivity for trainees.

The application of learning through experiential case studies was also recognised through the data for its effectiveness in reflective decision-making: "Through that experiential case study, it enabled him to be able to work out what was more appropriate" (E:918–921). However, there was also an acknowledgment of the limits of traditional case reports in showcasing reflexivity, calling for diverse methods to effectively demonstrate and develop this skill:

But case reports are more about, you know an assessment that a trainee has, has the knowledge of a theory and can apply that and can communicate that understanding of knowledge, technically. I don't think that they're the venue to demonstrate erm, reflexivity. (H:841–851).

This, of course, is dependent on the assessment criteria around case studies and process reports. Indeed critical assessments, such as process reports and case studies, were presented overall within

the data as pivotal for trainees to assess their own reflective abilities and engage them in further development; in line with an individualised growth model of reflexivity that has emerged within the other superordinate themes. Indeed these critical assessments were encouraged by the trainers as they were seen as encouraging an introspective approach that combined theory with practice, and thus led to a richer cognitive process which in turn expanded reflexivity further. Thus the data described the act of critical engagement with writing as a crucial element in reflexivity as it prompted a deeper engagement with the content and fostered a more integrated and personal understanding. While experiential learning through case studies and process reports was emphatically emphasised for its role in reflexive development, the wider data within the other themes understood these assessments as part of a wider pedagogical approach that utilises varied and innovative methods to more wholly focus on the development of reflexivity.

In conclusion, the superordinate theme Cultivating Reflexivity Through Critical Assessment and Engagement represented a holistic approach to engaging trainees within critical assessment processes. The data overwhelmingly supported the vital role of critical assessments in fostering knowledge and further as a crucial tool for enhancing reflexivity for trainees. This theme also emphasised the importance the integral process of critical feedback in the assessment process, through which trainers proposed that reflexivity was notably enhanced. Through various methods of engagement within critical assessments, the data emphasised that these were in fact their own micro environments of experiential learning. Indeed, once more, the concept of the 'other' within the dual action of reflexivity was proposed as including abstract others, as seen in the context of critical assessments here. Thus, clinical training environments were emphatically seen as increasing reflexivity according to the trainees' level of engagement with the critical assessment; the level of critical thinking within the assessment itself; and the process of critical evaluation. Collectively, these insights advocated for an integrated educational experience with critical assessments that cultivate deep reflexivity.

## CHAPTER 7: Quantitative Results

This chapter employs statistical analysis to synthesise the interviewees' responses into quantitative data. The analysis of the raw qualitative data gathered for this study followed a targeted in-depth analytic structure based on data management, interpretation and presentation tailored specifically to the aims and hypotheses under investigation.

### 7.1 Measures of Internal Consistency

All self-reported measures were tested for reliability in terms of internal consistency, as measured by Cronbach's alpha. For the Preferred Teaching Approach Inventory (PTAI), Cronbach's alpha was 0.790, which indicates an acceptable level of internal consistency for our scale with this specific sample. For the Relationship Scales Questionnaire (RSQ), Cronbach's alpha was 0.761, which indicates an acceptable level of internal consistency for our scale with this specific sample. For the Training Questionnaire, Cronbach's alpha was 0.835, which indicates a good level of internal consistency for our scale with this specific sample.

The Self-Reflection and Insight Scale reached an acceptable reliability, ranging between 0.758 and 0.848, as shown below:

**Table 1**

*Internal Consistency for the Self-Reflection and Insight Scale*

<b>Engagement in Self-Reflection</b>	
Time 1	Time 2
0.844	0.806
<b>Need for Self-Reflection</b>	
Time 1	Time 2
0.848	0.794
<b>Reflexivity</b>	
Time 1	Time 2
0.758	0.761

The BFI-10 Personality Inventory reached an acceptable reliability, ranging between 0.745 and 0.822 for the five dimensions of personality, as shown below.



**Table 2***Internal Consistency for the Big Five Inventory-10*

Extraversion	0.781
Agreeableness	0.758
Conscientiousness	0.745
Neuroticism	0.755
Openness to Experience	0.822

Full SPSS alpha results are reported in Appendix O.

**7.2 Descriptive Statistics of Demographic Variables***BFI-10 Personality Inventory*

For the BFI-10 Personality Inventory, 59.5% of participants were rated as High Conscientiousness, 57.3% as High Agreeableness, 36.8% as High Openness, 32.4% as High Neuroticism, and 29.7% as High Extraversion. In addition, 56.8% were rated as Low Extraversion, 53.5% as Low Neuroticism, 49.2% as Low Openness, 33% as Low Conscientiousness, and 25.9% as Low Agreeableness.

**Table 3***Frequency Table for BFI-10 Inventory*

<b>Personality Type</b>	<b>Percentage of High</b>	<b>Percentage of Low</b>
<b>Extraversion</b>	29.7	56.8
<b>Agreeableness</b>	57.3	25.9
<b>Conscientiousness</b>	59.5	33
<b>Neuroticism</b>	32.4	53.5
<b>Openness</b>	36.8	49.2

*Self-Reflection & Insight Scale*

In Time 1, participants scored a mean Engagement score of 25.21 ( $SD = 5.69$ ), a mean Need For Reflection score of 25.38 ( $SD = 5.24$ ), and a mean Insight score of 28.22 ( $SD = 5.51$ ). In Time 2, participants scored a mean Engagement score of 28.53 ( $SD = 5.52$ ), a mean Need For Reflection score of 29.72 ( $SD = 4.92$ ), and a mean Insight score of 43.73 ( $SD = 3.73$ ). (See Table 4 below.)

### *Relationship Scales Questionnaire*

The Relationship Scales Questionnaire scores participants on four continuous measures of attachment: Secure scored the highest with a mean of 3.15 ( $SD = 0.86$ ), followed by Preoccupied with a mean of 2.97 ( $SD = 0.75$ ), Dismissing with a mean of 2.92 ( $SD = 0.75$ ) and Fearful with a mean of 2.70 ( $SD = 0.83$ ). (See Table 4 below.)

### *Preferred Teaching Approaches Inventory*

Participants rated Information Transmission/Teacher-Focused Intention as the highest with a mean of 5.34 ( $SD = 1.07$ ), followed by Conceptual Change/Student-Focused Strategy with a mean of 5.15 ( $SD = 1.09$ ), Conceptual Change/Student-Focused Intention with a mean of 4.95 ( $SD = 1.11$ ), and Information Transmission/Teacher-Focused Strategy with a mean of 3.81 ( $SD = 0.75$ ). (See Table 4 below.)

**Table 4**

*Mean, Standard Deviation and Range for the Relationship Scales Questionnaire, the Self-Reflection and Insight Scale, and the Preferred Teaching Approaches Inventory*

	<b>Mean</b>	<b>Standard Deviation</b>	<b>Range</b>
<b>Relationship Scales Questionnaire</b>			
<b>Secure</b>	3.15	0.86	1.2–4.8
<b>Fearful</b>	2.70	0.83	1–5
<b>Preoccupied</b>	2.97	0.75	1.25–5
<b>Dismissing</b>	2.92	0.75	1.2–4.6
<b>Self-Reflection and Insight Scale</b>			
<b>Engagement in Self-Reflection Time 1</b>	25.21	25.21	8–33
<b>Engagement in Self-Reflection Time 2</b>	28.53	28.53	12–36
<b>Need for Self-Reflection Time 1</b>	25.38	25.38	8–34
<b>Need for Self-Reflection Time 2</b>	29.72	29.72	8–36
<b>Reflexivity Time 1</b>	28.22	28.22	17–41
<b>Reflexivity Time 2</b>	43.74	43.74	27–48
<b>Preferred Teaching Approaches Inventory</b>			
<b>Conceptual change/student-focused→ intention</b>	4.95	1.11	2.5–7
<b>Conceptual change/student-focused→ strategy</b>	5.15	1.09	2.25–7
<b>Information transmission/teacher-focused→ intention</b>	5.34	1.07	2.75–7
<b>Information transmission/teacher-focused→ strategy</b>	3.81	0.75	2.5–6

### *Self-Rated Reflexivity Questionnaire*

For the Self-Rated Reflexivity Questionnaire, 66.9% of participants rated Personal Therapy as having 'Extensive improvement on levels of reflexivity'. The other items rated as having 'Extensive improvement on levels of reflexivity' were as follows: Individual Supervision (65.3%), Clinical Practice (45.8%), Group Supervision (40.7%), Case Discussion (29.7%), Case Reports/Process Reports (28.8%), Video Work (28%), Service User Input (28%), Roleplay (24.6%), Peer Discussion (18.6%), Observing Trainers in Practice (18.6%), Observing Professionals in Practice (10.2%), Seminars (7.6%), Theoretical Essays (2.5%), and Lectures (1.7%).

**Table 5**

*Frequency Table for Self-Rated Reflexivity Questionnaire*

<b>Teaching Activity</b>	<b>Percentage rating activity as having 'Extensive Improvement on levels of Reflexivity'</b>
<b>Lectures</b>	1.7
<b>Seminars</b>	7.6
<b>Case Discussion</b>	29.7
<b>Roleplay</b>	24.6
<b>Video Work</b>	28
<b>Observing Trainers in Practice</b>	18.6
<b>Observing Professionals in Practice</b>	10.2
<b>Case Studies/Process Reports</b>	28.8
<b>Theoretical Essays</b>	2.5
<b>Individual Supervision</b>	65.3
<b>Group Supervision</b>	40.7
<b>Peer Discussion</b>	18.6
<b>Clinical Practice</b>	45.8
<b>Service User Input</b>	28
<b>Personal Therapy</b>	66.9

*Amount of Teaching Activity Questionnaire*

For the Amount of Teaching Activity Questionnaire, the highest teaching activity is Lectures with a mean of 6.25 hours per week ( $SD = 3.48$ ), followed by Seminars with a mean of 3.2 hours per week ( $SD = 1.73$ ), and Peer Discussion with a mean of 1.45 hours per week ( $SD = 0.88$ ). The lowest amount of teaching activities were Observing Trainers in Practice and Service User Input, both with a mean of 0.02 ( $SD = 0.13$ ).

**Table 6***Frequency Table for Amount of Teaching Activity Questionnaire*

	<b>Mean No. of Hours Per Week</b>	<b>Standard Deviation</b>	<b>Range</b>
<b>Amount of Teaching Type Questionnaire</b>			
<b>Lectures</b>	6.25	3.48	1–12
<b>Seminars</b>	3.2	1.73	1–8
<b>Case Discussion</b>	1.38	0.99	0–4
<b>Role-play</b>	0.75	0.74	0–2
<b>Video Work</b>	0.04	0.20	0–1
<b>Observing Trainers in Practice</b>	0.02	0.13	0–1
<b>Observing Professionals in Practice</b>	0.27	0.53	0–2
<b>Individual Supervision</b>	1.03	0.60	0–2
<b>Group Supervision</b>	1.03	1.19	0–4
<b>Peer Discussion</b>	1.45	0.88	1–6
<b>Clinical Practice</b>	6.04	3.38	1–10
<b>Service User Input</b>	0.02	0.13	0–1
<b>Personal Therapy</b>	0.92	0.59	0–3
<b>Case Studies/Process Reports</b>	2.04	1.02	0–4
<b>Theoretical Essays</b>	2.46	1.11	0–5

### 7.3 Inferential Statistics

A Pearson correlation coefficient was computed to assess the relationship between the personality variables, the attachment variables, the Time 1 Reflexivity and Time 2 Self-Reflection and Insight Scale variables, the PTAI variables, the Amount of Teaching Activity variables and the Self-Rated Reflexivity variables. Additionally, the result of this correlation analysis was used to determine the need for further statistical tests.

#### 7.3.1 Hypothesis 1

Hypothesis 1 predicted that at Time 1, participants with a prior clinical background will score significantly higher on Reflexivity than those without a prior clinical background.

In order to test the hypothesis, a multiple regression was run to predict Reflexivity at Time 1 from prior clinical training, prior clinical supervision, prior personal therapy and prior clinical hours.

These variables statistically significantly predicted Reflexivity T1,  $F(4,180) = 7.3222$ ,  $p < .0005$ ,  $R^2 = .140$ . Two of the variables – prior clinical supervision and prior personal therapy – contributed significantly to the prediction,  $p < .005$ . Hypothesis 1 was partially supported.

**Table 7**

*Multiple Regression Analysis Results on the Prediction of Reflexivity Scores Regarding Prior Clinical Background*

<b>Model</b>	<b>Unstandardised B</b>	<b>Coefficients</b>	<b>Standardised</b>	<b>t</b>	<b>sig</b>
		<b>Std. Error</b>	<b>Coefficients Beta</b>		
<b>Constant</b>	33.763	1.271		26.570	.000
<b>Supervision</b>	-4.398	.799	-.530	-5.505	.000
<b>Therapy</b>	-2.577	.645	-.292	-3.996	.000
<b>Degree/Training</b>	-.156	.918	-.017	-.170	.865
<b>Clinical Hours</b>	2.038	1.040	.236	1.959	.052

$F = 18.738$ ;  $p = .000$ ;  $R = .542$ ;  $R^2 = .294$

Please see Appendix R for SPSS Output.

### **7.3.2 Hypothesis 2**

Hypothesis 2 predicted that participants rated high on Openness to Experience, Conscientiousness and Agreeableness personality categories will score significantly higher on Reflexivity at Times 1 and 2.

A series of independent samples t-tests were conducted to compare Reflexivity in Time 1 and Time 2 in comparison with participants rated high and low in the personality categories.

In Time 1, there was a significant difference in the scores for low Agreeableness ( $M = 26.71$ ,  $SD = 5.51$ ) and high Agreeableness ( $M = 29.43$ ,  $SD = 5.44$ ) conditions;  $t(152) = -2.867$ ,  $p = 0.005$ . In addition, there was a significant difference in the scores for low Conscientiousness ( $M = 26.82$ ,  $SD = 5.93$ ) and high Conscientiousness ( $M = 29.41$ ,  $SD = 5.09$ ) conditions;  $t(169) = -3$ ,  $p = 0.003$ . These results suggest that when participants are rated high in Agreeableness and Conscientiousness, their scores on Reflexivity in Time 1 are higher.

In Time 2, there was a significant difference in the scores for low Agreeableness ( $M = 42.58$ ,  $SD = 3.60$ ) and high Agreeableness ( $M = 44.64$ ,  $SD = 2.97$ ) conditions;  $t(93) = -3.023$ ,  $p = 0.003$ . These results suggest that when participants are high in Agreeableness, their scores on Reflexivity in Time 2 are higher. Hypothesis 2 was partially supported.

Please see Appendix S for SPSS Output.

### 7.3.3 Hypothesis 3

Hypothesis 3 predicted that participants scoring higher on the Secure Attachment variable will score significantly higher on Reflexivity at Time 1.

A multiple regression was run to predict Reflexivity at Time 1 from Secure Attachment style. Secure Attachment style statistically significantly predicted Reflexivity at Time 1,  $F(1,183) = 9.968$ ,  $p = 0.02$ ,  $R^2 = .052$ . Hypothesis 3 was fully supported.

**Table 8**

*Multiple Regression Analysis Results on the Prediction of Reflexivity Scores Regarding Secure Attachment*

Model	Unstandardised B	Coefficients Std. Error	Standardised Coefficients Beta	t	sig
Constant	23.616	1.510		15.642	.000
Secure	1.458	.462	.227	3.157	.002

$F = 9.968$ ;  $p = .002$ ;  $R = .227$ ;  $R^2 = .052$

Please see Appendix T for SPSS output.

### 7.3.4 Hypothesis 4

Hypothesis 4 predicted that factors on the Self-Reflection and Insight Scale will increase significantly between Time 1 and Time 2.

A paired-samples t-test was conducted to compare Reflexivity in Time 1 and Time 2. There was a significant difference in the scores for Reflexivity in Time 1 ( $M = 29.23$ ,  $SD = 5.66$ ) and Reflexivity in

Time 2 ( $M = 43.74$ ,  $SD = 3.73$ ) conditions;  $t(117) = -13.46$ ,  $p < 0.0005$ . These results suggest that Reflexivity does increase over time when participating in a clinical training programme.

A paired-samples t-test was conducted to compare Engagement in Reflection in Time 1 and Time 2. There was a significant difference in the scores for Engagement in Reflection in Time 1 ( $M = 24.07$ ,  $SD = 6.25$ ) and Engagement in Reflection in Time 2 ( $M = 28.53$ ,  $SD = 5.52$ ) conditions;  $t(117) = -6.469$ ,  $p < 0.0005$ . These results suggest that Engagement in Reflection does increase over time when participating in a clinical training programme.

A paired-samples t-test was conducted to compare Need for Reflection in Time 1 and Time 2. There was a significant difference in the scores for Need for Reflection in Time 1 ( $M = 24.58$ ,  $SD = 5.88$ ) and Need for Reflection in Time 2 ( $M = 29.72$ ,  $SD = 4.92$ ) conditions;  $t(117) = -7.917$ ,  $p < 0.0005$ . These results suggest that Need for Reflection does increase over time when participating in a clinical training programme. Hypothesis 4 was fully supported.

Please see Appendix U for SPSS output.

### **7.3.5 Hypothesis 5**

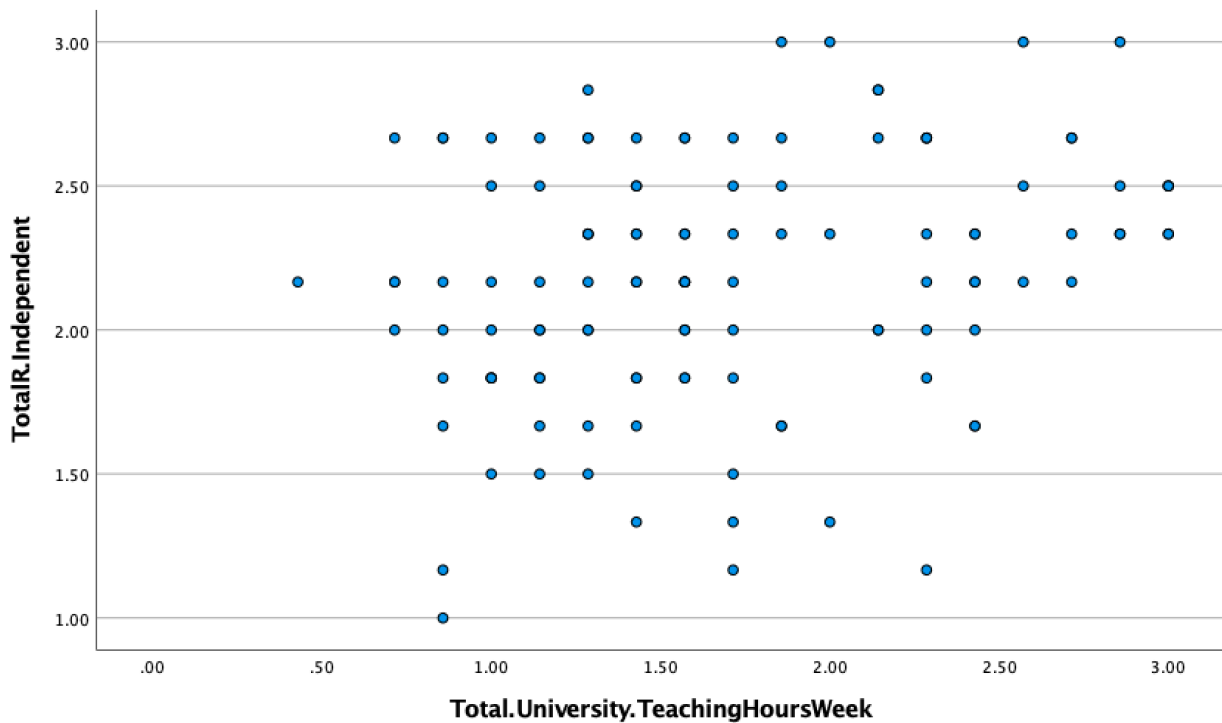
Hypothesis 5 predicted that higher levels of self-rated Reflexivity will be positively correlated with university-led and independent-led training components with a higher relative contribution of independent-led training components (Supervision, Peer Discussion, Clinical Practice, Service User Input and Personal Therapy).

A Pearson correlation coefficient was computed to assess the relationship between the self-reported levels of Reflexivity and university-led vs. independent-led training components. Within the university-led training components, two groups were formed based on hours per week and hours per year. There was a positive correlation between the amount of university-led training components and the self-rated increase in Reflexivity from independent-led training components,  $r = 0.265$ ,  $n = 118$ ,  $p = 0.004$ . A scatterplot summarises the results.



**Figure 1**

*Scatterplot of Amount of University-Led Training Components and Reflexivity from Independent-Led Training Components*

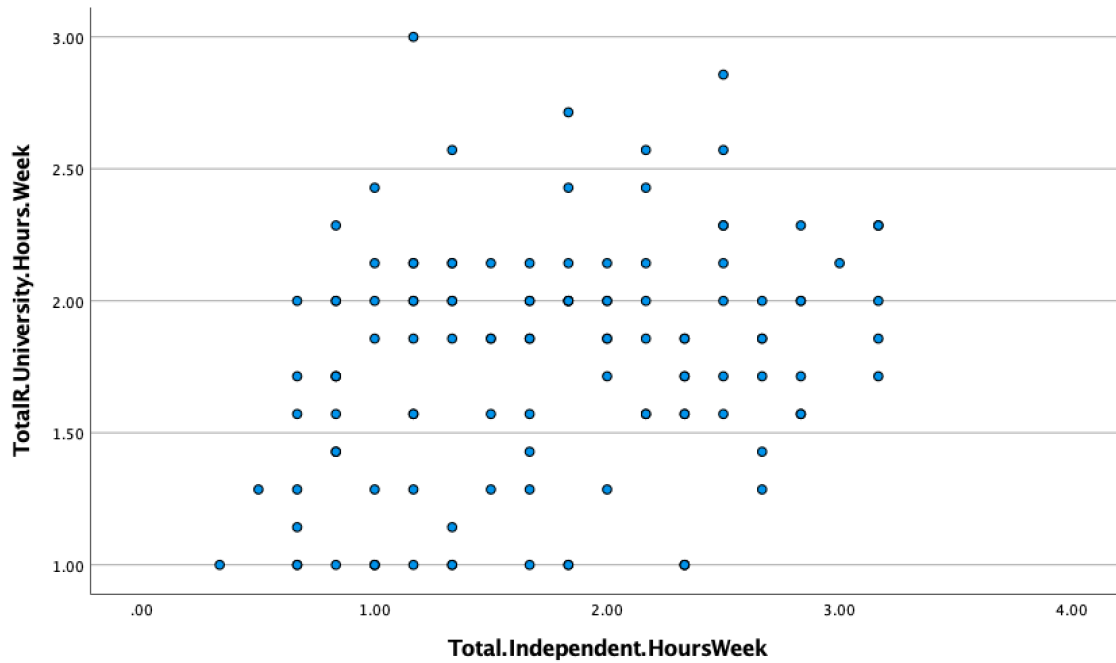


For amount of university-led training components and Reflexivity from independent-led training components, the scatterplot displays a moderately positive linear relationship. As the amount of university-led components increases, Reflexivity from independent-led training components also tends to increase.

There was a positive correlation between the amount of independent-led training components and the self-rated increase in Reflexivity from university-led training components ( $r = 0.264$ ,  $n = 118$ ,  $p = 0.004$ ) and the self-rated increase in Reflexivity from independent-led training components,  $r = 0.455$ ,  $n = 118$ ,  $p < 0.005$ . (See the scatterplots below to for a summary of results.)

**Figure 2**

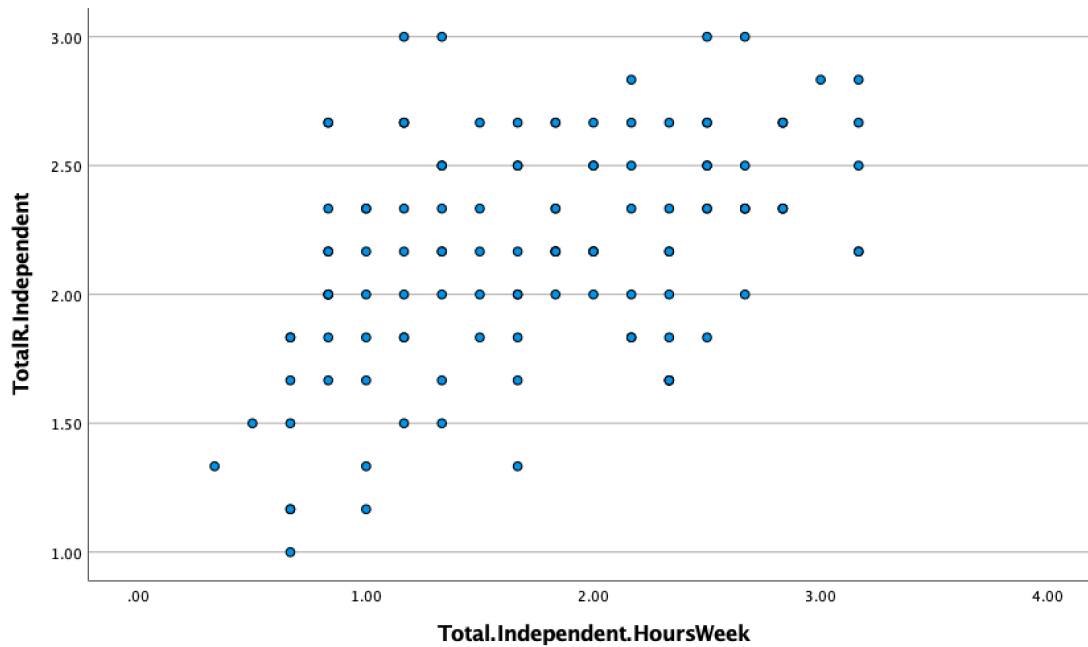
*Scatterplot of Amount of Independent-Led Training Components and Reflexivity from University-Led Training Components*



For the amount of independent-led training components and Reflexivity from university-led training components, the scatterplot displays a moderately positive linear relationship. As the amount of independent-led components increases, Reflexivity from university-led training components also tends to increase.

**Figure 3**

*Scatterplot of Amount of Independent-Led Training Components and Reflexivity from Independent-Led Training Components*



For the amount of independent-led training components and Reflexivity from independent-led training components, the scatterplot displays a moderately positive linear relationship. As the amount of independent-led components increases, Reflexivity from independent-led training components also tends to increase.

The amount of time spent in independent-led training components had a higher contribution to Reflexivity than the amount of time spent in university-led training components. However, independent-led training components increased ratings of Reflexivity within university-led training components to a higher relative contribution than ratings of Reflexivity within independent-led training components. Hypothesis 5 was partially supported.

Please see Appendix V for SPSS output.

### **7.3.6 Hypothesis 6**

Hypothesis 6 predicted that Secure Attachment style will predict Reflexivity in Time 1 and increase in Reflexivity from Time 1 to Time 2.

A multiple regression was run to predict Reflexivity at Time 1 from attachment styles. These variables statistically significantly predicted Reflexivity Time 1,  $F(2, 115) = 4.442$ ,  $p < .014$ ,  $R^2 = .072$ . Reflexivity in Time 2 added statistically significantly to the prediction,  $p = .023$ . Hypothesis 6 was fully supported.

**Table 9**

*Multiple Regression Analysis Results on the Prediction of Reflexivity Scores in T1 and T2 Regarding Secure Attachment*

Model	Unstandardised B	Coefficients Std. Error	Standardised Coefficients Beta	t	sig
Constant	.362	.983		.369	.713
Reflexivity.T1	.017	.015	.104	1.105	.271
Reflexivity.T2	.054	.023	.217	2.304	.023

$F = 4.442$ ;  $p = .014$ ;  $R = .268$ ;  $R^2 = .072$

Please see Appendix W for SPSS output.

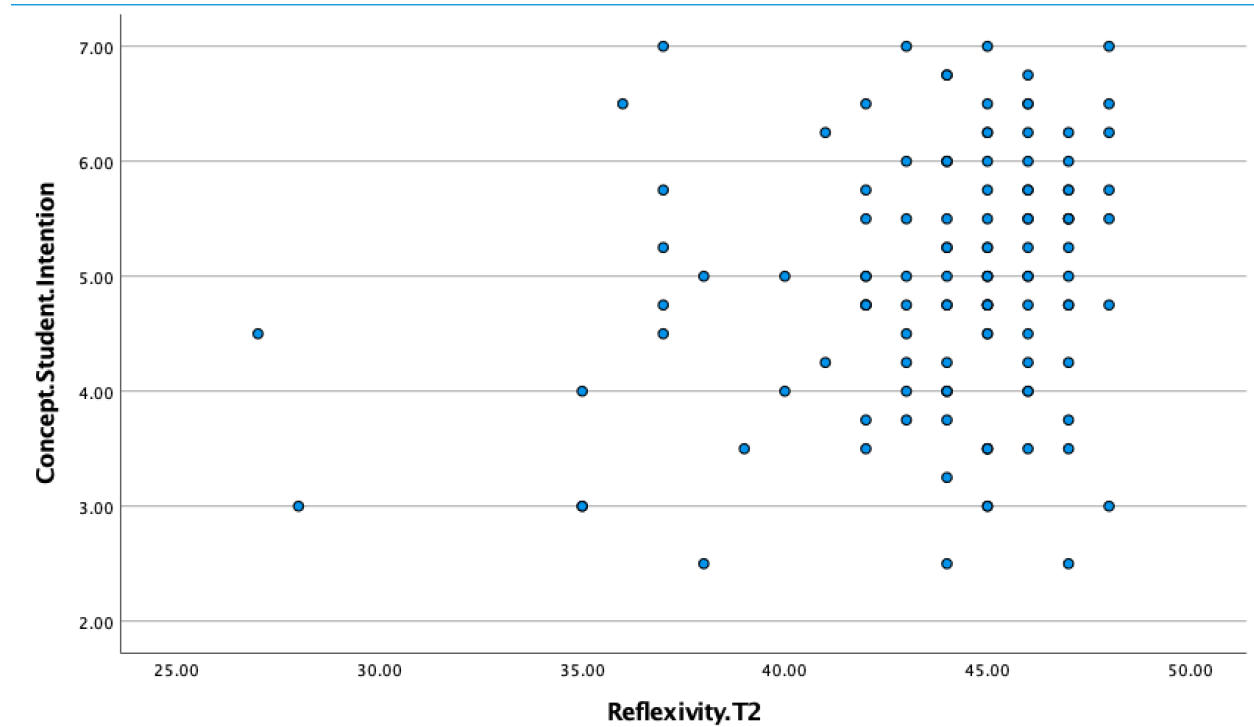
### 7.3.7 Hypothesis 7

Hypothesis 7 predicted that participants preferring student-focused teaching approaches will score significantly higher on Reflexivity in Time 2 than those preferring a teacher-focused teaching approaches.

A Pearson correlation coefficient was computed to assess the relationship Reflexivity at Time 2 and Preferred Teaching Approaches. There was a positive correlation between Conceptual Change/Student-Focused→Intention and Reflexivity in Time 2,  $r = 0.213$ ,  $n = 118$ ,  $p = 0.021$ . A scatterplot summarises the results (Figure 2). Overall there was increase in Reflexivity in Time 2 from a student-focused teaching approach.

**Figure 4**

*Scatterplot of Reflexivity in Time 2 and Conceptual Change/Student-Focused Intention*



For Reflexivity in Time 2 and Conceptual Change/Student-Focused-Intention, the scatterplot displays a moderately positive linear relationship. As Reflexivity in Time 2 increases, the Conceptual Change/Student-Focused→Intention also tends to increase.

Please see Appendix X for SPSS output.

## CHAPTER 8: Discussion

In light of the phenomenological mixed methods approach, this discussion integrated the key findings from the quantitative and qualitative research in order to present and examine the key research outcomes of this thesis in light of the existing literature.

### 8.1 Introduction

For decades, theorists have broadly agreed that reflexivity is fundamental to efficacious and ethical clinical practice (Hawkins & Shohet, 1989) with clinicians often adhering to an intuitive or common-sense approach pertaining to reflexive development (Irving & Williams, 1995), potentially due to the well-documented gap between theory and practice (Burton, 2000).

As outlined more fully within the introduction, Schön (1983) revolutionised the concept of professional reflection by introducing 'reflection-in-action' and 'reflection-on-action', promoting a model of reflective practice as a core aspect of professional development in psychology. Whilst within the field of social work, the significance of reflexivity was emphasised especially in terms of recognising personal biases and emotional responses, which are vital for maintaining effective practitioner-client relationships (Howe, 2009). Similarly, the field of education has long advocated for reflective teaching, encouraging educators to critically assess their pedagogical methods and the influences of their beliefs on their interactions with students, colleagues, and within academic discourse, thereby advocating for a multifaceted approach to reflective practice (Brookfield, 1995). These diverse dimensions of reflective practice all converged to contribute to the overarching framework of relational reflexivity. These models unified personal introspection with external factors whilst emphasising the dialogic and collaborative nature of reflexivity. Further, they highlighted the necessity of critical self-assessment and its contribution to professional development, whilst also recognising the broader social and cultural contexts within which reflexivity occurs.

This phenomenological mixed methods study is novel in its comprehensive examination of key aspects across and within the relational models of reflexivity. It considered the personal attributes of trainees, the insights from trainers skilled in reflexivity, the pedagogical strategies believed to enhance reflexivity, and the comparative effectiveness of various teaching and learning methodologies in fostering reflexive practice in reference to both trainers and trainees.

In more detail, the study utilised and integrated qualitative and quantitative data research. The qualitative research explored how trainers interpreted the concept of reflexivity; understood their own process of the acquisition and development of reflexivity; and understood the teaching and learning

methods for enhancing reflexivity. Whilst the quantitative component was a longitudinal study looking at individual differences (such as attachment, personality traits and clinical background) as well as analysing training factors and considering how they are linked to levels of reflexivity and the development thereof across a year of clinical training.

The findings of this thesis contributed to the evidence base for the teaching and learning of reflexivity in support of the training experience of both the trainee and trainer, as well as in support of wider systemic well-being, heeding the call of Callahan and Watkins (2018).

## **8.2 Summary of Results**

In the quantitative study, several factors predicted higher levels of Reflexivity at the start of trainees' clinical training programmes. Trainees who had prior personal therapy or prior clinical supervision; trainees who were high in Agreeableness and Conscientiousness; and trainees who scored higher on Secure Attachment had higher levels of reflexivity on entering clinical training programmes. Regardless of individual differences, the study found that reflexivity, as well as engagement in reflection and need for reflection, increased over time when participating in a clinical training programme. More specifically, trainees who scored higher on Secure Attachment or Agreeableness at the start of the clinical training programme were shown to have the most improvement in reflexivity after one year of training in comparison to other trainees. Analysis of training factors using the Training Questionnaire found that when the amount of university-led training components increased, there was an increase in self-rated reflexivity from independent-led training components. In addition, when the amount of independent-led training components increased, there was an increase in self-rated reflexivity from both the university-led training components and the independent-led training components. Finally, overall there was an increase in reflexivity over time from a conceptual change, student-focused teaching approach, where the teaching methodology is focused on making the student central to a critical thinking learning process.

In terms of the qualitative results, eight key themes emerged from the data: Self-Reflective Inquiry and Personal Awareness; Emotional Awareness and Continual Growth; Emotional Intelligence in relation to Dynamic Personality Characteristics; Influence of External Factors on Emotional Expression and Coping; Enhancing Self-Awareness and Reflexivity; Cultivating Critical Skills in Creativity; Reflective Learning and Support; Pedagogical Approaches and Educational Effectiveness; and Cultivating Reflexivity Through Critical Assessment and Engagement.

Consistent with the phenomenological mixed methods approach, this discussion will now engage in a critical analysis of how these quantitative and qualitative findings complement and enhance



each other, thereby enriching the overall results. This section will be presented in line with the research question, which is itself indicative of the phenomenological mixed methods approach. The first section will look at the nature of reflexivity, the second at how reflexivity develops, and the third at how reflexivity can be taught and learnt; all within the context of clinical training programmes for counsellors and counselling psychologists. The ensuing discussion will explore these findings in detail, drawing on the existing literature to critically analyse the findings.

### **8.3 What Is Reflexivity?**

The comprehension of the nature of reflexivity that emerged from the qualitative data was complex and nuanced, mirroring the well-attested challenges that have confounded historical and contemporary attempts to provide a universal definition. It is particularly important to this phenomenological mixed methods researcher that the research question around the nature of reflexivity and the ensuing examination of it was not reductive, indeed quite the opposite, as this study aimed to enrich the discourse on reflexivity, particularly within clinical training contexts, without attempting to distil it into a single or indeed uniform definition.

The synthesis of these findings provided additional evidence for the mechanism by which reflexivity operates, adding further weight to its dualistic role as both an internal cognitive function and an external interactive process within a broader social and cultural context.

This dual action process of reflexivity was encapsulated in two primary dimensions within the themes of Self-Reflective Inquiry and Personal Awareness, and Emotional Awareness and Continual Growth. The former theme explored this first dimension which can be conceptualised as first-order reflexivity which is related to the capability of individuals to examine their actions, beliefs, and traditions in a given context, as articulated by Giddens (1991). This notion encapsulated the cognisance of an individual's actions in terms of the choices that are made and the repercussions of these actions within their immediate context. At its core, first-order reflexivity is pivotal for self-awareness and self-regulation (Schön, 1983), and its function has been repeatedly exemplified across multiple disciplines. One such relevant example here would be the notion of researcher reflexivity where heightened attention to first-order reflexivity is crucial for researchers to recognise and manage their own biases in terms of the potential impact on the research (Elliot & Timulak, 2005), thereby promoting transparent and ethical research methodologies (Creswell, 2022).

The latter theme, Emotional Awareness and Continual Growth, conceptualised the second dimension of the dual action process which was understood as second-order reflexivity; this was focused on a deeper examination of the concentric and extensive social and cultural frameworks that an individual

is inextricably embedded within and that therefore inform an individual's values and perspectives about the self, others and the world (Bourdieu, 1990). Within the data, this second process required the initial introspection as well as the critical analysis of values and perspectives, creating a fuller understanding of how an individual interprets and engages with their surroundings (Guba & Lincoln, 1994). Within this context, it is imperative for trainers and trainees to actively engage in, as well as for trainees to actively be required to engage in this dual action process of reflexivity involving symbolic interactionism (Denzin, 1997) as it would lead to a more comprehensive understanding of the power structures within society and culture that are deeply embedded within all individuals (Hollway & Jefferson, 2012) and thus lead to the most efficacious and accomplished trainees.

In essence, the concept of reflexivity's dual action, aptly conceptualised within the qualitative data, is comprised of individual-level first-order reflexivity, which was centred on personal cognisance of the self, and the societal-cultural level second-order reflexivity, which entailed a critical examination of the social and cultural context. As D'Cruz et al. (2007) stated, this concept is vital in qualitative inquiry and critical theory in terms of the notion of meaning making.

These results were further consistent with White's (1997) earlier characterisation of reflexivity as both internal introspection and external evaluation, and they also resonated with broader, more culturally and socially inclusive definitions of reflexivity, such as Vagle and Hofsess' (2015) conceptualisation of reflective practice. Vagle and Hofsess (2015) highlighted the dual character of reflexivity as an individual cognitive process influenced by societal factors, and the necessity for engagement with the subtleties of personal biases as well as the wider cultural and structural elements that shape one's worldview (Thompson, 2023).

Therefore, this thesis' results served to complement and reinforce the existing academic discourse on the bidirectionally dual action process of reflexivity, which was particularly pertinent considering the phenomenological methodological approach adopted in this research. Within the qualitative research, reflexivity's bidirectional dual action process was also exemplified in further detail through the superordinate theme of Enhancing Self-Awareness and Reflexivity as it was concerned with how reflexivity might be further advanced through teaching and learning methods, such as personal therapy. The further contribution of this theme will be discussed later. Additionally, the study's findings enabled more granular insights into the nature of reflexivity in its relevance to clinical training programmes, especially concerning its interplay with the other variables studied.

Viewing the quantitative results through an integrative lens, the findings on secure attachment, agreeableness and preferred teaching approach further enhanced an understanding of the dual action of reflexivity here.

First, the study found that secure attachment not only significantly increased levels of reflexivity but also significantly predicted the growth in reflexivity over the first year of clinical training. It is helpful here to consider these findings on secure attachment in light of Teo's (2015) focus on the importance of a reactive and proactive agent within the dual process of reflexivity. Bowlby's (2005) seminal exploration conceptualised secure attachment as the ability of individuals to establish and maintain healthy, mutually supportive relationships which were founded on a strong sense of self and a healthy balance between closeness and self-reliance. Therefore, secure attachment can be viewed as empowering an individual to act as a proactive agent and thus engage more actively within reflexivity. This study's findings added further evidence that this secure base is vital for developing reflexivity (Foley et al., 2017).

These quantitative findings aligned closely with the superordinate themes of Self-Reflective Inquiry and Personal Awareness, and also Enhancing Self-Awareness and Reflexivity. In its exploration, the theme on Self-Reflective Inquiry and Personal Awareness emphasised the mechanisms within the dual action model of reflexivity. Thus, this theme has provided a deeper insight into the processes by which individuals with secure attachments have enhanced their reflexivity. As Hunter and Maunder (2016) proposed, reflexivity allowed individuals with secure attachments to assimilate and synthesise novel information effectively, thus enhancing their self-awareness and insight into their interactive paradigms. The quantitative findings reinforce this perspective, indicating that trainees with more secure attachment styles exhibited greater initial reflexivity. This also aligned with Mikulincer and Shaver's (2007) research on adult attachment, which stated that the capacity for self-reflective inquiry is frequently rooted in a stable self-identity and the emotional stability that comes with secure attachment.

Furthermore, the theme of Enhancing Self-Awareness and Reflexivity which explored the progression of reflexivity emphasised that some individuals were particularly active in reflective practices and utilised them as a tool for personal development. Here, the qualitative data emphasised that these active individuals were engaged in dynamic models of reflexive growth, such as personal therapy. The integrative findings are mutually reinforcing as these personal attributes aligned with those observed in individuals who have a secure attachment style (Mikulincer & Shaver's, 2007).

Thus this study's results found that reflexivity proactively played a pivotal role in steering future behaviours and choices, thus nurturing personal and professional development. This was further in congruence with the quantitative findings that secure attachment significantly predicted the increase of reflexivity over time. As Asen and Fonagy (2021) stated, individuals with secure attachment were characterised by a consistent self-concept and a tendency for introspection and, in addition, were

predisposed to engage in reflexive activities that accelerated personal growth and also adaptability. Thus, the dual action role of reflexivity served both as a reactive and a proactive mechanism, and was a key factor in how secure attachment was a mediator for high reflexivity within these results. In sum, higher secure attachment provided more foundations for the emergence of reflexivity.

In essence, the qualitative themes highlighted this dual role of reflexivity as both a tool for reflection as well as for personal development. The integration of the data broadened the understanding here that secure attachment is one of the components that forms the basis for self-reflective inquiry, and thus enhances personal awareness. Throughout their training, the results showed that trainees maintained this initial benefit in reflexivity associated with secure attachment. Thus, the qualitative themes provided a comprehensive contextual framework that complemented the quantitative findings.

Second, the quantitative results found that trainees with higher levels of agreeableness, a core personality trait, had significantly higher levels of reflexivity. Agreeableness is primarily an interpersonal characteristic that fosters heightened empathy within individuals which motivates these individuals to prioritise the needs of others, and thus they experience greater satisfaction from interpersonal interactions (McCabe & Fleeson, 2012). As Wilmot and Ones (2022) explored, as a consequence, such individuals are predisposed to engage in more profound reflection and comprehension of their interpersonal interactions, thus enhancing their self-awareness and reflexive abilities.

Considering the above findings related to agreeableness, these can be seen as broadening the understanding of the dual action nature of reflexivity as it suggested that individuals higher in agreeableness may be more predisposed towards certain types of reflective practices, particularly those that are externally oriented. As Graziano and Eisenberg (1997) stated, agreeableness is intrinsically connected to prosocial behaviours and an empathetic understanding of others, which is conducive to personal and professional development particularly through a conscious and active engagement with the external environment. Further research by Caprara et al. (2011) also emphasised the role of agreeableness in fostering adaptive social interactions and psychological well-being, both of which are integral to reflexivity. Therefore, it may be proposed that individuals who are agreeable in nature are more inclined to consider how their actions affect others and thus focus their reflective practices on understanding and enhancing interpersonal dynamics.

Additionally, these insights on agreeableness can be further elaborated upon through the perspective of the theme Self-Reflective Inquiry and Personal Awareness as the qualities of agreeableness may be better understood in light of the dual action process, as both placed importance on the need for

an interpersonal approach and similarly stress the importance of consistent emotional self-awareness for increasing reflexivity. Indeed those individuals who possessed this trait tended to be more conscious of their emotional state and committed to the process of growth (Caprara et al., 2011). Moreover, the superordinate theme Emotional Awareness and Continual Growth also supported the findings on agreeableness in its discussion on connecting to and understanding experiences outside of the self.

Indeed it is striking that the concepts of secure attachment and agreeableness may be seen as aligned in their outward focus on the external interpersonal interactions. In sum, this study's results proposed that secure attachment and agreeableness served to enhance the second-order reflexivity within the dual action process, perhaps also indicative of the primary significance of this part of the reflexivity process.

Third, the quantitative analysis found an increase in reflexivity during training from trainees that preferred a conceptual change, student-focused teaching approach. This pedagogical method, which emphasised the cultivation of critical thinking in an individualised approach, was aimed at enhancing students' cognitive development and metacognitive awareness through active engagement (Zhang, 2001; Zhang 2004). The integrative results here also correspond with additional existing research, which has consistently shown that reflective thinking primarily emerged from pedagogical approaches that involved probing questions or similar critical methods, which in turn led to increased understanding and analytical abilities (Ladewski et al., 2007; Lee & Chen, 2009). Moreover, Davis and Pereira, (2016) concluded that this approach significantly augmented reflexivity within teacher-student exchanges. These teacher-student interactions, seen as trainer-trainee interactions within this study, are an example of how this research encompassed an extended concept of the 'other' in the development of reflexivity, where here the 'other' can be conceptualised both as a teaching method involving probing questions and also as an interaction.

These teaching methods around active engagement in critical thinking have a profound impact on reflexivity (Grenier, 2016). As Grenier (2016) stated, when this strategy is integrated with higher-order questioning during interactions, it catalysed a more profound introspection and scrutiny of learning experiences within the reflexivity framework. Additionally, the qualitative data related to the theme Cultivating Critical Skills in Creativity suggested that creative thinking is pivotal in the reflexive process due to its role in critical thinking. The contribution of this theme will be further explored in the section on teaching and learning reflexivity.

This study's comprehensive analysis, employing both qualitative and quantitative methods, highlighted the nature and components of the dual-action process of reflexivity. This process has

been explored as an introspective cognitive activity and also as a dynamic interaction with various external 'others'. The concept of the 'other' in the self-other dual action model of reflexivity was conceptualised broadly within these results as it encompassed various forms such as individuals (trainers/peers); learning methods (like personal therapy/supervision); teaching approaches (including creative activities and critical thinking/questioning); the substance of the teaching material (such as research articles/art); and the overall teaching environment. The study's results here were advantageous as they encouraged the consideration of the dual action model of reflexivity between the trainee and all these 'others' within the training environment. Thus, these findings highlighted the necessity of a broader and more in depth approach in promoting the development of reflexivity within clinical training programmes.

Significantly, the research also identified secure attachment and agreeableness as key enhancers of reflexivity, with agreeableness being particularly linked to second-order reflexivity. Additionally, the implementation of a conceptually driven student-focused teaching strategy has been demonstrated to notably enhance reflexivity, advocating for an clinical training environment that prioritises engagement with the 'other' in reflexivity, particularly in fostering critical thinking around creativity.

Moreover, these integrative results contributed a fresh perspective to the existing body of knowledge on the relational model of reflexivity. The study's novelty lies in its mixed-methods approach, analysing the interactive and integrative results between trainers and trainees within clinical training programmes, thus offering a unique lens through which the dual-action model of reflexivity can be further understood and applied.

#### **8.4 What Helps Develop Reflexivity?**

Reflexivity is a fundamental cognitive process that is almost without exception universally present to some extent. The objective of this research question was to contribute to the current research by exploring the factors that could enhance or limit an individual's capacity for reflection and to examine whether reflexivity can be enhanced regardless of these limitations. Indeed, the significance of this is highlighted by a longitudinal twenty-year study which found that reflective practice is vital in improving student learning outcomes (Veine et al., 2019).

The integrative results from this study contributed to the existing knowledge base by affirming that, whilst reflexivity was presented as an inherent cognitive skill universally, the capacity for reflexivity is variable across individuals and, more importantly, the developmental of reflexivity varies according to individual differences and environment differences, i.e. the differences in structures, content, methodologies and processes within clinical training environments.

The quantitative results reinforced the universality of reflexivity by showing that all participants experienced an increase in reflexivity during their clinical training programmes; this development of reflexivity was evident across all participants, even those with lower initial levels. However this development of reflexivity was not uniform, indicating the potential effects of the individual and environmental differences which emerged from the qualitative data. Indeed, the qualitative findings also supported the notion that individuals can enhance their reflexivity through the theme of Emotional Awareness and Continual Growth where this capacity was understood as adaptable and expansive. Within the existing literature, reflexivity has been described as an inherent and fundamental aspect of human development, crucial for emotional and psychological well-being (Fonagy & Target, 1996). Fonagy et al. (2004) also confirmed that, whilst some individuals may naturally possess a predisposition towards introspection and self-awareness, a capacity for reflection can be nurtured and strengthened through deliberate effort and the application of specific techniques or strategies. This perspective aligned with this study's findings that reflexivity is a critical cognitive skill that can be cultivated and improved over time. Thus the interest in the findings for this mixed methods research was in the far more nuanced area of what is needed for this capacity to be expanded upon both at an individual level and at a system level. The former is explored below whilst the latter is examined both below and within the following section.

The existing literature referred to several factors that can influence an individual's capacity and willingness to engage in reflective thinking. One such factor was personality traits, where traits like openness to experience and conscientiousness were seen as promoting natural inclinations toward reflection, whereas lower levels of introspection or impulsivity found in other personality traits were seen as challenging to reflective thinking (Dishon et al., 2017). In contrast, this study's quantitative results found that high levels of reflexivity were found to be related to agreeableness at the start of clinical training and that agreeableness also predicted a higher increase in reflexivity over time. The quantitative results did also find that those with higher conscientiousness were higher in reflexivity at the start of training, although that did not bear out in the predictive analysis. In addition, openness to experience was not found to be significant at all. Therefore it is essential to consider how personality traits can influence reflectivity. Within the literature, the traits of openness to experience, conscientiousness, and agreeableness were seen as playing a significant role within this dynamic. In light of agreeableness, as Sanchez-Ruiz and El Khoury (2019) concluded, individuals high in agreeableness tended to be higher in empathy and therefore have an ability to see things from others' perspectives which in turn can lead to deeper self-reflection as they seek to understand the feelings and viewpoints of others, enhancing their own self-awareness.



The theme of Emotional Awareness and Continual Growth contributed an additional layer to the quantitative findings that highlighted the significance of agreeableness in enhancing reflexivity. Within the context of agreeableness, the quality of emotional awareness is extremely pertinent in terms of the individual's ability to recognise and understand their own emotions, as well as those of others. As such, these individuals may be seen as more adept at discerning the subtleties of interpersonal interactions. Thus, Sanchez-Ruiz and El Khoury (2019) stated that the heightened emotional awareness displayed by agreeable individuals can be attributed to their innate inclination to remain attuned to the needs and feelings of others, enabling them to be more receptive to emotional signals. Consequently, they are more inclined to extend emotional support and understanding when such support is required as they themselves have heightened emotional awareness.

In relation to this, examining the theme of Emotional Intelligence in relation to Dynamic Personality Characteristics within the context of agreeableness, the results provided a nuanced perspective on the intricate relationship between personality traits and emotions. As Sanchez-Ruiz and El Khoury (2019) further noted, emotional intelligence involves the recognition, understanding and regulation of emotions, and thus may be seen in parallel with the qualities intrinsic to the agreeableness trait. Indeed, agreeable individuals tended to perform particularly well in the social and interpersonal dimensions of emotional intelligence due to their innate qualities of cooperation, consideration, empathy, trust and compassion (Sanchez-Ruiz & El Khoury, 2019). Furthermore, the personality trait of agreeableness was both the most empirically validated pro-social personality trait (Habashi et al., 2016) and was also linked with pro-social motivation (Graziano et al., 2007). Conversely, in individuals with low prosocial motivation, their pro-social behaviour declined in response to situations where empathy was requested (Graziano et al., 2007), which is of great interest given the imperative importance of clinical practice within the clinical training programmes. Overall these results highlighted the interconnectedness of personality and emotional factors, and how they collectively contributed to an enhanced understanding of the development of reflexivity. In sum, these results suggested that agreeableness played a pivotal role in facilitating this connection, shedding light on the intricate interplay between agreeableness and emotional intelligence in fostering greater reflexivity. In addition, the qualitative theme of Influence of External Factors on Emotional Expression and Coping posited how the expression and regulation of emotions by both trainers and trainees positively influenced their reflexivity.

Further insights can be drawn from the quantitative results that highlighted the relationship between secure attachment and agreeableness. As securely attached individuals tended to display a propensity to openly express their emotions and seek support from trusted others when confronted with external challenges, this would infer that their early attachment experiences equipped them with the necessary skills and self-assurance to effectively cope with these challenges (Fuchshuber et al.,

2019). Thus, these results highlighted the paramount importance of secure attachment in facilitating adept navigation of emotional responses to external influences. This also supported and extended the existing research that has both found that a high level of reflexivity leads to a more secure attachment style (Cassidy et al., 2013) and posited potential links between the development of reflexivity and attachment experiences, where reflexivity operated as a mediator of attachment (Rizq & Target, 2008).

On the other hand, agreeable individuals, characterised by their accommodating nature, may be particularly susceptible to the impact of external factors as they often adapt their emotional expressions to align with the expectations of specific social situations. Thus this adaptability can be seen as a manifestation of their inclination to prioritise positive interpersonal interactions, even if it entails modifying their emotional responses to fit the context (Jensen-Campbell & Graziano, 2001). Additionally, agreeable individuals are naturally inclined to seek out social support and engage in prosocial coping mechanisms as referenced earlier when confronted with emotional challenges. This highlighted the pivotal role of fostering and sustaining positive interpersonal relationships in their coping strategies. Thus, the combination of their accommodating nature and their reliance on social support emphasised the prominent influence that external factors have on how agreeable individuals expressed their emotions and cope with emotional difficulties.

In summary, the interplay between external factors, secure attachment, and agreeableness revealed that these variables collectively shaped the emotional expressions and coping strategies of individuals within the study. As such secure attachment appeared to provide a strong foundation for open emotional expression and effective coping, whilst agreeableness, as a personality trait, influenced how individuals adapted their emotional responses and relied on social support when confronted with external challenges. Understanding these dynamics has shed further light on the intricate relationship between personality, attachment style, and the impact of external influences on emotional processes, within the context of reflexivity.

In terms of appropriate conditions, the integrative results also highlighted factors that can facilitate or impede the development of reflexivity. In terms of factors that can impede reflexivity, the qualitative results found that anxieties around self-worth and other-evaluation were proposed as impediments, which was strongly supported by the quantitative findings that secure attachment status predicted higher reflexivity before training and predicted higher increases in reflexivity during training. In terms of the facilitation of reflexivity, the qualitative factors identified as increasing an individual's capacity for developing reflexivity included the nature of response to life experiences and personal therapy. Indeed, personal therapy was strongly supported as a vehicle for reflexivity development by both the qualitative and quantitative data. Within the quantitative data, trainees with prior personal therapy

had higher levels of reflexivity at the start of their clinical training programmes; whilst within the qualitative data, the development of reflexivity was consistently attributed to personal therapy, both within the trainers' perspectives of how their own reflexivity developed as well as their perspectives on the development of reflexivity in trainees and clients. Indeed this vehicle of personal therapy was seen as the mediator in mitigating the limitations and enhancing the facilitating factors around the development of reflexivity. These results contributed to the existing literature, which concluded that personal therapy was a credible and useful vehicle for teaching reflexivity (Chigwedere et al., 2019) and effectively served to embed and centralise the use of reflection within the trainee's experience, thereby enhancing both personal and professional development (Hildebrand, 2018). Therefore the results here contributed in making connections between personal therapy and the specific limitations and facilitation of reflexivity within these particular clinical training programmes.

Thus, this thesis added further support for the need for personal therapy as a training component within all clinical training programmes for the development of reflexivity; this was a regulatory requirement for the clinical training programmes utilised within this study. In terms of wider clinical training programmes without this regulatory requirement, these results echoed the existing research that it is incumbent on regulatory bodies to ensure that personal therapy is a requirement within the curriculum as standard. Of course, there are questions to be raised as to inclusivity. The integrative results here also raised more specific questions in relation to personal therapy and, by extension, the other training components examined during this study: whether there is an optimal amount of personal therapy before or during the clinical training programme as per this study's results; whether there are optimal models of personal therapy that are better suited to increase reflexivity than others; whether there are optimal models that are better suited to address the individual differences in trainees' levels of reflexivity; and whether there are optimal models that are better suited to address the individual differences in trainees in terms of specific limitations. However, these are queries outside the scope of this research and raised in the section on future research. Overall this outcome on the types of factors that can improve reflexivity is supported by Aron's (2000) assertion that the capacity for reflective functioning can be improved particularly within relational activities, of which personal therapy is a prime example.

This section has thus far discussed some of the factors that facilitate and impede reflexivity that have emerged from the qualitative and quantitative data; however, the data also presented a more complex picture regarding the factor of early environment within the qualitative data as well as the factor of personality within both the quantitative and qualitative data.

Within the integrative data, the results around the impact of personality on the development of reflexivity were complex. The existing literature on personality overwhelmingly affirmed that reflexivity

served to help an individual better understand their own and others' personalities, which in turn led to more positive interpersonal relationships (Ewen, 2009), as well as affirming that personality was a strong mediator of real-life decision-making outcomes (Juanchich et al., 2015). Indeed, studies on personality pathology demonstrated the negative effects where the self is incapable of sustaining a secure sense of self (Fonagy & Target, 2003). From the qualitative data, there emerged divergent perspectives on personality that initially appeared to present a conflict between a more outdated fixed model of personality type and the widely accepted contemporary more flexible longitudinal model of personality. In fact, the qualitative data presented a longitudinal lifespan model of personality (Griffin et al., 2015) which is more flexible in relation to the development of reflexivity. In particular, research has found that the emotional stability factors within and across personality traits increased consistently and more significantly across life span (Bleidorn, et al., 2022), which is reflective of the significance of emotional awareness and emotional intelligence as positively implicated in the development reflexivity within the qualitative results.

The results concluded that the development of reflexivity was dependent on the presenting personality (Paulhus & Trapnell, 2008) during the clinical training, namely those personality factors that were more highly operative during the time of training. Thus, the clinical trainers noted examples of trainees whose presenting personality could either impede or improve their development of reflexivity. For example, those with a presenting personality that was defensive in nature, perhaps due to training anxieties, were described as experiencing more impediments to developing reflexivity than those with, as the quantitative data also validated, a more agreeable and conscientious presenting personality. Therefore, the implication was that as the presenting personality can change across lifespan, so it can indeed change within the timespan of clinical training programmes. In this context, the quantitative provided a static picture of a state whilst the qualitative served to provide the fuller context for the quantitative findings on personality and reflexivity.

The quantitative results substantiated the qualitative results here and also offered further observations into the presenting personality factors that can improve or impede the development of reflexivity. The quantitative results showed that trainees who were high in agreeableness and conscientiousness traits had higher reflexivity on entering clinical training programmes. Thus, both the qualitative and quantitative results supported the notion that the presenting personality of the trainees affected their current capacity for reflexivity and their capacity to further develop it. In addition, the quantitative data analysed the components of the presenting personality and demonstrated that high agreeableness and high conscientiousness were the most advantageous personality traits for developing reflexivity, with more significance placed in the former in its predictive ability for reflexive growth.

Therefore the current study contributed to the existing lifespan growth model of personality factors within the literature (Griffin et al., 2015) and also raised important implications for clinical training programmes. The data identified the importance of considering trainees' presenting personalities at the start of training, as well as the fundamental need to consider how to utilise the trainer's role to enable trainees to understand their current presenting personality alongside its implication for training success (including reflexivity development) and to assess the trainees' motivations to cultivate personality growth applicable to their future roles and selves. In essence, with an awareness of a more flexible lifespan model of personality combined with the implications of a presenting personality within this research, the results recommended that clinical training programmes comprehensively assess trainees' presenting personalities during the selection and training process, not with an exclusionary aim but with a positive inclusivity framework that facilitates individualised personality growth and malleability (Damian et al., 2019). Importantly, the quantitative results showed that over time reflexivity increased for all trainees participating in these clinical training programmes; the wider results therefore proposed that teaching methodologies that further oriented the trainee to their role will likely further increase reflexivity, including for trainees who might otherwise have failed or dropped out. For example, this might include assessments around psychological flexibility and motivation, as well as teaching methodologies centred around the direction of change and conceptualising a future self within a growth/change model.

It is essential here to move from an overarching view of the integrative research outcomes in terms of personality toward the more individual aspects of personality traits studied within the quantitative research. It may be proposed that agreeableness and conscientiousness are primarily associated with the aspects of relationships between the self and other. For example, the agreeableness trait includes prosocial attributes such as altruism, co-operation, trust and kindness (Graziano & Eisenberg, 1997), whilst the conscientiousness trait includes similar attributes such as thoughtfulness, co-operation (a team player), commitment and purposefulness (Costa & McCrae, 1992). Therefore, the conditions required for developing reflexivity were indicated as a safe, creative and relational feedback space between the self and another, as was highlighted in the qualitative data. Thus, the quantitative findings on the more pro-social personality traits and secure attachment styles amplify the qualitative data here, as individuals with these traits would be more readily able to participate in, and thus gain from, these creative symbiotic relational feedback systems.

Within the qualitative data within the theme Influence of External Factors on Emotional Expression and Coping, there emerged discordant perspectives on trauma within the early environment with some participants asserting that this acted as a catalyst for reflexive growth, whilst for other participants, negative environmental experiences had a detrimental impact on reflexivity. Here the quantitative data can be used to shed some light on this contradiction. Although the quantitative

methodology did not test for the effects of trauma specifically, it did test for attachment which the existing literature base has linked to trauma and reflexivity. For example, the process of second-order representation proposed that a reflexively responsive caregiver leads to a more secure attachment style in the other (Fonagy & Target, 1997), i.e. that reflexivity is a mediator of and predictive of attachment status (Bouchard et al., 2008). Thus, the quantitative data added weight to the qualitative data, which suggested that trauma in early experiences had a negative impact on reflexivity.

However, it is important to consider possible explanations for the alternative qualitative data that emerged from the trainers. Indeed, perhaps the most likely explanation, given the existing literature, was that those participants for whom trauma acted as a catalyst for reflexive growth may have had either pre-existing resilience factors that protected them from detrimental effects, i.e. agreeableness or conscientiousness personality traits, or secure attachment; or had experiences following the negative impact of the trauma, such as a reflexive secure other to support them, or more formal personal therapy, that acted as a catalyst for increased reflexivity.

The integrative results of the study contributed to the picture of reflexivity as a critical cognitive skill which can be significantly enhanced over lifespan given certain conditions both in regards to the individual and the environment. Furthermore, the results also contributed by exploring the enhancement factors for the development of reflexivity in the context of clinical training programmes. While all individuals possess the fundamental capacity for reflexivity, its development can be positively influenced by various individual factors, including personality traits of agreeableness, and to a lesser extent conscientiousness, and of course secure attachment. Thus this study supported the notion that personality traits such as agreeableness and conscientiousness are conducive to reflexivity, with agreeableness being particularly associated with emotional awareness and the ability to understand others' perspectives. These traits can enhance reflexivity by fostering empathy and self-awareness. Furthermore, secure attachment is highlighted as a facilitator for open emotional expression and effective coping with external influences, which is beneficial for reflexivity.

Moreover, the study indicated that while reflexivity was seen as influenced by early environmental factors and personality, it can also be enhanced through relational activities and engagement with various forms of the 'other' within the clinical training programmes. The results also identified certain factors that can impede the development of reflexivity, such as anxieties related to self-worth and the evaluation of others.

In conclusion, this study reinforced the concept that while reflexivity has a universal capacity, its development is dynamic and can be significantly influenced by personality traits, attachment styles,

and therapeutic and educational interventions. Therefore, this study contributed to the field by analysing how the training environment can first identify and then enhance positive factors for reflexivity while effectively managing any limitations.

### **8.5 What Do You Need to Teach and Learn Reflexivity?**

This section is focused on examining the integrative results in relation to the existing body of research on reflexivity in the context of clinical training programmes. It offers recommendations based on this thesis for advancing teaching and learning methodologies to better foster reflexivity within these environments. Thus this discussion begins with an examination of how the integrated data contributed to the overall educational environment and includes an examination of the results concerning specific pedagogical methods.

The integration of the results proposed two additional recommendations concerning the cultivation of reflexivity within clinical training programmes, particularly in the context of critical thinking. Firstly, the integrated data emphasised the importance of seamlessly incorporating critical thinking into the overall framework of teaching and learning methods. Secondly, the data also highlighted the significance of further embedding this critical thinking element into the teaching methods themselves in the form of creativity. This is further supported by Grenier (2016) who stated that teaching strategies that promoted reflexivity helped students develop higher-order thinking skills and engage more critically with the course content. Thus, this research both provided further evidence for the necessity of a critical thinking training environment and also expanded this proposition through proposing creativity as one of the most essential tools within the context of counselling and counselling psychology training programmes, advocating for its optimisation within these environments.

First, this thesis will consider the integrative results in reference to the overarching learning environment. The quantitative results showed that there was an increase in reflexivity in those trainees who preferred a conceptual change student-focused teaching approach (Zhang, 2006). This was a student focused teaching methodology which enabled trainees to be learning-orientated as opposed to content-oriented, with the aim of encouraging trainees to critically evaluate both their own ideas as well as those presented by their peers. The type of thinking required for this conceptual change student-focused teaching approach tended to be Type 1 thinking styles, which have been defined as creativity-generating (Zhang, 2006; Zhang, 2007). Thus in terms of the overarching training environment, the results suggested that it was imperative that the clinical trainers were expert in Type 1 teaching styles. Indeed, as Zhang (2017) stated, Type I teaching styles were more effective than Type II as teachers with Type I styles tended to adopt a conceptual-change teaching approach;



focused on creative thinking processes; and interestingly had more positive perceptions of the teaching environment. The findings of this thesis supported the existing literature, which has historically continued to promote a move away from traditional instructional methods such as teacher-focused pedagogical approaches towards a critical thinking approach where students learn 'how to think' (Snyder & Snyder, 2008).

In their exploration of the reflective learning process, Gill and Halim (2006) suggested that reflection becomes apparent during a student's engagement with new information. They stated that this reflective activity triggers mental models and serves as a catalyst in the inquiry process, initiating critical thinking. These researchers also highlighted how teachers used this reflective learning process to increase students' reflections by placing the student at the centre of the learning experience through creative student-focused learning strategies. Thus, students in effect took control of their own learning. This proposition is aligned with further contemporary research which has emphasised the transformative nature of the empowerment of students, and further explored how this empowerment is achieved through encouraging personal, self-directed activities where students analysed their own experiences and developed critical thinking skills, and thus bridged the gap between theoretical and practical knowledge (Colomer et al., 2020). This approach highlighted the importance of focusing on the trainee's perspective in the learning process, which is crucial for nurturing reflexivity.

In support of this, the qualitative theme of Reflective Learning and Support offered additional evidence regarding this learning approach by highlighting essential components within the trainer-trainee relationship. For example, the results indicated that components such as feedback cycles and reflective guidance were essential to the development of reflexivity and thus that both these components were also essential within the process of this learning approach. This theme informed the quantitative data on preferred teaching approach by exploring in more depth how Reflective Learning and Support methodologies were instrumental in helping trainees critically engage with content, thus supporting their ongoing learning and professional development. These fundamental components will be discussed later in reference to the specific teaching and learning methods themselves.

Furthermore, Grenier's (2016) research also explored how reflexivity can be used to inform critical pedagogies, drawing from the ongoing debate between theory and practice. The results of this research suggested that by cultivating reflexivity, students can deepen their critical understanding of the subject matter. This theory proposed that this was achieved by encouraging the students to question the theoretical foundations and narratives within their chosen field of study. Thus, the integrative results of this thesis contributed further to an understanding of this process by proposing

that certain pedagogical approaches that actively involved trainees in practical roles as creators of knowledge could significantly enhance reflexivity, and therefore also contribute to a more significant learning experience which would be transformative in its nature.

Second, within the qualitative results, the theme of Cultivating Critical Skills in Creativity provided both evidence for the overall educational environment and specific pedagogical techniques. In terms of the overall learning environment, this theme emphasised the overarching role of creativity in cultivating critical cognitive skills and added significant weight to the argument for integrating creativity more thoroughly within the whole training environment. The results proposed that creativity was not merely an adjunct to education or just a pedagogical device but a foundational element that drove the development of critical cognitive skills essential for reflexivity. Thus, the results concluded that creativity should be deeply embedded within the very structures of clinical training programmes.

Indeed, Heard et al. (2020) affirmed that the development of critical thinking was of course the most significant goal in the educational process. This further supported this study's findings on the necessity of creative elements in the broader training setting and also emphasised the effectiveness of specific pedagogical methods that optimised creativity. As Trivette et al. (2009) noted in their examination of contemporary educational methods, accelerated learning, which resonated particularly with this theme, was a learning approach that aimed to foster a relaxed and creative emotional state, paralleling the integrative data that such environments significantly enhance reflexivity. The superordinate theme Cultivating Critical Skills in Creativity provided a robust framework for understanding how creativity acted as a catalyst for cognitive growth in terms of reflexivity and further how the results may also be interpreted in reference to the structure of the clinical training environments. For example, within a creative training environment structured around both top-down and bottom-up processing, the data emphasised that there would be a collaborative dynamic between trainees and trainers in determining both the content and the learning process. In such an open learning approach, the roles would be more fluid where trainees contributed to the curriculum while trainers provided expertise and guidance during this process.

In addition, the proposition would be that trainers shared the rationale behind teaching methods and learning strategies more transparently, ensuring that trainees understood not just what they are learning but also how and why the learning processes are effective for reflexivity. Thus these results advocated for this type of training environment where there would be a culture of collaborative creativity embedded within the environment, and where the training itself would further enhance a dynamic, interactive process that respected the contributions of each participant; all in the service of the development of reflexivity.

Furthermore the theme Cultivating Critical Skills in Creativity additionally supported this interpretation by reinforcing the idea that creativity was a crucial educational tool that encouraged innovative thinking and problem-solving skills from top down to bottom up within the learning environment of the clinical training programmes. In summary, the results suggested that clinical training programmes further embed an even more inclusive and transparent approach to learning which would involve active collaboration between trainees and trainers in shaping teaching and learning methodologies. Thus, trainers would play a key role in providing clear guidance on how each teaching method operated to optimise reflexivity within the overall framework and moreover, they would ensure transparency in assessing each trainee's individual progress within a reflexive growth model. This approach would enable the identification of specific pathways for the growth of reflexivity which is tailored to each trainee's unique needs.

As mentioned earlier, the qualitative theme of Cultivating Critical Skills in Creativity provided evidence for the incorporation of creative methods in learning as crucial for the development of cognitive skills fundamental to reflexivity. As Craft et al. (2001) noted, creativity enriched the learning process by fostering the learners' capacities to view situations from multiple perspectives and to devise innovative problem-solving approaches, which are of course both essential elements of reflexivity. Therefore, the results proposed that trainers can enhance trainees' flexibility in thinking by fostering creativity within the training environment and thus also enhance reflexivity. Within this theme, the capacity for imagination was understood as facilitating the creation of a mental space where an individual can reflect both intrapersonally on the self and interpersonally about others. Again the concept of the 'other' in this context encompassed a wider definition.

As a further point in relation to reflexivity as a relational activity, it is of great interest to understand the results in terms of what actually was understood as being most effective for reflexivity under the umbrella of relational activities, i.e. whether it is in relation to another individual, or in relation to a different type of 'other'. Here, the quantitative results found two mediators in that the most effective 'other' to increase reflexivity is a learning method like personal therapy or supervision. However, this is not exclusively the case within the integrative data, although these answers are indeed substantiated by the qualitative data which is further explored below. Indeed, the trainers posited that the self's interaction with the 'other' in the form of art, music and literature for example also increased reflexivity. It is arguable, of course, that these are extensions of another individual, i.e. an individual has composed the music or written the narrative; however, the qualitative results highlighted the use of these 'others' as a way for the self to interact creatively and increase reflexivity. Indeed, the findings indicated that these may be equivalent vehicles to provide a relational experience of the other, particularly as it can be assumed they do not provoke the anxieties of 'getting it wrong' in supervision or the fear (Latta, 2005) of being exposed in personal therapy, as discussed by the

trainers. As Latta (2007) stated succinctly, reliance on solely one's own bearings is wholly unreliable and indeed relational accountability is essential (Latta, 2016).

As the integrative results emphasised, creative thinking allowed for the simultaneous holding of various perspectives which aligned with Read's (2008) suggestion that drama and storytelling served as scaffolds for deep knowledge and adaptable learning due the interaction with multiple narratives of others. As such, the trainers indicated that exposure to diverse narratives in creative environments increased reflexivity, with the 'other' narratives being pivotal in this interaction. As argued by Sahlberg (2009), immersion in novel relational spaces, which are inherently new to the individual, can augment creativity and reflexivity. This was additionally supported by the superordinate theme Pedagogical Approaches and Educational Effectiveness which explored the effectiveness of clinical training through its emphasis on the importance of employing diverse teaching strategies that are trainee-focused.

This research also highlighted certain pedagogical techniques deemed vital for increasing reflexivity, particularly around the process of feedback, which emerged independently across several themes. Indeed, feedback was established as an essential and influential mediator in the domains of Reflective Learning and Support, Cultivating Critical Skills in Creativity, and Cultivating Reflexivity Through Critical Assessment and Engagement. In light of the thorough research outcomes and a more detailed evaluation of the educational framework, the indispensable and central position of feedback within the teaching and learning methodologies was apparent. Indeed, this interactive exchange between trainer and trainee, i.e. feedback, enhanced the learning experience yet also reinforced the application of taught concepts in practical settings. Thus the emphasis on feedback within these training relational spaces was seen as paramount with the trainers proposing a model of a secure teaching and learning environment where creative thinking is nurtured within a feedback loop involving the self and others. This concept is aligned with adult learning components discussed by Trivette et al. (2009) which included readiness-to-learn, self-directedness, active participation, and solution-focused strategies (Knowles, 1984). Additionally, the accelerated learning method (Trivette et al., 2009) recommended the incorporation of role-playing and journal writing, both supported by and expanded upon by the qualitative data which proposed a diverse range of 'others' to engage with that would all enhance reflexivity, including creative content, supervisors, personal therapists, highly critical thinking trainers and more creative engagement with more traditional academic content.

Interestingly, the individual factors of secure attachment and agreeableness, which were shown to significantly increase reflexivity within this study, provided a conflictual discussion here. It may be proposed that the individual factors of secure attachment and agreeableness can be interwoven into

these creative cognitive development processes with the 'other', leveraging these factors to enhance reflexivity (Craft et al., 2001). However, a more in depth examination of the relationship between agreeableness and creativity highlighted that this relationship may be more nuanced. While some studies suggested that agreeableness could be beneficial for creativity, particularly in collaborative environments where cooperation and positive interpersonal interactions were valued; other studies indicated that lower levels of agreeableness, which might include traits such as independence and a willingness to challenge the status quo, were often found amongst individuals who were in fact highly creative (Puryear et al., 2016). Indeed these theorists found that openness to experience and extraversion tended to have a stronger correlation with creativity compared to agreeableness. As they concluded, individuals higher in openness had the qualities of an active imagination and intellectual curiosity which were directly related to generating novel ideas, whilst extraversion also motivated an individual to engage with new ideas with its qualities of assertiveness and enthusiasm. This suggested that while agreeableness can be advantageous for certain creative processes, particularly those that are collaborative in nature, it is not the predominant presenting personality trait linked to creativity. In fact, less agreeable traits may sometimes serve as a catalyst for creative innovation. The implication within the integrative results here is that the context in which creativity is being expressed or required plays a significant role in determining which personality traits are most conducive to creative output. Hence, the relationship between agreeableness and creativity found within the research is not linear but rather complex and variable, depending on situational factors, and of particular interest within the clinical training environments.

In addition, the integrative results also served to provide an insight into the trainees' and trainers' perspectives on the content of clinical training programmes. In terms of teaching methodologies, it is useful to consider the results on the types of teaching components within the Training Questionnaire, which looked at the training components in two categories: university-led and independent-led. University-led training components were comprised of lectures, seminars, case discussions, roleplays, video work, video observations, professional practice observations, case studies, process reports and theoretical essays; and independent-led training components were comprised of individual supervision, group supervision, peer discussion, clinical practice, service user input and personal therapy. Overall, the amount of time spent in independent-led training components was significantly correlated with increased reflexivity in relation to both university-led and independent-led training components, which demonstrated an observational finding that independent-led training components were more effective in enhancing reflectivity.

Meanwhile, the qualitative themes on Reflective Learning and Support and Emotional Awareness and Continual Growth provided further evidence that the external independent-led learning methods were more advantageous for reflexivity. In particular, the trainers emphatically highlighted the

heightened advantages of clinical supervision and personal therapy. The integration of the data here provided evidence both in terms of the finding that independent-led training components are more advantageous to the development of reflexivity over university-led components but also added two further nuances. First, the qualitative data provided enhanced support for two specific learning methods, that of personal therapy and supervision. Second, the quantitative data found that both types of training components significantly increased reflexivity, just in differing amounts. Thus the results provided a broader and deeper understanding here as the qualitative data was enhanced by the quantitative data which found overall that the trainees' reflexivity was higher in response to external independent led learning methods. This integrative finding places further emphasis on advancing university-led training components to also enhance trainees' reflexivity; a finding which aligns with this study's recommendations for optimising a creative critical thinking learning approach.

Furthermore, the picture that emerged from the quantitative data also posed further questions as although both university-led and independent-led training components increased reflexivity with a greater weight on independent-led components, there are also two surprising results. First, university-led training components only increased ratings of reflexivity of independent-led training components. Second, an increase in the amount of independent-led training components generated higher ratings in reflexivity from university-led training components than independent-led components. These two discrepancies within the quantitative data may be best explained through a consideration of the differing perspectives of the trainer versus the trainee. Here it is helpful to draw on the existing research base. Frank et al. (2020) undertook a systematic review of the training literature since 2010 in order to assess the impact of the type of training components on trainees' knowledge, beliefs and behaviours. Their study concluded that therapist training had evolved significantly since prior systematic reviews in the previous decade; specifically, there had been an evolution from the use of more traditional teacher instructional learning activities to more intensive training models. However, they noted that further examination of training models was problematised by methodological issues, namely the lack of consistency of models between training programmes. Furthermore, in their study on the importance of a mentoring culture in graduate psychology training programmes, Johnson et al. (2023) proposed a model for introducing or enhancing the mentor-based culture within clinical training programmes, noting its evidence-based advantages to the trainee and the efficacy of training. These recommendations for a relationship-rich training environment are further corroborated by the findings of this study.

Regarding the examination of individual teaching and learning methods, the qualitative analysis thoroughly explored two primary approaches: supervision and personal therapy. These methods emerged independently within the overarching themes of Reflective Learning and Support and Enhancing Self-Awareness and Reflexivity respectively. The significance of these two aspects within

these respective themes warranted further examination as the quantitative data found that participants with prior supervision and personal therapy experience scored significantly higher in reflexivity than those who did not have these experiences. These qualitative results were even further reinforced by the outcome that showed a significant improvement in trainees' reflexivity when they engaged with independent-led learning methods. The qualitative data added depth to this analysis by elucidating why these elements were crucial by drawing from the unique perspectives of trainers who had both undergone personal therapy as part of their own training and also advocated in favour of the requirement for personal therapy in training.

In summary, the integrated findings emphasised the significance of independent-led learning experiences in nurturing reflexivity among trainees. Thus, this suggested that, while conventional university-led teaching components have their merits, the inclusion of supervision and personal therapy can lead to more significant reflexivity within clinical training settings. It is also an interesting proposition to further understand how the mechanisms of supervision and personal therapy can be understood further in terms of reflexive development and integrated into the university-led teaching methods within clinical training programmes. The integrative findings begin to explore this below.

The qualitative theme of Reflective Learning and Support Supervision explored the utility of supervision in enhancing reflexivity. This theme's exploration aligned with the existing literature, which emphasised that clinical supervision played a pivotal role in shaping the growth of therapists and served as the central teaching method that contributed to their professional identity (Shulman, 2005). This formative process is considered vital, as it aided therapists in balancing theoretical knowledge with clinical practice (Watkins, 2018). However, as Callahan et al. (2019) noted, the precise mechanisms of learning and skill development during supervision remained an area that warranted deeper understanding. This study served to provide some insights into this area by highlighting the significance of individual factors such as secure attachment; the importance of fostering a conducive learning environment characterised by a creative and critical thinking approach; and a transparent open learning approach embedded within an individualised growth model.

Additionally, the integrative findings highlighted the critical role of feedback within such an environment, as this feedback can further enhance the pathways of learning within supervision. Scaife (2019) noted the fundamental importance of creating a structure of supervision that was flexible, innovative, creative and centred on the supervisee's voice and experience. Scaife's (2019) propositions around providing individualised environments for training mirrored the qualitative findings here on the importance of creating a relational trainee focused structure for the dual action process of reflexivity and also providing appropriate conditions of creativity for that structure to



function most effectively. Prior research had proposed methods to create this framework of relational reflexivity, such as entering into a dialogic method or creating a dialogic relationship utilising a range of techniques for generating education-centric conversations (Wegerif, 2006). Fundamentally, when viewed through this lens, the study's results served to provide a broader understanding of the necessary conditions for the structure and function of this model of relational reflexivity within these training programmes.

Meanwhile, the qualitative theme of Enhancing Self-Awareness and Reflexivity also offered further insights into personal therapy as essential in the development of reflexivity. This study contributed further to the extensive body of evidence here that personal therapy is considered a critical component in the training of counselling and counselling psychology trainees, with its importance rooted in enhancing personal and professional development. The importance of personal therapy in counselling and counselling psychology training is obvious by its inclusion in professional training requirements and the recognition of its value in the personal and professional development of trainees. Edwards' (2018) work also emphasised that personal therapy is considered a vital component of training programmes in various relational therapy fields, including social work, creative arts therapies, counselling, psychiatry and clinical psychology.

The integrative results further contributed to the overall picture here by supporting the notion that personal therapy fostered a deep level of self-awareness and self-reflection, almost incomparable to other learning methods. Within the discussion of Enhancing Self-Awareness and Reflexivity, trainers promoted personal therapy as it was this process that, in their view, best involved the trainees in a rigorous self-examination thereby enhancing their understanding of self and others, and therefore enhancing their overall reflexivity. Through personal therapy, the data emphasised that trainees developed a critical understanding of how their subjective experiences and internal narratives shaped their interactions with the world and their professional practice. Additionally, personal therapy was understood as encouraging trainees to reflect on how their personal world views may intersect with their professional roles, promoting an understanding of the larger social and cultural dynamics at play. Indeed, this reflection was seen as vital by the trainers in maintaining professional boundaries and ensuring that personal biases or issues did not interfere with the therapeutic relationship within clinical practice. Ultimately, the integrative results concluded that personal therapy was indispensable as it both laid the foundations for increasing reflexivity and it also held the components for developing reflexivity within its very structure and processes.

Thus overall, the integrative results emphasised the transformative potential of personal therapy and supervision as key components for increasing reflexivity. These learning methods facilitated an in-depth reflective process, where trainees were both the recipients of knowledge and also active



participants in creating their understanding, mirroring the principles suggested by Craft et al. (2001) on the role of creativity in learning. It is of interest here how the mechanisms of therapy and supervision can be further embedded within university-led teaching methods. Thus, such a dynamic educational model, which incorporated both independent-led and university-led training components, was upheld to be more conducive to developing reflexivity.

Finally this discussion will conclude its examination of the teaching content in relation to the integrative data by exploring the superordinate theme of Cultivating Reflexivity Through Critical Assessment and Engagement and the quantitative results around university-led teaching components, which drew together the integrative data around the enhancement of reflexivity through engagement with critical assessments during training. In the field of clinical and counselling psychology, the use of case studies and process reports is fundamental in trainee assessment strategies. As the qualitative results explored, these methods provided a platform for cultivating reflexivity, as they required trainees to actively participate in the analysis and reflection of clinical experiences and therapeutic processes which in turn enabled trainees to critically assess their interventions, understand their impact on clients, and also engage with the content on a level that promotes personal and professional growth, particularly in reflexivity.

Interestingly, case studies and process reports were also indicated within the quantitative results as contributing to an observational increase in reflexivity as part of the university-led teaching components and also additionally emerged prominently within the qualitative data as two of the learning methods that encouraged creativity through relational thinking with the 'other'. The qualitative data suggested that the use of critical written assessments offered advantages to reflexive learning in that the case study or process report assumed the role of the relational space where the trainee could critically examine their clinical practice as well as the relationship between themselves and the client. In this way, trainees were seen to be able to hold and integrate multiple perspectives (as opposed to solely their own), thereby creating an environment reflective of and conducive to the development of reflexivity. Overall, the integrative data on critical assessments indicated that teaching methodologies should create safe relational spaces that motivated trainees to engage creatively in a feedback cycle with an 'other'.

In conclusion, the integrative findings offered a valuable contribution to the promotion of reflexivity within clinical training programmes and highlighted the crucial role played by innovative teaching and learning methods. These methods prioritised student-led inquiry and the development of critical cognitive skills through creativity. Further, the integrated data asserted the need for a training environment that further fostered reflexivity by intertwining critical thinking with creativity through these pedagogical methods which provided a compelling argument for a further shift in the

educational paradigm towards an even more student-centred approach. This approach would more actively involve trainees in the learning process, allowing them to critically assess and engage with the structures of the course; the methodologies of teaching, learning and assessment; and also be engaged in a more individualised and tailored approach to the learning of reflexivity within a growth model.

## CHAPTER 9: Conclusion

### 9.1 Conclusion

Reflexivity is a fundamental element in the growth of professionals across various domains, including psychology, social work and education. Critically informed by the existing literature, this thesis researched the teaching and learning of reflexivity in reference to counselling and counselling psychology training programmes; research which encompassed key questions around the nature and functioning of reflexivity within these distinct clinical training programmes.

This thesis contributed further evidence to the existing framework of relational models of reflexivity by elaborating on its understanding within the distinct context of counselling and counselling psychology training, and extending its understanding by broadening the scope of its investigation to the specific pedagogical methods within this context. Overall, this study served to further highlight and elucidate that the multi-faceted concept of reflexivity is seen as a dual action process model incorporating the components of self, other and the wider social and cultural constructs; each one interacting with the other, within a counselling and counselling psychology context. This study further contributed by offering a thorough exploration of reflexivity within these specific components in this singular context, in particular the self and the other. Furthermore, the integrative results expanded the notion of the other within this study to include an individual other; the distinct teaching and learning methodologies within these clinical training programmes, and the unique training environment itself. Therefore, through a detailed examination, this research provided evidence for the factors that enhanced and limited the development of reflexivity in respect of these components. In addition, this study contributed an understanding of how these components can be utilised within the overall training environment and within the distinct teaching and learning methodologies to enhance reflexivity.

First, in reference to prior clinical experience, participants with background clinical experience in supervision or personal therapy had significantly higher reflexivity, affirming the qualitative analysis that practical experiential experiences enhanced reflexivity in line with the relational model of reflection. Additionally, the research made an observational finding that independent-led training components, which included personal therapy and supervision, served as a more potent mediator on reflexivity than university-led training components. This data served to expand the understanding of reflexivity in its findings that independent-led training components, inclusive of but not limited to personal therapy and supervision, increased reflexivity; these findings provided a foundation for further theoretical and practical explorations of independent versus university led training components within these clinical training programmes. The integrated results corroborated the

existing literature's focus on experiential learning and contributed towards substantiating the role of personal therapy and supervision within the broader context of experiential teaching and learning methods in the fields of counselling and counselling psychology training. It is noteworthy that both personal therapy and supervision were heavily weighted within both analyses and thus served to further emphasise the importance of these components within clinical training but also for further research to consider the relative relevance of each; both prior to and during training. In addition, this research proposed the consideration of incorporating the mediators of reflexivity found within independent-led learning methods to be further incorporated within university-led teaching methods.

Second, the quantitative results found that higher secure attachment and higher agreeableness significantly increased reflexivity. Through the integration of the qualitative findings, these results were situated within a broader context and therefore overall served to emphasise the importance of the individual characteristics of the trainees in the development of reflexivity. This study confirmed previous research that secure attachment mediated reflexivity. However, this study expanded on these prior findings by highlighting the significance of emotional regulation and emotional intelligence in enhancing reflexivity, providing an explanation for this study's results that also found agreeableness as a mediator for reflexivity, which deviated from the current literature. These results served to provide a broader contextualisation of reflexivity within these particular clinical training programmes.

These research findings provided a rationale for further investigation into the individual characteristics of trainees in terms of identifying personal attributes, emotional competencies, and individual limitations in order to conceptualise a more rigorous individualised learning approach to the development of reflexivity. The integrative results emphatically emphasised the fundamental importance of a safe, relational training environment to enhance reflexivity and overcome individual limitations. Therefore these findings offered further specification around the definition and understanding of reflexivity through the identification of factors that promoted growth and those that restrained it. Thus, it is imperative that any further investigation and implementation of such an approach is implemented within a positive and inclusive growth model; a mindset that is embedded within counselling and counselling psychology. This approach would ensure that trainees have access to the information needed to leverage their strengths and effectively address their limitations which in turn would lead to an improvement in their reflexivity and overall personal development. In addition, trainees would also be able to utilise this information to employ tailored teaching and learning methodologies to enhance each trainees' reflexivity. Thus this comprehensive study contributed to the field in its recognition of the diversity of trainees' individual differences and the necessity to tailor teaching and learning methodologies accordingly, enabling trainees to fully engage with and process their own development in reflexivity.

Third, this thesis contributed to the research base through its deeper examination of creativity within these specific clinical training environments, both in terms of the structure of these environments and in terms of the pedagogical methods. The concept of creativity, as explored in the trainers' narratives, extended beyond artistic endeavours to encompass broader capacities such as imagination, critical thinking, and critical engagement. This perspective aligned with the quantitative findings, where trainees who preferred critical thinking teaching approaches were significantly higher in reflexivity. Consequently, the results extended the understanding of reflexivity within this particular context by emphasising the fundamental importance of expanding critical thinking pedagogical approaches, particularly those focused on fostering creativity.

Thus the data unequivocally supported critical thinking and creativity as pivotal mediators in the development of reflexivity. In relation to the structure of the training environment, the integrative findings offered additional validation for a training environment characterised by collaborative critical and creative input from both trainers and trainees into the structures, content, and processes, within an open learning approach. In terms of pedagogical methods, the integrative results also emphasised the significance of further incorporating creativity in order to enhance reflexivity.

In conclusion, this research contributed to the relational models of reflexivity by further exploring its dual nature within the self and the other, whilst broadening the concept of the 'other' to include pedagogical methods and the training environment within clinical training programmes. These results highlighted the importance of trainee diversity, including personal attributes, emotional competencies, and limitations in shaping reflexivity development. Thus, this emphasised the need for more personalised teaching and learning approaches, promoting full engagement of both trainees and trainers in the content and process of both training experiences and training environments. Furthermore, the research emphasised the significance of experiential learning in reflexivity, emphasising the roles of personal therapy and supervision in counselling and counselling psychology training. Finally, this thesis also highlighted the importance of incorporating creativity into pedagogical methods and promoting transparent, critical thinking, open learning environments where both trainers and trainees actively contribute to training structures and processes.

## **9.2 Limitations**

There are several limitations to the present research study.

This research was designed as a phenomenological mixed-methods study. It is inherent to the nature of mixed-methods research that each methodology incorporated will still have its own limitations

whilst seeking to adopt the strengths of the other (Onwuegbuzie & Leech, 2004a). Thus it would be misguided to assume that combining methodologies eliminated their individual limitations. In essence, the limitations of each methodology persisted and, in addition, further limitations were imposed through the mixed-methods approach. These limitations will be discussed in full below, alongside the strategies employed to manage these effectively.

In addressing the methodological limitations within this phenomenological mixed methods study, where the methodologies combined a longitudinal quantitative approach and an Interpretative Phenomenological Analysis (IPA) qualitative approach, several key limitations came to light. Firstly, the quantitative study provided valuable statistical data on reflexivity, however its reliance on predefined variables was limited in capturing the complexity of the trainees' experiences. This was, of course, problematic given the phenomenological emphasis on understanding subjective lived experiences. As Punch (1998) stated, quantitative research is limited in its ability to reflect the unique ways individuals perceive and interpret their experiences, and further that this approach risked oversimplifying complex behaviours and assuming uniformity, which can lead to misrepresentation. This limitation was addressed as far as possible within this study with the use of a mixed methods approach which ensured that a phenomenological theoretical framework guided the interpretation of the quantitative data and also the choice of a longitudinal approach which measured temporal patterns.

Secondly, the integration of these two distinct methodological approaches presented additional challenges. The epistemological alignment of these methods was not straightforward, and thus there was much consideration of the framework, data collection methods and integration of findings. Although this mixed methods approach of combining longitudinal quantitative data with IPA qualitative analysis offered a helpful and comprehensive framework for exploring the complex concept of reflexivity, it was also incumbent on the researcher to manage the limitations of integrating different methodologies. The researcher accomplished this through establishing a clear methodological justification for the research framework; participating in advanced training in both methodologies, as well mixed methods research; and maintaining transparency throughout.

In reference to another specific limitation to this mixed methods study, there was the emergence of contradictory results between the qualitative and quantitative research. For example, the qualitative data proposed that independent-led training components were more likely to facilitate reflexivity, whereas the quantitative results found that the amount of time spent in university-led training components was positively correlated with increased ratings of reflexivity within independent-led training components. Here the contradiction was resolved by looking closely at the quantitative findings on training components, where the amount of time spent in independent-led training

components was positively correlated with increased ratings of reflexivity within university-led training components more than ratings of reflexivity within independent led training components.

Nonetheless, despite the limitations above, it was concluded that the mixed-methods approach offered more benefits than limitations as a whole.

In this study, the quantitative approach was specifically chosen due to its strength in analysing and understanding factors that influenced groups as a whole. The limitations in terms of the quantitative methods included selection bias, information bias and generalisability, all of which are considered below.

In terms of selection bias and generalisability which, of course, overlapped with the qualitative limitations, the present methodology was not completely objective as the study selectively recruited from a sample of clinical training programmes across the United Kingdom. Given the numbers of clinical training programmes within the UK, the decision was made to include only traditional master's and doctoral counselling and counselling psychology clinical training programmes in the advertising procedure, which effectively excluded trainers and trainees from other programmes. This may well have imposed an additional exclusionary bias on the recruitment of minorities within this research project and in addition the participant groups may not have adequately represented the populations. Moreover, the decision to select only trainers for the qualitative component and only trainees for the quantitative component had a limitation on internal validity. In terms of external validity, this study has good generalisability across counselling and counselling psychology clinical training programmes.

In order to address these limitations in any future research, a more inclusive sampling strategy could be adopted that encompassed a broader range of participants within clinical training programmes to enhance the diversity of the participants and reflect the population as a whole. Thus the randomisation of the advertising procedure could be implemented to minimise exclusionary bias and better reflect the demographics of the entire population of clinical trainers and trainees. This was inhibited within this thesis as demographic data on trainees and trainers was not publicly accessible. Furthermore, in future research, integrating both trainers and trainees in both qualitative and quantitative components of the study could further improve the internal validity, allowing for a more comprehensive analysis of reflexivity and thus enhancing the generalisability of the findings.

In terms of measures, the quantitative components of reflexivity and attachment have been difficult to define and measure empirically. The evolving nature of the concepts of reflexivity and attachment within the literature, and the resulting multiplicity of psychometric measures, was a limitation as no



one measure was unilaterally accepted and utilised across reflexivity or adult attachment research. For example, in terms of adult attachment, Justo-Núñez et al. (2022) performed a systemic review of 40 studies from the literature, which included 24 self-reporting measures of attachment in order to study the characteristics of self-reported measurements of secure attachment in adults. The authors identified only four of them as high quality, namely the Attachment Style Questionnaire-Short Form (ASQ-SF), the Cartes-Modèles Individuels de Relations (CAMIR), the CAMIR-Reduced (CAMIR-R), and the Psychological Treatment Inventory-Attachment Style Scales (PTI-ASS). The authors reiterated that more rigorous studies are needed, especially in areas such as content validity, reliability, measurement invariance and construct validity. However these measures were excluded from this study as they did not adopt a dimensional approach and were mainly designed around romantic adult attachments. Therefore, this study utilised the best available, and most appropriate, quantitative measures for this thesis. For reflexivity, the Self-Reflection and Insight Scale (Grant et al., 2002) was selected on the basis that it was the most comprehensive scale for measuring reflexivity, given its ability to measure both internal reflexivity and reflexivity in relation to the other, which was the working definition of reflexivity from the existing literature base. For adult attachment, the Relationship Scales Questionnaire (Griffin & Bartholomew, 1994) was the logical choice for the measure of adult attachment because it is designed to be used as a continuous, as opposed to categorical, measurement of adult attachment in line with the current research,

In terms of information bias, the quantitative study utilised a self-rated measure of reflexivity within the Training Questionnaire, which was constructed for the purposes of this thesis and therefore was not empirically validated. This was necessary because no other measure was available for this purpose; nevertheless, the results related to this construct should be viewed with this limitation in mind. In future research, to enhance the validity of self-rated measures of reflexivity, it would be advantageous to develop and empirically validate a comprehensive reflexivity assessment tool around the training components specifically. This would involve a rigorous process of item generation, pilot testing, and validation studies including a diverse sample of participants from clinical training programmes.

The qualitative methodology also involved several limitations, including selection bias, generalisability; the level of ambiguity within the data; the need for the management of the researcher's bias in terms of interpretation; and concerns about reliability and validity, which are addressed here. Selection bias has partly been addressed above.

Within the IPA study, the self-selected trainer participant group exhibited several methodological limitations that could affect the robustness and transferability of the findings. The use of purposive, self-selected sampling may have introduced a bias towards trainers who are intrinsically motivated

to engage with the research, which may have potentially biased the data towards those trainers with more positive or engaged views around reflexivity.

There were also limitations related to the homogeneity of the participant group. In terms of homogeneity, all participants were accredited professionals within a similar professional field; they were all trainers on accredited clinical training programmes; and they all had over ten years of experience as a clinical trainer. It must also be acknowledged that, although the trainers were from similar professional fields, there are clear distinctions between counselling and counselling psychology training programmes which offered its own limitation. This limitation was addressed through the nature of the research as the relational models of reflexivity are utilised across these clinical training programmes.

In addition, the gender imbalance, with a majority identifying as female, could also have impacted the study's ability to capture a balanced gender perspective, as the only male participant's experiences might have been either overemphasised or underrepresented in the analysis. Furthermore, the ethnic identities of the participants, while somewhat diverse, still presented limitations. With the majority identifying as White British and a smaller representation of Black African, Black Caribbean or Black British and one identifying as Other Ethnic group, there may be cultural nuances and systemic issues specific to minority groups that may not be adequately reflected in the findings. This is particularly significant in counselling and counselling psychology where cultural competence is crucial. These limitations suggest a need for caution when generalising the study's findings beyond the specific field of counselling and counselling psychology. To address these limitations, the researcher ensured that the findings were contextualised within the scope of these professions. In the future, it would be of interest to examine the impact of a more diverse gender and ethnic participant group which is representative of this population as a whole in relation to this study's outcomes.

Furthermore, the interpretative nature of IPA meant that the researcher's biases could influence the analysis. However this limitation was managed proactively throughout the study through a rigorous IPA process including researcher reflexivity, peer review through IPA groups, research supervision and additional training in IPA.

Within the IPA analysis itself, there were also limitations around the emergence of discordant perspectives on trauma within the early environment; some participants asserted that this acted as a catalyst for reflexive growth, whereas others reported that negative environmental experiences had a detrimental impact on reflexivity. Given the small sample size of participants, the results were affected by an inherent generalisability bias although the IPA stance is not one of generalisability but

rather of providing detailed explorations of the trainers' personal lived experiences. Thus, the contradiction is in fact an advantage to this thesis in that it offers a diverse range of experiences, potentially of more relevance to the thesis. It would be applicable to address the limitations of this factor in future research by expanding the sample size which would provide a more comprehensive understanding of the diverse perspectives on trauma and its impact on reflexivity. By including a larger and representative group of participants, the researcher could further assess whether the observed discordant perspectives are representative of broader trends.

Although the present study is not without limitations, this research offered fundamental outcomes and also highlighted the need for further research on teaching and learning reflexivity within clinical training programmes.

### **9.3 Future Research**

This section provides an overview of how the findings from this thesis lay the foundation for future research.

A potentially fruitful avenue for future research would be to investigate a best-fit model of reflexivity in order to have a standardised set of structures, processes and content that constituted the most efficacious way to develop reflexivity within different environments, such as therapy or supervision, and also within the teaching methodologies that exist within clinical training programmes, such as case studies, seminars and roleplays. In addition, future research should seek to further sensitively explore individual characteristics that both contribute to and hinder the development of reflexivity in trainees. The findings could then inform the creation and evaluation of a personalised growth model that focused on fostering reflexivity throughout the training process.

In terms of creative pedagogical methods, research could focus on how to further integrate creativity into the curriculum of clinical training programmes systematically, which might involve the design of new content that prioritised creative thinking and innovation, and modifications to existing course content to include more creative components. Further, it would be applicable to explore how to more deeply embed the mechanisms for developing reflexivity from independent-led learning methods, i.e. experiential learning methods such as supervision and personal therapy, into the university-led training components.

Finally, it is particularly importance to this minority researcher that any future research is able to represent the sample population with accuracy.

In sum, it would be imperative to explore the long term impact of any study on reflexivity interventions, whether that be at the level of the training environment or at the level of the individual.

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## APPENDICES

### Appendix A: Advertisement for Participants in Qualitative Design

How Do Counsellor Trainers Understand the Learning and Teaching of Reflexivity?

My name is Samantha Farag and I am a student at Goldsmiths, University of London. I am conducting a piece of original research as part of my PhD in psychology. The research involves a series of semi-structured interviews made up of eight Counsellor Trainers currently working in the UK on accredited training programmes who are willing to discuss their understanding of both how they learnt reflexivity and how they teach it. Participants must have a minimum of 10 years' experience as a trainer. The semi-structured interviews will take place on an individual basis at the Goldsmiths' College in central London at a time and date convenient for participants. I will audio-record the interview and facilitate its smooth running. It will take up to 60 minutes.

All data gathered during this study will be held securely and confidentially, and there will be an opportunity for participants to withdraw their data if they so choose.

If you would be interested in taking part or would like more information, please contact me using the details below.

#### Researcher:

Samantha Farag ([s.farag@londonmet.ac.uk](mailto:s.farag@londonmet.ac.uk))  
Department of Psychology  
London Metropolitan University  
Old Castle Road  
London E1 7NT

#### Supervisors:

Dr Keren Cohen ([k.cohen@gold.ac.uk](mailto:k.cohen@gold.ac.uk))  
Paula Collens ([p.collens@gold.ac.uk](mailto:p.collens@gold.ac.uk))

PACE  
**Goldsmiths, University of London**  
**New Cross**  
**London**  
**SE14 6NW**

### Appendix B: Recruitment Information

*(To be given to participants when they contact the researcher and again on arrival at the interview)*

## How Do Counsellor Trainers Understand the Learning and Teaching of Reflexivity?

This research is being carried out by Samantha Farag, a PhD student at Goldsmiths, University of London. The study is concerned with how Counsellor Trainers understand the teaching and learning of reflexivity both for themselves and for their trainees.

You have been asked to take part in a semi-structured interview with the researcher. The interview will consist of approximately 10–15 questions, which the trainer is welcomed to expand upon.

The interview is expected to take no longer than 60 minutes. It will be recorded, and the recording will be kept securely by the researcher and the university. It is the researcher's intention that the anonymised final thesis will be published; therefore, materials will be stored securely and confidentially for five years following the final publication.

Your name and any other identifying information will not be attached to the recording or any transcripts made from the recording. All data will remain confidential.

Confidentiality will be broken only in the unlikely event that anything you say suggests that harm will come to yourself or others.

You can leave the interview at any time and can withdraw your data up to two weeks after the interview by contacting me: [s.farag@londonmet.ac.uk](mailto:s.farag@londonmet.ac.uk). Alternatively, you may contact my lead supervisor, Dr Keren Cohen, at [k.cohen@gold.ac.uk](mailto:k.cohen@gold.ac.uk)

Thank you for volunteering to take part in my research.

## Appendix C: Consent Form

How Do Counsellor Trainers Understand the Learning and Teaching of Reflexivity?

Researcher: Samantha Farag

### CONSENT FORM

This consent form is designed to ensure that you are happy with the information you have received about the study and that you give your informed consent to take part.

To be completed by the participant:

Please circle Yes or No

- Have you read and fully understood the information sheet?

Yes/No

- Have you had the opportunity to discuss further questions related to the study?

Yes/No

- Are you satisfied with the answers to your questions?

Yes/No

- Have you received enough information about the study to decide whether you want to take part?

Yes/No

- Have you understood that all information you reveal will be kept confidential unless the information disclosed suggests that you or someone else is at risk of harm?

Yes/No

- Do you understand that you are free to refuse to take part in the interview and to leave at any time?

Yes/No

- Are you clear that you have the right to withdraw from the study up to two weeks following the interview?

Yes/No

- Do you give consent for the researcher to record the interview and to use verbatim quotations from your speech in the writing up and/or publication of the study?

Yes/No

- Do you understand that you will remain completely anonymous and that your name and identity will not at any point be revealed and that this will be kept separate from the findings of the study?

Yes/No

- Do you give consent for the recording and transcript to be kept for up to a period of five years after the final publication of this study?

Yes/No

- Do you agree to take part in the above study?

Yes/No

\_\_\_\_\_

Name of Participant

Date

Signature

Age \_\_\_\_\_

Gender \_\_\_\_\_

Ethnicity \_\_\_\_\_

\_\_\_\_\_

Researcher

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

## **Appendix D: Interpretative Phenomenological Analysis Interview Schedule**

### How Do Trainers Understand the Learning and Teaching of Reflexivity?

#### **Topic Area 1: Learning Reflexivity**

1. What is your understanding of the term 'reflexivity'?
2. How would you describe your use of reflexivity in clinical practice?
3. What is your understanding of how you have learnt reflexivity?
4. How do you understand whether individuals are born with a capacity for reflexivity?
5. How do you understand the circumstances within which babies, infants, children and adolescents learn reflexivity?

#### **Topic Area 2: Teaching Reflexivity**

1. How do you understand how to teach reflexivity?
2. Which components of counsellor training programmes do you understand as developing the trainees' reflexivity?
3. Do you understand some components as more helpful than others in developing trainees' reflexivity?
4. How do you understand the capacity of each trainee for developing higher levels of reflexivity?
5. Would you be able to speak about an anonymised example of a trainee with a high level of reflexivity in your opinion and how you understand how they came to develop this?
6. Would you be able to speak about an anonymised example of a trainee with a low level of reflexivity in your opinion and how you understand how they came to develop this?
7. Is there anything else you would like to add?

## **Appendix E: Advertisement for Participants in Quantitative Design**

### Teaching and Learning Reflexivity

#### A Longitudinal Study: Levels of Reflexivity and Attachment

My name is Samantha Farag and I am a student at Goldsmiths College, University of London. I am conducting a piece of original research as part of my PhD in psychology. This research involves trainees on accredited counselling training programmes who are willing to complete questionnaires related to attachment, reflexivity and their training programme. Participants will be asked to complete five questionnaires at the start of their training programme and again one year later. Respectively, the five questionnaires concern personality, attachment styles, preferred teaching approaches, reflexivity, and the components of respondents' training programmes. The questionnaires can be completed online at a time and date convenient for participants.

All data gathered during this study will be held securely and confidentially, and there will be an opportunity for participants to withdraw their data if they so choose.

If you would be interested in taking part or would like more information, please contact me using the details below.

#### **Researcher:**

Samantha Farag ([s.farag@londonmet.ac.uk](mailto:s.farag@londonmet.ac.uk))  
Department of Psychology  
London Metropolitan University  
Old Castle Road  
London E1 7NT

#### **Supervisors:**

Dr Keren Cohen ([k.cohen@gold.ac.uk](mailto:k.cohen@gold.ac.uk))  
Paula Collens ([p.collens@gold.ac.uk](mailto:p.collens@gold.ac.uk))

PACE  
**Goldsmiths, University of London**  
**New Cross**  
**London**  
**SE14 6NW**



## Appendix F: Recruitment Information

*(To be given to participants when they contact the researcher and again on arrival on sending the e-questionnaires)*

### Teaching and Learning Reflexivity

#### A Longitudinal Study: Levels of Reflexivity and Attachment

This research is being carried out by Samantha Farag, a PhD student at Goldsmiths, University of London. The study is concerned with the relationships between the attachment styles, levels of reflexivity and ratings of the components of the counsellor training programmes of a group of trainee counsellors, psychotherapists and counselling psychologists.

You have been asked to complete five questionnaires by giving ratings on attachment styles, personality styles, levels of reflexivity, teaching and learning preferred methods, and training components. You will be asked to complete these items in Year 1 and then again in Year 2 of your training.

It is anticipated that the questionnaires will take approximately 45 minutes to complete. In order to be able to match your responses across Years 1 and 2, you will be given a unique reference number to ensure strict confidentiality. The questionnaires will be stored securely by the researcher and the university. It is the researcher's intention that the anonymised final thesis will be published; therefore, materials will be stored securely and confidentially for five years following the final publication.

Your name and any other identifying information will not be attached to the questionnaires. All data will remain confidential.

Confidentiality will be broken only in the unlikely event that anything you say suggests that harm will come to yourself or others. You can withdraw your data up to two weeks after the Year 2 collection by contacting me: [s.farag@londonmet.ac.uk](mailto:s.farag@londonmet.ac.uk). Alternatively, you may contact my lead supervisor, Dr Keren Cohen, at [k.cohen@gold.ac.uk](mailto:k.cohen@gold.ac.uk)

Thank you for volunteering to take part in my research.

## Appendix G: Consent Form

### Teaching and Learning Reflexivity

#### A Longitudinal Study: Levels of Reflexivity and Attachment

Researcher: Samantha Farag

#### CONSENT FORM

This consent form is designed to ensure that you are happy with the information you have received about the study and that you give your informed consent to take part.

To be completed by the participant:

Please circle Yes or No

- Have you read and fully understood the information sheet?

Yes/No

- Have you had the opportunity to discuss further questions related to the study?

Yes/No

- Are you satisfied with the answers to your questions?

Yes/No

- Have you received enough information about the study to decide whether you want to take part?

Yes/No

- Have you understood that all information you reveal will be kept confidential unless the information disclosed suggests that you or someone else is at risk of harm?

Yes/No

- Are you clear that you have the right to withdraw from the study up to two weeks following the second data collection point in Year 2?

Yes/No

- Do you give consent for the researcher to use the results from your questionnaires in the writing up and/or publication of the study?

Yes/No

- Do you understand that you will remain completely anonymous and that your name and identity will not at any point be revealed and that this will be kept separate from the findings of the study?

Yes/No

- Do you give consent for the questionnaires to be kept for up to a period of five years after the final publication of this study?

Yes/No

- Do you agree to take part in the above study?

Yes/No

_____	_____	_____
Name of Participant	Date	Signature
_____	_____	_____
Researcher	Date	Signature

## Appendix H: Self-Reflection and Insight Scale (SRIS)

Self-Reflection and Insight Scale  
(Factors, reverse scoring and scoring instructions shown)

Please read the following questions and circle the response that indicates the degree to which you agree or disagree with each of the statements. Try to be accurate, but work quite quickly. Do not spend too much time on any question

THERE ARE NO 'WRONG' OR 'RIGHT' ANSWERS – ONLY YOUR OWN PERSONAL PERSPECTIVE

**BE SURE TO ANSWER EVERY QUESTION      ONLY CIRCLE ONE ANSWER FOR EACH QUESTION**

1. I don't often think about my thoughts (E) (R)	<b>Disagree</b> Strongly	<b>Disagree</b> <i>2</i>	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
	1					
2. I am not really interested in analysing my behaviour (R) (N)	<b>Disagree</b> Strongly	<b>Disagree</b> <i>2</i>	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
	1					
3. I am usually aware of my thoughts (I)	<b>Disagree</b> Strongly	<b>Disagree</b> <i>2</i>	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
	1					
4. I'm often confused about the way that I really feel about things (R) (I)	<b>Disagree</b> Strongly	<b>Disagree</b> <i>2</i>	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
	1					
5. It is important for me to evaluate the things that I do (N)	<b>Disagree</b> Strongly	<b>Disagree</b> <i>2</i>	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
	1					

6. I usually have a very clear idea about why I've behaved in a certain way (I)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
7. I am very interested in examining what I think about (N)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
8. I rarely spend time in self-reflection (R) (E)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
9. I'm often aware that I'm having a feeling, but I often don't quite know what it is (R) (I)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
10. I frequently examine my feelings (E)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
11. My behaviour often puzzles me (R) (I)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
12. It is important to me to try to understand what my feelings mean (N)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
13. I don't really think about why I behave in the way that I do (R) (E)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6

14. Thinking about my thoughts makes me more confused (R) (I)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
15. I have a definite need to understand the way that my mind works (N)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
16. I frequently take time to reflect on my thoughts (E)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
17. Often I find it difficult to make sense of the way I feel about things (R) (I)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
18. It is important to me to be able to understand how my thoughts arise (N)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
19. I often think about the way I feel about things (E)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6
20. I usually know why I feel the way I do (I)	<b>Disagree</b> Strongly 1	<b>Disagree</b> 2	Disagree Slightly 3	Agree Slightly 4	<b>Agree</b> 5	Agree Strongly 6

E = Engagement in self-reflection: N = Need for self-reflection: I = Insight: R = Reverse scored

## Scoring Instructions

The scoring process is very simple. Summed scores are used. There is no scaling or scale transformation required other than basic reverse-scoring for four items.

### Step 1.

**Reverse-score those items marked (R).**

An original score of '1' would become '6', '2' would become '5', '3' would become '4', and vice versa.

### Step 2.

**Sum the scores for each subscale**

E = Engagement in Self-Reflection Sub-scale – Items: **1(R)**, **8(R)**, 10, **13(R)**, 16, 19

N = Need for Self-Reflection Sub-scale – Items: **2(R)**, 5, 7, 12, 15, 18

I = Insight Sub-Scale – Items: 3, **4(R)**, 6, **9(R)**, **11(R)**, **14(R)**, **17(R)**, 20

Grant, A. M., Franklin, J., & Langford, P. (2002). The Self-reflection and Insight Scale: A new measure of private self-consciousness. *Social Behavior and Personality*, 30, 821–836. –

*Permission is freely granted to use this scale for research and therapeutic/coaching purpose.*

*Commercial use of this scale requires written permission from A. M. Grant. Email:*

[anthonyg@psych.usyd.edu.au](mailto:anthonyg@psych.usyd.edu.au)

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## Appendix I: Big Five Inventory-10 (BFI-10)

### A Brief Version of the Big Five Personality Inventory

Adapted from Rammstedt, B. & John, O. P. (2007). Measuring personality in one minute or less: A 10-item short version of the Big Five Inventory in English and German. *Journal of Research in Personality, 41*, 203–212.

**Instructions:** How well do the following statements describe your personality?

---

I see myself as someone who ...	Disagree	Disagree	Neither	agree	Agree
	a little	nor disagree	a little	strongly	
	strongly				
1. ...is reserved	(1)	(2)	(3)	(4)	(5)
2. ...is generally trusting	(1)	(2)	(3)	(4)	(5)
3. ...tends to be lazy	(1)	(2)	(3)	(4)	(5)
4. ...is relaxed, handles stress well	(1)	(2)	(3)	(4)	(5)
5. ...has few artistic interests	(1)	(2)	(3)	(4)	(5)
6. ...is outgoing, sociable	(1)	(2)	(3)	(4)	(5)
7. ...tends to find fault with others	(1)	(2)	(3)	(4)	(5)
8. ...does a thorough job	(1)	(2)	(3)	(4)	(5)
9. ...gets nervous easily	(1)	(2)	(3)	(4)	(5)
10. ...has an active imagination	(1)	(2)	(3)	(4)	(5)

---

**Scoring the BFI-10 scales** (R = item is reverse-scored):

Extraversion: 1R, 5

Agreeableness: 2, 7R

Conscientiousness: 3R, 8

Neuroticism: 4R, 9

Openness to Experience: 5R, 10

The BFI should be cited with the original (as well as a more accessible, and more recent) reference:

John, O. P., Donahue, E. M., & Kentle, R. L. (1991). *The Big Five Inventory – Versions 4a and 5a*. Berkeley, CA: University of California, Berkeley, Institute of Personality and Social Research.

John, O. P., Naumann, L. P., & Soto, C. J. (2008). Paradigm shift to the integrative Big Five trait taxonomy: History, measurement, and conceptual issues. In O. P. John, R. W. Robins, & L. A. Pervin (Eds.), *Handbook of personality: Theory and research* (pp. 114–158). New York, NY: Guilford Press.



## Appendix J: Preferred Teaching Approaches Inventory (PTAI)

### Preferred Teaching Approach Inventory<sup>1</sup>

*Li-fang Zhang, 2003*

*The University of Hong Kong*

This inventory is designed to explore students' preferences for the way their teachers go about teaching in general (i.e. students' preferred classroom learning environment).

For each item, please circle one of the numbers (1–7). The numbers stand for the following responses:

1	2	3	4	5	6	7
Absolutely disagree	Strongly disagree	Mildly disagree	Mildly agree	Somewhat agree	Strongly agree	Absolutely agree

Please answer each item. Do not spend a long time on each: your first reaction is probably the best one.

- |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 1. It is important that my teachers design their teaching with the assumption that most of the students have very little useful knowledge of the topics to be covered.        | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2. It is important that the subjects my teachers teach be described entirely in terms of specific objectives relating to what students must know for formal assessment items. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 3. It is important that my teachers try to develop a conversation with students about the topics we are studying.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 4. It is important that my teachers present a lot of facts in classes so that students know what they must learn for each subject.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 5. Assessment should be an opportunity for students to reveal their changed conceptual understanding of a subject.  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 6. It is important that we take time out in classes so that the students can discuss, among themselves, the difficulties that they encounter in studying a subject.           | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 7. It is important that my teachers concentrate on covering the information that might be available from a good textbook.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

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<sup>1</sup> Statements adapted from M. Prosser and K. Trigwell (1996).

8. It is important that my teachers encourage students to restructure their existing knowledge towards new ways of thinking about a subject that they will develop.	1	2	3	4	5	6	7
9. It is important that in their lectures, my teachers use difficult or undefined examples to provoke debate.	1	2	3	4	5	6	7
10. It is important that my teachers structure their teaching to help students to pass the formal assessment items.	1	2	3	4	5	6	7
11. It is important that teachers give students a good set of notes for each lecture.	1	2	3	4	5	6	7
12. Teachers should provide the students with only the information they will need to pass the formal assessments.	1	2	3	4	5	6	7
13. It is important that my teachers know the answers to any questions (related to the subjects they teach) that students may put to them.	1	2	3	4	5	6	7
14. Formal teaching time should be made available for students to discuss their changing understanding of a subject.	1	2	3	4	5	6	7
15. It is better for students to generate their own notes rather than always copy those of teachers.	1	2	3	4	5	6	7
16. A lot of teaching time should be used to explore students' ideas.	1	2	3	4	5	6	7

Scoring:

Compute  $ccsfi = (q5+q8+q15+q16)/4$  (Conceptual change/student-focused→intention)

Compute  $ccsfs = (q3+q6+q9+q14)/4$  (Conceptual change/student-focused→strategy)

Compute  $ittfi = (q2+q4+q11+q13)/4$  (Information transmission/teacher-focused→intention)

Compute  $ittfs = (q1+q7+q10+q12)/4$  (Information transmission/teacher-focused→strategy)

## Appendix K: Relationship Scales Questionnaire

The RSQ can either be worded in terms of general orientations to close relationships, romantic relationships, or orientations to a specific relationship. It can also be reworded in the third person and used to rate others' attachment patterns (see Bartholomew & Horowitz, 1991 or Scharfe & Bartholomew).

Please read each of the following statements and rate the extent to which you believe each statement best describes your feelings about close relationships. (you may wish to use a 5- to 9-point scale from *not at all like me* to *very much like me*)

1. I find it difficult to depend on other people.
2. It is very important to me to feel independent.
3. I find it easy to get emotionally close to others.
4. I want to merge completely with another person.
5. I worry that I will be hurt if I allows myself to become too close to others.
6. I am comfortable without close emotional relationships.
7. I am not sure that I can always depend on others to be there when I need them.
8. I want to be completely emotionally intimate with others.
9. I worry about being alone.
10. I am comfortable depending on other people.
11. I often worry that romantic partners don't really love me.
12. I find it difficult to trust others completely.
13. I worry about others getting too close to me.
14. I want emotionally close relationships.
15. I am comfortable having other people depend on me.
16. I worry that others don't value me as much as I value them.
17. People are never there when you need them.
18. My desire to merge completely sometimes scares people away.
19. It is very important to me to feel self-sufficient.
20. I am nervous when anyone gets too close to me.
21. I often worry that romantic partners won't want to stay with me.
22. I prefer not to have other people depend on me.
23. I worry about being abandoned.
24. I am somewhat uncomfortable being close to others.
25. I find that others are reluctant to get as close as I would like.
26. I prefer not to depend on others.
27. I know that others will be there when I need them.
28. I worry about having others not accept me.
29. People often want me to be closer than I feel comfortable being.
30. I find it relatively easy to get close to others.

### SCORING THE RSQ

Secure scale is the average of 3, 9 (Reverse), 10, 15, 28 (Reverse).

Fearful scale is the average of 1, 5, 12, 24.

Preoccupied scale is the average of 6 (Reverse), 8, 16, 25.

Dismissing scale is the average of 2, 6, 19, 22, 26

The remaining items correspond to measures developed by Hazan and Shaver (1987) and Collins and Read (1990). As with the RQ, you can calculate the underlying attachment dimensions, which can be derived using the following equations: Self Model = (secure + dismissing) MINUS (fearful + preoccupied). Other Model = (secure + preoccupied) MINUS (fearful + dismissing)

Please see [Kim Bartholomew's](#) web page for more information about the RSQ.

## Appendix L: The Training Questionnaire

### Teaching and Learning Reflexivity

#### A Longitudinal Study: Levels of Reflexivity and Attachment

**Unique Reference Number:**

**Gender:**

**Age:**

**Ethnicity:**

This questionnaire asks you to rate the training components that trainees self-report as increasing their level of reflexivity. For your assistance, there is a list of components below. Trainees are encouraged to add their own components to the list. You are required to rate all of the components on the list as well as any additional components that you wish to add yourself.

Please rate the List of Training Components by rating the component on this scale and ticking the corresponding box below. Ratings: -1 = Reduced Levels of Reflexivity; 0 = No Effect on Levels of Reflexivity; 1 = Some improvement on Levels of Reflexivity, 2 = Extensive improvement on Levels of Reflexivity.

<b>Training Components</b>	<b>-1</b>	<b>0</b>	<b>1</b>	<b>2</b>
<b>University-Led</b>				
<b>Lectures</b>				
<b>Seminars</b>				
<b>Case Discussion</b>				
<b>Roleplay</b>				
<b>Videowork</b>				

<b>Observing Trainers in Practice</b>				
<b>Observing Professionals in Practice (i.e. DVDs)</b>				
<b>Case Studies/Process Reports</b>				
<b>Theoretical Essays</b>				
<b>Independent</b>				
<b>Individual Supervision</b>				
<b>Group Supervision</b>				
<b>Peer Discussion</b>				
<b>Clinical Practice</b>				
<b>Service User Input</b>				
<b>Personal Therapy</b>				

## **Appendix M: Debrief Sheet**

### Teaching and Learning Reflexivity

Researcher: Samantha Farag

#### **Debrief**

Thank you very much for taking part in my research. The study is designed to understand the teaching and learning of reflexivity. Having gathered the data, I will now analyse the results and write up the findings.

If you have any further questions about the study, I would be very happy to answer them now or in the future. You can contact me on [s.farag@londonmet.ac.uk](mailto:s.farag@londonmet.ac.uk). If you would like to withdraw your data from the study you may do so at any time over the next two weeks by contacting me in the ways identified above. Alternatively you can contact my lead research supervisor, Dr Keren Cohen, at [k.cohen@gold.ac.uk](mailto:k.cohen@gold.ac.uk)

I would be very pleased to share the results with you. If you would like a copy of the final thesis, please email me.

Thank you again for sharing your time to aid me in my research.

**Appendix N: Thematic Table**

<b>Superordinate Theme (Third Level)</b>	<b>Subordinate Themes (Second Level)</b>	<b>Emerging Themes (First Level)</b>	<b>Examples</b>
<b>Self-Reflective Inquiry and Personal Awareness</b>	<ul style="list-style-type: none"> <li>- Reflection of self, internal processes and the world around you</li> <li>- Understanding of self</li> <li>- Implicated at the fundamental level</li> </ul>	<ul style="list-style-type: none"> <li>- Understanding of reflexivity before knowledge of concept</li> <li>- Always implicated at a fundamental level in the process of inquiry and understanding</li> <li>- How you are affected and impacted by things that are happening around you</li> <li>- Understanding of yourself</li> <li>- Constantly shifting and changing</li> <li>- Subjective foundation of all knowledge and interactions and the process of understanding</li> <li>- Awareness of own strategies</li> </ul>	<p>'I think I've had an understanding of reflexivity long before erm, having any knowledge of a word for it'. (L-48–51)</p> <p>'Capacity of therapists and other health professionals to think about their interactions with a patient, both behavioural interactions and internal interactions'. (A-56–62)</p> <p>'Process of looking at one's self and understand one's own internal processes that occur in psychology in reaction to work that we do'. (H-7–11)</p> <p>'What's going on for me and my internal thinking, my own judgements, my own interpretations, incorporating my theory'. (C-114a–116b)</p>

		<p>'Thinking about the client within their own culture and context of their life'. (C-119–121)</p> <p>'Process where one will accept the way the assumptions and actions and how it influences certain situations that we find ourselves'. (E-67–70b)</p> <p>'The subjective foundations of all knowledge and err, interactions and the process of understanding, is always subjectively based'. (J-119–122b)</p> <p>'That means that you as an enquirer, are part of the process itself. And that in order to understand the implications that has for the knowledge you generate, you have to identify the influence, or attempt to try and identify the influence that your subjectivity has on the process'. (J-131–138c)</p>
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			<p>'Well I think it's something to do with engaging the inner life and subjectivity in a process of reflection. So that you are looking inwards (pause) as well as outwards'. (L-159–164)</p>
<p><b>Emotional Awareness and Continual Growth</b></p>	<ul style="list-style-type: none"> <li>- Continuum</li> <li>- Emotional functioning</li> <li>- Personal experiences</li> </ul>	<ul style="list-style-type: none"> <li>- Different levels of how being acquire reflectivity</li> <li>- Influenced by environment</li> <li>- Spectrum of capability or capacity to be reflective</li> <li>- Can be improved via teaching</li> <li>- Introspection</li> <li>- Comfortable with a range of emotions</li> <li>- Exposure</li> <li>- Personal experiences</li> <li>- Affect regulation</li> </ul>	<p>'I suppose I would just ask them how they feel in certain situations and see how they respond to that question because often people who can't answer those questions would, you know, who find it, erm, (pause), I mean, I notice that in my patients, you know, sort of "How did you feel about the fact that you had to move school yet again?" and they look at you blankly and say "Well, my father had to move and so we just went". You know, that kind of thing in a trainee might make me think "Hmm". But it doesn't mean they can't be trained to</p>

		<p>reflect, but if you really had to pick people who could reflect from day one, then, you know, you'd have to exclude somebody like that'. (A-1111-1129)</p> <p>'Well, I suppose reflexivity. Erm, obviously they have to be right, erm, you know, the people around counselling psychology courses are very different, you know, they usually don't have first class degrees but they're older, more thoughtful. They're no worse at it, you know, by any means, but they have... If you like, it's more understandable for them to be reflexive, you know, because they're older, they've been through life experiences. Many of them have had therapy. (pause) These very young ones – the vast majority had not had therapy, my</p>
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			<p>understanding is'. (A-1083–1097)</p> <p>'Everybody have that capacity to learn it and it's just about whether they've been, perhaps, specifically trained or it's been brought into their awareness in another way'. (E-361–365)</p> <p>'Some people have more capacity for that than others'. (H-24–26)</p> <p>'So some people you can teach and their capacity can be improved. But other people, I think they just don't get it and maybe that's because they're more concerned about what it might say about them as a clinician. So they're worried about owning maybe negative emotions or scared about what that would mean to their supervisor'. (H-44–55)</p>
<p><b>Emotional Intelligence in relation to</b></p>	<ul style="list-style-type: none"> <li>- Flexible throughout life</li> <li>- Baseline</li> </ul>	<ul style="list-style-type: none"> <li>- Deficits in reflective capacity or mentalization</li> </ul>	<p>'But that personality (pause) can mould and kind of be</p>

<p><b>Dynamic Personality Characteristics</b></p>	<ul style="list-style-type: none"> <li>- Traits/styles</li> <li>- Emotional Capacity</li> </ul>	<ul style="list-style-type: none"> <li>- Empathy</li> <li>- Natural instinct</li> <li>- High achievers</li> <li>- Attitude</li> <li>- Curiosity</li> <li>- Emotion regulation/dysregulation</li> </ul>	<p>moulded and changed, and shaped throughout your life'. (K-708–711)</p> <p>'Style and personality does play a great role'. (E-711b–712)</p> <p>'Some people are much more into reading, looking at the theory and just memorizing it, they just rote-learn it. They don't necessarily understand the depth of what they've learnt but they have that information. There are other people that are much more likely to look for the understanding of it and not necessarily remember, erm who wrote what or what research paper that they've looked at'. (C-370–381)</p> <p>'My natural instinct and my personality is to kind of think about others'. (C-219–220b)</p> <p>'Some characters can't tap into that and</p>
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			<p>can't access it'. (H-396–398)</p> <p>'I said that I think my family said I was over emotional. So, I am not sure I think there's such a thing as over emotion. I think it's about emotion regulation, when there's dis-regulation. So, erm, (pause) I think some personalities just don't have a language for emotion'. (H-386–394)</p>
<p><b>Influence of External Factors on Emotional Expression and Coping</b></p>	<ul style="list-style-type: none"> <li>- Supportive environment</li> <li>- Expressed emotions</li> <li>- Exposure</li> <li>- Trauma and difficult experiences</li> </ul>	<ul style="list-style-type: none"> <li>- Acceptable to express emotions</li> <li>- Atmosphere in the group where people do feel safe to say things</li> <li>- Parental influence</li> <li>- Developmental experience which has modelled reflexivity</li> <li>- Fundamental capacity</li> <li>- Can initiate reflexivity</li> <li>- Can also impede reflexivity</li> <li>- Generates introspection</li> </ul>	<p>'People who've had parenting which was not attuned, not reflexive, if you like have difficulty with emotional self-regulation and mentalisation and so on'. (A-485–488b)</p> <p>'The environment we grow up in can, in itself, bring about those things. If you don't know about reflexivity, or you'll be going through a process, you might not realise what exactly — and I can give an</p>

		<ul style="list-style-type: none"> <li>- Path to therapy</li> <li>- Reflective</li> <li>- Subjectivity</li> </ul>	<p>example that you might, in my work, to a lay person'. (E-327–333)</p> <p>'Being in an environment where emotions are expressed, good or bad. Where discussions about emotions take place'. (K-607–611a)</p> <p>'People that I've dealt with, who really struggle to become reflective and understand what it is, in my experience they come really from environments where err it's like, everything just has to appear good'. (K-630–636)</p> <p>'If you've had developmental experiences, which haven't really modelled this reflective capacity, or helped you develop it. Then it probably doesn't matter how much you get exposed to the idea of it later on. If you haven't</p>
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		<p>developed the fundamental capacity, or there are deficits in your ability, then it's going to be very difficult for you to, erm, to kind of have a natural inclination to do that, or be another way'. (J-460–472)</p> <p>'Let's say something seems to be a bit of erm, difficulty, is that something that is relevant to them in their personal life? Does that remind them of something in their personal life?' (K-320–323)</p> <p>'I think trauma, trauma really. That's how I went into therapy... But it was trauma that initiated my erm, me into the context of having to look inside'. (L-306–313b)</p> <p>'I had experienced a trauma which was, which broke me down, in some ways. And a lot broke through, in that process, particularly around</p>
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			<p>subjectivity'. (L-333b–338)</p> <p>'Developmental experiences are such that that person's psychological development has been so fundamentally compromised, that they haven't even developed that ability'. (J-530b–536)</p>
<p><b>Enhancing Self-Awareness and Reflexivity</b></p>	<ul style="list-style-type: none"> <li>- Role of reflexivity</li> <li>- Self-awareness</li> <li>- Development of reflexivity</li> </ul>	<ul style="list-style-type: none"> <li>- Reflexive process</li> <li>- Reflect on your own subjective experiences</li> <li>- Finding reference from within to connect to experiences outside of oneself</li> <li>- Reflecting on self</li> <li>- Reflecting on the world as I experience it</li> <li>- Values subjectivity</li> <li>- Understanding the world around me</li> <li>- Trauma initiated me into the context of having to look inside</li> <li>- Tapping into reflexivities</li> </ul>	<p>'Personal therapy (pause) helped me to be more reflective about myself, and my relation to other people around me, you know, in my environment. Like the people speak in therapy about, that kind of thing'. (K-773–778)</p> <p>'If they've had personal therapy, that usually is an indicator that they may have got some more self-awareness'. (K-1446b–1449)</p> <p>'So probably therapy, and I went into therapy very, in my late teens, personally. So I think I</p>



		<p>started my journey of reflexivity in therapy in my late teens, starting to reflect on myself, and life as I understood it, and the world as I experienced it and perceived it, in that context'. (L-66–74)</p> <p>'So I think I started my journey of reflexivity in therapy in my late teens, starting to reflect on myself, and life as I understood it, and the world as I experienced it and perceived it, in that context'. (L-68–74)</p> <p>'You see, I think I learnt in a lot of personal therapy, rather than through teaching. Erm, I think it's only when you experience somebody doing that for you, or doing it with you, that you appreciate the feeling that it evokes. What's actually needed in order to contain somebody' (G-24–32b)</p>
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			<p>'I always ask for feedback from my clients at the end of every session and at the end of every treatment'. (C-293b–295)</p> <p>'Experience of personal therapy that sort of, I think, unlocks some of that ability to really understand what it feels like to be working in a reflexive, you know, a reflective way'. (G-560–564)</p>
<p><b>Cultivating Critical Skills in Creativity</b></p>	<ul style="list-style-type: none"> <li>- Imagination</li> <li>- Tactic knowledge</li> <li>- Multiple points of view</li> <li>- Evaluative Feedback</li> </ul>	<ul style="list-style-type: none"> <li>- Creative about how you get people to learn</li> <li>- Think creatively</li> <li>- Creative and relational processes</li> <li>- Inter-personal</li> <li>- Reflexive journal</li> <li>- Freedom of expression</li> <li>- Self-inquiry</li> <li>- Constant feedback cycle</li> <li>- Attitude to constant learning</li> </ul>	<p>'You've got to try to think creatively. Use storyboards, or whatever you can do to kind of get the information from a different point of view'. (H-864–868)</p> <p>'It was amazing, and it all came from, yeah this kind of opportunity of hearing about tacit knowledge and try and be creative about how you get people to learn'. (H-1001–1005b)</p>

		<p>'So I want to try to get (pause) to those people, some of the knowledge and expertise that needs to be disseminated more widely, around emotional literacy and creativity and imagination, applied therapeutic thinking. So that they can feel a bit more supported and well resourced'. (L-1463–1471)</p> <p>'Mm, I think (pause) very much so really, that using the arts, and the arts in psychotherapy, which has been, I guess my long term interest, has been in the creative process and the imagination, the human imagination. Erm, (pause) and the inner life really, and tapping into one's experience of oneself and the world through the imagination'. (L-115–125)</p> <p>'Play and all the arts, drama, music,</p>
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			movement, sound and play, puppetry, poetry, dance. It could be anything at all that enables that freedom of expression and self-inquiry'. (L-127–131)
<b>Reflective Learning and Support</b>	<ul style="list-style-type: none"> <li>- Feedback cycle</li> <li>- Reflective</li> <li>- Guidance</li> </ul>	<ul style="list-style-type: none"> <li>- Reflexivity development</li> <li>- Tapping into reflexivities</li> <li>- Teaching each other</li> <li>- Revisiting</li> <li>- Opportunity to learn from mistakes</li> <li>- Developing skills</li> <li>- Providing a space for reflection</li> <li>- Practical guidance</li> <li>- Humanistic approach</li> <li>- Psychoanalytic perspective</li> <li>- Empathetic</li> <li>- Genuine</li> <li>- Peer learning</li> <li>- Creating a safe space</li> <li>- Sharing with peers</li> <li>- All feedback is useful</li> <li>- Helps us to know exactly what to develop</li> </ul>	<p>'Clinical supervision developed much more my reflexivity in terms of my clinical work'. (K-771–772b)</p> <p>'It's group supervision so they just teach each other, it's brilliant'. (C-71–73)</p> <p>'What did you find helpful today? What was not helpful? Is there anything we could do differently next time? Erm so it's constantly getting that feedback cycle'. (C-300a–304)</p> <p>'Allowing opportunity to make mistakes, I guess. And that journey of, 'Oh now I've got the, the deeper meaning of what that actually means and how to apply it'. (C-754–758)</p>

		<ul style="list-style-type: none"> <li>- Peer feedback</li> </ul>	<p>'I think the best reflection happens with another in a supervision or peer supervision situation'. (A-75-77)</p> <p>'Allowing the supervisee the space to say what they feel'. (K-335-336)</p> <p>'But it would be like little peer supervision groups, where let's say the tutor would be the supervisor. Erm, and through the facilitation of the group and the questions being asked, and so on, it would get, gradually students to be thinking in a more reflective way about themselves, about the clients and others would all be learning'. (K-1183-1191)</p>
<b>Pedagogical Approaches and Educational Effectiveness</b>	<ul style="list-style-type: none"> <li>- Role modelling</li> <li>- Reflexivity</li> <li>- Integrative thinking</li> <li>- Structured Feedback</li> </ul>	<ul style="list-style-type: none"> <li>- Integrative thinking</li> <li>- Thinking about the process</li> <li>- Prompting</li> <li>- Awareness</li> <li>- Theoretical</li> <li>- Support tapping into that reflexivity</li> </ul>	<p>'I think also a trainer is a role model, inevitably'. (A-1317-1318)</p> <p>'It's difficult to teach reflexivity when you're not very reflexive'. (A-1309-1311a)</p>

		<ul style="list-style-type: none"> <li>- Range of teaching and learning strategies</li> <li>- What trainees want to get from you</li> <li>- Feedback from students about how useful they found the module and what they found useful</li> </ul>	<p>'Teaching people how to erm, trainees or qualified therapists, but err, particularly trainees about thinking integratively, so no just thinking within a particular model'. (K-26–31)</p> <p>'What could have influenced the ideas that they got from the article, or the pinions that they formed about the article'. (K-958–961)</p> <p>'What influences your response, you know. What is it about you or what is it about maybe where you're working and so on, that erm, affects how you're thinking and your response to this article'. (K-997–1001b)</p> <p>'Feedback on how people are receiving your information, where they're going with whatever is happening within the setting'. (E-419–422)</p>
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			<p>'I mean, you know, some of the people that I've supervised haven't been very reflective and you have to teach it almost from scratch in the way that you would with certain patients. Erm, I mean, it doesn't mean they can't learn it, and get it, but it takes longer'. (A-1183a-1188)</p>
<p><b>Cultivating Reflexivity Through Critical Assessment and Engagement</b></p>	<ul style="list-style-type: none"> <li>- Knowledge &amp; Application of theory</li> <li>- Increased reflective awareness</li> <li>- Assessment feedback</li> </ul>	<ul style="list-style-type: none"> <li>- Experiential</li> <li>- General reflection</li> <li>- Assessment of knowledge and theory</li> <li>- Provides depth</li> <li>- Essential for increasing reflexivity</li> <li>- Embed learning</li> <li>- Always monitoring what you're thinking and where that fits</li> <li>- Consider what's taking place</li> <li>- Important mechanism for learning</li> </ul>	<p>'I think (pause) the theory and all the research and all the study that I do, just gives more depth and, and more variation on how I think'. (C-244-248)</p> <p>'But case reports are more about, you know an assessment that a trainee has, has the knowledge of a theory and can apply that and can communicate that understanding of knowledge, in a technical manner. I don't think that they're the venue to demonstrate erm,</p>

		<ul style="list-style-type: none"> <li>- Feedback on the accuracy of reflexivity</li> <li>- Understand your own ways of expressing reflexivity</li> <li>- Identifying opportunities to be reflective</li> </ul>	<p>reflexivity'. (H-841–851)</p> <p>'Through that experiential case study, it enabled him to be able to work out what was more appropriate'. (E-918–921)</p> <p>'Doing case studies and process reports, actually also made me much more aware'. (K-71–72b)</p> <p>'Because you can listen to somebody talking and you think, "Oh yes I know that". But the combination of reading it and you get more depth from the reading and then the reading somehow links back into the conversation. Erm, but then writing assignments, when you go to write something down you think, "Actually, I have no idea what I'm talking about". It does make you start to read with more depth and more reflectivity</p>
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			<p>because you're having to repackage it and reconstitute it into another, into your own words and your own cognitions. So, I think it really embeds it'. (C-274-290)</p> <p>'These kind of pieces of work forced me, to look at my own processes and what's going on, and what's happening in the room let's say, with a client'. (K-80b-84)</p> <p>'When somebody is given very clear feedback about problems, deficits, and then they still aren't able to develop that area of competence, to an adequate level, that's a pretty clear indicator that they are at a developmental stage, in relation to that competence, that means they're not really ready to continue this programme'. (J-1656-1665)</p>
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			<p>'I think that they shape you into wondering about what occurs for you. And because the feedback you get from them is about how, how accurate your reflexivity is'. (H-122–127)</p> <p>'I do really think they are useful towards you learning, to understand your own ways of expressing reflexivity, but also realizing when you have missed opportunities to do so'. (G-234a–239)</p>
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## Appendix O: Scale Reliability Cronbach's Alpha

### Big Five Inventory-10

#### Extraversion

##### Reliability Statistics

Cronbach's Alpha	N of Items
.781	2

#### Agreeableness

##### Reliability Statistics

Cronbach's Alpha	N of Items
.758	2

#### Conscientiousness

##### Reliability Statistics

Cronbach's Alpha	N of Items
.745	2

#### Neuroticism

##### Reliability Statistics

Cronbach's Alpha	N of Items
.755	2

#### Openness

##### Reliability Statistics

Cronbach's Alpha	N of Items
.822	2

### Self-Reflective & Insight Scale

#### Engagement in Self-Reflection Time 1

##### Reliability Statistics

Cronbach's Alpha	N of Items
.844	6

**Engagement in Self-Reflection Time 2**

**Reliability Statistics**

Cronbach's Alpha	N of Items
.806	6

**Need for Self-reflection Time 1**

**Reliability Statistics**

Cronbach's Alpha	N of Items
.848	6

**Need for Self-reflection Time 2**

**Reliability Statistics**

Cronbach's Alpha	N of Items
.794	6

**Insight Time 1**

**Reliability Statistics**

Cronbach's Alpha	N of Items
.758	8

**Insight Time 2**

**Reliability Statistics**

Cronbach's Alpha	N of Items
.761	8

**Relationship Scales Questionnaire**

**Reliability Statistics**

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
------------------	--	------------

.761	.768	30
------	------	----

**Preferred Teaching Approaches Inventory**

**Reliability Statistics**

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.790	.815	16

**The Training Questionnaire**

**Reliability Statistics**

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.835	.844	15

## Appendix P: Descriptive Statistics on Demographic Variables

### Age: Time 1

	Descriptive Statistics <sup>a</sup>				
	N	Minimum	Maximum	Mean	Std. Deviation
What is your age?	67	21	53	33.33	8.249
Valid N (listwise)	67				

### Age: Time 1 & 2

	Descriptive Statistics <sup>a</sup>				
	N	Minimum	Maximum	Mean	Std. Deviation
What is your age?	118	23	59	33.64	8.215
Valid N (listwise)	118				

### Gender: Time 1

		Are you female or male? <sup>a</sup>			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	42	62.7	62.7	62.7
	Male	19	28.4	28.4	91.0
	Prefer not to answer	6	9.0	9.0	100.0
	Total	67	100.0	100.0	

### Gender: Time 1 & 2

		Are you female or male? <sup>a</sup>			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	71	60.2	60.2	60.2
	Male	27	22.9	22.9	83.1
	Prefer not to answer	20	16.9	16.9	100.0
	Total	118	100.0	100.0	

### Ethnicity: Time 1

		. - White <sup>a</sup>			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	English	21	31.3	75.0	75.0
	Scottish	3	4.5	10.7	85.7
	Northern Irish	1	1.5	3.6	89.3
	Irish	3	4.5	10.7	100.0

	Total	28	41.8	100.0
Missing	System	39	58.2	
Total		67	100.0	

**. - Mixed/multiple ethnic groups<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	White and Asian	1	1.5	100.0	100.0
Missing	System	66	98.5		
Total		67	100.0		

**. - Asian/Asian British<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Indian	4	6.0	57.1	57.1
	Pakistani	1	1.5	14.3	71.4
	Bangladeshi	1	1.5	14.3	85.7
	Other	1	1.5	14.3	100.0
	Total	7	10.4	100.0	
Missing	System	60	89.6		
Total		67	100.0		

**. - Black/African/Caribbean/Black British<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Caribbean	2	3.0	100.0	100.0
Missing	System	65	97.0		
Total		67	100.0		

**You chose 'Other ethnic group' as your main ethnic category. Could you please give more detail by choosing one of the options in the menu?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		54	80.6	80.6	80.6
	Belgian	1	1.5	1.5	82.1
	British Cypriot	1	1.5	1.5	83.6
	Cypriot	1	1.5	1.5	85.1
	Greek	1	1.5	1.5	86.6
	Greek	4	6.0	6.0	92.5
	Maltese	1	1.5	1.5	94.0

Mixed	1	1.5	1.5	95.5
Turkish	1	1.5	1.5	97.0
White - European	1	1.5	1.5	98.5
White European	1	1.5	1.5	100.0
Total	67	100.0	100.0	

**Ethnicity: Time 1 & 2**

**. - White<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	English	48	40.7	80.0	80.0
	Scottish	3	2.5	5.0	85.0
	Welsh	5	4.2	8.3	93.3
	Irish	4	3.4	6.7	100.0
	Total	60	50.8	100.0	
Missing	System	58	49.2		
Total		118	100.0		

**. - Mixed/multiple ethnic groups<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	White and Black African	3	2.5	75.0	75.0
	Other	1	.8	25.0	100.0
	Total	4	3.4	100.0	
Missing	System	114	96.6		
Total		118	100.0		

**. - Asian/Asian British<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Indian	3	2.5	20.0	20.0
	Pakistani	5	4.2	33.3	53.3
	Bangladeshi	1	.8	6.7	60.0
	Chinese	5	4.2	33.3	93.3
	Other	1	.8	6.7	100.0
	Total	15	12.7	100.0	
Missing	System	103	87.3		
Total		118	100.0		



**. - Black/African/Caribbean/Black British<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	African	2	1.7	40.0	40.0
	Caribbean	3	2.5	60.0	100.0
	Total	5	4.2	100.0	
Missing	System	113	95.8		
Total		118	100.0		

**You chose 'Other ethnic group' as your main ethnic category. Could you please give more detail by choosing one of the options in the menu?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid		106	89.8	89.8	89.8
	Belgian	1	.8	.8	90.7
	European	1	.8	.8	91.5
	European white	1	.8	.8	92.4
	Finnish	2	1.7	1.7	94.1
	Mixed	1	.8	.8	94.9
	Pole	1	.8	.8	95.8
	Polish	1	.8	.8	96.6
	Polish	1	.8	.8	97.5
	Swedish	1	.8	.8	98.3
	Turkish	1	.8	.8	99.2
	White European	1	.8	.8	100.0
	Total	118	100.0	100.0	

**Prior Clinical Background: Time 1**

**Have you had clinical supervision previously?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	19	28.4	28.4	28.4
	No	48	71.6	71.6	100.0
	Total	67	100.0	100.0	

**Have you had personal therapy previously?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	5	7.5	7.5	7.5
	No	62	92.5	92.5	100.0
	Total	67	100.0	100.0	

**Do you have prior training or a degree or in a therapeutic modality?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	12	17.9	17.9	17.9
	No	55	82.1	82.1	100.0
	Total	67	100.0	100.0	

**Have you any clinical hours (one to one therapy with a client)?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	15	22.4	22.4	22.4
	No	52	77.6	77.6	100.0
	Total	67	100.0	100.0	

**Prior Clinical Background: Time 1 & 2**

**Have you had clinical supervision previously?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	33	28.0	28.0	28.0
	No	85	72.0	72.0	100.0
	Total	118	100.0	100.0	

**Have you had personal therapy previously?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	38	32.2	32.2	32.2
	no	80	67.8	67.8	100.0
	Total	118	100.0	100.0	

**Do you have prior training or a degree or in a therapeutic modality?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	24	20.3	20.3	20.3
	No	94	79.7	79.7	100.0
	Total	118	100.0	100.0	

**Have you any clinical hours (one-to-one therapy with a client)?<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	31	26.3	26.3	26.3
	No	87	73.7	73.7	100.0
	Total	118	100.0	100.0	

**Appendix Q: Descriptive Statistics on Measures**

**BFI-10**

**Extraversion Category**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Low	105	56.8	56.8	56.8
	Average	25	13.5	13.5	70.3
	High	55	29.7	29.7	100.0
	Total	185	100.0	100.0	

**Agreeableness Category**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Low	48	25.9	25.9	25.9
	Average	31	16.8	16.8	42.7
	High	106	57.3	57.3	100.0
	Total	185	100.0	100.0	

**Conscientiousness Category**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Low	61	33.0	33.0	33.0
	Medium	14	7.6	7.6	40.5
	High	110	59.5	59.5	100.0
	Total	185	100.0	100.0	

**Neuroticism Category**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Low	99	53.5	53.5	53.5
	Average	26	14.1	14.1	67.6
	High	60	32.4	32.4	100.0
	Total	185	100.0	100.0	

		Openness Category			Cumulative
		Frequency	Percent	Valid Percent	Percent
Valid	Low	91	49.2	49.2	49.2
	Average	26	14.1	14.1	63.2
	High	68	36.8	36.8	100.0
	Total	185	100.0	100.0	

### Self-Reflection & Insight Scale

Descriptive Statistics						
	N	Range	Minimum	Maximum	Mean	Std. Deviation
Engagement.T1	185	25.00	8.00	33.00	25.2054	5.69334
Engagement.T2	118	24.00	12.00	36.00	28.5339	5.51561
NeedFor.T1	185	26.00	8.00	34.00	25.3838	5.23977
NeedFor.T2	118	28.00	8.00	36.00	29.7203	4.92488
Reflexivity.T1	185	24.00	17.00	41.00	28.2162	5.51448
Reflexivity.T2	118	21.00	27.00	48.00	43.7373	3.72891
Valid N (listwise)	118					

### Relationship Scales Questionnaire

Descriptive Statistics						
	N	Range	Minimum	Maximum	Mean	Std. Deviation
Secure	185	3.60	1.20	4.80	3.1546	.85953
Fearful	185	4.00	1.00	5.00	2.7027	.83250
Preoccupied	185	3.75	1.25	5.00	2.9716	.74923
Dismissing	185	3.40	1.20	4.60	2.9189	.75161
Valid N (listwise)	118					

### Preferred Teaching Approaches Inventory

Descriptive Statistics						
	N	Minimum	Maximum	Mean	Std. Deviation	
Concept.Student.Intention	118	4.50	2.50	7.00	4.9513	1.10663
Concept.Student.Strategy	118	4.75	2.25	7.00	5.1504	1.09297
Information.Teacher.Intention	118	4.25	2.75	7.00	5.3432	1.06859
Information.Teacher.Strategy	118	3.50	2.50	6.00	3.8114	.74746

### Training Questionnaire

#### Descriptive Statistics

	N	Range	Minimum	Maximum	Mean	Std. Deviation
Lectures	118	11.00	1.00	12.00	6.2458	3.48363
Seminars	118	7.00	1.00	8.00	3.2034	1.73234
Case Discussion	118	4.00	.00	4.00	1.3814	.98640
Roleplay	118	2.00	.00	2.00	.7458	.74175
Videowork	118	1.00	.00	1.00	.0424	.20230
Observing trainers in practice	118	1.00	.00	1.00	.0169	.12963
Observing professionals in practice, i.e. DVDs	118	2.00	.00	2.00	.2712	.53367
Case Studies/Process Reports	118	4.00	.00	4.00	2.0424	1.01606
Theoretical Essays	118	5.00	.00	5.00	2.4576	1.11435
Individual Supervision	118	2.00	.00	2.00	1.0339	.59818
Group Supervision	118	4.00	.00	4.00	1.0254	1.18727
Peer Discussion	118	5.00	1.00	6.00	1.4661	.88368
Clinical Practice	118	9.00	1.00	10.00	6.0424	3.37511
Service User Input	118	1.00	.00	1.00	.0169	.12963
Personal Therapy	118	3.00	.00	3.00	.9153	.59307
Valid N (listwise)	118					

### Self-Rated Reflexivity Questionnaire

#### Lectures<sup>a</sup>

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	64	54.2	54.2	54.2
	Some improvement on levels of reflexivity	52	44.1	44.1	98.3
	Extensive improvement on levels of reflexivity	2	1.7	1.7	100.0
	Total	118	100.0	100.0	

		Seminars <sup>a</sup>			Cumulative
		Frequency	Percent	Valid Percent	Percent
Valid	Haven't had any	43	36.4	36.4	36.4
	Some improvement on levels of reflexivity	66	55.9	55.9	92.4
	Extensive improvement on levels of reflexivity	9	7.6	7.6	100.0
	Total	118	100.0	100.0	

		Case Discussion <sup>a</sup>			Cumulative
		Frequency	Percent	Valid Percent	Percent
Valid	Haven't had any	24	20.3	20.3	20.3
	Some improvement on levels of reflexivity	59	50.0	50.0	70.3
	Extensive improvement on levels of reflexivity	35	29.7	29.7	100.0
	Total	118	100.0	100.0	

		Roleplay <sup>a</sup>			Cumulative
		Frequency	Percent	Valid Percent	Percent
Valid	Haven't had any	27	22.9	22.9	22.9
	Some improvement on levels of reflexivity	62	52.5	52.5	75.4
	Extensive improvement on levels of reflexivity	29	24.6	24.6	100.0
	Total	118	100.0	100.0	

**Observing professionals in practice (i.e. DVDs<sup>a</sup>)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	55	46.6	46.6	46.6
	Some improvement on levels of reflexivity	51	43.2	43.2	89.8
	Extensive improvement on levels of reflexivity	12	10.2	10.2	100.0
	Total	118	100.0	100.0	
	Some improvement on levels of reflexivity	35	29.7	29.7	72.0
	Extensive improvement on levels of reflexivity	33	28.0	28.0	100.0
	Total	118	100.0	100.0	

**Observing trainers in practice<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	72	61.0	61.0	61.0
	Some improvement on levels of reflexivity	24	20.3	20.3	81.4
	Extensive improvement on levels of reflexivity	22	18.6	18.6	100.0
	Total	118	100.0	100.0	

**Case Studies/Process Reports<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	27	22.9	22.9	22.9
	Some improvement on levels of reflexivity	57	48.3	48.3	71.2
	Extensive improvement on levels of reflexivity	34	28.8	28.8	100.0
	Total	118	100.0	100.0	



**Group Supervision<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	52	44.1	44.1	44.1
	Some improvement on levels of reflexivity	18	15.3	15.3	59.3
	Extensive improvement on levels of reflexivity	48	40.7	40.7	100.0
	Total	118	100.0	100.0	

**Theoretical Essays<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	80	67.8	67.8	67.8
	Some improvement on levels of reflexivity	35	29.7	29.7	97.5
	Extensive improvement on levels of reflexivity	3	2.5	2.5	100.0
	Total	118	100.0	100.0	

**Individual Supervision<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	12	10.2	10.2	10.2
	Some improvement on levels of reflexivity	29	24.6	24.6	34.7
	Extensive improvement on levels of reflexivity	77	65.3	65.3	100.0
	Total	118	100.0	100.0	

**Peer Discussion<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	27	22.9	22.9	22.9
	Some improvement on levels of reflexivity	69	58.5	58.5	81.4
	Extensive improvement on levels of reflexivity	22	18.6	18.6	100.0
	Total	118	100.0	100.0	

**Clinical Practice<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	8	6.8	6.8	6.8
	Some improvement on levels of reflexivity	56	47.5	47.5	54.2
	Extensive improvement on levels of reflexivity	54	45.8	45.8	100.0
	Total	118	100.0	100.0	

**Service User Input<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	72	61.0	61.0	61.0
	Some improvement on levels of reflexivity	13	11.0	11.0	72.0
	Extensive improvement on levels of reflexivity	33	28.0	28.0	100.0
	Total	118	100.0	100.0	

**Personal Therapy<sup>a</sup>**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Haven't had any	16	13.6	13.6	13.6
	Some improvement on levels of reflexivity	23	19.5	19.5	33.1
	Extensive improvement on levels of reflexivity	79	66.9	66.9	100.0
	Total	118	100.0	100.0	

## Appendix R: Regression Analysis Hypothesis 1

### Regression

		Notes
Output Created		11-APR-2019 15:24:48
Comments		
Input	Data	/Users/sam_farag/Desktop/D ATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics are based on cases with no missing values for any variable used.
Syntax		REGRESSION /MISSING LISTWISE /STATISTICS COEFF OUTS CI(95) R ANOVA /CRITERIA=PIN(.05) POUT(.10) /NOORIGIN /DEPENDENT Insight.T1 /METHOD=ENTER q0012 q0014 q0016 q0017.
Resources	Processor Time	00:00:00.02
	Elapsed Time	00:00:00.00
	Memory Required	11632 bytes
	Additional Memory Required for Residual Plots	0 bytes

**Variables Entered/Removed<sup>a</sup>**

Model	Variables Entered	Variables Removed	Method
1	Have you any clinical hours (one to one therapy with a client)?, Have you had personal therapy previously?, Have you had clinical supervision previously?, Do you have prior training or a degree or in a therapeutic modality? <sup>b</sup>	.	Enter

a. Dependent Variable: Insight.T1

b. All requested variables entered

**Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.542 <sup>a</sup>	.294	.278	3.17941

a. Predictors: (Constant), Have you any clinical hours (one to one therapy with a client)?, Have you had personal therapy previously?, Have you had clinical supervision previously?, Do you have prior training or a degree or in a therapeutic modality?

**ANOVA<sup>a</sup>**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	757.665	4	189.416	18.738	.000 <sup>b</sup>
	Residual	1819.557	180	10.109		
	Total	2577.222	184			

a. Dependent Variable: Insight.T1

b. Predictors: (Constant), Have you any clinical hours (one to one therapy with a client)?, Have you had personal therapy previously?, Have you had clinical supervision previously?, Do you have prior training or a degree or in a therapeutic modality?

**Coefficients<sup>a</sup>**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B
	B	Std. Error	Beta			Lower Bound
1 (Constant)	33.763	1.271		26.570	.000	31.256
Have you had clinical supervision previously?	-4.398	.799	-.530	-5.505	.000	-5.975
Have you had personal therapy previously?	-2.577	.645	-.292	-3.996	.000	-3.849
Do you have prior training or a degree or in a therapeutic modality?	-.156	.918	-.017	-.170	.865	-1.968
Have you any clinical hours (one to one therapy with a client)?	2.038	1.040	.236	1.959	.052	-.015

**Coefficients<sup>a</sup>**

Model	95.0% Confidence Interval for B
	Upper Bound
1 (Constant)	36.270
Have you had clinical supervision previously?	-2.822
Have you had personal therapy previously?	-1.304
Do you have prior training or a degree or in a therapeutic modality?	1.655
Have you any clinical hours (one to one therapy with a client)?	4.091

a. Dependent Variable: Insight.T1

## Appendix S: T Tests and Levene's Test of Homogeneity of Variance Hypothesis 2

### Time 1

```
T-TEST GROUPS=ExtraversionCategory(1 3)
/MISSING=ANALYSIS
/VARIABLES=Insight.T1
/CRITERIA=CI(.95).
```

### T-Test

		Notes
Output Created		18-APR-2019 16:27:00
Comments		
Input	Data	/Users/sam_farag/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User defined missing values are treated as missing.
	Cases Used	Statistics for each analysis are based on the cases with no missing or out-of-range data for any variable in the analysis.
Syntax		T-TEST GROUPS=ExtraversionCategory(1 3) /MISSING=ANALYSIS /VARIABLES=Insight.T1 /CRITERIA=CI(.95).
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

		Group Statistics			
	ExtraversionCategory	N	Mean	Std. Deviation	Std. Error Mean
Insight.T1	Low	105	27.6476	5.80448	.56646
	High	55	28.6545	4.96737	.66980

**Independent Samples Test**

		Levene's Test for Equality of Variances		t-test for Equality of Means		
		F	Sig.	t	df	Sig. (2-tailed)
Insight.T1	Equal variances assumed	2.756	.099	-1.093	158	.276
	Equal variances not assumed			-1.148	125.527	.253

**Independent Samples Test**

		t-test for Equality of Means			
		Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
				Lower	Upper
Insight.T1	Equal variances assumed	-1.00693	.92091	-2.82581	.81195
	Equal variances not assumed	-1.00693	.87722	-2.74297	.72912

T-TEST GROUPS=AgreeablenessCategory(1 3)  
 /MISSING=ANALYSIS  
 /VARIABLES=Insight.T1  
 /CRITERIA=CI(.95).

**T-Test**

**Notes**

Output Created		18-APR-2019 16:27:16
Comments		
Input	Data	/Users/sam_farag/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User defined missing values are treated as missing.

Cases Used		Statistics for each analysis are based on the cases with no missing or out-of-range data for any variable in the analysis.
Syntax		T-TEST GROUPS=AgreeablenessCategory(1 3) /MISSING=ANALYSIS /VARIABLES=Insight.T1 /CRITERIA=CI(.95).
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

### Group Statistics

	AgreeablenessCategory	N	Mean	Std. Deviation	Std. Error Mean
Insight.T1	Low	48	26.7083	5.50805	.79502
	High	106	29.4340	5.44412	.52878

### Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means		
		F	Sig.	t	df	Sig. (2-tailed)
Insight.T1	Equal variances assumed	.052	.821	-2.867	152	.005
	Equal variances not assumed			-2.855	89.906	.005

### Independent Samples Test

		t-test for Equality of Means			
		Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
				Lower	Upper
Insight.T1	Equal variances assumed	-2.72563	.95059	-4.60371	-.84755
	Equal variances not assumed	-2.72563	.95481	-4.62255	-.82870

T-TEST GROUPS=ConscientiousnessCategory(1 3)  
/MISSING=ANALYSIS  
/VARIABLES=Insight.T1  
/CRITERIA=CI(.95).



## T-Test

### Notes

Output Created		18-APR-2019 16:27:37
Comments		
Input	Data	/Users/sam_farag/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User defined missing values are treated as missing.
	Cases Used	Statistics for each analysis are based on the cases with no missing or out-of-range data for any variable in the analysis.
Syntax		T-TEST GROUPS=Conscientiousness Category(1 3) /MISSING=ANALYSIS /VARIABLES=Insight.T1 /CRITERIA=CI(.95).
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

### Group Statistics

ConscientiousnessCategory		N	Mean	Std. Deviation	Std. Error Mean
Insight.T1	Low	61	26.8197	5.93439	.75982
	High	110	29.4091	5.09415	.48571

### Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means		
		F	Sig.	t	df	Sig. (2-tailed)
Insight.T1	Equal variances assumed	2.105	.149	-3.000	169	.003

Equal variances not assumed			-2.871	109.032	.005
-----------------------------	--	--	--------	---------	------

### Independent Samples Test

		t-test for Equality of Means			
		Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
				Lower	Upper
Insight.T1	Equal variances assumed	-2.58942	.86323	-4.29353	-.88531
	Equal variances not assumed	-2.58942	.90180	-4.37675	-.80209

T-TEST GROUPS=OpennessCategory(1 3)  
 /MISSING=ANALYSIS  
 /VARIABLES=Insight.T1  
 /CRITERIA=CI(.95).

### T-Test

#### Notes

Output Created		18-APR-2019 16:28:05
Comments		
Input	Data	/Users/sam_farag/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User defined missing values are treated as missing.
	Cases Used	Statistics for each analysis are based on the cases with no missing or out-of-range data for any variable in the analysis.
Syntax	T-TEST GROUPS=OpennessCategory(1 3) /MISSING=ANALYSIS /VARIABLES=Insight.T1 /CRITERIA=CI(.95).	

Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

**Group Statistics**

	OpennessCategory	N	Mean	Std. Deviation	Std. Error Mean
Insight.T1	Low	91	27.8462	5.40766	.56688
	High	68	28.7647	5.86443	.71117

**Independent Samples Test**

		Levene's Test for Equality of Variances		t-test for Equality of Means		
		F	Sig.	t	df	Sig. (2-tailed)
Insight.T1	Equal variances assumed	.544	.462	-1.022	157	.308
	Equal variances not assumed			-1.010	137.781	.314

**Independent Samples Test**

		t-test for Equality of Means			
		Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
				Lower	Upper
Insight.T1	Equal variances assumed	-.91855	.89880	-2.69386	.85675
	Equal variances not assumed	-.91855	.90945	-2.71684	.87974

**Time 2**

T-TEST GROUPS=OpennessCategory(1 3)  
 /MISSING=ANALYSIS  
 /VARIABLES=Insight.T2  
 /CRITERIA=CI(.95).

**T-Test**

**Notes**

Output Created	18-APR-2019 16:21:12	
Comments		
Input	Data	/Users/sam_farag/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>

	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User defined missing values are treated as missing.
	Cases Used	Statistics for each analysis are based on the cases with no missing or out-of-range data for any variable in the analysis.
Syntax		T-TEST GROUPS=OpennessCategory(1 3) /MISSING=ANALYSIS /VARIABLES=Insight.T2 /CRITERIA=CI(.95).
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

### Group Statistics

	OpennessCategory	N	Mean	Std. Deviation	Std. Error Mean
Insight.T2	Low	54	43.2222	3.85426	.52450
	High	48	44.3333	3.67472	.53040

### Independent Samples Test

Levene's Test for Equality of Variances

t-test for Equality of Means

		F	Sig.	t	df	Sig. (2-tailed)
Insight.T2	Equal variances assumed	.272	.603	-1.485	100	.139
	Equal variances not assumed			-1.490	99.494	.139

### Independent Samples Test

t-test for Equality of Means

95% Confidence Interval of the Difference

		Mean Difference	Std. Error Difference	Lower	Upper
Insight.T2	Equal variances assumed	-1.11111	.74805	-2.59523	.37301
	Equal variances not assumed	-1.11111	.74594	-2.59112	.36830

## Appendix T: Regression Analysis Hypothesis 3

Notes		
Output Created		18-APR-2019 13:02:35
Comments		
Input	Data	/Users/sam_farag/Desktop/D ATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics are based on cases with no missing values for any variable used.
Syntax		REGRESSION /MISSING LISTWISE /STATISTICS COEFF OUTS CI(95) R ANOVA /CRITERIA=PIN(.05) POUT(.10) /NOORIGIN /DEPENDENT Insight.T1 /METHOD=ENTER Secure.
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00
	Memory Required	10800 bytes
	Additional Memory Required for Residual Plots	0 bytes

### Variables Entered/Removed<sup>a</sup>

Model	Variables Entered	Variables Removed	Method
1	Secure <sup>b</sup>	.	Enter

a. Dependent Variable: Insight.T1

b. All requested variables entered.

**Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.227 <sup>a</sup>	.052	.046	5.38482

a. Predictors: (Constant), Secure

**ANOVA<sup>a</sup>**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	289.025	1	289.025	9.968	.002 <sup>b</sup>
	Residual	5306.326	183	28.996		
	Total	5595.351	184			

a. Dependent Variable: Insight.T1

b. Predictors: (Constant), Secure

**Coefficients<sup>a</sup>**

Model		Unstandardized Coefficients		Standardized Coefficients Beta	t	Sig.	95.0% Confidence Interval for B	
		B	Std. Error				Lower Bound	Upper Bound
1	(Constant)	23.616	1.510		15.642	.000	20.638	26.595
	Secure	1.458	.462	.227	3.157	.002	.547	2.369

a. Dependent Variable: Insight.T1

## Appendix U: T Tests Hypothesis 4

### T-Test

		Notes
Output Created		18-APR-2019 13:08:22
Comments		
Input	Data	/Users/sam_farag/Desktop/D ATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User defined missing values are treated as missing.
	Cases Used	Statistics for each analysis are based on the cases with no missing or out-of-range data for any variable in the analysis.
Syntax		T-TEST PAIRS=Engagement.T1 NeedFor.T1 Insight.T1 WITH Engagement.T2 NeedFor.T2 Insight.T2 (PAIRED) /CRITERIA=CI(.9500) /MISSING=ANALYSIS.
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Engagement.T1	24.0678	118	6.25352	.57568
	Engagement.T2	28.5339	118	5.51561	.50775
Pair 2	NeedFor.T1	24.5847	118	5.88396	.54166
	NeedFor.T2	29.7203	118	4.92488	.45337
Pair 3	Insight.T1	29.2288	118	5.66201	.52123
	Insight.T2	43.7373	118	3.72891	.34327

### Paired Samples Correlations

		N	Correlation	Sig.
Pair 1	Engagement.T1 & Engagement.T2	118	.192	.037
Pair 2	NeedFor.T1 & NeedFor.T2	118	.159	.085
Pair 3	Insight.T1 & Insight.T2	118	.302	.001

### Paired Samples Test

		t	df	Sig. (2-tailed)
Pair 1	Engagement.T1 - Engagement.T2	-6.469	117	.000
Pair 2	NeedFor.T1 - NeedFor.T2	-7.917	117	.000
Pair 3	Insight.T1 - Insight.T2	-27.355	117	.000



## Appendix V: Pearson Correlation Coefficient Hypothesis 5

<b>Notes</b>		
Output Created		11-APR-2019 16:29:11
Comments		
Input	Data	/Users/sam_farag/Desktop/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics for each pair of variables are based on all the cases with valid data for that pair.
Syntax		CORRELATIONS  /VARIABLES=Total.University.TeachingHoursWeek Total.University.TeachingHoursYear Total.Independent.HoursWeek TotalR.University.Hours.Week TotalR.Independent TotalR.University.Hours.Year /PRINT=TWOTAIL NOSIG /MISSING=PAIRWISE.
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

		<b>Correlations</b>			
		Total.University.TeachingHoursWeek	Total.University.TeachingHoursYear	Total.Independent.HoursWeek	TotalR.University.Hours.Week
Total.University.TeachingHoursWeek	Pearson Correlation	1	-.005	.398**	.088
	Sig. (2-tailed)		.953	.000	.344

	N	118	118	118	118
Total.University.TeachingHoursYear	Pearson Correlation	-.005	1	.158	.025
	Sig. (2-tailed)	.953		.088	.785
	N	118	118	118	118
Total.Independent.HoursWeek	Pearson Correlation	.398**	.158	1	.264**
	Sig. (2-tailed)	.000	.088		.004
	N	118	118	118	118
TotalR.University.HoursWeek	Pearson Correlation	.088	.025	.264**	1
	Sig. (2-tailed)	.344	.785	.004	
	N	118	118	118	118
TotalR.Independent	Pearson Correlation	.265**	.030	.455**	.604**
	Sig. (2-tailed)	.004	.750	.000	.000
	N	118	118	118	118
TotalR.University.HoursYear	Pearson Correlation	.093	-.022	.145	.581**
	Sig. (2-tailed)	.314	.816	.118	.000
	N	118	118	118	118

### Correlations

		TotalR.Independent	TotalR.University.Hours.Year
Total.University.TeachingHoursWeek	Pearson Correlation	.265**	.093
	Sig. (2-tailed)	.004	.314
	N	118	118
Total.University.TeachingHoursYear	Pearson Correlation	.030	-.022
	Sig. (2-tailed)	.750	.816
	N	118	118
Total.Independent.HoursWeek	Pearson Correlation	.455**	.145
	Sig. (2-tailed)	.000	.118
	N	118	118
TotalR.University.HoursWeek	Pearson Correlation	.604**	.581**
	Sig. (2-tailed)	.000	.000
	N	118	118
TotalR.Independent	Pearson Correlation	1	.472**
	Sig. (2-tailed)		.000
	N	118	118

TotalR.University.Hours.Y ear	Pearson Correlation	.472**	1
	Sig. (2-tailed)	.000	
	N	118	118

\*\* . Correlation is significant at the 0.01 level (2-tailed).

## Appendix W: R Squared Regression Model Hypothesis 6

### Regression

		Notes
Output Created		18-APR-2019 16:47:49
Comments		
Input	Data	/Users/sam_farag/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics are based on cases with no missing values for any variable used.
Syntax		REGRESSION /MISSING LISTWISE /STATISTICS COEFF OUTS R ANOVA /CRITERIA=PIN(.05) POUT(.10) /NOORIGIN /DEPENDENT Secure /METHOD=ENTER Insight.T1 Insight.T2.
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00
	Memory Required	11248 bytes
	Additional Memory Required for Residual Plots	0 bytes

Variables Entered/Removed <sup>a</sup>			
Model	Variables Entered	Variables Removed	Method
1	Insight.T2, Insight.T1 <sup>b</sup>		Enter

- a. Dependent Variable: Secure  
b. All requested variables entered.

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.268 <sup>a</sup>	.072	.056	.89430

- a. Predictors: (Constant), Insight.T2, Insight.T1

ANOVA <sup>a</sup>						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	7.106	2	3.553	4.442	.014 <sup>b</sup>
	Residual	91.974	115	.800		
	Total	99.080	117			

- a. Dependent Variable: Secure  
b. Predictors: (Constant), Insight.T2, Insight.T1

Coefficients <sup>a</sup>						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.362	.983		.369	.713
	Insight.T1	.017	.015	.104	1.105	.271
	Insight.T2	.054	.023	.217	2.304	.023

- a. Dependent Variable: Secure

## Appendix X: Pearson Correlation Coefficient and Analysis of Variance Hypothesis 7

### Correlations

		Notes
Output Created		18-APR-2019 16:42:10
Comments		
Input	Data	/Users/sam_farag/DATASET SF.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	185
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics for each pair of variables are based on all the cases with valid data for that pair.
Syntax		CORRELATIONS /VARIABLES=Insight.T2 Concept.Student.Intention Concept.Student.Strategy  Information.Teacher.Intention Information.Teacher.Strategy /PRINT=TWOTAIL NOSIG /MISSING=PAIRWISE.
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00

		Correlations			
		Insight.T2	Concept.Student.Intention	Concept.Student.Strategy	Information.Teacher.Intention
Insight.T2	Pearson Correlation	1	.213*	.131	.039
	Sig. (2-tailed)		.021	.158	.671
	N	118	118	118	118

Concept.Student.Intention	Pearson Correlation	.213*	1	.766**	.341**
	Sig. (2-tailed)	.021		.000	.000
	N	118	118	118	118
Concept.Student.Strategy	Pearson Correlation	.131	.766**	1	.397**
	Sig. (2-tailed)	.158	.000		.000
	N	118	118	118	118
Information.Teacher.Intention	Pearson Correlation	.039	.341**	.397**	1
	Sig. (2-tailed)	.671	.000	.000	
	N	118	118	118	118
Information.Teacher.Strategy	Pearson Correlation	.025	.113	.045	.393**
	Sig. (2-tailed)	.788	.221	.625	.000
	N	118	118	118	118

### Correlations

		Information.Teacher.Strategy
Insight.T2	Pearson Correlation	.025
	Sig. (2-tailed)	.788
	N	118
Concept.Student.Intention	Pearson Correlation	.113
	Sig. (2-tailed)	.221
	N	118
Concept.Student.Strategy	Pearson Correlation	.045
	Sig. (2-tailed)	.625
	N	118
Information.Teacher.Intention	Pearson Correlation	.393**
	Sig. (2-tailed)	.000
	N	118
Information.Teacher.Strategy	Pearson Correlation	1
	Sig. (2-tailed)	
	N	118

\*. Correlation is significant at the 0.05 level (2-tailed).

\*\*. Correlation is significant at the 0.01 level (2-tailed).

**Appendix Y: Interview A: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Original Transcript	Exploratory Comments	Emergent Themes
<p>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15</p>	<p>I: Okay, so I just wanted to get started by asking how you would describe yourself, as a professional. What's your professional title?</p> <p>P1: Okay, I am a psychotherapist but before that I was a doctor.</p> <p>I: And how long have you been a, erm, doctor or a psychotherapist?</p> <p>P1: Well, I qualified as a doctor in 1977-</p> <p>I: Okay.</p> <p>P1: And, erm, I didn't become a psychiatrist. My intention was to be a GP, so I did nine months of psychiatry on the way as part of the</p>	<p>Psychotherapist – 1994 onwards</p> <p>Doctor since 1977 - 1986</p> <p>CAT 1994 – solution-focused therapy</p>	<p><b>Job Title</b></p> <p><b>Previous job title</b></p>



16	GP vocational training. Erm, and I		
17	was a GP until 1986. Erm, from then		
18	I then, sort of, changed into family		
19	planning and women's health about		
20	two thirds of the time and		
21	psychotherapy about one third of the		
22	time. Psychotherapy was initially		
23	CAT and from '94 also sort of		
24	solution-focused therapy.		
25			
26	I: Okay and how long have you been		
27	a trainer, as well, on different		
28	programmes?		
29	P1: I've been a trainer since, really...		
30	I mean I started... Really since 1990		
31	because I was one of the very first	<b>Trainer</b>	
32	people to train with Anthony Ryle,		
33	the founder of CAT. So in those		
34	days, as soon as you had completed		
35	eight cases, you became a		
36	supervisor, just like that.	Since 1990	
37	I: Okay.		
38			
39	P1: It was very scary but, you know,		
40	that's what we did.		
41	I: Thank you for that just a general		
42	idea. Erm, here's the main questions.		
43	What is your understanding of the		
44	term "reflexivity"?		
45	P1: I'm not sure I came across it		
46	before you sent me the information.		

47	I: What is your understanding of self-		<b>Reflexivity</b>
48	reflection / reflective practice?		
49	P1: Okay, erm, well, reflective		
50	practice I have come across that		
51a	term and it's really about the capacity		
51b	of therapists and other health		Unaware of it until
52	professionals to think about their		now
53	interactions with a patient – both		
54a	behavioural interactions, as in what		
54b	he said, what I said. But also, if you		<b>Reflective Practice</b>
55	like, the internal interaction with a		
56	patient. You know, what I feel about	Capacity of	
57	them, what I think about them, even	therapists and	To think about their
58	if I don't show outward signs of	other health	behavioural and
59	behaviour of that.	professionals to	internal interactions
60	And self-reflection or reflective	think about their	with a client.
61	practice is the capacity to reflect with	interactions with	
62	yourself or with another about these	a patient. Both	
63	things, these issues.	behaviorally, and	
64		internally (what	
65	I: And how do you use reflection /	you feel about	
66	reflective practice in your clinical	them, what you	
67	work?	think about	
68		them).	
69	P1: How do I use it? Erm, I'm not		<b>Self Reflective</b>
70	quite sure what the question is		<b>Practice</b>
71	aiming at. I mean, I supervise other		Capacity to reflect
72	people and I have peer supervision		with yourself or with
73	so that's the main place I reflect. Of		another
74	course I also reflect as I drive home,		
75	you know? In other words I do reflect		
76a	on my own but I think the best		
76b	reflection happens with another in a		<b>Use of reflection in</b>
77	supervision or peer supervision		<b>clinical work</b>
	situation.		

78			
79	I: Okay and how do you understand		Supervision and peer
80	individual differences in reflective		supervision
81	function?		
82			
83	P1: You mean between, say, one		Reflect on my own
84	therapist and another?		Reflect with
85			supervisor or peers
86	I: Yes.		
87			
88	P1: Okay. I suppose I would see it as		
89	at least two, two, erm, factors. One is		<b>Individual</b>
90	their training, you know, have they		<b>differences in</b>
91	been given the tools to reflect with?		<b>reflective function</b>
92	Erm, you know, have they practiced		
93	reflecting with another? Erm, that		
94	sort of stuff, you know and some		
95	therapy approaches are better than		
96	others at this. Then there's another		
97	which is to do with a person's own	Whether one is	
98	capacity to be self-reflective, which	provided with the	
99	might have to do with whether	tools to reflect	
100	they've had therapy or with a	with, and whether	Training
101	particular psycho-pathology, some of	they have	
102	which can be very resistant to self-	practice	
103	reflection, some of which may not be	reflecting.	
104	resistant to self-reflection.		
105			
106	I: Taking the first point around the	Self therapy	
107	tools; what kind of tools do you feel		
108	can help somebody develop the		
109	ability to reflect?		Own capacity to be
			self-reflective
	P1: Well I think an understanding of		
	interpersonal dynamics, however you		
	acquire that. I think CAT is		

110	particularly good at this because the		
111	tools are grasped quite quickly and		
112	quite easily by relative beginners. So		
113	that in a supervision group people		
114	have understood the concept of		
115	reciprocal roles and recruitment can,		
116	from the start, reflect on their		<b>Tools to develop</b>
117	colleagues or their own phenomena		<b>reflectivity</b>
118	of projective identification or, you	CAT is good at	
119	know, enactments, etc. I find that	this because the	
120	when people have had a day's	tools are grasped	Understanding of
121	training by me, they are able to bring	quite quickly and	interpersonal
122	that into the... and given permission	easily by relative	dynamics
123	so that they're told "Look" you know	beginners.	
124	"Issues like parallel process, issues		
125	like understanding enactments,	Understanding of	
126	they're not my, only my responsibility	reciprocal roles	
127	as supervisor, they're all of your	and recruitment	
128	responsibilities."	and can reflect	Reciprocal roles
129	So, in a group you might pick up,	on their	
130	before I do, that Susan is causing an	colleagues or	Projective
131	enactment with a patient, so make	own phenomena	identification
132	sure you say it or, if you're too shy,	of projective	
133	ask it. "Could this be an example	identification	Enactments
134	of..?" So people have the permission		
135	to put themselves in that role and to		
136	deploy their basic, but hopefully		
137	solid, knowledge.		
138			
139	I: How do you understand that		
140	capacity? Is it something they're born		
141	with, something they learn? Is it a		
142	combination?	Allowing people	
143		to put themselves	
144	P1: I think it's a mixture of things. I	in that role and to	
145	don't think anybody's born with the		

144	capacity to reflect. I mean, one of the	deploy their basic	
145	things that helps is if they're brought	knowledge	
146	up in a family where they are helped		
147	to reflect with another. So that, for		
148	example, if they're upset or they feel		
149	jealous of their baby brother or		
150	whatever it might be, somebody can	No one is born	
151	name it for them and make it	with the capacity	
152	acceptable. So, you know; "Yes you	to reflect	
153	love your little brother and you hate		
154	your little brother" and that becomes		
	acceptable and people don't need to		
155	project it out or hide it from	Raised by a	
156	themselves, or from others. So that's	family where they	
157	very helpful.	are helped to	<b>Development</b>
158	But also there's, you know, the	reflect with on	
	different strategies that people might	another	
159	use and I think most, but not all,		
160	people with a narcissistic dynamic		Not innate
161	find, you know, that they're quite	Name the	
162	resistant to self-reflection.	emotion/feeling	
163		and make it	
164	I: So you'd, you'd point out perhaps	acceptable	Influenced by family
165	narcissistic traits might impede		
166	sometimes the reflections?		
167			
168	P1: I don't thinks traits, but I think		
169	when the main, you know, I think		
170	most of us are on a continuum of		
171	narcissistic traits but I think when the		
172	primary dynamic is narcissistic, I		
173	think that impedes it.		
174			
175	I: And how would you say have you		
176	learned reflexivity reflects a function?		
177			

178	P1: Yes, I think, erm, I mean I		
179	don't... If you like, if I go back		Strategies
180	chronologically, erm, I was...		
181	Because I grew up in Argentina, I		
182	was reading Freud from the age of		
183	16, erm, which was sort of what one		Some are quite
184	did. You sort of read, you know, left		resistant to self-
	wing books and you read Freud.		reflection e.g.
185	That gave me the understanding of		narcissistic dynamic
186	the idea of unconscious. Erm, I no		
187	longer believe in the unconscious but		
188	I do believe in unconscious as an		
	adjective, you know. We can have		
189	feelings or thoughts that are not		
190	accessible to us at the moment.		Influenced and
191	So that was, if you like, a beginning,		impeded by
192	but I think it was... There were things		personality
193	along the way. I mean, I sort of, you		
194	know, when I did psychiatry I did		
195	some brief psycho-dynamic therapy		<b>Learning</b>
	under supervision and, you know,		
196	that was helpful. But I think,	Reading Freud	
197	ultimately, the real tool that I think	gave me an	
198	enables me to think very, very clearly	understanding of	
	has been CAT.	the idea of	
199		unconscious.	
200	I: And how did that learning take		
201	place for you when you trained in	I no longer	
202	CAT?	believe in the	Environmental
203		unconscious but	exposure
204	P1: It took place, mainly, in	do believe in	
205	supervision because there were...	unconscious as	Understanding of the
206	There was a very basic book that	an adjective. We	unconscious
207	Ryle had written which didn't really	can have feelings	
208	include the stuff on reciprocal roles,	or thoughts that	
209	etc. and we learned in supervision.	are not	

210		accessible to use	
211	I: Erm, could you perhaps describe	at the moment.	
212	how you feel you learned to be		
213	reflexive in supervision? What was	Psychodynamic	
214	the process that took place that	therapy under	
215	enabled that to happen?	supervision.	
216			Psychodynamic
217	P1: Er, it was Tony Ryle getting us to	CAT training	therapy
218	reflect on er... Initially, we're talking		
219	now about 1986, the concept of		
220	reciprocal roles didn't even exist then		
221	but it was very much; how did the		
222	patients dilemmas, traps and snags		CAT training
223	include us, if at all? Also to think		
224	about how, you know... But he		
225	wasn't... Ryle was actually quite		
226	timid about, well not timid, I think he		<b>CAT training</b>
227	very deliberately, when he saw that		
228	an enactment was taking place, he		
229	would almost always, if you like,		Supervision
230	blame the patient, meaning, you		
231	know, he wouldn't say, you know,		
232	"There you are Simon, once again		
233	lording it over your patient" He would		
234	say "Well, this patient is the sort of		
235	person who recruits other people into		
236	lording it over them". That's what I		
237	mean by "blaming the patient".		
238	I think it was a very tactful way of	How did the	
239	talking about an enactment without	patients	
240	saying "Here you go again". But	dilemmas, traps	<b>Supervision and</b>
241	really just understanding our, you	and snags	<b>Learning Reflexivity</b>
242	know, thinking about our own	include us, if at	
243	dilemmas, traps and snags because,	all?	
244	again, no reciprocal roles yet, was		
245	how it was.		

<p>243</p> <p>244</p> <p>245</p> <p>246</p> <p>247</p> <p>248</p> <p>249</p> <p>250</p> <p>251</p> <p>252</p> <p>253</p> <p>254</p> <p>255</p> <p>256</p> <p>257</p> <p>258</p> <p>259</p> <p>260</p> <p>261</p> <p>262</p> <p>263</p> <p>264</p> <p>265</p> <p>266</p> <p>267</p> <p>268</p> <p>269</p> <p>270</p> <p>271</p> <p>272</p> <p>273</p> <p>274</p> <p>275</p> <p>276</p> <p>277</p>	<p>But of course there was a quantum leap once reciprocal roles were talked about and that made for huge clarity in all of us, including Ryle himself.</p> <p>You know, suddenly it was impossible not to reflect, if you see what I mean, because you had the diagram in front of you and you can actually see the way we do, you know, where on the diagram were you with the patient at that moment? etc.</p> <p>I: And so from that point to where we are today, would you say reflexivity / reflexive functions continue to develop us, continue to evolve?</p> <p>P1: Yes, erm, I think, I think if I can speak immodestly, erm, my contribution to CAT theory which isn't in the books but is recognised by Ryle and, you know, it's gone into an in-house journal and it's been at conferences, is my understanding of not simply reciprocal roles and shifting between them, which is Ryle's stuff, but also shifting between different degrees of integration, so that we can be recruited by patients or we can recruit patients into a higher or lower degree of integration or fragmentation. And that was my own discovery, if you like, which is now within the CAT world.</p>	<p>Quantum leap once reciprocal roles were talked about and made for huge clarity</p> <p>Can see where on the diagram you are with a patient in a given moment</p>	<p>Reflecting on the concept of reciprocal roles</p> <p>Enactment</p> <p>Understanding one's own dilemmas, traps and snags</p>
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278	I: And would you say that discovery		
279	was possible because of your own		Reciprocal roles
280	reflexivity and your work?		made it impossible
281			not to reflect
282	P1: Well I would say my own		
283	openness because it was a sort of		
284	eureka moment where I was		Provided with a
285	supervising a case of a border line		diagram
286	patient and the patient had been		
287	improving and becoming far more		
288	integrated. For about eight sessions		
	she'd been doing really, really well.		
289	The she turned up one day to		
290	session nine, erm (pause) very, very		
291	fragmented and cut off. So she was	We can be	<b>Development</b>
292	cut off so we could just call it a cut off	recruited by	
293	state. But what struck me was that	patients or we	
294	she was also not just cut off as in not	can recruit	
295	able to feel, erm, but not able to	patients into a	
296	access the other bits of herself and	higher or lower	
297	that was represented on a diagram	degree of	
298	and then written up. Erm, and I think	integration or	
299	that level of understanding, erm, of	fragmentation	
300	what happened to me isn't simply		Shifting between
301	that I was recruited into becoming		difference degrees of
302	critical like her mother or over		integration
303	protective, like her grandmother, or		
304	whatever else, but that I may have		
305	been recruited into a state in which I		
306	couldn't think because I was in a - I -		
307	was in a fragmented state.		
308	When it comes to thinking about		
309	teams and splitting in teams, what		
310	actually happens... I mean this isn't		
311	exclusive to CAT, understanding that		
312	people get recruited into different		

<p>313</p> <p>314</p> <p>315</p> <p>316</p> <p>317</p> <p>318</p> <p>319</p> <p>320</p> <p>321</p> <p>322</p> <p>323</p> <p>324</p> <p>325</p> <p>326</p> <p>327</p> <p>328</p> <p>329</p> <p>330</p> <p>331</p> <p>332</p> <p>333</p> <p>334</p> <p>335</p> <p>336</p> <p>337</p> <p>338</p> <p>339</p> <p>340</p> <p>341</p> <p>342</p> <p>343</p> <p>344</p> <p>345</p> <p>346</p>	<p>reciprocal roles, you know, so one staff member becomes over protective and one becomes rejecting, and so on, which is widely recognised. But realising that this only can happen – this splitting in teams – if, at the same time as each staff member is recruited into one reciprocal role – they are also recruited into a fragmented state, at least in relation to their patient. Because if they weren't in a fragmented state, they could reflect together as a team and say "Hey, it looks like I'm being rejecting and you're being protective". What actually happens is that people behave in paranoid-schizoid ways to each other; "Oh, she's really naïve, that's why she's over-protective" and "Oh, he's really caring, that's why he's rejecting", etc.</p> <p>I: So it's not only supervision and perhaps [technical] practices that makes you be reflective and to learn reflexivity, it's been within different teams as well?</p> <p>P1: Well I haven't worked in teams for a long, long time but I've offered sort of external supervision ____ [00:15:56]. I haven't been a team member, you know, caught up in this splitting but I have offered</p>		<p>Openness</p>
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347	consultation both within the trust and		
348	in other places.		
349			
350	I: And so for you, you would say you		
351	developed reflexivity through...?		
352			
353	P1: Only ___[00:16:12] to some		Recruitment into
354	degree. My parents weren't the best		different reciprocal
355	at this, but they weren't the worse		roles
356	either. The interesting thing is how		
357	reflective people with learning		
358	disabilities – some people with		
359	learning disabilities - can be. And the		
360	truth is, possibly people are born with		
361	a gift for it – possibly – but I find that		
362	such a, you know, (pause) such a		
363	waste of time thinking about, if you		
364	see what I mean. Because		
365	whatever... It's a bit like saying are		Recruited into
366	people born gay or made gay? Who		fragmented states
367	cares, you know? It's just not very		
368	interesting, so it might be that some		
369	people are better at it from birth, but		
370	the point is that their capacity to		
371	reflect will be enormously affected –		
372	positively or negatively – by their		
373	experiences.		
374			
375	I: And do you find that you're still		
376	learning around reflexivity? Still		
377	becoming more reflexive?		
378	P1: Erm, I think every experience		
379	teaches one something but I		
380	suppose there's been no... Well, no		
381	major developments in my capacity		

382	to reflect since the MetaShifts thing		Supervision
383	but what is interesting to me right		Practices
384	now... I'm a recent... I'm not in any		Teams
385	sense an expert, but I'm a recent		
386	enthusiast for neurobiology and in		
387	particular Dan Siegel's version of it		
388	and understanding – beginning to		
389	understand, because it's only		
390	beginning to understand – beginning		
391	to think about it in neuroanatomical		
392	terms, almost. You know, when I was		
393	feeling fragmented; "Can I think		
394	about this in terms of right brain and		
395	left brain?" or, you know, "Can I think		
396	about it..?" you know, one can		
397	translate these things, erm, and it's		
398	interesting. Whether it enables you to		
399	increase your reflexivity, I'm not sure.		
400	The other thing I've done recently, to		
401	attempt to increase my reflexivity,		
402	erm, is, I went to, erm, I had the		
403	opportunity to present a case at a, at		
404	a sort of supervision seminar on		
405	working with the body, erm,		
406	organised by Confer, which		
407	organizes, you know, conferences on		
408	various things.		
409	So anyway I said I'd be really happy		People are possibly
410	to do this and as a result of doing it		born with a gift for
411	they invited me to be a kind of		reflecting
412	onlooker at the next one. Anyway,		
413	and I was asked to present a case		Capacity to reflect will
414	that I'm stuck with and I was hoping		be enormously
	that they would – the supervisor –		affected, either
	would teach me, or that I would		positively or
	glean from it a better capacity to tune		

415	into my body, which, you know, I		negatively, by their
416	haven't been trained in. I've tried to		experiences
417	do it. I'm not great at it. I thought		
418	"Well, if this enables me to do it		
	better, this surely will be better for		
419	my reflexivity, for me to be more		
420	aware of my bodily reactions and so		
421	on."		
	Sadly it was disappointing in that that		
422	didn't happen. I didn't feel I learned		Continual learning
423	that and that wasn't what they		
424	conveyed. It was more how they		
425	used their body to figure out what I		No major
426	was supposed to be doing, if you see		developments in
427	what I mean? And while I was an		capacity to reflect
428	onlooker as opposed to the therapist		
429	with the case, the same sort of thing		
430	happened, so I was looking for some		
431	increase in my capacity to reflect, but		
432	I don't think I got it.		Neurobiology
433			
434	I: And is there any link there,		
435	between, you know, the two patches		
436	around neuropsychology and		
437	neurobiology and I'm trying to		
438	understand how you feel somatically		
439	more?		
440			Reflecting using
441	P1: Well I suppose there is although		neuroanatomical
442	each one of them would have		terms
443	happened without the other, if you		
444	see what I mean? Erm, even if I		
445	hadn't discovered neurobiology, I've		
446	been aware for some years that I'm		
447	not great – because it wasn't part of		
448	my training – at tuning into my body.		

<p>449</p> <p>450</p> <p>451</p> <p>452</p> <p>453</p> <p>454</p> <p>455</p> <p>456</p> <p>457</p> <p>458</p> <p>459</p> <p>460</p> <p>461</p> <p>462</p> <p>463</p> <p>464</p> <p>465</p> <p>466</p> <p>467</p> <p>468</p> <p>469</p> <p>470</p> <p>471</p> <p>472</p> <p>473</p> <p>474</p> <p>475</p> <p>476</p> <p>477</p> <p>478</p> <p>479</p> <p>480</p> <p>481</p> <p>482</p> <p>483</p> <p>484</p>	<p>Sometimes I do, sometimes I realize what I'm feeling and I, you know, I'm able to bring that in. But the truth is I guess that a lot of the time I'm not aware of it. You know, I'm onto the content of the words. And yes, I'm looking at "How does that make me feel? Do I feel sadness while they're telling me a happy story?" That sort of thing. But I'm not as tuned in to my body as I know other people are, in terms of, you know, I feel something in my, you know, lower abdomen or while I can feel that my heart is beating fast, you know. I'm sure if it was really beating fast I'd be aware of it, but I don't think I'm as aware of changes as other people.</p> <p>I: Do you feel, then, the changes in neuropsychology / neurobiology..? Do you feel they'll substantially change how we understand how to learn reflexivity?</p> <p>P1: They might. It's something I need to think about and, erm, you know, I know that Dan Siegel believes that therapists, in order to be good, have to be mindful. If you can encapsulate some of it into a sentence or two, it's that what heals patients – and that is very, very modern neurobiology, thanks to very, very modern technology – that people who've had parenting which was not attuned, not</p>		<p>Presented a case at a supervision seminar on working with the body</p> <p>Presenting a difficult case for feedback</p>
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485	reflexive, if you like have difficulty		Didn't increase
486	with emotional self-regulation and		capacity to reflect
487	mentalisation and so on. That we		
488a	can measure certain integrating		
488b	fibres of white matter and they are		
489	below average. They are really low.		
490	And that when they are in good		
500	therapy with somebody who is		
501	attentive to them and, you know, at		
502	that level it's almost re-parenting		
503	because they're really paying		
	attention, and so on. These fibres		
504	grow by 5%.		Neurobiology and
505	So that's very impressive and what		neuropsychology
506	he says is what really heals is the		occur without the
507	mindfulness of the therapist and in		other
508	order to be mindful... Or rather, what		
509	are the obstacles to mindfulness and		
510	one of them might be that your		
511	patient is talking about stuff that's		
512	difficult for you, so you switch off and		
513	you go off on one. Or, you know, you		
514	find it difficult to concentrate because		
515	you're thinking about other things.		
516	So, you know other problems you've		
517	got, or whatever it might be. And so		
518	he looks at the obstacles to		Not always aware of
519	mindfulness and he wants therapists		body
520	to practice mindfulness so that they		
521	can be better therapists. And I'm		
522	intrigued by the idea, erm, and I've		
523	only just begun reading him. I've only		
524	read one book and a bit but I'm on		
525	my way to reading all 12. (laughter) I		
526	think if this is correct then it should		
527	change how we train therapists.		

528			
529	I: What made you feel you could		
530	change the way we... or that would		
531	change the way we train therapists?		
532			
535	P1: Well, I think the whole idea of		
534	mindfulness becomes really, really		
535	important and part of that		
536	mindfulness is attention to one's own		
537	body, you know, if... and		
538	understanding (pause). Maybe some		
539	people just are better at being		
540	mindful. Partly training, you know,		
541	have they gone on a mindfulness		
542	course? Do they practice it? But also		
543	some people are better at being		
544	mindless and, you know, I think		May influence
545	there's different forms of		reflexivity
546	mindlessness. There's the person		
547	thinking about planning their summer		
548	holiday while they're with a patient,		
549	of course. But in general it's not that.		
550	In general it's that you can't stay with	Measure	
551	it because you're busily thinking	integrating fibers	
552	"Well, how does this fit with Freud's	of white matter	
553	theory?" or, you know, you become		Mindfulness
554	not mindful because you're trying to		
555	do something different to		
556	mindfulness.		
557			
558	I: Do you feel there's a difference		
559	between how somebody who's		
560	experienced approaches being able		
561	to manage that dichotomy and your		Provides a
562	experience of how trainees manage		measurement of
563	being able to stay mindful?		therapy success
564			
565			
566			



562			
563	P1: I'm not sure because I think		
564	trainees get very anxious because –		
565	not all of them - but many or most		
566	are lost constantly thinking in parallel		
567	to what the patient is saying, you		
568	know “I this a reciprocal role that I’ve		
569	just heard?” “Is this an example of a		
570	trap, or I wonder whether I should be	Mindfulness of	Obstacles to
571	doing this” and “Oh, well if they	the therapist	mindfulness
572	haven’t done therapy”.	helps heal	
573	So there’s this chatter in their heads	patients	
574	because they’re trying to do things		
575	right. They’re trying to keep to the		
576	model. They’re trying to... Now I		
577	think that bit of it, I think, with		
578	experience, you just don’t do. But I		
579	think that experienced people have		
580	their own chatter and it’s often about		
581	their theory. You know, trying to fit		
582	what the patient is saying or feeling		
583	or doing with their theory, whether		
584	it’s CPT or psychodynamic or, for		
585	that matter, CAT. And I think that’s		
586	much less likely to happen to a		Therapist to be
587	trainee than to a, an experience		mindful to become
588	person who’s invested in their model.		better therapists via
589			identifying obstacles
590	I: How do you stay mindful?		to mindfulness
591			
592	P1: Erm, I’m not sure what I do, or		
593	even whether I do it. Erm, I don’t		
594	know that I very often... I mean,		Should change how
595	because that’s the sort of thing that		we train therapist
596	would happen, I think, mainly, when		
	things don’t seem to fit a pattern that		

597	I'm expecting them to fit. Erm, but I, I		<b>Mindfulness</b>
598	think I tend to park it. I mean, you		<b>Training</b>
	know, I'm not sure.		
599			Attention to one's
600	I: Are there particular circumstances		own body and
601	under which an adult learner can		understanding
602	learn reflexivity?		
603			
604	P1: Well, given that it involves		
605	themselves, it's not like teaching		
606	physics or something out there, you		
607	know some... You get a book and		
608	you read it or you listen to a lecture.		
609	You know, it can be very difficult to	If you are too	Mindfulness course
610	reflect on yourself because you can	concerned with	
611	get defensive. So really, it's just	fitting things to	
612	about an atmosphere in which things	theory you may	
613	are safe and talking about, you	not become	
614	know, saying to people, you know,	mindful because	
615	"You will get recruited into an	you're doing	
616	___[00:27:42] with a patient before it	something	
617	happens, but when it happens, it's	different to	Flexibility
618	fine.	mindfulness.	
619	And, erm, you know, having an		
620	atmosphere in the group where		
621	people do feel safe to say things so		
622	they're not constantly trying to		
623	appear more competent than they		
624	are or not bringing to the group		
	something or other that's happened		
625	in the session so people can bring		
626	confusion and one of the things I		
627	learned from Ryle is to talk about my		
628	own failures, you know. Give lots of		
629	examples, never of my successes or		
630	very rarely but of my, you know, you		Anxiety in trainees

631	know, you know, "When I was		
632	learning CAT this happened to me",		
633	or, "The other day, such and such		
634	happened to me and then I		
635	realized..." You know, so that it		
636	becomes normal, you know? It's		
637	normal for us to... And it's okay.		
638	I: So there's something about the		
639	internal circumstances where people		
640	learn reflexivity?		Trainees try to keep
641			to the model and do
642	P1: Yes, because... Because you're		the "right thing"
643	learning about yourself, you don't		
644	have to learn it, you don't have to		
645	expose yourself, you have to say "I		
646	felt like strangling my patient" or		
647	something "I felt really stupid" or "I		
648	didn't know what to say. I was		
649	speechless" and those are things		Fitting what the client
650	that people are not very likely to say		is saying/doing to
651	in a, unless there's a really safe		main theory
652	atmosphere.		
653			
654	I: And what about external		
655	circumstances? External life		
656	circumstances.		
657			
658	P1: Well I think, you see, if you... I		
659	don't know whether know my little	Use mindfulness	
660	MetaShifts diagram, but when	when things don't	
661	external stresses are pushing us,	seem to fit a	
662	you	pattern that I'm	
663	know, if I am homeless,	expecting them to	
664	currently and in debt, and my	fit	

<p>665</p> <p>666</p> <p>667</p> <p>668</p> <p>669</p> <p>670</p> <p>671</p> <p>672</p> <p>673</p> <p>674</p> <p>675</p> <p>676</p> <p>677</p> <p>678</p> <p>679</p> <p>680</p> <p>681</p> <p>682</p> <p>683</p> <p>684</p> <p>685</p> <p>686</p> <p>687</p> <p>688</p> <p>689</p> <p>690</p> <p>691</p> <p>692</p> <p>693</p> <p>694</p> <p>695</p> <p>696</p> <p>697</p>	<p>partner's leaving me and I'm  redundant, the likelihood is that I  will be in a fairly fragmented place.  And in the place it's quite hard to  reflect with patients or to reflect full  stop. And I know... so, you know, so  those things, you know or, you know,  if I'm a trainee and I'm fearing my  exam and I can't concentrate  because I'm so terrified of my exam.  Those are circumstances that tend to  take people into rather wedged  places.  Now one of the things that happened  to me. I was... I am being made  redundant and the document – the  consultation paper – was produced,  distributed on 31 July and in August I  was in a very bad place. I actually  took five days off at different times  when I just couldn't come in. But  even on the days when I was in,  when I had to tell my patients that  this was happening, I was often on  the verge of tears, I was in a not  together place. Because most of my  patients have seen that diagram, I  would just say "Look, this is where I  am right now and it's because of this"  and that was helpful to them.  I didn't necessarily... I can't  remember whether I did that with  supervisees because I think I was  less in need, you know, less... If you  like, the upset was a bit more  contained than with my patients.</p>	<p>Group  environment  where people do  feel safe to say  things</p> <p>Less focused on  appearing  competent</p>	<p><b>Learning Reflexivity</b></p> <p>Defensiveness  impedes learning</p> <p>Creating a safe  environment</p>
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698			
699	I: What do you think the difference		
700	was between those two groups?		
701			
702	P1: I think with the supervisees I was		Shared experiences
703	more able to be angry. Not at them,		
704	but to sort of vent, if you like,		
705	possibly, because (pause). You		
706	know, I certainly didn't feel that with		Positive feedback
707	patients I could go "And, even		
708	though we're the productive ones		
709	and... This is so unfair". I didn't do		
710	any of that.		
711			<b>Internal</b>
712	I: And so, part of what you're saying		<b>circumstances</b>
713	in terms of your reflective function is		
714	it allows you the capacity to say,		
715	actually "I should or I shouldn't be		Honesty
716	with patients".		Safe environment to share true feelings and thoughts
717	P1: Yes.		
718			
719	I: On particular days.		
	P1: Yes and, and if we just think		
720	about reflexivity here, erm, one of my		
721	strategies from childhood and even		
722	now... I mean, now I try to be aware		
723	of it so that it doesn't happen, but it's		
724	to turn sadness into anger really fast.		<b>External</b>
725	So fast that you don't feel the		<b>circumstances</b>
726	sadness. And I realize now, talking to		
727	you, that with supervisees, for		
728	example, I was able to turn it so		
729	quickly into anger because I was		
730	angry. You know, it's something to		
731	be angry about. This is unfair, you		

<p>732</p> <p>733</p> <p>734</p> <p>735</p> <p>736</p> <p>737</p> <p>738</p> <p>739</p> <p>740</p> <p>741</p> <p>742</p> <p>743</p> <p>744</p> <p>745</p> <p>746</p> <p>747</p> <p>748</p> <p>749</p> <p>750</p> <p>751</p> <p>752</p> <p>753</p> <p>754</p> <p>755</p> <p>756</p> <p>757</p> <p>758</p> <p>759</p> <p>760</p> <p>761</p> <p>762</p> <p>763</p> <p>764</p> <p>765</p>	<p>know. "I've done this, I've done that. Nobody else has done it" "I should have been..." "My team should have been..."</p> <p>So the moment you're on that kind of, you know, vehicle, the sadness is absolutely contained. That's one of my strategies. But with a patient I don't feel I can rant and, you know. So I think the sadness was really kind of there and couldn't be contained.</p> <p>I: Can I ask you a bit about being a trainer? Erm, how do you think reflexivity can or should be taught?</p> <p>P1: Ooh, erm, (pause), well I think it should be taught, er, and it's an interesting question for me because, you know, I'm a great fan of solution focused therapy. Really, really great fan of it. And I teach it and I think it's wonderful but there is no real teaching of reflexivity in it. None.</p> <p>Erm, the only reflexivity – in inverted commas – is somebody to help you reflect. If something isn't going well, if you bring, you know, if a therapist were to bring to me – sorry not to me 'cause I tend to use CAT when supervising someone solution-focused for this very reason. But a typical solution-focused supervisor would simply try to get somebody stuck to reflect on what is going well.</p>	<p>Focus on areas where learning occurred</p>	<p>Therapist's own fragmentation limits reflection with self or patients</p>
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766	Erm, so, you know; "What do you		
767	think you need to do more of?" or		
768	whatever else. And the kind of		
769	reflexivity that, erm, we might think		
770	about in CAT or in psychodynamic or		
771	in a lot of therapies just doesn't get		
772	taught. And does it matter? I don't		
773	know. I mean, It matters to me which		
774	means that I can... I've never been		
775	able to offer supervision in solution-	Explore feelings	
776	focused therapy without adding CAT	and emotions	
777	elements. So I'm a very, if you like,	with supervisees.	
778	I'm a fairly standard SFT practitioner.	Unable to do this	
779	I'm not a standard SFT supervisor	with patients.	
780	because I don't think I can manage it		
781	without the bit of CAT.		
	Should it be taught? That's a		
782	question. I mean, it isn't taught in		
783	solution-focused and people do great		
784	therapies. I think it does need to be		
	taught and especially when one is		
785	working with quite difficult patients.		
786	But I think, yes, I think it should be		
787	taught. If I were organising a training		
788	course in solution-focused, I would		
789	make sure there was a module on,		
790	on that or – not module but that it		
791	was woven in.		
792		Aware of own	Reflective function
793	I: If you were to start a reflexivity	behavioural and	allows you the
	module, what would you like it to look	emotional	capacity to identify
794	like?	patterns	whether you should
795			be with patients
796	P1: You mean a reflexivity module or		
797	something?		
798			

799	I: Well, some type of... Yes, if you were...		
800			
801	P1: I mean I would use CAT simply because it is so easily transmitted,		
802	so easily understood. You know,		
803	people who do psychodynamic use		
804	quite similar tools in many ways but it		
805	takes them a very long time to get it.		
806	Erm, it just takes a lot longer for		
807	them to get it.		
808			
809	I: Do you feel that different		
810	therapeutic models are better		
811	equipped to teach reflexivity?		
812			
813	P1: Say that again? Do I think that		
814	models?		
815			
816	I: Are different therapeutic models		
817	better at reflexivity than others?		
818			
819	P1: Yes. I mean, I think solution-		
820	focused doesn't teach it. I think		
821	standard ___[00:36:17] therapy		
822	doesn't teach it. I think the third wave		
823	CPT does. Not all of them but, you	Reflexivity should	
824	know, for example, schema-focused	be taught	
825	teaches it, absolutely. But it just		
826	depends which particular wave, you		
827	know, which particular beat of CPT	No teaching of	<b>Teaching Reflexivity</b>
828	they teach it or they don't teach it. Or	reflexivity in	
829	they teach it or not necessarily very	solution focused	
830	well. And when they teach it – is my	therapy	
831	impression from the outside - what		
	they do is they borrow from		



832	psychodynamic, erm, a bit		
833	undigested. They don't integrate it		
834	into the model. Whereas what we've		
835	done in CAT is to integrate the good		
836	bits of psychodynamic, if you like,		
837	into the model. Erm, so, I think		
838	(pause). I mean, I can't imagine		
839	anything better than CAT for		
840	teaching – quickly – people to reflect		
841	on what's happening to them and		
842	happening with their patients. And		
843	that can be used... I mean, I have...		
844	I used to be a solution-focused		
845	supervisor in, erm, in a charity for		
846	Latin American women and they had		Reflect on the
847	to work with a solution-focused		situation
848	model because they could only do		
849	three to 10 sessions and the patient		
850	– the clients – were far too difficult to		
851	do abbreviated CAT and I think you		
852	can only do abbreviated CAT when		
853	you're good at CAT. You can't do it		
854	when you're learning CAT.		
855	So, we decided to work with solution-		
856	focused, but they had a one-day		
857	training in CAT just so they		
858	understood the concept and CAT		
859	was a supervision tool. And I really		
860	don't think I could have done it well		
861	without it. Other people might have		
862	done it well. I couldn't have.		Solution-focused
863			therapist
864	I: And so you recommend, as a		
865	trainer, that potentially a model of		Use CAT with SFT
866	reflexivity – potentially from CAT –		when supervising

867	would be a useful component in		
868	other therapeutic-		
869			
870	P1: Yes.		Reflexivity should be
871			taught when working
872	I: Where it was integrated effectively.		with difficult patients
873			
874	P1: Yes and even if it isn't. Because,		
875	you see, it wasn't... CAT was not		
876	integrated into solution-focused.		
877	Erm, it was something I used in		
878	supervision. Erm, (pause) I think, for		<b>Reflexivity Module</b>
879	example, what schema-focus does is		
880	it brings in psychodynamic into CPT		
881	but in a way that, to me from the		
882	outside, 'cause I've never done it.		
883	I've never done a case myself, under		
884	supervision. But just looked at from	CAT because it is	
885	the outside feels un-integrated.	so easily	
886	I don't think it matters to integrate it	transmitted and	
	when you're using it as a supervision	understood	
887	tool. I think it does matter to integrate		CAT
888	it when it's a therapy tool, ideally.	Much quicker	Psychodynamic
889		than	
	I: From the training programmes that	psychodynamic	
890	you've seen, you've worked on, what		
891	components of those training		
	programmes would you assess as		
892	good for learning reflexivity for the		
893	trainees?		
894	P1: It's difficult to say because I think		
895	it depends how things are taught. If		
896	you, for example, teach people what		
897	reciprocal roles are but you don't get		
898	them to experientially think about		

899	their own reciprocal roles, then it's		
900	only a very partial, you know... the		
901	truth is they learn about it in		
902	supervision and I think in CAT if you		
	have a good lecture course and, and		
903	bad supervision, I think that's much		
904	worse than if you have a bad lecture		Solution focused
905	course and good supervision.		therapy and standard
	Because you learn in the moment.		therapy doesn't teach
906	So, it's not just the topics but how		reflexivity
907	they're dealt with. For example,		
	when I do... I'm often a visiting		Third wave CPT does
908	lecturer on CAT practitioner courses		teach reflexivity
909	and I do stuff of narcissism and the	Sometimes	
910	important thing to do isn't to do a	taught, but not	Schema focused
	theoretical thing on, you know,	necessarily well	teachers reflexivity
911	compare and contrast, CAT with		
912	psychodynamic, or what does		
913	___[00:40:12] say? Or... But actually		
914	to get people to think about their own		
915	narcissism or to think about how they	CAT – integrated	
916	feel when they get a referral that	the good bits of	Needs integration
917	says, you know, "John Bloggs is	psychodynamic	within model
918	highly narcissistic, artist and da da	into the model	
919	da da da." You know. Unless you		
920	incorporate reflexivity into every topic		
921	that you're teaching, you're		
922	missing... It's not tragic, but you're		
923	missing an opportunity.		
924			
925	I: It sounds like you feel that the		
926	trainees' capacity to learn reflexivity		
927	must be done experientially.		
928			
929	P1: Yes. I think must is a big... Yes, I		
930	think... Yes, 'cause the experiential		

931	bit will either come in the course or		
932	it'll come in supervision and if it		
933	comes in neither, not good.		
934			
935	I: And how does the trainer – you as		
936	a trainer – how would you describe		
937	to somebody else “This is how I		
938	teach reflexivity in the process”?		
939			
940	P1: Well, I mean, it's... For example,		
941	you know, when I do something on		
942	narcissism I start by getting people to		
943	do a little... To talk in pairs, you		
944	know, about how they feel when they		
945	get a referral that says “So and so is		
946	narcissistic”. You know, what are		
947	their thoughts, what are their		
948	feelings, what are their fears, what		
949	are their hopes, what are their..?		
950	So you begin, you know, people		
951	begin to think about “How do I feel		
952	about it?” “What feelings does it		
953	bring up in me, what thoughts does it		
954	bring up in me?” realizing that for		
955	other people it might be different.		
956	Some people think “Oh, I'd like a		
957	challenge” whereas other people		
958	go... And so on. Erm, so, so you		
959	know, but that's not a terribly		
960	challenging little exercise.		
961	But then I might, later, ask them to		
	think about their own narcissistic		
962	traits and share that in pairs. And,		
963	you know, for people to understand		
964	there is a continuum and for people		
965	to realize that sometimes our		

A model of reflexivity from CAT would be a useful component in therapeutic training

966	patients can hit our narcissistic pain points.		
967			
968	I: So the types of more deeper-learning reflexivity is when you		
969	potentially ask them to reflect particularly on their own experience		
970	within the context of the training?		
971			Integrated when used
972	P1: On their own experience full		as a therapy tool
973	stop, because, you know, it's not,		
974	you know, consider your narcissistic		
975	traits as a therapist but your		
976	narcissistic traits full stop.		
977			
978	I: How do you understand the		
979	trainees' capacity to develop this		
980	high level of reflexivity in that		
981	example?		
982			
983	I: Their capacity? Well, I mean, I		
984	think, (pause) I think if you build up		
985	to it a bit slowly by doing something		
986	potentially easy or easier, definitely		
987	easier, which is, you know, how do		
988	you feel when you get a referral		
989	about somebody like that? And also		
990	using a lot of humour all, all the way		
991	through because the humour makes		
992	it safe, the humour makes it, you		
993	know.		Supervision is
994	And again, talking about my		essential to learning,
995	narcissistic traits and doing it a,		as students learn in
996	hopefully, amusing way but basically		the moment
	the message being, you know, there		
	is a continuum here. Don't project		

997	your narcissism onto the patient		
998	'cause otherwise you will see them		How topics are dealt
999	as the other, you know, and really it's		with
1000	just, you know, they're like me but a		
1001	bit more so. Erm, so (pause) if you		
1002	can do that... And I think humour		
1003	and normalising and basically just		
1004	making it safe, usually enable this. I		
1005	just think, you know, it's... Certainly		
1006	it's taking out the, you know, "I am		
1007	the expert and you are potentially		
1008	messy people 'cause you haven't		Trainee's must learn
1009	been trained enough." Yes.		reflexivity
1010			experientially
1011	I: Would you be able to speak about		
1012	an anonymised example of a trainee		
1013	who you would consider to have had		Incorporate reflexivity
1014	a higher level of reflexive function		into every topic your
1015	and why you think they have this		teaching
1016	capacity?		
1017			
1018	P1: Erm, I can certainly speak about		
1019	(cough) quite a lot of trainees who,		
1020	who greatly impressed me with the		
1021	precocity, if you like. They weren't		
1022	necessarily more reflective than		
1023	other people. They were more		
1024	reflective sooner than other people.		
1025	Right, so, you know, I was... And I'm		
1026	awfully in awe and I'm thinking "Well,		Via the course or
1027	they're not more reflexive than I am		within supervision
1028	now but they're certainly much better		
1029	at it than I was, you know, in 1986		
1030	when I was starting".		
1031	Erm, and, and, I mean, I must say		
1032	the... Not all of them but a lot of		

1033	them are first year clinical		
1034	psychology trainees, so whatever the		
1035	universities are doing in selecting		
1036	them I think they're doing it right.		
1037	Because of course, they all have first		
1038	class degrees and all of that and that		
1039	doesn't necessarily ensure reflexivity		
1040	at all. Erm, you know, not a bit of it,		Identification of
1041	but they somehow seem to pick		thoughts, feelings,
1042	people who have both. How they do		fears, and hope
1043	it is a mystery to me, but they're		
1044	clearly succeeding.		
1045	I: So I wonder what it is, about		
1046	clinical psychology trainees, that		
1047	makes them more reflexive.		Identifying how one
1048	P1: I really don't know, I mean		feels about a client
1049	they're persistent people 'cause most		and what it brings up
1050	of them, in addition to a first class		in them
1051	degree have been around the world		
1052	of mental health in some minor		
1053	capacity for three years before they		
1054	succeed. But in terms of do I know		
1055	about their background or their		
1056	childhood or anything like that, I		
1057	don't. I don't at all. It's not something		
1058	we particularly talk about. I mean, I'm		
1059	just in awe sometimes.		
1060	I: What do you think's different for		
1061	them as opposed to what was		
1062	different for you?		Relate own
1063	P1: I mean, it's you know, maybe I'm		experience
1064	being a bit inaccurate. Perhaps I had		

1065	something similar by 1986 but in		
1066	1986 I was 34 and, you know, had		
1067	been through therapies, had been		
1068	through life experiences. Erm, would		
1069	I have had that when I was 26?		
1070	Nope, definitely not. Absolutely not.		
1071	Erm, (pause)...		
1072			Reflecting on their
1073	I: I wonder what the difference is.		own experience
1074			provides more deep-
1075	P1: I don't know. I really don't know.		learning of reflexivity
1076			
1077	I: If you were going to recruit		
1078	trainees, what would you look for?		
1079			
1080	P1: Well, I suppose reflexivity. Erm,		
1081	obviously they have to be right, erm,		
	you know, the people around		
1082	counseling psychology courses are		
1083	very different, you know, they usually		
1084	don't have first class degrees but		
1085	they're older, more thoughtful.		<b>High level of</b>
1086	They're no worse at it, you know, by		<b>reflexivity</b>
1087a	any means, but they have... If you		
1087b	like, it's more understandable for		
1088	them to be reflexive, you know,		
1089	because they're older, they've been		
1090	through life experiences. Many of		
1091	them have had therapy. (pause)		Safe environment
1092	These very young ones – the vast		
1093a	majority had not had therapy, my		
1093b	understanding is.		
1094			
1095	I: And so you'd look for somebody		
1096	who was able to demonstrate		
1097			



1098	reflexivity if you were to ____[00:48:02]?		Continuum
1099			
1100	P1: I think so. I'm not sure I would		Normalising the
1101	pick it up at interview. I mean, I		experience
1102	suppose I could design some		
1103	questions around it.		
1104			
1105	I: How might you design something		
1106	____[00:48:15]?		
1107			
1108	P1: I suppose I would just ask them		
1109	how they feel in certain situations		
1110	and see how they respond to that		
1111	question because often people who		
1112	can't answer those questions would,		
1113	you know, who find it, erm, (pause),		
1114	I mean, I notice that in my patients,		
1115	you know, sort of "How did you feel		
1116	about the fact that you had to move		
1117	school yet again?" and they look at		
1118	you blankly and say "Well, my father		
1119	had to move and so we just went."		
1120	You know, that kind of thing in a		
1121	trainee might make me think "Hmm".		
1122	But it doesn't mean they can't be		
1123	trained to reflect, but if you really had		
1124	to pick people who could reflect from		
1125	day one, then, you know, you'd have		
1126	to exclude somebody like that.		
1127			
1128	I: Do you think it's better to pick		
1129	people who can reflect on day one? P1: Well I don't know whether it's		More reflective
1130	better. Erm, It is better because		sooner than others
1131	they're seeing patients from day one,		

1132	you know. Once you're on a		
1133	doctorate you are seeing patients		
1134	from day one actually. But, you see,		
1135	if you didn't have such a huge pool to		
1136	pick from, then it wouldn't matter.		
	That's what I think when it's		
1137	counseling psychology, they don't all		
1138	have to have first class degrees, but		
1139	you know, because clinical		
1140	psychology is so popular, the pool is		
1141	enormous and you can afford to do		
1142	anything you like, you know, the		
1143	people who pick them.		
1144			
1145	I: Do you feel...? Because you said		
1146	there's advantages in clinical	Appears the	
1147	psychology they have first class	universities are	
1148	degrees and they're very persistent	doing something	
1149	and there's advantage of the	right selecting the	
1150	counseling psychology that,	students	
1151	potentially, they come with later life		
1152	experiences and perhaps more		
1153	experience of therapy. Would your		
1154	ideal be a combination of those two		
1155	or something different?		
1156			
1157			
1158	P1: I don't see them as either / or. It		
1159	just happens to be, in this country,		Persistence
1160	that... how the careers have evolved.		
1161	I don't see, you know. I wouldn't		Familiar with the
1162	want to have to choose between only		world of mental health
1163	this lot and... I've been incredibly		
1164	lucky, in Hackney, all these years to		
1165	have both, erm, and to get a huge		
1166	amount of both and also other		

1167	people as well. You know, people		
1168	have come randomly from all kinds		
1169	of places. But I wouldn't want to have		
	to choose.		
1170	I: And how much to you think either		
1171	that kind of day one, or indeed the		
1172	whole training programme... How		
1173	much do you think that indicates as		
1174	to how good a therapist somebody's		
1175	going to be 20 / 30 years later?		
1176			
1177	P1: Well they're certainly not going to		
1178	be any worse than someone with low		
1179	reflexivity but of course, you don't		
1180	know what happens. I mean, you		
1181	know, some of the people that I've		
1182	supervised haven't been very		
1183a	reflective and you have to teach it		
1183b	almost from scratch in the way that		
1184	you would with certain patients. Erm,		
1185	I mean, it doesn't mean they can't		
1186a	learn it, and get it, but it takes longer.		
1186b			
1187	I: Would you be able to, again, give		
1188	an anonymised example of a trainee		
1189	who you felt had low reflexivity and		
1190	why, potentially, they had that?		
1191			
1192	P1: Yes, erm, let me think. Oh, I		
1193	could talk about (pause).		
1194	Alright, this is an example for a long		
1195	time ago. Erm, 'cause he had the		<b>Recruitment</b>
1196	least reflexivity of anybody and most		Reflexivity
1197	people eventually get it and he didn't.		
	He was a GP. He was in his late '50s		

1198	/ early '60s, I don't know, and he was		Thoughtful
1199	absolutely charming and he was		
1200	quite narcissistic but not in a... He		Mature
1201	was never contemptuous and he had		
1202	an admiring / admired relationship		
1203	with me. Erm, which I wasn't sure		Life experiences
1204	what to do with except... 'Cause		
1205	you're not supposed to interpret		
1206	these things when it's not your		
1207	patient, it's your supervisee. And		Self-therapy
1208	anything that I or the group		
1209	suggested, he was incredibly		
1210	pleasant, never got angry, smiled		
1211	sweetly and never took on board.		
1212	And this went on for years and one		
1213	of my experience colleagues had		
1214	supervised him before me and she		
1215	had exactly the same experience		
1216	and I used to say to her "What do I		
1217	do 'cause he's really not learning		
1218	anything?" And she said, "Well, is he		
1219	disrupting the group?" "No" "Well,		
1220	leave him be."		
1221	Today I wouldn't leave him be but		
1222	this was a long time ago, and the		
1223	fascinating thing for me was his		
1224	patients got better and by got better I		
1225	mean life changes and I think that		
1226	the admiring / admired role changed		
1227	them in some way and he's always		
1228	been, for me, on the one hand he		
1229	drove me nuts, on the other hand he		How they feel in
	has posed a... He has made me		certain situations and
	pose a question about what helps		see how they respond
	people change.		to the question

1230	Erm, but anyway, he didn't change in terms of his capacity to reflect. Not		
1231	one bit.		
1232			
1233	I: Do you think he was able to allow his clients to reflect?		
1234			
1235	P1: Do you know? I doubt it. I doubt		
1236	that he ever made a confrontational		
1237	remark to them or said "You are		
1238	enacting this" or "I think we're here		
1239	on the..." because I don't think he		
1240	ever understood CAT concepts but		
1241	he was in the group for six years.		
1242	First with my predecessor then with		
1243	me. I was quite a junior supervisor		
1244	then. Not an absolute beginner but,		
1245	you know, relatively junior – relatively		
1246	new. Erm, and yes, he definitely is		
1247	the person with the least reflexivity		Reflectivity from day
1248	and who never acquired it.		one is important
1249			because they're
1250	I: You said if he was with you now		seeing patients from
1251	you'd do something differently. What		day one
1252	would you..?		
1253			
1254	P1: I would say "I don't think CAT's		
1255	for you. I don't think you've		
1256	understood the concept. I think		
1257	you're great for your patients. They		
1258	clearly make a difference, but it's not		
1259	CAT."		
1260	I: So, potentially he's an example of		
1261	someone who just couldn't learn		
1262	reflexivity.		

1263			
1264	P1: Yes.		
1265			
1266	I: And you would understand...		
1267			
1268	P1: And he couldn't learn CAT either.		
1269	That's what so interesting. He		
1270	couldn't get the concepts, even at a		
1271	theoretical level.		
1272			
1273	I: That is interesting, because CAT is		
1274	a relational...		
1275			
1276	P1: Yes.		
1277			
1278	I: Why do you think he couldn't learn		
1279	it?		
1280	P1: I don't know. I mean, you know,		
1281	he wasn't stupid. He was a GP and		
1282	as far as I could understand I think		
1283	he was a competent GP. I think, you		
1284	know, there was no issue about		
1285	incompetence or patients		
1286	complaining, who knows? Erm, I		
1287	think he lived in a kind of bubble of		
1288	loveliness and, erm, in the... Oh yes,		
1289	I remember now. In the end I had to		
1290	ask him to leave the group because		
1291	he became involved with one of his		
1292	patients. Erm, and I just said "I'm		
1293	sorry, you know, this is not		
1294	something we can..." And he left the		
1295	group and that was the end of that.		
1296	Erm, but, otherwise he'd probably		
	still be there, you know.		

1297			
1298	I: That's all the questions I have. Is		
1299	there anything you feel you want to		
1300	add or comment on about teaching		
1301	or learning reflexivity that I haven't..?		
1302			
1303	P1: Probably not because the truth is		Teaching it from
1304	I haven't thought about these		scratch
1305	questions in this form before, so I		
1306	don't have great ideas and so on.		
1307	Erm, erm and I think it's difficult to	Doesn't mean	
1308	teach reflexivity when you're not very	they can't learn it,	
1309	reflexive, if you see what I mean.	it just may take	
1310	And so, who are we putting to teach	longer.	
1311a	reflexivity?		
1311b	I: So a trainer has to have particular		
1312	traits?		
1313			<b>Low Reflexivity</b>
1314	P1: Yes, I mean, I think also a trainer		
1315	is a role model, inevitably and if a		
1316	trainer is defensive, you know, if a		
1317	trainer is teaching it as opposed to		
1318	kind of, imparting it, erm, I'm not sure		
1319	what'll get across.		
1320			
1321	I: Sounds like that's the integral role		
1322	– to be able to monitor or be more		
1323	reflexive.		
1324			
1325	P1: Yes and I mean, I would say		
1326	Dan Siegel talks about the mindful		
1327	therapist and I think I would have to		
1328	had the mindful supervisor or peer		
1329	supervisor, erm, you know, we have		
	to be self-aware as supervisors, etc.		

1330	And make sure that we hold the		
1331	group to account. In other words, if I		
1332	get it wrong, it's also your		
1333	responsibility.		
1334	So I suppose there is a devolving of		
1335	power, yes. It's a collaborative, you		
1336	know... Yes I am the supervisor, yes		
1337	I am more likely to pick up an		
1338	enactment than you are, but I may		
1339	be caught up in it, in a parallel		
1340	process, so you have to... You. You		
1341	have to be, to notice and say.		
1342			
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1365			
1366			
1367			
1368			Lack of
1369			understanding of CAT
1370			concepts
1371			
1372			
1373			
1374			
1375			
1376			
1377			
1378			Never acquired
1379			reflexivity.
1380			
1381			
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1385			
1386			
1387			
1388			Alternative training
1389			models/theories
1390			
1391			
1392			
1393			
1394			
1395			
1396			Unable to learn
1397			reflexively

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1400			
1401			
1402			Unable to grasp
1403			concepts at a
1404			theoretical level
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1439			Difficult to teach
1440			reflexivity when
			you're not very
1441			reflexive
1442			
1443			
1444			
1445			
1446			
1447			Trainer needs
1448			particular traits
1449			
1450			Role model
1451			Non-defensive
1452			
1453			
1454			
1455			
1456			

1457			Mindful therapist,
1458			mindful supervisor
1459			Self-awareness as
1460			supervisors
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**Appendix Z: Interview C: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Original Transcript	Exploratory Comments	Emergent Themes
1	I: What's your professional title?		
2	P1: My professional title is, Cognitive	Cognitive	<b>Job title</b>
3	Behavioral Therapy Lead for	behavioural	
4	Complex Trauma.	therapy lead for	
4		complex trauma	
5	I: And do you have other hats that		<b>Other employment</b>
6	you wear as well?		
7	P1: I have other hats that I wear. I'm	Occupational	
8	a, professionally I'm an Occupational	Therapist and	
9	Therapist and a qualified CBT	CBT Therapist	
10	Therapist.		
11	I: Okay, how long have you been		<b>Years of experience</b>
12	doing those jobs for?		
13	P1: I have been an Occupational	Occupational	
14	Therapist for about 18 years and a	therapist for 18	
15	CBT therapist I have and DBT	years	
16	therapist for ten years.	CBT and DBT	
17	I: Okay.	therapist for 10	
18	P1: Prior to that, I was a Dual	years	<b>Previous job</b>
19	Diagnosis Specialist for five years.	Dual diagnosis	
20		specialist	
21	I: Okay.		



22	P1: Within a Community Mental		
23	Health Team.		<b>Years offering training</b>
24	I: How long have you been offering	Since graduation	
25	training for?		
26	P1: Right from when I graduated		
27	actually. Erm, in New Zealand once		
28	you've had your first year of clinical		
29	practice as an Occupational		
30	Therapist, you're expected to have		
31	students, to become an inter-media		
32	or a Senior Occupational Therapist,		
33	you just have students. So, I had at	15 years as	
34	least three students every year for all	Occupational	
35	of the time I was in New Zealand.	therapist	
36	So, that was about 15 years and here		
37	I have a Senior Clinician in the impart	Senior Clinician	
38	service, I managed, clinically	providing case	
39	managed and clinically led the team.	management	
40	And provided case management	supervision,	
41	supervision, clinical supervision,	clinical	
42	therapy supervision and training for	supervision,	
43	eight years.	therapy	
44	Now my current practice I'm training	supervision and	
45	the junior doctors in their brief case	training for 8	
46	of CBT. So, I've done three, three	years.	
47	rotations of eight junior doctors, it's a		
48	whole other study in itself. And		
49	because they've got such a short		
50	time, they're allocated a case, erm;		
51	it's very much a kind of week by		
52	week, training programme of		
53	experiential learning.		
54			
55	I: What do they learn?		

56			
57	P1: What do they learn? I usually		<b>Junior doctor</b>
58	give them three erm, training		<b>training in CBT</b>
59	sessions. Three kind of over view of		Overview of CBT
60	CBT structure, "This is what's		structure.
61	expected, this is how it's going to		
62	work." Erm and then they take on	Take on their	
63	their case and each week they just	case and each	Reflect on each
64	come back, reflect on the last week's	week reflect on	session
65	session. I think about how they	the previous	
66	might go onto the next session. We	session	
67	formulate, reformulate, think about		
68	what strategies might be effective	Formulate,	
69	and then they just bounce week to	reformulate and	
70	week.	think about what	
71	And over the 12 weeks, because	strategies might	
72	these are [Abbott 0:02:46] clients.	be effective	
73	So, over the 12 weeks you just see		Formulate,
74	them blossom. And the group, it's	Students	reformulate, and
75	group supervision so they just teach	teaching one	strategy development
76	each other, it's brilliant.	another through	
77		supervision	Teaching one another
78	I: And you said they come in each		
79	week and they reflect, how do you		
80	see them doing it?	Talk	<b>Reflection in</b>
81		pragmatically	<b>teaching</b>
82	P1: They'll come in and I will talk	about the	
83	pragmatically about the structure, I	structure.	Discuss structure
84	held the structure as the session, so,		
85	they want to tell me that they did	Discuss	
86	what I told them to do. And then they	interaction of	
87	will talk about the interaction between	supervisee and	Discuss interaction
	them and the client.	client, identify	between them and
	Erm, and they'll, there'll be some		client
	confusion and, "I'm not sure what I		
	should have done then. I'm not sure		

88	what that meant and where that	any issues that	Discuss difficulties
89	fitted.”	they have had.	
90			
91	I: Mmm, have you been a part of any		
92	clinical programmes or...?		
93			
94	P1: I have, erm I have lectured here		
95	at London Met, as a guest lecturer for		
96	it must be about five years. Erm, for	CBT Masters	
97	the CBT Masters and for the	Counselling	
	counselling psychology courses. I	Psychology	Previous lecturing
98	have also done an, kind of adhoc	Adhoc lectures	experience of 5 years
99	lectures for the homeless, the single	on	
	homeless and the voluntary sector.	homelessness	
100	Erm and also for within my own trust	and the voluntary	
101	of different teams, I've done various	sector	
102	training courses.		
103		Training within	
104	I: So, wow.	teams	
105			
106	P1: Mmm.		
107			
108	I: What is your understanding of ____		
109	[0:04:21].		
110			
111	P1: That's a good question isn't it?		<b>Understanding of</b>
112	Gosh and not having pre-thought		<b>reflexivity</b>
	about it. I believe that reflexivity is		
113	about looking at, at the client and the	Looking at the	
	relationship between the client and	client and the	Looking at the
114a	the clinician. So, the therapist and	relationship	client/clinician
114b	that kind of cross over. Erm, it's	between the	relationship
115	looking at what's going on for me and	client and the	
116a	my internal thinking, my own	clinician.	
116b	judgments, my own interpretations,		
117	incorporating my theory. And but		

118	also thinking about the client and	Looking at	Awareness of own
119	how that comes together.	what's going on	thoughts, judgements,
120	Erm, thinking about the client within	for me as a	interpretations and
121	their own culture and context of their	therapist and for	incorporation of
122	life. Erm, and about I guess, thinking	my internal	theory.
123	about what they're not saying as well.	thinking,	
124	I've just recently given, told one of	judgements,	Thinking of the client
125	the people I supervise to look at	interpretations	in their own culture
126	Virginia Satir's poem of, "Please hear	and theory. Then	and context
127	what I'm not saying." Erm and I, I	relating this to	
128	think we're always looking at what's	the client and	
129	not said or what is being said and	how it comes	Thinking about what
130	trying to think about, where that's	together.	clients are not saying
131	coming from.		
132	Whether it's internally driven or		
133	whether it's something about the	Please hear	
134	relationship as well. And the	what I'm not	
135	expectation of, because many people	saying.	
136	come into therapy with some kind of		
137	expectation of what they meant, how	Looking at	Internally driven or
38	they're meant to behave and what	what's not being	about the relationship
139	they're meant to do.	said and trying to	itself
140	So, I guess you're incorporating so	think about	
141	many different facets, all at once.	where that's	
142		coming from.	Client expectations
143	I: And how do you use reflexivity in	Whether it's	
144	your clinical practice?	internally driven	
145		or whether it's	
146	P1: All the time, I think during, during	something about	
147	therapy sessions, during training	the relationship	
148	sessions you're always monitoring	itself.	
149	what you're thinking and where that		
150	fits. So, you're always thinking		
151	about, I guess the context. Who		<b>Reflexivity in clinical</b>
152	you're delivering to, how they're, how		<b>practice</b>
153	they're receiving it.		

154	Erm, but also the framework that is	Always using	
155	guiding your thinking as well with but	reflexivity in	During therapy and
156	also looking at your own internal	clinical practice –	training sessions.
157	biases.	during sessions	
158	I: How would somebody else be able	and training	Constantly monitoring
159	to see that and process, if they watch	sessions –	own thoughts ad
160	you?	always	where they fit
161	P1: Mmm, (Pause) I expect it's	monitoring	Thinking about the
162	probably the depth in which, erm	thoughts and	context
163	well, I guess it's body language. It's	where that fits in	
164	how I relate to people in the process	the context.	Framework to guide
165	of talking or relating or being with		thinking
166	them. Erm, it would be (pause), yes,		Identifying own
167	I guess the context of what I'm		internal biases
168	talking about and it wouldn't be, this		
169	is how something is. There would be		<b>Visible process</b>
170	a whole lot of different perspectives		
171	put forward for, for people to make		Body language
172	their own decision.		
173	So, it's collating I guess a lot of		Context of
174	variables and a lot of information.		conversation
175	Erm, mmm.		
176	I: And how do you understand how		
177	you acquired reflexivity?		
178	P1: I think I've always had it. Erm, I		Multiple perspectives
179	am, I'm quite a shy person believe it		put forward for people
180	or not. Erm, when I'm training and		to make their own
181	teaching it's a performance, I deliver		decision
182	and when I'm managing, I have a		
183	role that I can respond to. But I, I		Collation of variables
184	notice and I look and I think about		and information
185	people around me and what they're		

186	doing. And I think, and in quite broad		<b>Reflexivity</b>
187	terms I think.		<b>acquisition</b>
188	Erm, I think a lot, I like to gather lots		Always had it
189	of information before I make		
190	decisions. So, all that gathering of		
191	information I'm always looking for		
192	more answers and more, more ways		
193	of thinking about things. And to see		
194	if there's yet one more way of doing		
195	something.		
196	So, I think it's, it's being flexible and	Awareness of	
197	not rigid. Erm, if I guess I had the	those around me	
198	view that I know it all, then reflexivity	and what they're	Gather information
199	goes down doesn't it?	doing.	before making
200			decisions
201	I: Mmm and so, you relate it		
202	somewhat to how you are as a		Always looking for
203	person?	To see if there's	answers and more
204		another way of	ways of thinking
205		doing something.	about things.
206	P1: Yes.		
207			
208	I: And so, would you say that you've		Being flexible and not
209	always had a level of reflexivity?		rigid.
210			
211	P1: I think I have, yes. I'm the		
212	youngest in the family so, youngest		
213	reflect, well they observe the older		
214	ones don't they? They learn from the		
215	older ones. So, you always kind of,		
216	sociably kind of related and		Related to who I am
217	connected, always think about		as a person
218	people. Erm, but I think the roles that		
219	I've taken in my relationships with		
	people is not to risk even but I'm a		
	helper. I like helping people.		

220a	Erm, so, I think, yes, my natural		
220b	instinct and my personality is to kind		
221	of think about others.	Observation of	Always reflected
222		older siblings.	
223	I: And so, from that point where		Learnt from older
224	perhaps you had, an instinct or an		siblings
225	ability to reflect early on from	Always sociably	
226	observing others. How would you	kind of related	
227	say you then went on to, if you did	and connected	
228	develop more reflexivity?	and always think	
229		about people as	Helper personality
230	P1: I think it's really useful to have	the youngest	
231	the frameworks, the theory and the	child.	
232	frameworks of the different models.		
233	Erm and I know when I was doing my	General	Natural instinct and
234	OT training, there was such an	tendency to help	personality are to
235	emphasis on models. Erm and within	and think about	think about others
236	my OT training was probably five	others	
237	core models that influenced and		
238	guide me. That gives me some		<b>Instinct</b>
239	boundaries and context for collating		
240	information about erm, people and		
241	what therapy I'm doing. And then of		
242	course erm, I've trained in the DBT		
243	model, which gives you a whole new	Frameworks,	
244	abundance of ways of working with	theories and the	Frameworks and
245	people. But also for contextualizing	frameworks of	theories helped
246	and thinking about, why, what, how,	different models	develop more
247	things might be happening.	help develop	reflexivity
248	Erm and then of course my CBT	reflexivity.	
249	training. Erm, so, I think (pause) the	Models provide	
250	theory and all the research and all	boundaries and	OT training
	the study that I do, just gives more	context for	
	depth and, and more variation on	collating	
	how I think. I mean I have lots of		
	conversations at work with		

251	psychotherapists. And I know that	information	
252	we can have a conversation with	about people	
253	processing something in a	and what therapy	
254	psychodynamic kind of format and	I'm conducting	
255	I'm here formulating in the CBT kind	with clients.	DBT training
256	of format. And it's really interesting		
257	that we're both having this strange	DBT model	
258	conversation with different language	allowed me to	Contextualising and
259	and a different pathway.	contextualize	thinking about why,
260	But quite often we get to the same	and think about	what and how things
261	conclusion at the end.	why, what and	are occurring
262		how things might	
263	I: So, there's some similarities then?	be happening.	CBT training
264			
265	P1: There's similarities, yes.	Theories,	Theory and research
266		research and	provide depth and
267	I: And so, for each of the training,	study gives more	variation to how I
268	the OT, the DBT, the CBT were there	depth and	think
269	components about each of the	variation to how I	
270	trainings that allowed you to develop	think.	
271	more reflexivity?		
272		Conversations	
273	P1: I think erm; I think the whole	with people	
274	process of study is absolutely	using different	
275	essential for increasing reflectivity.	formats; different	
276	Because you can listen to somebody	languages and	
277	talking and you think, "Oh yes I know	different	Similarities even
278	that." But the combination of reading	pathways; but	though there are
279	it and you get more depth from the	draw the same	many different
280	reading and then the reading	conclusion in the	pathways and
281	somehow links back into the	end.	languages used
282	conversation.		
283	Erm, but then writing assignments,		
284	when you go to write something		
285	down you think, "Actually, I have no		
	idea what I'm talking about." It does		



286	make you start to read with more		
287	depth and more reflectivity because		
288	you're having to repackage it and		<b>Training to develop</b>
289	reconstitute it into another, into your		<b>reflexivity</b>
290	own words and your own cognitions.		
291	So, I think it really embeds it.	Combination of	
292	I: How for you, any other	reading about a	
293a	components?	theory, listening	Process of study is
293b		to somebody	essential for
294a	P1: Mmm. Feedback, I always ask	talking about a	increasing reflectivity
294b	for feedback. Erm, from my clients at	theory, and	
295	the end of every session and at the	writing about a	
296	end of every treatment I will always,	theory, provides	A deeper
297	"What helped? What, what was	a more in depth	understanding
298	useful there, if anything? And what	understanding	
299	wasn't useful?" But in supervision	that just doing	
300a	and training I always complete and	one option.	
300b	conclude. So, "What did you find	The process of	
301	helpful today? What was not helpful?	repackaging and	
302	Is there anything we could do	reconstituting	
303	differently next time?"	information into	
304	Erm so it's constantly getting that	your own words	
305	feedback cycle.	and thoughts	Embeds knowledge
306		really embeds	
307	I: Was that something you had as	reflexivity.	
308	well as a trainee?		
309		Feedback and	
310	P1: yes, yes.	reflecting on	
311		client	
312	I: Okay.	interactions	
313		enhances	
314	P1: And it's sometimes you don't	reflexivity.	
315	actually like what's said, it's		
316	uncomfortable. Err, but the	Asking clients	
317	comfortableness is only if you're	what helped,	

318	attached to, "I'm right and they're	what was useful,	Feedback increases
319	wrong or I'm better than them or I	what wasn't	reflectivity
320	should know more." Erm if, if you, I	useful.	
321	guess have an attitude of learning	Constantly	
322	that we're always learning, we never	receiving	
323	come to the end of learning then all	feedback.	
324	feedback is useful.		
325	I: It sounds like you feel that all the		
326	components of your training interlink		
327	somehow to create...		
328	P1: Mmm.		
329			Constant feedback
330	I: The capacity to be more reflexive?		cycle
331		An attitude of	
332	P1: Absolutely.	continuous	
333		learning helps	
334	I: You wouldn't take anything out	you reflect on	
335	and point to it, that was more	uncomfortable	
336	powerful or less powerful in your	feedback, and	
337	training.	view all feedback	
338		as useful.	
339	P1: I think it depends on individuals.		
340	Erm, within my OT training we had so		
341	much presentation work. Every six		
342	weeks there was a presentation		
343	about something. Erm, now I at that		All feedback is useful
344	stage was very much more anxious		
345	than I am now. Erm and would		
346	hyperventilate every time I had to		
347	present. Now, I think for me the		
	presentations, I didn't actually learn		
	as much, I didn't learn the lessons		
	they wanted me to learn from the		

<p>348 349 350 351 352 353 354 355 356  357 358 359  360  361 362 363  364 365 366 367  368 369 370 371 372 373 374 375 376 377</p>	<p>presentation because I was so busy managing myself.</p> <p>Err, however and looking back on it, it was a journey that I went through and now I present, I represent 200 / 300 people at different times. Erm, so, it's a journey I've gone through personally, but I think it didn't, wasn't helpful for me as a student. Because I was an anxious person and yet there are other people very confident talking in public and they gained a lot from them. But I do think there is a combination of group work and individual work. You can learn a lot off your peers.</p> <p>Erm and I think and working with your peers you get to kind of think, "Actually I'm not the only one who's struggling with this," or, "I can help them I know this." So, you've got a benchmarking that you can do about your own learning and learning styles.</p> <p>I: How do you understand individual differences in reflexivity?</p> <p>P1: It's personality styles isn't it and learning styles? Erm some people are much more into reading, looking at the theory and just memorizing it, they just wrote- learn it. They don't necessarily understand the depth of what they've learnt but they have that information. There are other people</p>	<p>Process of how I relate to people in the process of talking or relating or being with them.</p> <p>Combination of group work and individual work. The opportunity to learn from your peers.</p>	<p>Components of training interlink to create the capacity to be more reflexive</p> <p>Dependent on individuals and their experience and personality traits</p>
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378	that are much more likely to look for	Allows you to	
379	the understanding of it and not	benchmark your	
380	necessarily remember, erm who	own learning and	
381	wrote what or what research paper	learning styles.	
382	that they've looked at.		
383	And I think those come together		
384	somehow and, and help each other.		
385			
386	I: And how would you say		
387	personality fits in?		
388			
389	P1: Mmm, there are some people	Personality	
390	who are just into, "I need answers,"	styles and	
391	so, they're fast. "Erm, I just need to	learning styles	
392	know the end result and then I'm		
393	fine." There are other people who	Obtain the	
394	like the journey of learning and	information but	
395	exploring and looking at things in	don't necessarily	
396	great depth and understanding how	understand the	
397	they might apply it.	depth of what	
398		they've learnt	
399	I: And do you feel there are erm,		<b>Individual</b>
400	particular individuals who have more	Seek to	<b>differences in</b>
401	of a capacity to learn reflexivity than	understand the	<b>reflexivity</b>
402	others?	information,	
403		rather than	Personality styles
404	P1: Yes, I do, yes. How do I know	remember it.	Learning styles
405	that, what's guiding me on that?		
406	(Pause) I think, I do think it's the		Some wrote-learn and
407	combination of personality and		don't necessarily
408	learning styles. If I think about		understand the depth
	personality and, and the people who		of what they've learnt.
409	want answers and high achievers,	Some people	
410	the more thinking about what they	need answers	Others, look for the
411	need to do to get a high score for	and therefore	understanding.
	their assignments or their learning		

412	and to come through with the status	look for these	
413	of being a good student.	answers quickly.	
414	So, I guess their focus is, "I'm here to		
415	be a student and to achieve and get	Others enjoy the	
416	my qualification." Where I think there	process, and	
417	are some people who come into	take time to gain	
418	study to be a therapist or to be	depth and	
419	whatever the outcome of their	understanding	
420	training is. (Pause) It's what I'm		Natural curiosity
421	talking about there is attitude I think.		
422			
423	I: In what way?		
424			
425	P1: Well, it's attitude to, because I	Some individuals	Enjoy the process of
426	know for me actually one of the	have more of a	learning and exploring
427	things in my learning, in my study	capacity to learn	things
428	was my field work experience and	reflexivity than	
429	applying it. Erm, because I know my	others based on	
	first six months I was thinking,	a combination of	
430	"Actually, I don't think I'm a student, I	personality and	<b>Capacity to learn</b>
431	need to stop doing it." Because I	learning styles.	<b>reflexivity</b>
	hadn't started, I'd left school when I		
432	was 15 and I had, I went back to be	People who want	
433	an OT when I was 38, for goodness	answers and are	
434	sakes.	high achievers	Combination of
435	So, I was thinking, "Actually, Hmm	are more likely to	personality and
436	I'm not a student, I don't like this."	think about what	learning styles
437	Erm and it was when I did my field	they need to do	
438	work and I just applied everything I'd	to get a high	
439	learnt and thought, "Actually, there's	score.	
440	no backing out, I can do this. I can't		
441	do that written work as well as other		
	people but I actually know how to		
442	apply it."		
443	So, where was I going with that?		
444	What I was saying is, that I guess it's,		

<p>445</p> <p>446</p> <p>447</p> <p>448</p> <p>449</p> <p>450</p> <p>451</p> <p>452</p> <p>453</p> <p>454</p> <p>455</p> <p>456</p> <p>457</p> <p>458</p> <p>459</p> <p>460</p> <p>461</p> <p>462</p> <p>463</p> <p>464</p> <p>465</p> <p>466</p> <p>467</p> <p>468</p> <p>469</p> <p>470</p> <p>471</p> <p>472</p> <p>473</p> <p>474</p> <p>475</p> <p>476</p> <p>477</p>	<p>if you're studying for a means to an end as, "I need a qualification and I need a job." As opposed to, "Actually I'm passionate about what I'm learning and I want a career and what I'm doing next," I think that that has to influence it. As opposed to doing business studies where you study business and you go away and you run a business.</p> <p>I: Under what circumstances would an individual learn reflexivity as an adult?</p> <p>P1: Mmm, and learning institutions I think make it quite hard to encourage reflect ability. Erm, I think the emphasis on, on high achieving puts a lot of pressure on people. And do think that when people are anxious and under pressure for delivering assignments, multiple assignments all at once they're not clearly thought out about pacing the student. I think that gets in the way of reflexivity. Because they just have to deliver, there's no time, it's all cerebral and there's no time to reflect.</p> <p>However, there can be a time to just deliver and then you reflect afterwards. Erm, but I do think it's the applying, once you start to apply the theories where you get the reflexivity.</p>	<p>Field placement allowed me to apply everything I'd learnt and lead me to believe that I could do this role. Whilst I couldn't do written work as well as other people, I did know how to apply it.</p> <p>Studying as a means to an end (qualification, job) as opposed to studying based on passion of</p>	<p>Attitude</p>
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478	I: And following on from that, how do	learning and	
479	you think reflexivity can and should	career.	
480	be taught?		
481			
482	P1: Mmm, the concept of it. Erm		
483	(Pause) I think it's, giving opportunity		
484	and time within lectures for		
485	discussion. For erm, encouraging	Pressure of	
486	alternative ways of thinking. Erm,	delivering	
487	encouraging people to think about	multiple	
488	what they're reading and not take it	assignments	
489	as gospel. There is a part of study	focuses on	
490	that does feel sometimes like	delivery and	
491	brainwashing. Like, "This is the	doesn't allow	
492	model and this is what we want in our	time for	
493	assignments."	reflection.	
494	So, I do think it's very much		
495	encouraging people to erm, have the		<b>Learning reflexivity</b>
496	discussion (Pause), listen to other		<b>as an adult</b>
497	people's information and other		
498	stories. Erm and feel comfortable		
499	(Pause). I guess, yes feeling		
500	comfortable, "Actually I don't know		
501	what I'm talking about, I don't know		Emphasis on
502	what I'm learning. I don't understand		achieving and
503	this." Which can be quite shaming		pressure impacts
504	for, for people when they are sitting		negatively on
505	in a classroom, to admit that.		reflectivity
506			
507	I: I think that's interesting in itself		
508	about how potentially the trainer can		
509	have an impact on the room. The	Providing one	
510	ability to acquire reflexivity. So, are	with the	
511	there components of the trainer we	opportunity and	
	need to take into account?	time within	
		lectures for	

512	P1: Absolutely, absolutely. The	discussion and	
513	feedback I get from people is that I	encouraging	
514	can make a complex concept very	alternative ways	Applying theories is
515	simple. Erm, that I'm approachable	of thinking.	where you develop
516	and that people feel that they can talk		reflectivity
517	to me. Erm, so I think that's quite	Encourage	
518	important that the lecturers, trainers	critical thinking;	
519	are approachable. Erm, that they're	what they read is	
520	not judgmental.	not gospel.	<b>Teaching Reflexivity</b>
521	I think it's all the qualities you need		
522	as a therapist isn't it? To be		
523	accepting and none judgmental, to		Opportunity and time
524	be guiding and supportive. Use the		within lectures for
525	socratic questioning, techniques,		discussion
526	yeah. I think it's important.	Identifying	
527		weaknesses and	Encouraging people
528	I: And so the training that you do,	lack of	to think about what
529	what components of those	understanding	they're reading
530	programmes do you see as		
531	developing reflexivity?		
532			
533	P1: I think it's stimulating curiosity.		
534	It's giving enough information that		Listening to other
535	people get enthusiastic about what		people's information
536	they're learning. Erm, and getting		and stories
537	them to think about particular client's		
538	that they might be working with,		Feeling comfortable
539	currently and how it, it kind of		
540	crosses over. And I do know that the		
541	feedback that I've had from having	Lecturers and	
542	clients come in and present in the	trainers are	
543	lectures. Erm and interestingly	approachable	
544	enough when the client goes and	and are able to	
545	asks them, "What did you get from	teach to a wide	
	that?" And you will see them going		
	ping, ping, ping, ping, ping. And, and		



546	you know there were people who	range of student	
547	worked in drug and alcohol services	needs and	
548	who would say, "Well, actually I can	learning styles	<b>Trainer components</b>
549	see that 50% of my clients fit the		<b>required to teach</b>
550	criteria that this client just		<b>reflectivity</b>
551	demonstrated."		
552	Erm and you could see them just		Making a complex
553	making links that they had never		concept very simple
554	made before. Moving from I guess		
555	the science of addition to, "Actually,		Approachable
556	people have personalities," and all of		
557	that abuse and all the kind of context		Non-judgmental
558	that comes, that makes up people.		
559	They were just thinking in more		
560	depth.	Giving enough	
561		information that	Qualities needed as a
562	I: So, is it something particular about	people get	therapist
563	having a service user in the	enthusiastic	
564	creativity?	about what	Accepting
565	P1: I think it made a significant	they're learning	Guiding
566	difference because they could see		Supportive
567	and we do as adults learn from	Thinking about	
568	demonstration a lot. We pick up so	clients and how	Socratic questioning
569	much more by watching something.	they might be	and techniques
570	And I think you know, the mediums of	working with	
571	videos etc. makes such a difference.	them and how it	<b>Training</b>
572	I know when I was learning my PTSD	relates to	
573	work and I'd read all the books about	learning.	Stimulating curiosity
574	reliving and various, you know the		
575	whole thing. And it wasn't until I went		Thinking about clients
576	to a lecture and the lecturer said, "I'm		
577	going to show you video on a clip of		
578	reliving," and then when it came to		
579	the end I saw how he'd done and I		

580	thought, "Oh yes, I'm doing it. I'm not	Opening up their perspectives of their clients	Demonstration
581	doing it."		
582	And then he contextualized it and		
583	said out of a 12 week course of		
584	PTSD probably only two sessions will		
585	be reliving and I, "Err how did I not		
586	pick that up from the books?"		
587	I: So, there's something about		
588	watching it live in action?		
589			
590	P1: Live in action because we see,		
591	we pick up so much more by just		
592	observing don't we?		
593	I: And so for you that would be one	Learning from demonstration	
594	of the most powerful parts of training		
595	in terms of reflexivity?		
596			
597	P1: I think so, yes.		
598			
599	I: Are there other parts of your		
600	training that you do, that you feel		
601	you're more of less powerful?		
602			
603	P1: I think for me, two other things. I		
604	mean getting to know yourself is		
605	significantly important and I know out		
606	of my training there were two		
607	particular excises that I had to do that		Watching others Demonstrations Videos
608	made me have to think about me.		
609	Because when you're thinking about		
610	other people you have to know where		
611	you begin and end and where the	Contextualising learning	
612	cross over is. And I know at the end		
613	of my OT training we had to, no at		

<p>614</p> <p>615</p> <p>616</p> <p>617</p> <p>618</p> <p>619</p> <p>620</p> <p>621</p> <p>622</p> <p>623</p> <p>624</p> <p>625</p> <p>626</p> <p>627</p> <p>628</p> <p>629</p> <p>630</p> <p>631</p> <p>632</p> <p>633</p> <p>634</p> <p>635</p> <p>636</p> <p>637</p> <p>638</p> <p>639</p> <p>640</p> <p>641</p> <p>642</p> <p>643</p> <p>644</p> <p>645</p> <p>646</p> <p>647</p>	<p>the beginning actually, as part of our sociology. We had to write our life story and link it in to sociological principles.</p> <p>I had to then categorised myself as you know to where I fitted in the social spectrum, financially how that affected me, my parent's cultural background and how that affected me and influenced the way I approach life. Erm and that was a very good exercise and there was another time, oh at the end of our, my OT training and we had to write down our professional strengths and weaknesses.</p> <p>And it's really hard to write down the professional strengths when you're burnt out at the end of it, our course. So, it, it did require me really starting to move the bias of, "I'm crap to actually, Mmm maybe I've got some strengths," and then apply it to life goals.</p> <p>Because I think by doing those two particular exercises I looked at my strengths and weaknesses and set goals and I achieved them. Err, and I think in getting the confidence in your own ability to change and grow and develop you can support other people in how to change, grow and develop.</p> <p>I: So, there's simply two parts now, one is knowing yourself and then one</p>	<p></p> <p>One of the most powerful parts of training in terms of reflexivity is through observation</p> <p>Understanding who you are is very important</p>	<p>Variety of sources</p> <p>Live in action – pick up more through observation</p>
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648	is about growing and developing		Getting to know
649	yourself?		yourself
650			
651	P1: Yes.		
652	I: And when you train, when you		
653	teach, how does that work in action		Awareness of self
	for you?		
654			
655	P1: Well, I share, I share my life		
656	story as much as I feel comfortable		
	sharing. Erm, but I share my		
657	learning style and encourage people,		
658	erm and cheerlead them that, "If I		
659	can do this, you can do this." So, it's		
	all a lot of encouragement and		
660	support. Erm and I help them to		Categorise oneself
	think about what they wanting to		based on the social
661	learn and what goals and where they		spectrum using
662	might apply it.		sociological principles
663			
	I: So, is there an emphasis on them		
664	knowing themselves?		
665			
666	P1: Yes.		
667			
668	I: And how does that, what's the		Professional
669	process of that if I was to watch it,		strengths and
670	how would I see that?	Apply strengths	weakness
671		and weaknesses	
672	P1: I would erm, when somebody	to lift goals	
673	asked me something and I want to		
674	know more, I'll ask them to give me		
675	more depth of that and to explain it. I		
676	give them that opportunity and I will		
677	use the socratic questioning to get		

678	more depth. And it's surprising how		Setting goals
679	much people will share in a public		Achieving goals
680	forum about themselves and their		Gaining confidence in
681	vulnerabilities. Erm and then I give		own ability to chance,
682	them validation, "Well, done for		grow and develop
683	acknowledging that."		
684	I really do support them to go into		Knowing yourself
685	that real erm, to move past		
686	superficial kind of, "Yes this is kind of		Growing and
687	how it is, this is what I know." To,		developing yourself
688	"Actually, this is what I feel."		
689			
690	I: And so, when you've come across		
691	trainees, could you give an		
692	anonymised example of a trainee you		
693	would consider as having high		
694	reflexivity? And how you understand		
695	they've acquired this ability?		
696			
697	P1: I am, have a particular staff		
698	member, is that...?		
699			Share life story
700	I: Absolutely.		
701			Share learning style
702	P1: Yes. Erm and she was a lovely		
703	clinical psychologist, had been		Encouragement and
704	graduated one year and came into		support
705	the service of personality disorders.		
706	And she had been doing very, very		Goal setting
707	good therapy. And we were training		
708	and teaching her dialectical		
709	behavioral therapy and it was only		
710	working with personality disorders.		
711	So, it was a new client group for her		Large emphasis on
712	and a new model.		knowing themselves

713	Erm, and she was progressing quite		
714	nicely and she had a particular client		
715	that was dependent personality		
716	disorder and she was working with		
	her and I gave her some guidance on	Asking people to	
717	I guess and developing the	provide more	
	formulation with the client about the	depth and	Providing the
718	client's function and what I guess	explanation	opportunity for
719	was the meaning of being		Socratic questioning
720	dependent. And how that affected		
	her.		
721	And she was kind of rolling along		
722	saying, "Yes, yes, yes, yes, yes," and		
723	then there was a particular issue		
724	around risk where she was due to be		
725	discharged from her care		Validation and
726	coordinator, with this particular client		acknowledgement
727	and so, she started accumulating	Support to move	
728	medications and starting talking	past superficiality	
729	about her therapist about, "I'm		
730	accumulating medications."		
731	So, we did the formulation about		
732	what the function of that might be		
	and she was, "Yes, yes, yes, yes,		
733	yes," and then without telling me		
734	during the week she activated the		
	crisis team and the client got		
735	admitted to the acute unit. And so,		
	she made a mistake. So, when she		
736	came back into supervision I said,		
737	"Okay, how did this happen? Let's		
738	look at the function." So, revisited it		<b>High Reflexivity</b>
	and then all of a sudden the penny		
739	dropped that, "Ah the client was		
740	accumulating medication because		
741	she was losing somebody who was		

742	supporting her and wanted to		
743	reactive people looking after her.”		
744	And the actions that this therapist		
745	had done meant that she had		
746	achieved what she had set out to		
747	achieve and then all of a sudden she		
748	got it. “Ah right.” So, I gave her the		
749	opportunity to, “So, how are you		
750	going to turn this around?” And so,		
751	she went away, creatively worked on		
752	it and that client out of the acute unit		
753	within three weeks. So, it was about		
754	allowing opportunity to make		
755	mistakes, I guess. And that journey		
756	of, “Oh now I’ve got the, the deeper		
757	meaning of what that actually means		
758	and how to apply it.”		
759	I: It’s an interesting example		
760	because it’s an example of		
761	somebody who’s trained has just		
762	come out and newly qualified and		
763	something about the process of		
764	allowing people to make mistakes.		
765	Do you see that as reflective		
766	throughout the process, from being a		
767	trainee to...?		
768	P1: All the time I make mistakes, all		
769	the time as well. And I do have I		
770	guess an attitude that there’s no right		
771	or wrong, there’s just what you do.		
772	And for any kind of pathway you go		
773	down in therapy or training you can		
	always undo it or you can always		
	learn from mistakes. You can always		

774	backtrack. Erm and I have no		
775	problem with clients say, "You know		
776	what, I think actually the last two		
777	sessions we've gone way off track.		
778	I'm going to go back and see if we		
779	can go down a different pathway."		
780	And I'll do that with staff and I'll do		
781	that with trainees as well.		
782			
783	I: And so for that, the clinical		
784	psychologist, was she able to		
785	recognize the mistake because she	Revisiting the	
786	already had the abilities to recognise	function	
787	it?		
788			
789	P1: She, she was intelligent; she		
790	had a lot of theory. Erm she was a		
791	highly skilled person in her own right.		
792	Erm, (Pause) and she knew she was		
793	on a learning curve. So, she was		
794	aware she had gaps in her		
795	knowledge. Erm and I think that's		
796	essential for any reflectivity as well.		
797	Erm, and when I gave her the options		
798	of either handing the client over to		
799	somebody else or working differently.		
800	It was her that was saying, "I'm		
801	learning so much, please let me keep		
802	on going." Erm and so she went		Action development
803	through her journey of discovery,		
804	erm.	Allowing the	
805		opportunity to	
806	I: It sounds similar to your learning	make mistakes	
807	style?	and reflect upon	
808		them to gain	
809	P1: Hmm. (Pause)		



810		insight and	Providing one with the
811	I: In your experience is there a	deeper meaning	opportunity to make
812	difference between clinical		mistakes
813	psychology counselling psychology,		
814	the medical trainees you have, the		
815	OT trainees you had previously?		
816			
817	P1: Definitely, definitely. And I'm not		
818	sure if it's a different, people are		
819	attracted to the different professions,		
820	so, there will be a kind of a baseline		
821	personality, preference there I guess		
822	or temperament. Erm. But also the		
823	trainee, with the doctors they are so		
824	scientifically driven they're talking		
825	about medications and these, they	An attitude of	
826	have quite a harsh training anyway	there is no right	
827	and they tolerate a very direct kind	or wrong, there's	
828	of, "Actually, that's not going to	just what you do.	
829	work."		
830	So, they tolerate strong guidance.	An	
831	Erm, I think counselling psychologists	understanding	Always learn from
832	are much more touchy feely kind of,	that you can	mistakes
833	"We want to feel our way into it." And	always undo	
834	their interpretation and their	mistakes or learn	
835	understand of client centered	from them.	
836	practice is different from clinical		
837	psychology or CBT therapists.		
838			
839	I: How is it different?		
840			
841	P1: How is it different? It's like the		
842	integrate of therapists as well and		
843	their interpretation as, as for the		
844	contact that I've had, is that they see		
	that the client drives the therapy.		

<p>845</p> <p>846</p> <p>847</p> <p>848</p> <p>849</p> <p>850</p> <p>851</p> <p>852</p> <p>853</p> <p>854</p> <p>855</p> <p>856</p> <p>857</p> <p>858</p> <p>859</p> <p>860</p> <p>861</p> <p>862</p> <p>863</p> <p>864</p> <p>865</p> <p>866</p> <p>867</p> <p>868</p> <p>869</p> <p>870</p> <p>871</p> <p>872</p> <p>873</p> <p>874</p> <p>875</p> <p>876</p> <p>877</p>	<p>And there's something about, you know the client comes in, in there because they don't know what they want and how they got to where they are. And somehow they're in, where's the balance of power and control within a session? And I do think that counselling psychologist do somehow let the client's guide the treatment, the direction of treatment too much.</p> <p>Erm, too much, there's a, there's a different degree of whereas, if you've got a model then the client comes in and you say, "Okay this is, tell me what your problems are. This is the model and somehow we have to work together and the model will hold us and guide us through this process." Erm, does that make sense?</p> <p>I: Yes, I'm wondering about the differences between the types of trainees you mentioned.</p> <p>P1: Mmm.</p> <p>I: And whether that means they had different types of reflexivity or different levels of reflexivity.</p> <p>P1: Yes. The doctors, in fact the doctors are amazing at reflexivity but they're faster. (Giggle) and I think it's because of their training and you</p>	<p>Commitment to the process of learning</p>	<p>Understanding theory</p> <p>Highly skilled</p> <p>Awareness of learning curve and gaps in knowledge</p> <p>Essential for reflectivity</p>
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878	know they have 15 minutes with		
879	clients. The most they have is an		
880	hour if it's an initial assessment.		
881			
882	I: How do they learn to faster?		
883			
884	P1: Yes, a good question. Well, I		Baseline personality
885	kind of use the metaphor that I use		
886	with absolutely everybody. And it's		Doctors – very
887	about the length of treatment or the		scientifically driven.
888	length of time that you do for		Tolerate strong
889	assignments or the length of time		guidance.
890	that you do for anything. That if		
891	you've got all day to clean your		
892	house, it takes all day to clean your		
893	house. If you've got somebody		
894	coming who rings up and says, "I'm		
895	coming to have a cup of coffee with		
896	you in half an hour," the house is		
897	clean.		<b>Counselling</b>
898	And I, I think erm, doctors have a		<b>psychologists</b>
899	time pressure and they're trained		Touchy/feely
900	right from the very beginning to think		
901	in a structured way, so, that they get		Interpretation and
902	to the conclusion much more quickly.		understanding of
903			client centered
904	I: Is there a set of questions they ask		practice is difference
905	themselves in order to get there that		from clinical
906	quick?		psychology or CBT
907			therapists
908	P1: I don't know because I was		
909	actually quite surprised how		Client drives therapy
910	psychodynamic in thinking some of		
911	these doctors were. That really did		
912	surprise me and they were able to		
913	think about schemas and think about		

910	dynamics and, and context. So, I		
911	don't know if they left out the		
912	important things but maybe they left		
913	out the clutter. The waffly bits about,		
914	the person had eaten that day.		
915	You know maybe, maybe the rest of		
916	us are all trained within		
917	multidisciplinary services that we		
918	have to think about whether they are		
919	eating properly and whether they've		
920	got food on the table. And whether		
921	their benefits are working and, and		
922	maybe we have too much everyday		
923	stuff that we have to think about.		
924	I: So, they're focused on a narrower		
	source of information?		
925			
926	P1: Mmm, they're, they're looking		
927	diagnostically and clinically at the,		
928	yes the pathology. They're not		
929	necessarily focusing on, yes how		
930	they got to the therapy session		
931	where...		
932			
933	I: And you've mentioned words like		
934	intelligence and personality and I		
935	wonder how much of those		
936	somebody brings into the training or		
937	how much the training can change		
938	somebody?		
939			
940	P1: Yes (Pause). I had some		
941	contact, I don't supervise but I have		
942	some contact with some staff in the		
943	Abbott Service and they don't have		
			Model and process to follow; professional guides client with client
			Doctors – fast, strong reflectivity; training makes them develop this

944	as stronger kind of clinical		
945	background and they're much slower		
946	at thinking and writing reports and		
947	formulating. So, I'm not sure if		
948	they're any less intelligent but their		
949	training, the lack of academic training		
950	and being able to kind of	If you've got all	
951	conceptualise things in, in a model or	day to clean your	
952	a formulation I think is something	house, it takes	
	that's, (pause) somehow goes	you all day to	
953	against their client's centered beliefs.	clean your	
954	I think some of them do think it's a,	house. If you've	
955	it's not client centered to put people	got somebody	
	in a box and you know I think it's the	coming who	
956	anti-diagnosis sentiment. But a lot of	rings up and	
	them are anti-diagnosis sentiment	says "I'm coming	
957	will then formulate somebody into a	to have a cup of	
958	schema and use the schema as a	coffee with you	
959	diagnostic tool and, and fast forward	in half an hour",	
	through as well. (Pause)	the house is	
960	So, the training does speed the	clean.	
961	process up but it doesn't necessarily		Time pressure
962	(pause) make them more reflective.		
963	But I think the faster that you think		Structured training
964	then you're more responsive in a		from the beginning so
965	session anyway. Because you're		are able to draw
966	picking up the queues much more		conclusions much
967	because there's so much going on in	Providing people	more quickly
	a session.	with enough	
968	If you're thinking slowly and you're	information to	
	thinking about too much then you	encourage	
969	might miss some of the key issues.	enthusiasm for	
970		learning	
971	I: Could you give an anonymised		Psychodynamic
972	example of a trainee you've come		Think about schemas,
973	across who has lower levels of		dynamics and context

974	reflexivity and why you think they're		
975	like this?		
976			
977	P1: (Pause) Yes, I have a person		
978	who is working with a client and she		
979	was so focused on following the rules		
980	of the model, and that she		
981	overlooked some of the, the meaning		
982	and the depth of what was going on		
983	for the client. Erm, being real		
984	focused and, "But I did what the		
985	model told me." Erm and the		
986	interpretation that the model was so,		
987	so rigid that it discriminated against,		
988	"Actually the client wasn't benefiting		
989	from what you were doing." Erm you		
	know she got stuck.		
990			
991	I: Why do you think she was like		
992	that, did that?		
993	P1: Fear, fear and, "I need to follow		
994	a rule and I need to know I'm right		
995	and I need to know that I'm not going		
996	to lose my job at the end of it." I'm,		
997	I'm sure it's fear that holds people up		
998	or fear that they don't know what to		
999	do and the client's got to fit the		
1000	model.		
1001			
1002	I: It's interesting because you, you		
1003	spoke about your anxiety when you		
1004	first started training and whether that		
1005	fear is a necessary part of training or		
1006	is it, it can be overcome or not?		
1007			

Focused on a narrower source of information

Diagnostic and clinical approach

1008	P1: Yes, good question, fear. I		
1009	think, I think some people are		
1010	motivated by fear and it makes them		
1011	brilliant therapists in the end. But I		
1012	don't think we learn well under fear. I		
1013	think it impairs. Erm I think it's a,		
1014	yes, it impairs learning and reflection.		
1015	Because if you're fearful then you		
1016	move into protection mode and what		
1017	are you protecting? Probably your		
1018	ego, probably, you're shame,		
1019	avoiding shame. So, no I think fear's		
1020	not that useful, it's part of life.		
1021	But helping people to understand		
1022	how that might impair reflexivity. So,		
1023	looking at, I guess looking at		
1024	emotions. Because I do think		
1025	emotions are grossly under,		
1026	undervalued, that people take them		
1027	for granted.		
1028	I know that when I've been lecturing		
1029	here at the London Met. And I've		
1030	said, "So, I'm just going to ask all of		
1031	you to stop and think about what		
1032	you're feeling at this moment in time."		
1033	And half the class have no idea and		
1034	that's a core of who we are and what		
1035	we are and what information we're		
1036	getting.		
1037	And it's a link to our underlying kind		
1038	of beliefs and thoughts isn't it?		
1039	I: And the link to our reflexivity.		
	P1: Yes, yes it is that kind of real		
	depth of belief systems.		Training speeds up the process but doesn't necessarily enhance reflexivity

1040			
1041	I: So, somebody that has an		
1042	awareness of their emotional state		
1043	would be a better reflexive		
1044	practitioner?		
1045			
1046	P1: Absolutely.	Know where you	
1047		begin and end,	
1048	I: Why do think that is, I'm	and where the	
1049	wondering?	cross over is	
1050			
1051	P1: Well, I think the level of comfort	Too focused on	
1052	you have in your own emotional state	the rules and	
1053	is the level of comfort that you're	overlooked some	
1054	comfortable with other people's	of the meaning	<b>Low Reflexivity</b>
1055	emotional states. Erm, if you are	and depth of	
1056	comfortable going into that, that	what was going	
1057	depth and that level of vulnerability	on for the client.	
1058	then you can't help but be reflective.		
1059	And think about how that came about		Rigid interpretation of
1060	and what you do with it etc. Whereas		model
1061	if you're continually protecting		
1062	yourself, you're kind of skimming		
1063	along the surface.		
1064			
1065	I: So, how does somebody become		
1066	better at knowing their emotions?		
1067		Fear and the	Fear
1068	P1: Mmm, well, my DBT would say	belief that I need	Rigidity
1069	mindfulness. It's yes, it's very much	to follow a rule	
1070	learning mindfulness.	and need to	
		know that I'm	
1071	I: How much of a component?	write restricts	
1072		reflective	
1073	P1: I remember when I was a	practice	
1074	student, an OT student and I was		



1075	struggling to learn my anatomy. Erm		
1076	and one of our lovely lecturers said,		
1077	“For everybody struggling with their		
1078	anatomy you’ve got your exam next		
1079	week and you can’t label all your		
1080	muscles and you’re inserts etc. etc.		
1081	Erm, I giving an extra lecture.”		
1082	She made us all lie down on the floor		
1083	and she did a visualisation and took		
1084	us right through all the muscles and		Fear as motivation
1085	bones in the body. And it was really,	Fear can	
1086	really interesting when you’re lying	motivate and	
1087	on the floor with your eyes shut and	make people	Fear impairs learning
1088	all you’re doing is thinking about what	brilliant	and reflection
1089	she was talking about.	therapists in the	
1090	I was noticing my fear and my	end. However,	
1091	anxieties, I was noticing what was	we don’t learn	
1092	going on in my own body and my	well under fear.	
1093	own thinking and that’s where I’m		
1094	struggling with it. And I was able to		
1095	let that go for a moment in time and		
1096	learn what I needed to learn. So,		
1097	yes, I think it’s quite significant.		
1098			
1099	I: Do you use mindfulness in your		
1100	own work as a trainer?		
1101	P1: Not as much as I should	Allows you to	
1102	actually. Erm, when I was in the DBT	support others in	
1103	Service yes. We started every	how to change,	
1104	training session with 15 minute	grow and	
1105	mindfulness. Erm and it was	develop	
1106	sometimes driven by me, other		
	people had to, you know, “Who		
	would like to lead the mindfulness		

1107	practice.” Erm but since then, no, I haven’t which is interesting.		
1108	Erm I do use the, the take a breath		
1109	and, and just slow down and think		
1110	about what it is that you’re thinking		
1111	and feeling at this moment in time.		
1112			
1113	I: And do you feel mindfulness is		Depth of belief
1114	something everyone has the capacity		systems
1115	to learn or is there differences		
1116	between individuals?		
1117			
1118	P1: I think there’s differences. There		
1119	are, you know there are Buddhist		
1120	monks who will say, “I’ve been		
1121	practicing mindfulness for 20 years		
1122	and I still can’t do it effectively.” So,		Awareness of
1123	yes, I do. Erm and it, it does come		emotional state =
1124	back to that comfortableness with		better reflexive
1125	your own self and, and your own		practitioner
1126	feelings and sensations isn’t it.		
1127			
1128	I: Mmm.		Level of comfort with
1129			own emotional state
1130	P1: Erm, if, if you’re avoiding looking		related to the level of
1131	in on yourself then mindfulness is an		comfort that you’re
1132	incredibly uncomfortable process.		comfortable with other
1133			people’s emotional
1134	I: Do you as erm, a possibility that		states
1135	people, their early experiences, the		
1136	ability to be mindful is altered?		Naturally influences
1137			reflectivity
138	P1: Mmm (pause). Well, no, well I		
1139	think it has been definitely but I think		
1140	they can also be trained in it.		
1141	Because you know I’ve worked with		

1142	PD clients who've had terribly		Emotional awareness
1143	traumatic lives and they've come into		
1144	the service with no ability to know		
1145	what they're thinking and feeling		
1146	about themselves. And I've trained		
1147	them in mindfulness. So, it's a		
1148	willingness as much as anything and,	Learning	
1149	and a trust that this is going to be	Mindfulness	
1150	useful.		Mindfulness
1151	I: Mmm. Let me take you back to		
1152	the trainee, you spoke about the		
1153	trainee being too narrow, too raw		
1154	bound with the theory. But		
1155	potentially having a framework in		
1156	order to have the freedom is actually		
1157	helpful. And I'm interested in how		
1158	you learn to sit more on the good		
1159	side than the bad side.		
1160			
1161	P1: I think it's learning principles.		
1162	You learn the recipe of what the		
1163	principles about or the philosophy or		
1164	the belief system that drives it. You		
1165	learn the techniques and then you		
1166	have the flexibility of how you apply	Visualisation of	
1167	the techniques within the principles	all the muscles	
1168	and the boundaries of the model.	and bones in the	
1169	Whereas, if you're following the	body.	
1170	recipe that, "I'm, I'm making scones		
	and I, I have to have a measuring		
	spoon and it's got to be exact,	All you are doing	
	otherwise everything will fail." And,	is thinking about	
	"Oh gosh I haven't got the right oven;	what the lecturer	
	I've got a gas oven, instead of an	is talking about.	
	electric oven. So, therefore it's going		

1171	to fail.” I think you get bogged down	Awareness of	
1172	on detail.	fear and	
1173	I: Do you feel that personal therapy	anxieties, but	
	plays a part in developing reflexivity?	was able to let	
1174		that go to learn.	
1175	P1: Oh, I think that’s a very good		
1176	point, I think, I think it does, I don’t		
1177	think it’s absolutely essential. If		
1178	supervision, there’s varying degrees		
1179	of quality of supervision. And I’ve		
1180	always had a supervisor who’s made		
1181	me be reflective when I least wanted	Training	Starting training with
1182	it and allowed me to be reflective	sessions used to	mindfulness
1183	when I did.	start with 15	
1184	Erm, so, I think either good quality	minutes of	
1185	therapeutic supervision or therapy	mindfulness.	
1186	yourself make, can make a		
1187	difference.		
1188	I: What about process reports or	Currently not	
1189	case studies. Do you see them as	used, but I do	
1190	being useful?	take a breath	
1191		and slow down	
1192	P1: Absolutely, there’s nothing like	ans think about	
1193	writing something down to think,	what I’m feeling	
1194	“What the hell am I doing? That	and thinking at	
1195	doesn’t link up at all.” Or even	this moment in	
1196	having to tell somebody that this is	time.	
1197	what I’m doing isn’t right. So, I think		
1198	yes, it’s taking that time. Because		
1199	we do get into remote control. You		
1200	know and the busier you are and the		
1201	more clients and the more years that		
1202	you do something, you move into that	If you are	<b>Mindfulness</b>
1203	automatic pilot.	comfortable with	

1204	I: Mmm.	yourself and your own feelings you are able to learn mindfulness.	Difference between individuals
1205	P1: And you kind of think, "It feels right." But it only feels right probably because you're getting something from it.		
1206			Influenced by comfort with self and own feelings and sensations
1207			
1208			
1209			
1210	I: Mmm and if you were to design your own reflexivity programme, your own reflexivity training, what would you have as part of it?		Mindfulness is uncomfortable if you're avoiding looking in on yourself
1211			
1212			
1213			
1214			
1215	P1: I'd start with the self; I would start with, "Who are you?" And I would look at (pause) the social self, the intellectual self. I would look at the kind of intrinsic belief systems of the individual. Erm, and then help them to apply it to various situations and see where they fit.		
1216			
1217			
1218			
1219			
1220			
1221			
1222			
1223	I: Mmm.		Mindfulness can be altered by early life experiences
1224			
1225	P1: Erm, you know we have a strong focus now on cultural sensitivity but actually there's so much more to, into personal sensitivity that goes, that incorporates I guess culture. But actually it should go across every spectrum of interaction with people.		
1226			You can also be trained in mindfulness
1227			
1228			
1229			
1230			
1231	I know in my OT training you had a very strong emphasis on different levels of communication and not just talking communication but what's the intention behind the conversation.		Willingness and trust of usefulness
1232			
1233			
1234			
1235			

1236	And it's interesting that I, when I was		
1237	doing that I started listening to some		
1238	of our lecturers and they would be		
1239	saying, blah, blah, blah, blah, blah.		
1240	But somewhere in there, there was a		
1241	hidden agenda or there'd be		
1242	something positive. But within that		
1243	there was a negative that made it		
1244	actually a punishing kind of a	Providing team	
1245	statement. So, I, I do think that an	members with	
1246	emphasis on communication skills	the opportunity	
1247	and, and you know the really, really	to develop action	
1248	in-depth communication skills. Not		Learning the recipe of
1249	the just, "This is how you say		the principles/belief
1250	something."		system
1251			
1252	I: What would you look for in an		Learn technique
1253	interview for a trainee?		
1254			
1255	P1: Gosh (Pause) genuineness.		Flexibility within
1256			model boundary and
1257	I: Okay. How would you asses		techniques
1258	genuineness?		
1259			Restricted to theory
1260	P1: It's the congruency that I believe		
1261	what they're saying. That they		
1262	understand what they're talking		
1263	about. That they can relate to what		
1264	they're talking about and the impact it		
1265	has on other people.		
1266			
1267	I: Okay. I'm wondering about if		<b>Personal therapy</b>
1268	someone else was going to do the		Not essential
1269	interviewing, how you would give		
1270	them the skills to recognize the		But plays a part in
1271	genuineness?		developing reflexivity

1267			
1268	P1: I would be saying, "Sum up the		Supervision aids
1269	person, what's your first impression.		reflect development
1270	Tell me what you thought about, you		
1271	know notice what you think about		
1272	that person." If I needed to train		
1273	them onto doing those kind of spot,		
1274	"Go out and let's look at people and		
1275	let's think about what we're seeing		
1276	when we look at these people."		
1277	I would be asking them to think about		
1278	the language that, that the		
1279	interviewee was using and whether		Process reports and
1280	they were responding from a client		case studies are very
1281	centered perspective. Because you		useful
1282	come into any of the helping		
1283	professions to help people. And yes,		
1284	you always want to be thinking that		
1285	yourself, you don't want to be		
1286	subjugating. And, and but you need		
1287	to be actually I, "I want to be in this	Taking the time	
1288	job because I like helping people and	to stop and write	
1289	this is a client group I enjoy working.2	down process	
1290	So, looking for passion words, feeling	reports.	
1291	words.		
1292	I: Mmm, that's all the questions I		
1293	have, is there anything you'd like to		
1294	had?		
1295	P1: Having not thought about the		
1296	topic at all before I got here, I used		
1297	no theory, I just kind of off the top of		
1298	my head. And it's interesting that		
1299	within the restructuring that we've		
	just been through, the CBT therapists		

1300	have just kind of thought, "Oh yes,		
1301	we're going through a restructuring.		
1302	Yes, it's destabilise them but they've		
1303	got," that kind of way of thinking.		<b>Training program</b>
1304	Psychodynamic people it's all		
1305	interpretation and, "Oh, I'm feeling		Who are you?
1306	this and they're doing this to me."	Self, social self	
1307	And you know it means something	and intellectual	Social and intellectual
	completely different.	self.	self
1308			
1309	I: What draws us to particular		Intrinsic belief
1310	trainings in the first place?	Apply these	systems
		aspects to	
1311	P1: Yes, exactly. I'm receptive to	various	Applicability
1312	new models all the time. But I think	situations.	
1313	that's the openness to learning. I still		
1314	want to learn and you know when I'm		Personal sensitivity
1315	90 I'll still want to learn. I remember		
1316	when I first, the second job I had		
1317	after I graduated. And there was a	Personal	
1318	particular social worker who'd been	sensitivity	
1319	around 100 years, very, very good at		
1320	what she did. She could get people		
1321	benefits that had been struggling for		
1322	years. She could get them into		
1323	accommodation absolutely brilliant.		
	But she was abrasive. You know she		
1324	was therapeutically, actually really,		Intention behind the
	really insensitive and I believe a		conversation
1325	conversation she had with one of my		
1326	clients led them to go, it was the kind		
1327	of straw where he went and killed		
1328	himself. Erm, and she was saying,		
	"Oh you know we have to do the		
1329	CPD and what, what can I learn, I		
1330	know it all." And the next day the		



1331	manager said, much the same, "Oh	Emphasis on in- depth communication Skills.	
1332	I've got to make her go on training."		
1333	"What, what can I teach her she		
1334	knows it all." And I thought, "Yes, if		
1335	you know it all, you can't learn		
1336	anything."		
1337	And, and it was very scary to think		
1338	that somebody could just think, "I		
1339	know it all."		
1340	I: And for you that journey is just a		
1341	journey?		
1342			
1343	P1: Yes, yes, it's been comfortable		
1344	isn't it with being in the unknown and		
1345	the uncertainty.		
1346			
1347	I: Yes.		
1348			
1349	P1: And the confusion that goes with	Genuineness	
1350	learning. I do think that		
1351	organisation's can stifle reflexivity.		
1352	But just by monitoring and being over		
1353	powering and punishing if they're not		
1354	delivering on particular things and		
1355	they're not getting people through in		
1356	particular ways. And, and I do think		
1357	that then people start looking at the,		
1358	the system and lose sight of		Congruency
1359	themselves and the client and the		
1360	process.		
1361	It's interesting that all, all our systems		
1362	pyramids have kind of got the head		
1363	of the department and then you		
	know, the next layer and then the		
	clinical leads and then the, the	Relatability	
			<b>Skills to recognize genuineness</b>
		First impression	

1364	worker bees. And the client isn't		
1365	even on the picture.		
1366			
1367	I: No.		
1368			
1369	P1: And if I have to take on the job		Language
1370	that they're wanting me to take on, I		
1371	will actually turn the pyramid around.		
1372	And say, "Right, here's the client,		Client-centered
1373	here's you as the worker bees, we're		perspective
1374	here to support you to do the job that		
1375	you need to do. Yes, we have some		
1376	criteria that we need to tick some		
1377	boxes we need to tick but actually...		
1378	I: this is how I want it to be.		
1379	P1: This is how I want it to be."		Passion words
1380			
1381			
1382			
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1410			
1411			
1412			
1413			Openness and
1414			willingness to learn
1415			
1416			
1417		Openness to	
1418		learning that	
1419		makes me	
1420		receptive to new	
1421		models	
1422		If you know it all,	
1423		you can't learn	
1424		anything.	
1425		Organisations	
1426		can influence	
1427		reflexivity.	

1428			
1429		Monitoring and	Reversing the system
1430		being	pyramid
1431		overpowering	
1432		and punishing if	Client centered focus
1433		you are not	
1434		delivery on	
1435		particular things	
1436		stifles reflexivity.	
1437			
1438		Needing to follow	
1439		a rule and need	
1440		to know that I'm	
1441		right	
1442		Willingness and	
		a trust that it's	
1443		going to be	
1444		useful	
1445			
1446			
1447			
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**Appendix AA: Interview E: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Exploratory Comments	Original Transcript	Emergent Themes
1 2		I: First of all, what's your professional title?	
3 4 5 6 7 8 9		P1: Erm, I'm a forensic practitioner within the Forensic Service. I specialise in outreach community mental health within the forensic service. I'm also a cognitive behavioral psychotherapist.	
10 11		I: How long have you done each of those roles?	
12 13 14 15 16 17 18 19		P1: Psychiatry? Erm, I've done psychiatry over 20 years now and within forensic, nearly 12 years. CBT, though, I've had the experience using the principles since 2000. But as a practitioner of the cognitive behavioural therapy, in the past five years.	
20 21		I: What kind of trainer experience do you have?	
22 23 24 25		P1: Trainer experience? Erm, prior to going to doing this, I had - I went on various short courses to do with CBT. Before, with my	

26		initial Master's degree, there was	
27		a CBT component which I did for	
28		a year. Before I went back in a	
29		full-time CBT course for my	
30		Master's in CBT. So, it's been	
31		evolving for a long period of	
32		time.	
33		I: Over 20 years.	
34		P1: Over 20 years, I would say.	
35		It's a long time.	
36		I: What about you as a trainer?	
37		What kind of training do you	
38		offer?	
39		P1: I offer training for students	
40		within the inpatient team. Those	
41		who want advice on selling	
42		techniques and principles to use	
43		or clarification of some of the	
44		techniques they intend to use.	
45		Or some of the problems they	
46		come across on the wards in	
47		relation to the patient therapy	
48		interaction.	
49		I've also had the opportunity to	
50		lecture on the CBT for the MSC	
51		course at London Met. I've also,	
52		within the CBT psychology	
53		circles within the Trust, as well,	
54		I've had the opportunity to liaise	
55		with some of the clinical	
56		psychologists. On issues relating	

57		to CBT. It's been going on for quite some time.	
58			
59		I: So, you've been a trainer for quite a period of time?	
60			
61		P1: I'd say for some time, at least five years.	
62			
63		I: What is your understanding of reflexivity?	
64	Their sense-		Definition of
65	making of	P1: Reflexivity? I see that as a	Reflexivity
66	reflexivity.	process where one will accept	
67		the way the assumptions and	
68		actions and how it influences	
69	The personal	certain situations that we find	
70a	importance and	ourselves. Also, how that brings	
70b	meaning they	about change in our practices.	
71	give to reflexivity		Meaning attached
72	and its purpose	So, it's more to do with how we	to Reflexivity
73	for them	link all that in and the	
74		effectiveness on what we do, the	
75		situation that we find ourselves.	
76		I: How would you describe using	
77		reflexivity in your clinical work?	Meaning attached
78			to reflexivity
79		P1: It is fundamental because in	
80	How they use	my work when, let's say you	Applying reflexivity
81	reflexivity to	interview patients, though you	in practice
82	guide their work.	might have some ideas on	
83		where the interview is going.	
84		You need to be quite factual. It's	
85		only by getting the person to	
		reflect as well. As well as you as	



86	The purpose of reflexivity as a means to gather accurate information	the therapist reflecting on what is	Reflexivity to enable accurate knowledge creation
87		happening. It's when you get to	
88		know exactly what the factual -	
89		what you really need to know.	
90		Otherwise, it's all based on assumptions.	
91			
92		It's only that person that can tell	
93		you exactly whether it's healing	
94		to __ [0:04:38.3] they are the right people to tell you.	
95	The reflexive process to support accurate information gathering		Reflexivity to enable accurate knowledge creation
96		So, it's good to reflect on both	
97		sides to be able to get the right	
98		information that we require. So,	
99		reflexivity plays a great role in that work...	
100			
101		I: Mmm.	
102		P1: ...on both sides as well.	
103	Using reflexivity to guide reflection as a means to improve	Sometimes you need to know	Reflexivity to enable improvement
104		whether an interview is going the	
105		way you want it. It's good to be	
106		able to look at it and see	
107		whether there is something else	
108		that you could add to it or take it	
109		away. Or whether you need to	
110		come back to ask a bit more	
111		questions to clarify things. Like,	
112	why is this room full? The person		
113		to be able to digest what's happened and reflect on it.	
114			Meaning attached to reflexivity
115			
116			

117		So, it affects what action the situation that we find ourselves.	
118		That's my understanding of it.	
119	The role of	I: How do you understand how	Academic Study
120	formal education	you acquire reflexivity?	
121	in developing		
122	reflexivity.	P1: Reflexivity, acquisition is, in	
123		fact, come from a long way down	
124	The unconscious	the line from doing your GCSE	Heuristic
125	development of	work and university, you will	development
126	reflexivity	engage in that process.	
127	through practice	Sometimes, you're not even	
128	Unconscious	aware of the process being	Embedded in
129	development of	utilised but you, actually,	practice
130	reflexivity.	practice it.	
131	Embedded in all	It is when the term reflexivity is	
132	practice, or	being used that you begin to	
133	transcends	think about it. But it's, actually,	
134	across all.	being used all the time. The	
135	practice.	process is being utilised all the	
136	Learning from	time.	Experiential
137	experience and		learning
138	practical	So, it's coming from the normal	
139	application	way. My team projects and my	
140		team case studies, interviews,	
141		things like that. It is a seven-fold	
142		component to get things right	
143		where you want. So, it comes	
144		from a long way.	
145		I: So for you, there's a long	Academic Study
146		history of learning it through	Embedded in
		academia...	practice

147		P1: Academia, experience and,	Experiential
148		sometimes, some role plays	learning
149		where you are asked to present	Directed effort.
150		a patient and getting feedback.	
151	Develop	So, it's a variety of ways that you	
152	reflexivity	pick up - reflexivity reflects the	
	requires direct	amount of work put into it.	
153	and targeted	I: When was the first time you	
154	effort in training	heard the term reflexivity?	
155	and learning		
156		P1: About a few years ago I	
157		heard that. It's not something	
158		that I've, actually, taken note of	Embedded in
159		until you raised it again. I haven't	practice
160		___ [0:07:45.2] on this.	
161		But it's something that you look	
162		back and you know that it's been	
163		there. You use it all the time. It's	
164		a process that we go through all	
165		the time but you don't actually	
166		look at it in the way that you	
		would look at a subject material.	
167		So, it's good to be highlighted:	
168		we're aware of these things.	
169			
170		I: So, you mentioned two primary	
		trainers that you had. One was a	
171		psychiatrist and one was a CBT	
		therapist.	
172			
173		P1: That's right.	
174			
175			

176		I: Can we take the first one first?	
177		You mentioned there were	
178		components where through	
179		experiential interacting where	
180	Formal training	you learnt reflexivity. Would you	
181	which prompts	point to particular parts of that	Formal training
182	reflection in a	training which helped you	Pedagogy
183	formal	develop?	
184	framework	P1: In training? Every Friday,	
185		every other week, you take a	
186		patient and you present it to	
187		colleagues and supervisors. It's	
188	Sense-making	cases that, maybe, you find	
189	and reflection	interesting, where you have to	
190	facilitated and	present a case and this is where	Pedagogy
191	enabled through	this comes in as well.	
192	interaction with	Because though you might have	
193	peer group and	a dimension to what you think or	
194	trainers	where you think the case is	
195		going, then by presenting it you	
196	The role of	get other people, checking	
197	reflexivity in	different ideas. Reflecting what,	
198	enabling and	maybe, you haven't pick up,	
199	supporting	where you can go.	Reflexivity to
200	effective	It's through that process that you	enable effective
201	outcomes and	get to having a very fine way of,	action
202	treatment plans	maybe, diagnose - devising a	
203		plan, treatment plan, that will suit	
204		that particular situation. So, it	
205		influences the way we look at	
206		interventions we plan to, you	
207		know.	

208	The importance of supervisors and training for reflexivity development	I: So, would you say supervision was the tool for reflexivity in your work? Where there other components?	Facilitation from formal training
209		P1: That did play a key role and also in training as well with CBT and, also, with my mental health - you also have the opportunity to reflect on certain situations that you've come across. Whether with the supervisor or a peer. Reflexivity comes in there, you have to look at all those things and, again, devise a plan you'd go with.	
210			
211			
212			
213			
214			
215			
216			
217			
218	The centrality of interaction between client and practitioner to their meaning of reflexivity		Sometimes, you can overlook certain things that you might think is trivial or somebody might point out something that you would have, probably, missed.
219			
220			
221			
222			
223			
224			
225			
226			
227		It all helps to bring all these ____	
228	[0:10:55.9]. It plays a key role.		
229	I: It sounds like you feel it's the interaction with another that allows the most opportunity for reflexivity.	Meaning attached to reflexivity	
230			
231			
232			
233			
234			
235			
236			
237			
238			Using reflexivity to enable the development of

239	an effective plan for client	It's more of a process that we go		
240		through to be able to get a final		
241		___ [0:11:43.0] fine, plan. It's		
242		absolutely - it influences, the		
243		process in itself influences your		
244		actions.		
245		I: What about other components		
246		of the training? Did they help		
247		with reflexivity?		
248		P1: Well, mental health training		Formal training
249		was more to do with very		
250		definite, examined questions and		
251		you deal with it that way. But		
252		CBT, there was more of that.		
253		There was more reflection. Er,		
254		reflexivity was more to do with,		
255		yes, with interviewing and		
256		supervising and that kind of		
257	thing.			
258	That's where I've had to do with	Pedagogy		
259	it in my work in psychiatry. That's			
260	more to do with the interaction;			
261	the interviewing. How people			
262	can view it. Every week, we do			
263	have that session, we can bring			
264	a patient and discuss it and then			
265	see how others view it.			
266	So, very helpful.			
267	I: So, you mentioned that you			
268	would always learn reflexivity			

269		even if not in the name of reflexivity...	
270			Academic study
271		P1: That's right.	
272		I: ...through academia, you mentioned A levels, etc.	
273			
274		P1: Yes.	
275			
276		I: Would you say you have, prior to that, a capacity to learn reflexivity?	Hueristic learning
277			
278			
279		P1: It hasn't been introduced to me as a subject matter. But it is something that you largely engage in at all stages. Yes, it's always there that you use that. You go through that process all the time.	
280			
281			
282			
283			
284			
285			
286		It's not a subject that I've actually	
287		- and it's interesting for it to come back and for you to look at what you've been doing in the past and realising, "I've actually been going through this but not realising but it's something that you can go in depth.	
288			
289			
290			
291			
292			
293		I: Do you think everybody can acquire reflexivity?	
294			
295			
296		P1: Everybody in, say, my practice or - I think so. I think it's	Experiential learning
297			

298		something that is not highlighted but it's something that we do. It's	Embedded in
299		a process that we go through all	practice
300		the time.	
301			
302		I: I wonder whether you've had	
303		experience within a team or	
304		colleagues or elsewhere, where	
305	Formal	they might have different levels	
306	knowledge and	of reflexivity.	Formal knowledge
307	awareness can	P1: Oh, absolutely. Absolutely.	of reflexivity
308	contribute to	There's different levels and also	
309	different levels of	if people have been introduced,	
310	reflexivity or	at some point, to reflexivity and	
311	awareness of	are more aware of what is going	
312	reflexivity	on in the relationship, the	
313		interaction. As compared to	
314		somebody who uses, goes	
315		through that process but not	
316		aware of this component and the	Formal knowledge
317		interaction level that you have	of reflexivity
318		with somebody.	
319		So, I would say there are	
320		different levels of somebody	
321		knowing about reflexivity and	
322	Reflexivity	how best they can utilise it to	Reflexivity to
323	enabling them to	suit. Or to influence a particular	enable
324	do job well	situation. So, by interaction you	improvement
325		can - if you are more aware of it,	
326	Giving meaning	you can dwell a bit more on the	Meaning attached
327	to reflexivity as a	process to develop your work.	to reflexivity
328	way to support		
329	clients	The environment we grow up in	
329		can, in itself, bring about those	



330	understand an experience	things. If you don't know about	Applying reflexivity in practice
331		reflexivity, or you'll be going	
332a		through a process, you might not	
332b		realise what exactly - and I can	
333		give an example that you might,	
334		in my work, to a lay person.	
335			
336		They might be able to, let's say,	
337		describe a hallucination or a	
338		delusional experience. But might	
339	not know the component of it to	Heuristic learning	
340	tell you that. This is experience		
341	is brought by this or this is what		
342	caused it. So, this is what the		
343	explanation.		
344	But they might be able to -		
345	there's something that they can		
346	describe to you. But not know		
347	delusional hallucination, let's say		
348	by a male. Or, maybe, you've not		
349	read about, not know about it.		
350			
351	Reflexivity is assimilated or learning unconsciously through personal discoveries and experiences .	But a clinician would know	
352		exactly where to go with that	
353		little information.	
354			
355		So, I liken that to reflexivity. A	
356		process that we go through all	
357		the time. If you are not familiar	
358		with that subject matter, it's	
359		brings about a level almost like	
360		kindergarten. People ____	
361	[0:17:11.5] at different levels.		
		I: It sounds like, for you, you	
		understand it as a process of	

362		learning. Actually, everybody	
363		have that capacity to learn it and	
364a		it's just about whether they've	
364b		been, perhaps, specifically	Definition of
365		trained or it's been brought into	reflexivity
	From above,	their awareness in another way.	
366	they see and		
367	define reflexivity	P1: Sure.	
368	as a process of		
369	learning	I: What are the rationales around	
370		whether you feel there are	
		individual differences in people's	
371		ability to acquire or to learn	
372		reflexivity?	
373			
374		P1: Well, just like any other	
375		subject matter. There will be	
376		differences in how people, er,	
377		utilise or go through that	
		process. So, yes, there will be	
378		different levels how people	
379		acquire it and how they use it.	
380			
381		Different ways of - just like any	
382		other subject matter. Somebody	
383		might choose to specialise, that's	
384		in my work, in addition,	
		somebody would work harder in,	
385		maybe, a different area in	
386		psychiatry.	
387			
388		Therefore, there are different	
		levels of how people acquire	
389		certain knowledge and use it in a	
390		way that they feel they can.	
400			

401		I: What do you think are the best circumstances for an individual to develop reflexivity?	Academic Study
402	The importance		Formal training
403	of a variety of		Pedagogy
404	contexts from	P1: The environment for one matter, academia, training, case studies, supervision, writing.	Experiential learning
405	which to learn.		
406	Here, clearly	There's all sorts of ways that you can - it's varied and we pick it along the way, in various circumstances. Work, academia to influence certain situations.	
407	voicing many of		
408	the themes		
409	already		
410	mentioned		Reflexivity to improve training delivery
411		I: In your own work as a trainer, do you use reflexivity?	
412	Making use of		
413	reflexivity to		
414	assess their own	P1: Yes, I do. I do and, in a way, as a trainer you need to know whether trainees are thinking through or feeling a particular way about, let's say, a subject matter. You need to have a feedback on how people are receiving your information, where they're going with whatever is happening within the setting.	
415	training delivery		
416			
417			
418			
419			
420			
421a			
421b			
422			
423			
424			
425		Likewise, as a trainer, you also need to know where are you going with whatever you're doing.	
426	Attaching		
427	meaning to		
428	reflexivity as an		
429	important part of	So, it goes both ways in a sense.	Meaning attached to reflexivity
430	the training process	It keeps us in check and helps us to know exactly what to	

431		develop and also what trainees	
432		want to get from you. It's very	
433		important.	
434		I: That's interesting. It sounds	
435		like you use trainees' feedback	
436		to understand how they're	
437		learning.	
438			
439		P1: In a way, yes, I would say.	
440		Because as a trainer, you want	Reflexivity to
441		to impart something. You want to	improve training
442		give them something - people to	delivery
443		pick up.	
444			
445		If it's a way they can pick up - if	
446		there's a way that they can pick	Reflexivity to
447		up, then I think it makes the work	improve training
448		much easier to look at that way.	delivery
449		There's no point in trying to get	
450		something across the way I	
451		know it and trainees cannot	
452		assimilate what's coming.	
453			
454		But if through reflecting or	
455		looking at - you might be able to	
456		find a way that you can get	
457		things across. Let's say, for	
458		instance, maybe, role play is one	
459		way of trainees getting to know	
460		exactly - maybe use what you're	
461		doing and they prefer it that way.	
		Could you introduce that and	Embedding
		work a bit more to make - if it's	reflexivity within
		case studies, which helps,	training delivery

462	Portray	people to, you know, get that	
463	reflexivity as	knowledge then it's worth looking	
464	something they	at it.	
465	embed within		
466	their training and	So, through that process that	
467	teaching. So	you pick up things. It does help. I	
468	they do not seek	wouldn't say it's the, you know,	
469	to teach	only way. But it does help to	
470	reflexivity	know what trainees also what	
471	directly but make	and how it can be made easier	
472	it an embedded	for them.	
473	part of the		
474	learning process	So, that - the process is - it	
475	so trainees learn	complements - the trainer would	
476	it by osmosis.	have something else and	
477		trainees can bring in something.	
478		So, it goes both ways.	
479			
480		I: So, from the training that	
481		you've done, what components	
482		of your training programmes do	
483		you understand as teaching	
484		reflexivity?	
485			
486		P1: If I take, for example, not just	
487		lectures that I've been to - with	
488		my training, the more practical	
489		side of training where you have,	
490		let's say, a [Grunswald	
491		0:23:08.0] time interview with a	In-context training
492		patient, then the interaction that	
493		goes on. How the questions are	
494	Use a hands-on,	framed and how a patient	
495	in practice or in	responds and, maybe,	
496	context	clarification and that interaction.	
497	approach to		

494	teach reflexivity.	I find that very useful sitting	
495	Showing trainee	behind as them a trainee. You	
496	how to use	know, using reflexivity to look at	
497	reflexivity within	the whole process, how it takes	
498	a particular case	place and the benefit for	
499	to frame	devising a plan that would suit a	
500	questions,	particular - you can have a	
501	interact with the	patient who would, you know,	
502	patient.	respond in a way that a	
503		particular treatment might have	
504		helped them in the past. It's	
505		through that interaction or the	
506		influence. It's by knowing, also,	
507		in the interaction what people	
508		that helps. The end process has	
509		helped. Yes.	
510		I: From the training programmes	Make use of case
511		you've taught on over the years,	studies
512	Beyond a	are there components within	
513	practice scenario	those that you would point to as	
514	make use of	teaching reflexivity?	
515	case study	P1: Yes and, in particular, I'll	
516	approach to	look at, let's say, in a training	
517	provide a	case scenario that comes up	
518	context for and	and get people to think about	In-context training
519	to teach	what they're looking at. Also, to	
520	reflexivity	put themselves in that situation	
521	Creating context	and reflect on what they've	
522	for the learning	probably been through. Or, if	
523		they haven't been through, just	
524		think about that.	
		So, giving people the opportunity	
		to think things through in a	

525		scenario situation. Again, it's	
526		very important from a	
527		trainer/trainee point of view.	
528		I: You're pointing to a sense of	
529		experiential work...	
530			
531		P1: Experiential.	
532			
533		I: ...being one of the most	
534		important [things]. I suppose if	
535		we look at the components of	
536		courses where there might be	
537		supervision or personal therapy.	
538		Are there ones you'd point to as	
539		being more important than	
540		others for reflexivity?	
541		P1: I would say they are all	
542		important. You can't single one	
543		out and say, "This is better." It's	
544		something that we do a lot of the	
545		time and you can't pull this one	
546		out and say, "This is better than	
547		this one." They all have a role to	
548		play in reflexivity.	
549		I: From you experience, can we	
550		take an anonymised example of	
551		a trainee with a high level of	
552		reflexivity? And talk about how	
553		you understand you have that.	
554		P1: Can you repeat the	
		question? What...	

555		I: Would you be able to talk	
556		about an anonymised example	
557		of a trainee with a high level of	
558		reflexivity? And to think about	
559		your understanding of how they	Academic learning
560		acquired that level.	
561			
562		P1: From the top of my head, I	
563		remember having a student	
564		some years ago and had one	
565		idea on how to assess a patient	
566		and had a high, structured way	
567		of doing it from what they'd	
568		learned from the textbook. And	
569		what he wanted was for me to	
570		interrogate somebody before he	
571		carries on with an interview	
572		himself.	
573		The interview was - though there	
574		is a way of doing it sometimes,	
575		depending on the patient, it can	
576		take time but we might discuss	
577		something and then come back.	
578		But how he knew it, was to	
579		follow. So, if you need to stop	
580		him, the interview to follow the	
581		process, the procedure that he	
582		has, it will have to be done in	
583		that way. Not realising that you	
584		can let people talk about what	In-context training
585		they want to talk about at that	
586		particular time.	
587	Using the context and the	You could, equally, come back to look at other assessments	



588	experience of	that you need to do before you	In-context training
589	the situation to	come up with a diagnosis.	
590	support		
591	development	After the interview with	
592	and train	reflexivity, he realized that, yes,	
	reflexivity	you can do it that way but it's	
593		important to let an interview flow.	
594		And be so doing, you get more	
		information. So, it's that process	
595		that highlighted how you can use	
		that, you know, not just in	
596		academia but also in practical	
597		work.	
598		I: That's an example of	
		somebody who made a shift.	
599			
		P1: That's right.	
600			
601		I: And that shift was because	
602		they learnt it...	
603			
		P1: In practice.	
604			
		I: In practice.	
605			
606		P1: This is how you can - one	
607		way you can do it and it doesn't	
608		have to be structured.	
609	Discussing the		
610	limitations of	I: Why do you think he was like	
611	academic	that before?	
612	knowledge only.		
613	Need to be able	P1: It is always like that that if	
	to work fluidly	you are assessing somebody,	
614	and in a person-	you will have a set of questions	

615	centered way in practice.	that you would need to do for	
616		your patient to come up with - to	
617		formulate a plan. So, I suppose,	
618		as a student, you have that in	
619		mind so that you don't miss	
620		anything out.	
621			
622		But, in a way, if you've done it for	
623		years, it's like a mark for you that	
624		you know you can come back to.	
625		If one wants to talk about	
626		something that is not important	
627		to them. Then you can let that	
628		flow and then come back to	
629		those other things that might not	
630		be so important to them.	
631		In so doing, it helps the interview	
632		process as well and makes	
633	things much easier.		
634	I: Is that your understanding that,		
635	potentially, there are aspects of		
636	being a student that might,		
637	actually, inhibit reflexivity?		
638	P1: I think in his case, he wasn't		
639	aware that you could do it		
640	differently. It wasn't an		
641	experience that he'd come		
642	across before that it's got to be,		
643	so - having said that, it is an		
644	opportunity that hasn't come to		
645	him to see that you can do it in a		
646	very relaxed way. It was always		
		more structured.	

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671	Taking quite a	I: So, what are the components	
672	personal	of a good trainer for reflexivity	
673	approach to	then?	
674	training		
	reflexivity.	P1: Erm, I would say personality;	
675	Consideration	knowledge; knowing about the	

676	for the individual	subject matter, knowing your	
677	trainer and how	students as well, trainees, what	
678	they need to be	they expect from you; and also,	
679	knowledgeable	a style, you know, presentation,	
680	and adapt to	all come into play when you	
681	who they are	want to engage in that process.	
682	teaching.		
683		There's different things that	
684		come into play.	
685		I: Can you talk about	
686		personality?	
687		P1: I can give an example of	
688		personality. I once had a maths	
689		tutor when I was doing my A	
690		levels and he would come to	
691		class and then start writing ____	
692		[0:33:43.7] sums.	
693		Doesn't say much. What we're	
694		supposed to do in a term, he can	
695		work it out - very good	
696		mathematician. But will work	
697		every time within three weeks	
698		what we need to do in the term.	
699		It's done in three weeks or a	
700		month.	
701		And as - you know, within the	
702		peer group, a lot struggled to	
703		know exactly - but another term,	
704		we had a different - and the style	
705		was totally different. There were	
706		people allowed to ____	
		[0:34:26.7]. Have you been	

707		private, personal, you know,	
708		tuition would come in for the	
709		whole peer group to look at.	
710		So, yes the style and personality	
711a		does play a great role and	
711b		people felt more satisfied with	
712		the second tutor. It makes a	
713		difference.	
714			
715		I: Would your understanding also	
716	Reiterating the	be, then, that the style and the	
717	centrality of the	personality of the trainee is	
718	personality of	important?	
719	the trainer for		
720	the effectiveness	P1: Absolutely, absolutely. They	
721	of the training	might also be used to a	
722	process.	particular way of learning or	
723		interacting, engaging in the	
724		process in itself. They might not	
725		have an affinity with the trainer	
726		as well. There might be some	
727		clashing.	
728		So, it's like, if I use the example,	
729		the recent example there. Let's	
730		say the first trainer, ____	
731		[0:35:35.4] to be there. So,	
732		trainees, students would then cut	
733		off completely. They're not given	Training as a two-
734		the chance to be able to	way interaction
735		influence the process from what	between trainer
736		they've heard from other people.	and trainee
737	Importance of	It's like that.	
738	having a two-		

739	way interaction	Whilst the second tutor, you	
740	between student	know, would have a reputation	
741	and trainer to	for getting people to understand	
742	develop	things and therefore the process	
743	learning.	already begins then. In which the	
744		trainee or the student will let a	
745		more responsive and be able to	
746		share within the process,	
747		bringing experiences and things	
748		like that.	
749		So, yes, it does go both ways.	
750		The style, the way both sides	
751		perceive things all with different	
752		outcomes.	
753	Describing the	I: So, when you're interviewing	Determine trainee
754	importance of	trainees. What components do	knowledge level
755	knowing the	you look for in relation to	
756	trainees	reflexivity?	
757	knowledge level	P1: It is helpful to have a little	
758	first to be able to	background, you know, to know	
759	teach for	about a group or a person. What	
760	relexivity	they know about whatever is for	
761		discussion or where they've	
762		come from. It's important to have	
763		the background.	
764		To know what level they are as	
765		well. To know, exactly, where to	
766		pitch whatever you want to bring	Make use of case
767		up for discussion of get across.	studies
768		It's also important to be able to	
769		get them to give an	

770		understanding of whatever you	
771		want to discuss as well and be	
772		able to find a way in which they	
773		feel able to learn what is going	
774		on. It could be through, maybe,	
775		research; that might be helpful	
776		for them, what they could do. If	Tailor teaching to
777		it's true, devising, let's say, a	individual trainee
778		case that they can look at. You	
779		look at ways that might bring a	
780		person, the trainee out and	
781	Seek to better	perform at the optimum level.	
782	understand		
783	individual and	So, you look at...	
784	adapt approach	I: How do you choose between	
785	to their needs	somebody that has a higher or a	
786		lower level of reflexivity?	
787			
788		P1: I think it's more to do with	
789		how best it suits the person as	
780		well. Because you can do as	
781		much as you - but if a style	Training as a two-
782		doesn't quite suit or doesn't get	way interaction
783		the best out of one. Then you	between trainer
784		need to read the secret plan;	and trainee.
785		look at how best you can engage	
786		that person in that process.	
787			
788		Also, finding out what is the best	
789		way is also important for that	
		person. It is important to know	
		what is best for that person and	
		they can only tell you that. Or,	
		through interaction, get to know	
		how best you can get the best	

790		out of them. And for them to feel satisfied with the process.	
791			
792		I: You need to use different	
793		styles. And how do you feel	
794		about those different styles?	In-context training
795			
796		P1: They're all important. You	
797		know, you need to bring out the	
798		best ____ [0:39:56.0] to it for a	
799		trainee.	
800		For instance, yesterday I had a	
801		medical student come round and	
802		want to spend some time with	
803		forensic from the locality ____	
804		[0:40:14.4]. He's been around	
805		before, a good few months ago	
806		and found the experience very	
807		enriching and has come round	
808		for another week of experience.	
809		And from what I got out of him,	
810		how much he learned for it, the	
811		short period that he was here,	
812		that it's different to even though	
813		forensic is deemed to be very	
814		dangerous. There was no sense	
815		of that and the interaction that he	
816		had with supervisors and	
817		patients was totally different.	
818		So, in a way, it's how the	
819		process goes in itself can be	
820		helpful for the trainee as well.	
821			



822		I: That's really interesting	
823		because, for me, it's talking	
824		about the importance of trainees	
825		in different contexts. And with	
826		the forensic context you're	
827		talking about, is there	
828		assumptions that trainees	
829		instinctively, potentially, make	
830		assumptions around danger.	
831		Whereas that trainee didn't.	
832			
833		P1: That particular trainee.	
834			
835		I: That particular student.	
836			
837		P1: Yes, they have the	
838		assumptions, you know, they	
839		think what forensic would be.	
840		And, therefore, quite worrying for	
841		them to come across and ____	
842		[0:42:07.7] maybe, committed	
843		serious offence and you're sitting	
844		in front of them in an interview.	
845			
846		But, it wasn't the case when he,	
847		actually, had that opportunity to	
848		experience that it wasn't as bad	
849		as people make it out to be. I	
850		think it was quite an experience	
851		for him to be able to have that	
		opportunity to do that.	
		I: I wonder why he wouldn't have	
		the same assumptions as,	
		perhaps, others have done.	

852		P1: For most trainees that I	
853		come across do have some	
854		assumptions about what forensic	
855		entails. Sometimes, are a bit	
856		worried what they might come	
857		across. But when it actually	
858		happens, apart from maybe a	
859		couple who psychiatry wasn't for	
860		them, probably switched off, ____	
861		[0:43:11.4] because psychiatry,	
862		they have to still do the rota. You	
863		know, the psychiatric rota. ____	
864		comparatively.	In-context training
865			
866		But most people enjoy the	
867		experience. I think it's through	
868		the process that they find that	
869		invaluable. ____ [0:43:37.6] in	
870		psychiatry to look at.	
871			
872		I: It tends to be in the process	
873		that people learn.	
874			
875		P1: Yes. So, it's actually	
876		engaging in the process,	
877		otherwise it's something that	
878		somebody might have told you	
879		or what you've come across. But	
880		the experience itself brings	
881		about change in people's	
		assumptions that might have,	
		then it becomes clearer that it's	
		quite different.	
		Yes, the experience itself brings	
		quite a change.	

882			
883		I: Would you be able to discuss	
884		an anonymised example of a	
885		trainee with a higher level of	Make use of case
886		reflexivity? And how you	studies
887		understand how they acquired or	
888		learned that.	
889		P1: Yes, there was a case some	
890		years ago with one particular	
891		trainee who wanted to know why	
892		medication was used for a	
893		particular situation rather than	
894		what he thought you could use it.	
895		He had to go through an	
896		assessment and then come up	
897		with what he thought would be	
898		appropriate. He did all that. It	
899		was more of a case that he kind	
900		of - so he had to do a medication	
901		review for the year that the	
902		patient had been and then come	
903		up with what he thought and just	
904		formulate -.	
905		Through that, he realised that	Make use of case
906		what he would have chosen was	studies
907		not recommended for that	
908		particular situation which is	
909		something that had been used	
910		for what affects for that particular	
911		-.	
912		So, in a way, through the case	
913		study and reviews that he did, as	

914		able to come up with something	
915		that was quite accurate and the	
916		patient responded very well.	
917		Through that experiential case	
918		study, it enabled him to be able	
919		to work out what was more	
		appropriate.	
920		This is somebody who through	
921		the process of asking, you know,	
922		looking at the review and	
923		everything was able to combine	
924		all those to come up with	
925		something which was very	
926		accurate. Yes.	
927		I: What's your understanding of	
928		reflexivity in relation to	
929		neuroplasticity?	
930		P1: It's not something that I've	
931		looked at. It's not something that	
932		I've considered.	
933		I: What about meta-cognition, for	
934		example?	
935			
936		P1: In a way, with reflexivity in	
937		that area, I've been trying to get	
938		one to think about what is going	
939		on for them and to be able to	
940		reflect on it. You know, to bring	
941		out what exactly thinking goes	
942		on behind certain actions and	
943		feelings, certain feelings.	
944			

945		It is helpful, not just for the	
946		person, but also for the therapist	
947		in enabling them in order to think	
948		about things in more	
949		perspective. To reduce, perhaps,	
		any anxieties or worries that they	
		might have in a particular	
		presenting situation. So,	
		reflexivity, in a way, is quite	
		central to the process itself in the	
		interaction with their meta-	
		cognition. Whatever process that	
		you use that you tend to use it	
		in, it's very central.	
		I: That's all the questions I have.	
		P1: Is it?	
		I: Is there...	

**Appendix AB: Interview G: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Original Transcript	Exploratory Comments	Emergent Themes
1	I: Should I ask my first question?		
2	F1: Yes, do.		
4			
5	I: How do you understand reflexivity?	Reflexivity is a skill in therapy	<b>Understanding of Reflexivity</b>
6		needed to look at different	Therapeutic skill
7	F1: Well, erm, I think it's a skill in therapy that you need in	different perspectives and	Look at different perspectives
8	order to look at different	people's view of the world, and	
9	perspectives. Look at people's view of the world. Feed back	feed back what you understand	Peoples view of the world
10	what you understand about that. Express empathy.	about that.	Feedback on your own understanding
11		Demonstrate that you're hearing	Empathy
12	Erm, yes, there's kind of interpersonal skills in therapy	their experience of the world, and	Interpersonal skills
13	that you would use to kind of,	of their experience, and	Paraphrase and feedback
14	erm, paraphrase and feedback	of their presenting problem	
15	to somebody what you're hearing their experience of the		<b>Reflexivity – How do you learn it?</b>
16	world, and of their experience, of their problem that they're presenting with.		
17			
18	I: How do you feel you learnt it?		
19	F1: You see, I think I learnt in a lot of personal therapy, rather		
20			
21			
22			
23			
24			
25			

26	than through teaching. Erm, I		Personal therapy
27	think it's only when you		
28	experience somebody doing	Allows you to	Through
29	that for you, or doing it with you,	appreciate the	experiencing
30	that you appreciate the feeling	feeling that it	somebody else
31	that it evokes. What's actually	evokes	demonstrating
32a	needed in order to contain		reflexivity
32b	somebody ___[0:01:14].		
33			
34	I: That's interesting. So what do		
35	you feel was the process for		<b>Process in</b>
36	you in personal therapy that		<b>Personal Therapy</b>
37	allowed that to take place?		
38	F1: Erm, I think, firstly I think it's	Being with	
39	being with somebody who is	somebody	
40	completely devoted to being	completely	
41	with you there and listening to	devoted to being	Client-therapist
42	your experience and, erm,	with you and	relationship
43	thinking with you about what it	listening to your	
44	is that you've, you bring, that	experience and	Active listening
45	you're bringing.	thinking with you	
46	Really, you know, focusing on	about what it is	Thinking with you
47	your other person, that sense	that you are	about your
48	that you're getting when you go	bringing	experience
49	on personal therapy of a	Focusing on	
50	person's only there for me.	yourself	
51	Then they sit there all week		
52	long just waiting for this one		
53	hour of me attending and I'm		
54	the most ___[0:02:03] person	Feeling that the	
55	that context.	therapist is there	
56	I think that's a really containing	for you	
57	and therapeutic experience that.		

58	Feeling that person's really	Reflexivity allows	
59	there for you and will	you to get the	
60	___[0:02:12], Reflexivity, I think,	feeling that the	
61	is a really important skill in that,	person's really	
62	that you get that feeling. That	devoted and	Commitment
63	person's really devoted and	committed	
64	committed towards the therapy.	towards the	
65	I: So are there particular	therapy	
66	components of the person		
67	who's teaching reflexivity. Or		
68	being with someone in a		
69	process to enhance reflexivity,		
70	like a personal therapist, that		
71	they must have in order for the		
72	trainee to learn it?		
73	F1: Can you say that again?		
74	I: What...does it depend on the	Therapists	
75	personal therapist?	devotion and	
76	F1: Erm, I think it does in some	commitment	
77	ways. I think it, it depends on	towards therapy	<b>Therapists role</b>
78	their, on their personality and on		Therapists
79	their ability to kind of, erm, on		personality and
80	their, maybe on their ability, on	Therapists	their ability
81	their interest and on how maybe	personality and	
82	well the person's presenting	their ability, their	
83	links to their own stories, to	interest, and how	Therapists interest
84	maybe be able to be as	well the person's	
85	empathic and as reflective as	presenting issues	Therapists
86	me, be, able to respond in that	links to their own	reflective
87	way.	stories.	responses
88			Empathy



89	I think it's something, I don't know, I wonder whether it's something that you would learn, erm, or whether it's something that you need to bring with you.	The ability to be empathetic and reflective.	Therapist as a teacher
90			
91			
92			
93	I: Did you bring it with you?		
94			<b>Client</b>
95	F1: Yes, I think so. I think, I think I brought it with me, but I also think I learnt how to look, erm, how to express it. That's what I learnt in personal therapy.	Was always reflective but learnt how to express it in personal therapy.	Brought reflexivity into the session
96			
97			
98			
99			Learnt how to express it in therapy
100			
101	But I think it's one thing that is within you that you're bringing with you, but that you then learn to express. Your teaching potentially, or your experience of it, and I'm somebody who learns quite well by doing.		
102			
103			
104			
105			
106			
107			
108	So having it done to me, I think, helps me learn it. Yes.	Experiencing reflectivity myself enabled me to learn it. This was enhanced by reading papers about it.	Personal research
109	Probably learn to deliberate a bit more on a theoretical level by reading papers about it all.		
110			
111			<b>Reflexivity – Innate</b>
112	I: And so would you think that everybody has it within them?		
113			
114			
115	F1: I think, yes, potentially. I think everybody has it within them and I think everybody responds to particular stories or particular experiences. So	Everybody has the potential to respond to	Everyone has the potential within them
116			
117			
118			
119			

120	maybe somebody who's had,	particular stories	
121	erm, experiences of growing up	or experiences.	
122	with somebody with a disability.		
123	Or, erm, of having, erm,		
	problem with addictions, will		Empathy and
124	respond differently to that		shared
125	person's presented problem		experiences
126	and with their ability to show,		
127	show ____ [0:04:46].		
128			
129	I: When you said that there's		
130	something within you that then		
131	was brought out or was, erm,		
	developed by personal therapy,		
132	would there be people whereby		
133	there would be something about		
134	them where that couldn't be		
135	brought out?		
136			
137	F1: Well I think, I think you can		
138	probably give a more automatic		Automatic
139	response, rather than a sort of		response vs.
140	heart felt truly empathic		empathic
	response. So if somebody		response
141	presents to me and I can't		
142	connect to their story, I can still,	If I am unable to	
143	sort of, probably use my learnt	connect to	Use theory and
144	core counselling skills.	someone's story, I	skills if unable to
145		can still use my	connect personally
146	But I think that it's more	learnt core	
147	effective, probably, if you are	counselling skills.	
	able to connect to that story in		
148	some things. Or connect to that	However, it is	
149	person in some way that allows	more effective if	
150	it to be truly empathetic or truly	you are able to	
151	sympathetic.	connect to that	

152		story or connect	
153	I: What about the rest of your	to the person that	
154	training? You kind of pointed to	allows you to be	<b>Training</b>
	personal therapy being the most	truly pathetic or	
155	important. Are there other	sympathetic.	
156	components that you feel were		
157	more or less important for		
158	reflexivity?		
159			
160	F1: Yes, I think it's important to		
161	think about the different		Different
	approaches we use and how we		approaches and
162	imbed reflexivity within them.		how we imbed
163	Erm, err, I use CBT and psycho		reflexivity within
164	dynamic approaches to therapy		them
165	in my practice.		
166			CBT
167	I think both of those approaches		Psychodynamic
168	are open towards the use of this	CBT and	approaches
169	use of methods. But I think,	psychodynamic	
170	yes, I think, erm, that maybe,	approaches are	
171	erm, again there's more scope	open to reflexivity.	
172	in the psycho dynamic	However, there is	Psychodynamic –
	intervention to use solely that,	more scope in the	more reflexivity
173	rather than being guided by	psychodynamic	
174	overarching principles that you	approach.	
175	need to be applying in order to		
176	get the person from A to B.		
177	Whereas in CBT you are more		
178	guided by those principles, so	CBT is more	
179	maybe there's not sufficient	guided by	CBT – more
180	time for it.	principles.	principle based
181			
182	I: Thank you. So when you		
	were doing your training and		

183	learning psycho dynamic, did		
184	you feel that was more helpful		
185	about developing reflexivity than		
186	when you learnt CBT?		
187			
188	F1: No, I think the most, erm, in		
189	terms of that I think the most	Most helpful	
190	important bits were the core	aspects of training	Core counselling
191	counselling things that we	in developing	skills
192	spoke about in terms of Carl	reflexivity were	
193	Rogers and ___[0:07:27] Health	core counselling	Carl Rogers
194	and Centre Practice. I think	skills in terms of	
195	that's the most relating. I think	Carl Rogers and	
196	the way it was presented was	Health and Centre	
197	that, that underlies any	Practice.	
198	therapeutic intervention, any,		
199	that you need to be presenting		
200	the person those core skills.		
201	Such as empathy, unconditional		Empathy
202	positive regard and, you know,		
203	paraphrasing and so on, in		Unconditional
	order to communicate, you		positive regard
204	know, that you're really there		
205	with them. That you're		Paraphrasing
206	reflecting what they're		
207	experiencing and that you hear		Reflecting clients
	from what they're saying.		experience
208			
209	I: So those principles would be		
210	the ones that taught you about		
211	reflexivity. Or, developed your		
212	own reflexivity?		
213			
214	F1: I suppose so. I mean as I		
215	said, I think it developed quite a	Theoretically	
216	bit in the, due to my personal	developed	

217	therapy. You're just seeing how	reflexivity via Carl	Developed due to
218	someone else was working,	Rogers and when	personal therapy
219	using those principles, but I	learning core	
220	think theoretically that's where I	counselling skills.	Seeing someone
221	learnt about them. I was able	Personal therapy	using principles
222	then to go to therapy and see,	allowed me to see	
223	"Ah, that's, that's what that is."	this in action.	Theory introduced
224			reflexivity
225	I: I suppose, like, experientially		
226	it was more important for you		
227	learning reflexivity, that's how		
228	you felt you learnt it?		
229			
230	F1: Mmm.		
231			
232	I: So I suppose I'm wondering		
233	about things like supervision or		
234a	process report for case studies.		
234b	Did they help at all, or not?		
235			<b>Supervision and</b>
236	F1: Yes. I think as much as I		<b>Process Report</b>
237	hated process reports, I do		<b>for Case Studies</b>
238	really think they are very useful		
239	towards you learning, to		Process reports
240	understanding your own ways		are very useful to
241	of expressing reflexivity, but		learning and
242	also realising when you have		understanding
243	missed opportunities to do so.		reflexivity
244			
245	Actually that's something, like,		Identifying missed
246	now that I'm supervising clinical	Asking	opportunities to be
	psychology trainees, I ask them	supervisee's to	reflective
	to do that, I ask them to take	take sections from	
	sessions and then take sections	their sessions so	
	from those sessions. So that	we can speak	

237	we can speak over them and reflect them.	them over and reflect them.	
248	I: And in terms of the training		
249	that you offer, have, how long		
250	have you been a trainer first of		
251	all?		
252	F1: Say again?		
253			
254	I: How long have you been		
255	training?	Masters in	<b>Training experience</b>
256		counselling	
257	F1: Erm, so I did a three year	psychology	
258	Masters in counselling	3 years	
259	psychology. Masters and ____[0:09:34] at the beginning.		
260	Then I started working and then	Doctorate level	
261	I did my Doctorate level	counselling	
262	qualifications, counselling.		
263	I: And what about in terms of		
264	how long you've been offering		
265	training for?		<b>Offering training</b>
266	F1: Offering training to		
267	trainees?		
268	I: To others, yes.		
269	F1: In terms of placements or		
270	teaching?		
271	I: Either.		
272		7 years	

273	F1: So placements I'd really offered, erm, since, erm, I was		Training through placement
274	probably two years into working,		
275	so that would be...[pause]		
276	...since about 2006. So, yes,		
277	for the past seven years. It has		
278	been a while.		
279			
280	I: What kind of trainees to you		
281	train?		
282			
283	F1: Well initially it was all, erm,		
284	counselling trainees. Then,		
285	erm, and then I had, that was	Counselling trainees	
286	while I was working in Barnett.		
287	Then I had one clinical		
288	psychology trainee and then I	Clinical psychology trainee	
289	moved to Haringey, where I had		
290	a bit of a break from having		
291	trainees, because we were		
292	developing the service there		
293	and there wasn't space to take		
294	on trainees at that point. Then I		
295	moved to Slough and here I've		
296	always had a trainee every six		
297	months, a new trainee, and		
298	they're all clinical psychology		
299	trainees.		
300	I: How do you teach them		
301	reflexivity?	Teaching Reflexivity	
302	F1: Well, as I said, I spent a bit		
303	of time getting them to tape	Recording sessions	
304	their sessions. Erm, I don't		
305	believe that you can bring		

<p>306</p> <p>307</p> <p>308</p> <p>309</p> <p>310</p> <p>311</p> <p>312</p> <p>313</p> <p>314</p> <p>315</p> <p>316</p> <p>317</p> <p>318</p> <p>319</p> <p>320</p> <p>321</p> <p>322</p> <p>323</p> <p>324</p> <p>325</p> <p>326</p> <p>327</p> <p>328</p> <p>329</p> <p>330</p> <p>331</p> <p>332</p> <p>333</p> <p>334</p> <p>335</p> <p>336</p> <p>337</p>	<p>sessions, bring people into your sessions, or go into theirs, because I think as soon as the intervention actually starts, we don't get to see it. Because that's their time with their client. Unless you're doing a joint piece of work. That's important for the client to, also especially for working with disabilities, it's important for the client to know me.</p> <p>This is, erm, this is the therapist, this is the therapy, this is the person I'm relating to. Because otherwise there's, there can be confusion.</p> <p>So we use tapes. Both the trainee tapes and I've developed a bit, sort of a reference library for trainees with tapes of my own sessions. I then get to choose the nicest bits and play back to them.</p> <p>I also use it in my supervision. So, I, I tend to try and tailor the placements for the trainees' needs and if they don't come often with a lot of recommendations from previous supervisors saying this trainee needs to develop this skill. So, or this trainee has particularly</p>		<p>Reference library with tapes of counselling sessions</p> <p>Tailor placements for the trainees' needs</p>
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338	structures in this domain and so		
339	I tend to try and really get a		
340	sense of what the trainee's		
341	strengths and weaknesses are		Identifying
342	very strongly, and at the		trainee's strengths
343	beginning of the placement.		and weaknesses
344			
345	I also attempt to try and, erm,		
346	bring in, erm, a little bit of		
347	thinking around ___[0:12:39]		
348	clinical psychologists are not		
349	used to because they work		
	almost solely ___[0:12:43]		
350	thinking about what impact does		What impact does
351	this client have on you when		the client have on
352	she says that. What does that		you when they say
353	do to you personally? Why is it		certain things?
354	difficult to communicate that? Is		
355	it only because the person has,		
	does not speak very well or is it		
356	because that person struggles		
357	to communicate. Or is it		
358	because this whole issue is		
359	probably something that's		
360	difficult.		
361			
	To try and bring out ways in		
362	which they could respond to		Identify ways to
363	that person that take into		respond to client
364	account their own realities, their		that take into
365	own worlds and then thinking		account therapist's
366	about the person they're		own realities and
367	speaking with.		worlds
368			
369	So, I think in terms of clinical		
370	and counselling I think there is		

371	definitely a difference. I think		Thinking about the
372	clinical clinics are excellent at		person they're
373	all the sort of CBT straight skills,		speaking with
374	but I'd probably do a...		
375			Clinical clinic –
376	In the placement we do with the		CBT
377	trainee this afternoon and she		
378	really, really struggled with all of		
379	these things. She's, I don't		
380	know, she's been quite		
381	unboundaried when		
382	___[0:13:46] with clients, giving		
383	clients her personal phone		
384	number and things like this, and		
385	has no appreciation that		
386	actually that's not just being,		
387	erm, I think she thinks when I		
388	say to her, "Think about what		
389	that does to that client", she		
390	thinks that's over the top. I		
391	think she thinks, "Oh, you know,		
392	it's not such a big deal, that		
393	client won't call be out of hours,		
394	it's okay". Actually, thinking		
395	about what that does to the		Thinking about
396	client and their therapeutic		what certain things
397	relationship. So she she's		do to the client
398	really struggled.		and their
399			therapeutic
400	I: It sounds like she struggled,		relationship
401	not only when she came in, but		
402	also to learn the concepts that		
403	you're trying to teach her and		
404	I'm wondering what it is about		
	her, what do you feel means		
	that she didn't have it to begin		

405	with and also isn't really learning it?		
406		People are	
407	F1: I think, in this particular	resistant towards	
408	client group, it is about that	being with	
409	people are resistant towards	somebody with a	<b>Low reflexivity</b>
410	actually being with somebody	disability	
411	with a disability. I think it		
412	creates huge amounts of		
413	anxieties for trainees' own lives.		
414	What it takes to, you know, how		Anxiety for
415	little it takes to be a person with		trainee's own lives
416	a disability and how easily that		
417	could have had happened to		
418	them or their friends and		
419	families.		
420	Because I think that's the first		
421	exposure a lot of these trainees		
422	have to ever understanding, you		
423	know, being with somebody		
424	with a learning disability.		Exposure
425	People will only generally		
426	present to therapy with a sense		
427	of, either they have, they have		
428	very low self-esteem often.		
429	They have a sense of that they		
430	are nobody, that, erm, you		
431	know, yes, just a really negative		
432	sense of themselves because		
433	that's what's portrayed socially.		
434	Trainees are very susceptible		
435	towards picking that up because		
436	they have a lot of defence mechanisms that they need in		

437	order to kind of engage in		Client's own
438	therapy with somebody.	Trainees can	defence
439		struggle with	mechanisms
440	To a degree, erm, you know,	where the	
441	when you've had a lot of	boundaries are,	
442	exposure and experience in	so they often stop	
443	therapy, then you know where	being empathetic	
444	the boundaries are and, I think,	or may become	Boundaries
445	trainees can often struggle with	reluctant to	
446	that. So they then, sort of, you	engaging with the	
447	know, kind of stop being that	client fully	
448	empathic or, erm, maybe are	because of	
449	reluctant towards engaging with	difficulty	
450	that person really fully because	processing the	
451	of some of that pain and that's	persons pain	Reluctant
452	so difficult to process.		Unempathetic
453	I: So part of it for trainees		
454	generally, might be that the		Painful to process
455	particular client groups, that can		client's situation
456	present the challenges? Are		
457	there, I'm mean I'm taking that		
458	example of the trainee, do you		Client group can
459	feel she can learn reflexivity?		impede reflexivity
460	F1: Erm, yes, and she has had		<b>Learning</b>
461	one really interesting session	Client expressed	<b>Reflexivity</b>
462	which we listened to recently	their frustration	
463	with a client where she has	during a session.	
464	expressed her own frustration.		
465	Well, she's expressed that		
466	there is frustration around being		
467	stuck, which the trainee was		
468	unable to see that that was,		
469	there was something beyond		
470	her own frustration.		

<p>471 472 473 474 475 576 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503</p>	<p>This person had obviously just, her discourse was, this person's obviously really disabled, she doesn't move on as fast as I'd like her to and I find that frustrating. When actually, you know, trying to get her to think, "Do you think maybe this person is finding something about your interaction problematic or frustrating? Or that something about her life is really frustrating and difficult? And feeling this feeling that you're having back to her?" And, you know, maybe not so direct way, but more just flagging it up. That is there a sense of ___[0:17:26] or frustration here? Could be really helpful in loosening that for her and enabling her to talk about it.</p> <p>The trainee did that and found that really interesting, and the session was really interesting. I don't think, I think it could have been taken to a further level, which is part of the learning obviously, but it was, I think, for the first time for her that she saw that anything like that had an impact. Actually, since then, things have loosened a bit.</p>	<p>Trainee reflected this and since has achieved more in therapy.</p>	<p>Identifying issues in client therapist relationship and</p>
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504	They've been able to move on.		discussing them to
505	They've been down a sort of,		move further into
506	what the trainee would say,		therapy
507	"Achieved more in the therapy,		
508	or moved on further."		
509	I: How do you understand that		
510	perhaps some trainees learn it	Previous	
511	quicker than others?	exposure to client	
512	F1: Mm...I don't know, I think	group and	
513	it's something to do, as I said	whether they have	
514	earlier, with the person's,	personal	
515	whether the person's been	experiences	Therapists
516	exposed to working with this	similar to clients	exposure to client
517	client group. Whether the	may increase	groups
518	person has any personal	reflective learning	
519	experiences of anything the	pace	Personal
520	client is talking about. Or what		experience
521	they're presenting, or		
522	representing.		
523	I: So potentially the trainee's		
524	experience, prior to any type of		
525	training, would be important?		
526			
527	F1: Hmm, it might be not		
528	necessarily experience of		
529	working or being with somebody		
530	with a learning disability but		
531	having that experience of		
532	somebody who, or of them		
533	having an experience		
534	personally, of being, I don't		
	know, ostracised or		
	discriminated against, or, I don't		

535	know, any theme that comes up		
536	in therapy. Such as not wanting		
	to go out because you feel		
537	anxious about what people		
538	might say, or the way you look,		Shared experience
539	or...		and understanding
540			increases empathy
541	I: And so that experience that		and reflexivity
542	they would have from their own		
543	lives might allow somebody to		
544	step into somebody else's		
545	shoes easier?		
546			
547	F1: Yes.		
548			
549	I: So, I mean you mentioned		
550	around the difference between		
551	clinical and counselling trainees		
552	in your experience, would you		
	say that's because of, they're		
553	different people before they		
554	come to training? That makes		
555	them different, or the training is		
556	different?		
557		Clinical trainees	
558	F1: No, I think the big difference	don't have	
559	is actually that they don't	experience of	
560	receive personal therapy.	personal therapy	
561	Clinical trainees don't have that	that unlocks some	Personal therapy
562a	experience of personal therapy	of the ability to	
562b	that sort of, I think, unlocks	really	Experiencing
563	some of that ability to really	understanding	reflexivity in a
564	understand what it feels like to	what it feels like to	client-therapist
565	be working in a reflexive, you	be working	environment
566	know, a reflective way. Yes,	reflectivity	
567	and I actually say to all of the		

<p>568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 583 594 595 596 597</p>	<p>trainees that I work with, “I think, you know, it’s really helpful to invest a little bit of money and efforts to, into personal therapy.”</p> <p>Actually, I have the comparison of trainees from two different courses. One of them, which is the summer nights course at the University of Canterbury. They have done these reflective groups. So they have groups every week, erm, where the trainees, which are sort of almost therapeutic spaces.</p> <p>I mean it’s about ___[0:20:46] like course, but also about the trainees’ experiences. Erm, and those trainees tend to be effective. Then the trainees from the ___[0:21:00] of Psychiatry, where, erm, I know the teaching curriculum really well and they don’t invest any efforts into them. Actually developing these skills on that more, erm, I would say like a practical level, that kind of learning by doing level. They don’t get a lot of that opportunity.</p> <p>I: So from your knowledge of the courses that you train on,</p>		<p>Providing trainees with therapeutic spaces</p>
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598	the components that would		Components of training that would create higher reflexivity are personal therapy groups and experiential groups
599	create higher reflexivity are the		
600	personal therapy groups and		
602	experiential groups. So any		
603	time reflection is in action, if you		
604	like?		
	F1: Absolutely, yes.		
605			
606	I: When you're interviewing		
607	trainees for placements...?		
608			
609	F1: Oh we don't do that. They		
610	just get allocated for them.		
611	We're not involved in the		
612	interviewing process, because		
613	that's part of the, erm, general,		
614	erm...		
615			
	I:...university?		
616			
617	F1: Yes, just the ___[0:21:55]		
618	getting in touch with us.		
619			
620	I: What about when you		
621	interview trainees in your work		
622	place? How do you assess		
623	whether somebody's got a		
	higher or a lower level of		
624	reflexivity at interview stage?		
625			
626	F1: To be quite honest, we don't		
627	really do that. I don't really go		
628	and interview them. We get		
629	that allocated and they are then		
630	there. But I do notice, erm, I		
			<b>Interviewing Trainees</b>

631	tend to ask the question at the		Questions at the
632	beginning of the placement,		beginning of
633	hmm. I basically ask what they		placement
634	would be, what they would like		
635	to work on. What their		What they would
636	strengths and weaknesses are.	Trainees are often	like to work on
637		in assessment	
638	I get a sense at that point that	situations and	Asking trainees to
639	the trainees are able to,	worry how they	identify their
640	obviously what comes into it is	come across, or	strengths and
641	that they are constantly in an	what impression	weaknesses
642	assessment situation and they	they are giving.	
643	are constantly worried about	Trainees who are	
644	how they come across, or what	able to identify	
645	their, what their, good	what they would	
646	impression they are giving.	like to work on	
647		and previous	
648	But, the trainees that are able to	difficulties are	Identifying areas
649	say, "I'd really like to work on	more likely to	that need
650	this, I found this quite difficult	develop	improvement
651	previously" in terms of their own	reflectivity.	allows reflectivity
652	school development. Those are		
653	the trainees, I think, that are		
654	more easy to, well, more easily		
655	pick up those kind of skills and		
656	are able to reflect and think		
657	about them more. Whereas the		
658	trainees that aren't able to think		
659	about that and say,		
660	"Everything's fine", which		
661	happens a lot. That people say,		
662	"No, no it's fine I'm developing		
663	my skills and consider		
664	everything that, you know, I'm		
	getting there." and have no		
	sense of what their strength and		

665	weaknesses are, and be, they		
666	would still like to be better, but		
667	aren't able to communicate that.		
668	Those are the ones that		
669	struggle also, often a bit more,		
670	when they ____ [0:23:44].		
671			
672	I: It sounds like, I mean you		
673	mentioned the word anxiety		
674	about training and about the		
675	continual process of		
676	assessment. It sounds like		
677	those trainees were perhaps		
678	able to overcome their anxiety,		Overcome or
679	or to manage it, and be able to		manage their
680	communicate back to you or to		anxiety
681	attain that, are the ones that		
682	perhaps get more out of the		
683	training and be able to be more		
684	effective?		
685	F1: I think so. I think, from my	Trainees able to	
686	perspective certainly, I think,	overcome or	
687	you know, we are educating	manage their	
688	people on the need to be able	anxiety, and able	
689	to sit, erm, with a lot of	to communicate	
690	difficulties and pain and work	that to their	Learning to sit and
691	with people who are in difficult	trainers, are the	actively listen to
692	situations. I think that's,	ones who get	what the client is
693	elements of that can sometimes	more from the	saying, rather than
694	be lost in clinical training. That	training and are	thinking about the
695	you've, that you are able to sit	able to be more	treatment plan
696	with this and able to really hear	effective.	
697	what somebody is talking about,		
698	rather than immediately		
699	constantly thinking about,		

697	"What's her treatment plan, how		
698	do you best discharge?", or get		
699	to discharge essentially.		
700			
701	I: Do you think the programmes		
702	attract different types of		
	individuals?		
703			
704	F1: The clinical training		
705	programmes? Erm. I think so		
706	actually.		
707			
708	I mean I certainly never applied		
709	for clinical training because I		
710	wanted to become a counselling		
	psychologist because I thought		
711	counselling psychology would		
712	teach me to become, how to		
713	become a really good therapist		
	and that's what I wanted to be		
714	at that time.		
715			
716	I see that a little bit differently		
717	now, but I still think that it		
718	definitely attracts different types		
719	of people. I also think it attracts		
720	people that have failed to get		
721	into clinical training. I know		
722	various people who haven't		
723	been able to get into clinical		
724	training and have then tried to		
	get into counselling. Yes.		
725			
726	I: So if you were going to design		
727	a course, or design a module		
728	that would encourage reflexivity		

Counselling  
psychology  
attracts those who  
failed to get into  
clinical training

729	on a training programme		<b>Designing a course on reflectivity</b>
730	whether clinical or counselling,		
731	what would you point to as the elements that you'd want to		
732	include on it?		
733	F1: Well I would have, erm, a reflective group, or like an		
734	experiential group, hmm.		
735		Reflective or experiential group	
736	I would use and look up the core sort of counselling skills		
737	and work on understanding the concept of those. I would use		
738	video recordings and tapes to try and look at individual		
739	try and look at individual		
740	___[0:26:29] both my own,		
741	whether it's published, but also		
742	the trainees bring in their own examples. For those who listen		
743	to and talk about.		
744		Video recordings and tapes	
745	I think it's, as I said, I think it's not something that we learn by		
746	doing. I don't think it's so much that. I couldn't certainly tell you		
747	a particular text, a particular book that I would read. Yes,		
748	___[0:26:58] but not...		
749			
750			
751		Learn by doing	
752			
753	I: ...but not the day only...		
754	F1: ...it's quite small, yes.		
755			
756			
757			

758	I: So it's in the application of the		
759	theory or the experience of		
760	doing it?		
761			Application of
762	F1: I think so.		theory or
763			experience of
764	I: What about for you? I mean		doing it
765	you mentioned kind of personal		
766	therapy when you were in		
767	training. What about since that		
768	point? Do you feel that your		
769	reflexivity has, you know,	Start personal	
770	stayed the same level, has	therapy to	
771	developed?	increase	<b>Development of</b>
772	F1: I have certainly thought that	reflectivity.	<b>Reflexivity</b>
773	it would be really helpful, and I		
774	have been meaning to do this		
775	for years and years, to start		
776	again having a bit of personal		
777	therapy. I think that with the		
778	pressure's we're all under		
779	working for the NHS,		
780	sometimes those skills can be,		
781	can be a bit lost.		
782	I certainly have to say that, erm,		
783	at my, in my initial sessions with		
784	people, we are very much		
785	asked to assess whether they		
786	need a specialist mental health		
787	service. People with learning		
788	disabilities, because it's the		
789	service I work for, or whether		
	actually they could access a		
	more mainstream service. So,		

790	I'm A, trying to assess that and		
791	B, I want to not, I want to try		
792	and prevent, in some ways, that		
793	level of relationship at session 1		
794	and 2, because I want to see		
795	whether I can potentially refer		Reflexivity is
796	that person on to somebody		sometimes
797	who would be able to do that		restricted by the
798	piece of work with them.		service
799	So, in the beginning, I mean of		
800	course I use reflexivity and I use		
802	my full counselling skills. I also		
803	think I do a lot of, erm, I could		
804	do a lot more work with that if I		
805	didn't have those restrictions,		
806	erm, imposed on me by the		
807	service I work for.		
808	I: In some way, there's quite a,		
809	a luckiness to trainees if you		
810	like, that they have that time		
811	and that space to be able to		
812	develop it. Whereas perhaps		
813	the context that you work in		
814	later on might, not necessarily		
815	restrict it, but restrict, err, you		
816	being able to continue to work		
817	on it.		
818	F1: Yes.		<b>Theoretical</b>
819	I: Do you feel that there's, I		<b>development</b>
820	mean does it, could it keep		
821	developing theoretically? Could		
	you reach higher and higher		

822	levels of reflexivity, is there a	Some clients have	
823	point that someone would reach		
824	and...?	a higher impact	
825	F1: No I don't think so, I think	on you	Different levels of
826	people, erm, I think there are		reflexivity with
827	just certain people you have		different clients
828	might higher reflexivity with		
829	because they have a, they have		
830	a much higher impact in some		
831	ways on your, and stay with you		
832	in a different way to others.		
833			
834	Because of your personal		
835	experiences or with a similar		Therapist's
836	topic, or because of their, of one		personal
837	person's particular story, or,		experience or
838	erm, so that give you levels, you		client's particular
839	have a certain level of ability to		story – influences
840	be reflective at the ___[0:29:42]		the level of ability
841	skills.		to be reflective
842	I: But that's dependant,		
843	perhaps, on the types of client		Reflexivity can be
844	and the issues that they bring?		dependent on the
845			client
846	F1: Yes.		
847			
848	I: Could you take an		
849	anonymised example of a		
850	trainee with a high level of		
851	reflexivity and describe how you		
852	think they got to this point?		
853	F1: Hmm...[pause]...I think, yes		<b>Trainee with High</b>
854	there was a trainee that I had		<b>Reflexivity</b>



855	who, erm, was working with		
856	somebody with cerebral palsy		
857	who was, erm...[pause]...I don't		
858	know, I think she was,		
859	erm...[pause]... He was very		
860	treatment resistant, this client		
861	and, erm, and in a really		
	desperate and social situation.		
862	Erm, so living in real squalor		
863	and poverty, being quite abused		
864	and financially exploited by		
865	people around him.		
866			
867	She worked very hard trying to,		
868	erm, engage him in the therapy,		
869	erm, and I think was really		Empathetic
870	interested and keen to think		Seeing the world
871	about, you know, to look at the		from the client's
872	world from his eyes. You know,		eyes
873	to try and understand how he		Trying to
874	was experiencing the world		understand how
875	around him and was therefore		the client was
876	also able to reflect that back to		experiencing the
877	him and work with him and		world around them
	engage him. Because he		Enabled the
878	understood, he realised that		therapist to reflect
879	she, you know, she was really		that back to the
880	genuinely keen to help him, and		client and engage
881	interested in him.		them
882			
883	Erm, and I think, erm,		
884	she...[pause]... I think she		
885	connected to some of his		
886	background. I mean she'd just		
887	had a bereavement, she, you		
888	know, and then, and that fitted		

889	with his experience of being,		
890	sort of, erm, alone and		
891	unsupported and, erm, and		
892	bereft and, yes, upset.		
893	So it was somehow her		Personal
894	personal experience, but I also		experience
895	think that something in this		
896	client's presentation was quite,		
897	erm, quite a bit more drastic		
898	and he was very, erm, people		
899	with cerebral palsy express a lot		
900	of their emotions towards		
901	___[0:32:18] reactions. Certain,		
902	you know, kind of spasming or,		
903	erm, having, having a certain		
904	level of reacting that's quite,		
905	erm, that's quite profound, and		
906	when you've never seen that		
907	before it can be, can be quite		
908	moving.		
909	I think, erm, having a session		
910	with somebody's who's		
911	generally very upset and will sit		
912	there and cry and have these,		
913	sort of almost physical		
914	explosions, ___[0:32:49] and I		
915	met this person as well, looked		
916	very... It was sort of a, it was		
917	almost like a physical		
918	embodiment of the emotion, of		
919	the pain. I think that had a huge		
920	impact on this trainee.		

921	But I think she was just,		Interest in client
922	because of her personal		Keeness to really
923	experiences, erm, her interest in		think about the
924	this person and her keenness to		client
925	really think about him		Reflect client's
	___[0:33:13] meant, yes and		story
926	use of it in that way, to reflect		Client-centred
927	his story and put her own		approach
928	feelings towards him. Separate		
929	what was, she was bringing,		
930	and what he was projecting, you		
931	know those, that was an interest		
932	that she, she had.		
933			
934	I: I wonder how you see any of		
935	the theories fitting in?		
936			Demonstrating
937	F1: I think they are all part, the		holistic principles
938	realistic principles are part of		
939	any type of therapy that you do		
940	though. So, I think it doesn't		
	really matter if you work CBT,		
941	psycho dynamically, you have,		
942	the crux of it is that you are able		
943	to show these holistic principles.		
944	I think that, that would be, that,		
945	that's at the core of it all.		
946			
947	I: I was just wondering about,		
948	the trainee that you gave an		
949	example of, with the chap with		
950	cerebral palsy, she was able to		
951	still be with him despite having		
952	an emotional reaction of her		
953	own. Emotional reaction was		
	helpful for her, because		

954	presumably she managed it in a		<b>Management of personal reactions</b>
955	particular way. I'm wondering		
956	how people learn to manage		Through personal
957	emotional reactions in particular		therapy and
958	ways?		supervision
959	F1: Well I suppose through		
960	therapy, through, yes well		
961	through their own therapy but		
962	also through the supervision,		
963	Erm, and as I said, you know, if	"What was it	
964	you use tapes or if you, erm,	about me that	
965	ask the trainee to report	made me respond	
966	___[0:34:37], you know parts of	like that"	
967	their therapy and you think		
968	about how they responded and		
969	what was...and you get them to		
970	start thinking about, "What was		
971	it about me that made me		
972	respond like that?" Not just to		Transference
973	pick up from this person.		
974			
975	I use the principles of transfer		
976	and ___[0:23:53] transfer		
977	there's quite a lot in supervision		
978	and sort of think about it. While		
979	I don't ask the trainees to work		
980	in that way, and I think working		
981	in CBT is what they're learning		
982	and doing and that's okay, it		
983	would be to develop it. I think	Consider reflexive	
984	the ___[0:35:06] principles can	strategy	
985	be really helpful in trying to	throughout the	
986	explore some of these, erm,	therapies in terms	
987	underlying mechanisms.	of how you invent	

985	I: So you kind of take more	better skills within	Reflexive strategy throughout therapy
986	perhaps, or you consider	a different therapy	
987	reflexive strategy throughout the		
988	therapies in terms of how you		
989	invent better skills within a		
990	different therapy to		
991	___[0:35:21].		
992			
993	F1: Yes. Although there are		
994	skills they would use to then		
995	work in the therapy with the		
	person, would be within that		
996	model, so, you know I wouldn't		
	ask them to do, erm, something		
997	psycho dynamic and then do		
998	CBT intervention in order to get		
	the person to realise, yes, a		
999	certain trend that you were		
	potentially uncovering. Or a		
1000	certain way of relating that we		
1001	were uncovering. Then		
1002	translate that into the model and		
1003	think about how you would tailor		
1004	your intervention.		
1005			Learning different
1006	I: So within the room, in terms		skills
1007	of ___[0:35:53] it would be		
1008	about them learning different		
1009	skills with you, that they can		
1010	then employ outside in a		
1011	particular...?		
1012			
	F1: Yes.		
1013			
1014	I: That's so interesting. What		
1015	do you believe about the		

1016	particular client group you work		
1017	in?		Thinking reflexivity
1018			
1019	F1: I think reflexivity or, you		Emotionally
1020	know, having being emotionally		flexible
	more flexible in some ways.		
1021	You know, some people might		
1022	___[0:36:19] necessity, I think is		Looking at things
1023	the outcome of any therapy that		from different
1024	somebody, if they		perspectives
1025	___[0:00:36:24] any shifts there.		
1026	Look at things from different		
1027	angles. So, what, what was the		
1028	question again?		
1029	I: I was asking about flexibility.		
1030		Anybody can	
1031	F1: That they can, that they can	achieve a way of	
1032	change? Or that they...?	maturing through	Reflexivity can be
1033		therapy that	enhanced
1034	I: Yes.	leaves them to	
1035		become more	Higher level of
1036	F1: Yes, I think that is definitely	emotionally aware	emotional
1037	possible. I think anybody can	and overcome	functioning
1038	achieve a higher level of	issues they were	
1039	emotional functioning in some	originally	Maturing through
1040	ways, you know. Anybody can	presented with	therapy
1041	achieve a way of, erm, maturing	because they	
	through therapy that leaves	have learnt a	Emotional
1042	them to become more	certain level of	awareness
1043	emotionally aware and	flexibility.	
1044	overcome damage or, erm,		
1045	accept or, erm, issues that they		
1046	were originally presented with,		
	because they have learnt a		
1047	certain level of flexibility.		

1048			
1049	I think, erm, I think, I think, you		
	know, clients, erm, the clients I		
1050	work with won't necessarily		
1051	have the ___[0:37:20] capacity		
1052	to always very flexibly think		
1053	about the world around them, or		
1054	understand certain messages or		
1055	certain ways of relating.		
1056			
1057	Like, from an emotional point of		Emotional
	view, they can change the way		intelligence
1058	they are interpreting what's		
1059	going on around them, that		
1060	emotional component. That,		
1061	you know, emotional		Difference
1062	intelligence in some ways, can		between cognitive
1063	develop through therapy.		and emotional
1064			intelligence
	Yes, I definitely believe that. I		
1065	think there's a difference		People with
1066	between, erm, yes cognitive		disabilities can be
1067	and emotional intelligence in		emotionally astute
1068	some ways. I think people with		
1069	___[0:37:52] disabilities can be		Identify underlying
1070	incredibly emotionally astute.		emotional
1071	More so often than other		messages more
1072	people. Erm, yes, and they pick		easily than
1073	up on underlying emotional		cognitive
1074	messages more easily than on		messages
1075	the cognitive messages being		
1076	presented or the eventual		
1077	factual message therein.		
1078			
1079	So I think they wouldn't, erm,		
	certain bits of information they'd		

1080	block out but therefore others		
1081	are, they're much more		
1082	receptible towards.		
1083	I: That's all the questions I		
1084	have. Is there anything you'd		
1085	like to add?		
1086			
1087	F1: I've always got the		
1088	___[0:37:29] on it, where I will		
1089	ask trainees to take all the		
1090	learning or all the things that		
1091	I've spoken about. Then think		
1092	about a case, or have a		Personal
1093	conversation or discussion		experience and
	about some points that...		personal therapy
1094	Yes, I think, I think that it has a		
1095	lot to do with personal		
1096	experience, it's personal		
1097	therapy, erm, and the ability to		
	kind of really experience it in a		
1098	new light, before you can give		Personal
1099	someone else.		experience can
1100			impact
1101	I think, yes, you can, this, these		engagement in
1102	things have a huge impact on		therapy
1103	somebody's engagement in	Ability to	
1104	therapy. So how much	experience things	Taking
1105	responsibility somebody takes	in a new light	responsibility for
	for their own change, or their	before you can	own change or
1106	own movement through	give to someone	movement through
1107	therapy. They're absolutely	else	therapy
1108	linked and I'm sure of it. Those		
1109	interventions, where the, the		
1110	kind experiences, the therapist		



1111	is really containing and ___[0:39:28] and, but I would		
1112	pass, you know, say, that's		
1113	___[0:39:32].		
1114			
1115	Those therapies, I'm sure, are		
1116	more, erm, are often, much		
1117	better outcomes or are more		
1118	effective.		
1119			
1120	Erm, in some ways we need to		
1121	show that in order for us not to		
1122	be in a position constantly		
	where we're having to prove		
1123	that a certain length of		
1124	treatment is necessary, or that		
1125	treatment is necessary at all,		
1126	where services are being		
1127	encouraged and financially		
1128	supported to have staff and...		
1129			
1130	I: ...exactly...		
1131			
1132	F1:...you know because I think		
1133	there's this whole thing that		
1134	proving that being in a therapy		
1135	is better than not, you know?		
1136			
1137	I mean I do, erm, also observe		
1138	their initial sessions, like, initial		
1139	assessment session or, when		
1140	they do ___[0:40:17]	Important you	
1141	assessment as well, where you	reflect with	
	also need those skills, you	somebody and	
1142	know, to engage someone. So	trainees really	
1143	I see it also face to face.	value this	

1144			
1145	Yes, it is so important that you		
1146	reflect with somebody and I		
1147	always feel that trainees really	Second pair of	
1148	value that. They really value	eyes	
1149	when you've sat with them and		
1150	when, gone through you know?		
	You've said this there, or,		
	___[0:40:42] you meant to say it		
	like that and clients will really		
	react positively when you, you		
	know... There's a second pair	Don't often get	
	of eyes that says actually those	client feedback	
	things that nobody says, "This is		
	how you do that", or, "This is the		
	right thing to do", seem very		
	helpful to someone else too,		
	you know?		
	So you often don't get that		
	feedback from your client. But I		
	think with this trainee that		
	struggled so much with this skill,		
	that was also one of the		
	struggles, erm, in my		
	supervision wither her, to be		
	honest. I think maybe I could		
	have spent a bit more time, you		
	know, trying to think about ways		
	in which she could develop this		
	skill or feed that back to her.		
	There was, you know, there has		
	been a lot of pressure on the		
	service at the moment, so I		
	haven't had as much time with		

	<p>her as I hoped. I think that has a big impact, erm, on somebody's ability to develop that.</p> <p>So I definitely take a little bit of ownership on this, erm, because I think it feeds down from level to level, so, from my supervision to me, from my supervision to my trainee, and from the trainee to the client, you know, it's this, sort of hierarchy model in some way.</p>		
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**Appendix AC: Interview H: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Exploratory Comments	Original Transcript	Emergent Themes
1 2		I: So how do you understand reflexivity?	
3 4 5 6 7 8 9 10 11a 11b	No clear terms, how can there be a real understanding without a definition?	P1: Erm, (pause) well, to begin with the term isn't, I feel some people think it's interchangeable with reflectivity, so I am assuming you mean the process of looking at one's self and understanding one's own internal processes that occur in psychology in reaction to work that we do.	
12 13 14 15 16 17	In reaction: reflexivity occurs in response to something Clinical work and other work too.	So that could be with colleagues, it could be with our patients, it could be, yeah, it's a reaction to. And then it's our capability to understand that reaction. So we	R is capability to understand own feelings
18 19	Reflexivity is in response to colleagues/patients	need to be cognisant of, "Oh I am distressed here." Or, "I am bored here."	
20 21	Reflexivity is a reaction to. Reaction to what? Reflexivity is the capability to understand the reaction thus	I: How do you understand that capacity?	
22 23 24 25 26	reflexivity is about understanding. Cognisant = cognitive awareness Yet thinking about emotions. Is it only negative emotions?	P1: Erm, (pause) I think what I understand is that some, some people have more capacity for	

27		that than others. Do you mean capability or capacity?	
28			
29		I: You used words like capacity or capability and I wondered what you meant by that?	Capacity for r is on a spectrum
30			
31			
31		P1: I mean that there is a spectrum of capability or capacity to be reflective. It's really interesting, as a concept for me, because it's one that we're considering teaching in our team.	Future teaching on the spectrum of r
33			
34	What is capacity?		
35	What is the difference for him about capability or capacity?		
36			
37			
38			R as Interchangeable terms
39		One of my colleagues said to me, "Well you know the thing with reflexivity or reflectivity is that you can get in half a minute or you can practice for 30 years and not have any reflectivity. So you're – so some people you can teach and their capacity can be improved. But other people, I think they just don't get it and maybe that's because they're more concerned about what it might say about them as a clinician. So they're worried about owning maybe negative emotions or scared about what that would mean to their supervisor, if they said something that was critical about a patient, or a reaction to a patient.	Capacity for r is on a spectrum
40			
41			
42			
43			
44			
45			
46	Used as the same term here.		Worried about others judging their negative emotions
47	Spectrum of capacity/capability		
48			
49			
50	Considering teaching, not teaching at the moment. How will they teach it?		
51	Teach the concept or the process?		
52			
53			Worried about superior others judging their negative emotions
54			
55			
56			
57			
58	Colleagues discuss reflexivity. Meaning of		Comfortable with negative emotions

59	this- is it important for them.		
60		Whereas other people who are	
61	The difference in terms	much more comfortable have	
62	used interchangeably. Is	that capacity to say, "Do you	Not worried about
63	this the participant of the	know what, this was really boring	negative emotions
64	colleague? What is the	me and I am interested in why I	
65	difference for him?	became bored." And they don't	
66	Either get it or not. Not	get worried about the fact that	Work with negative
67	learnable for some.	they were bored. They become	emotions
68	Teaching r is possible	introspective about what came	
69	but is this only when the	up for them and they're willing to	
70	capacity is present? i.e.	work with that and to try and	Emotions about
71	improved.	understand why did that come	therapist
72	Other people don't get r.	up?	
73			Emotions unique
74	One explanation for not	"Does that come up with all your	
75	getting it is that they are	patients, is it really about you?"	Related to
76	worried about being a	Or did they come up because of	transference and
77	bad clinician.	something unique between you	counter-
78	Worried about feeling	and the patient?	transference
79	negative emotions or	So it kind of borders on	
80	saying they experience	transference and counter-	
81	them.	transference issues.	
82	Worried about their		
83	feelings would mean to	I: Can you describe a bit more	
84	the supervisor	about what you mean by	
85	Supervisor.	counter-transference and	
86		transference issues in	
87	So they experience a	reflexivity?	Use personality
88	response, i.e. reflexivity,		disorders as
89	but they aren't	P1: Well I think if you are, erm,	example of
90	willing/able to share it?	(pause) if I give a specific	negative emotions
	Fear of	example of working with people	in therapist
	judgement/criticism	with personality disorders. They	
		generate an emotion within you.	
		And you have got to be able to	

91	Process is knowing emotional response, and wanting to know why by sharing with supervisor.	distinguish between what's coming up there's something for you in it, saying, "Right, so this person is irritating me because they are trying to manipulate me into doing something, like give lots of reassurance about something, and I've done this many times."	Distinguish own emotions from another
92			
93			
94	Not understanding the why of experiencing emotion is the lack of R = process of becoming introspective about the emotion and understanding why		
95			
96			
97			
98			
99			
100		So my irritation is a counter-transference because they're irritated they can't get what they wish, and I am irritated because I'm not going to go down that dynamic of getting sucked into giving them that.	
101			
102	R process continued: Then ask about similar emotions with different patients or if unique.		
103			
104			
105			
106			
107		Whereas at other times it comes from within. So actually this is my own irritation, that I've got things going on in my life from, that's happened to me during that day. And yes the patient might be making a demand of me, but my irritation isn't coming from them. So it's my own process that I am struggling with, that I am projecting onto them, perhaps.	Distinguish own emotions from others
108	Transference/counter transference is a somewhat similar process		
109	Different models explain r.		
110			
111			
112			
113			Therapist recognise struggle with process of emotions
114			
115			
116			
117			
118			
119		I: How did you learn or acquire reflexivity?	
120			
121		P1: Erm, I think I placed a lot of emphasis on doing those	
122			

123		process reports. I think that they	Process reports
124	Uses an example of	shape you into wondering about	allow exploration of
125	clinical work. Is it easier	what occurs for you. And	self's emotions
126	to see in this. More	because the feedback you get	Trainer feedback
127	extreme end of	from them is about how, how	on accuracy of
128	spectrum.	accurate your reflexivity is. And	reflexivity
129	Generalisation of	as a listener, these days I	Listener hears
130	experience with pd	realize, you can tell when people	honest account in
131	clients.	aren't being honest about what's	process report
132	Process: Experience	happening in a session.	Trainer develops
133	emotion, identify		ability to hear
134	emotion, identify why	So the process reports make	honesty
135	feel emotion, notice	you consider what's taking	Process report as
136	pattern.	place. Erm, and yeah it's a skill	honest account of
137	This seems same	to be able to name what's taking	session
138	process for r.	place. I think it's a skill that can	Teachable skill to
139		be taught though. So you can	name process
140		tell people, "Do you know what, I	Trainer feedback
141		don't really think you're kind of	on accuracy of
142		getting what's going on here. I	reflexivity
143		hear something very different."	
144	Countertransference is	So I think process reports are a	Process reports
145	experiencing the	big tool, a big mechanism for us	important
146	emotion so it is part of r.	to learn. But I don't think that	mechanism for
147		they're the end point, I don't	learning r
148		think that they're the only thing	
149		that we use to become reflective.	Other mechanisms
150		I: What types of training did you	for learning r
151		have, and what components in	
152	Meaning that feeling is	them were helpful for your	
153	generated by self	reflexivity?	
154	situation, not client.	P1: Erm, well I remember	
		having a psychotherapeutic	



155		(pause) placement, and (pause)	Psychotherapist
156		the erm, (pause) the consultant	supervisors tap into
157		psychotherapist in the post	transference and
158		resigned and a new one started.	counter-
159		And they had very different	transference
160	Identify emotion and	styles about tapping into	
	distinguish it from the	transference and counter-	Transference and
161	self or the patient. Is he	transference issues.	counter-
162	saying this is r or this is		transference
163	transference?		connected to r
164	R is recognizing if it's	So one of them had very	
165	about you or the client.	detailed conversations with me,	
166	CT and T are part of the	just talked to me about what	Supervisor focus
167	process of r.	came up for me in the session.	on therapists
168	Projecting is like	Barely spoke about the patient.	emotions
169	projection- is r about	And yet, he would make	
170	piecing together	predictions about what	
171	psychoanalysis/dynamic	happened, what was happening	
172	processes.	for the patient. I'd walk out the	
173	Is he psychodynamic?	session thinking, "How on earth	
174	Does he see r through	does he know what's going on	Process of
175	his own framework?	for the patient, you haven't	supervision unclear
176	Should have unpacked	asked any questions about the	
177	more about pa/pd	patient."	
178	concepts in relation to r.	It's all coming from me. He's	
179	Process reports helped	asking about what I felt like. It	
180	him develop r.	bordered on therapy but it wasn't	
181	They work by 'shaping'	therapy. He didn't name it as	Supervision
182	someone, i.e.	therapy.	bordered on
183	changing/altering what		therapy
184	already exists. Thus r	Then this second	
185	must be there already?	psychotherapist, who scared the	
186	Process of report is to	crap out of me really, because	Scared of
187	check accuracy of	he was very different. He	supervisor
188	interpreting emotions	wanted me to write down every	Supervisors vary
	and the reasons why.	comment in the session.	Supervision varies

189	Listener: Importance of real voice of trainee and client to assess	He didn't want a recording, he	
190		didn't want me to come in with	
191	These day = couldn't always identify honesty.	notes about content or even	
192	Why/How the shift? How	notes about process. He	
193	does he judge honesty? i.e. r?	wanted, you know, a verbatim,	
194	Is honesty about the	hand written representation of	
195	trainee deceiving the trainer or not knowing	what happened in the session. It	
196	and thus unknowingly being dishonest.	was laborious and I didn't really	
197	Reports = consider what is taking place which is a teachable skill	like it. But it certainly made me	Supervision helps understand therapy process
198		think about what was happening in the session.	
199			
200		So that came towards, I was	
201		probably in the midpoint of my	
202		training. Because I left there	
203		and went into a cognitive	
204	Tell = Superior knowledge of trainer.	behavioural placement in a	Cognitive supervisor not
205	Why? How do you know you are right?	secondary healthcare centre.	interested in therapist experience
206		And, (pause) there my supervisor was not interested at all in what my experience was.	
207			
208	What is the difference?	He was more interested in process, theory, models of formulation, erm; can I draw out a formulation? Do I know my modules and theories? He was...	Cognitive supervisor interested in theory
209			
210			
211			
212	Process reports act as a mechanism for him and for his trainees.		
213			
214			
215	Other mechanisms exist. Other tools exist.	So the contrast between the two made me think, "Actually I like having someone who wants to know about my experience, about my anxiety about, you know, what's going to happen in this session, or I don't know what's going to happen next."	Prefer supervisor focus on therapist's emotions.
216			
217			
218			
219			
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222			

223		And knowing there was a gap, I	
224		had other supervisors, you know	
225		you have multiple placements at	
226		the same time. And I valued	
227		those conversations more and	Compare
228		more, because of other	placements
229		placements still giving me	Compare
230		access to that.	supervisors.
231		So I think yeah, the placements	
232		in conjunction with kind of	Placements vital as
233		process reports at university,	mechanism to
234		were really vital. I mean it was a	learn r
235		long time ago, (pause) but that	
236	Different supervisors with different styles	combination works well.	Combination of
237	Both focus on CT and T. Intrinsically relating these to r.	I: I mean the commonality	placement and
238		between those two is the	process report vital
239		experiential component if you	
240	One supervisor asked about him only, not speaking about patient.	like, the reflection in action?	
241		P1: Yeah, (pause) yeah.	
242		I: Is that where you feel you	
243		principally learnt how to do it?	
244		P1: When you mention	
245		experiential, it reminds me of an	
246		activity that (pause) that there	
247		was a family therapist that came	
248		into ... University, and I forget	
249		his name. But he did an	
250		experiential workshop with us.	
251		And it was so powerful that, and	
252		I remember it from time to time, about the kind of way, because	

253	Not understand how or if	he separated out the men in the	Powerful
254	he understood the	room from the female students.	experiential
255	patient.		workshop
256		The men in the room were like in	
257		a goldfish bowl. We were in a	
258		little circle in the middle of the	
259		room. There were only about six	
260		of us. So he joined in.	
261		I wish I could remember his	
262	Supervision style similar	name. He became one of that	
263	to therapy.	group. I mean there was	
264		virtually no structure; it was just	
265		a conversation about how things	Wishes remembers
266		were and how the course was	trainers name.
267		going. But we were being	
268		observed by 35, 40 other	
269		students and some of the men in	Conversation
270	Scared by other	the room really cracked up and	amongst trainees
271	supervisor. Does scared	couldn't stand it. There was no	about training was
272	help or not help training?	structure, there was no	powerful
273		organization. It's just, all this	
274		dynamics kind of came out.	No structure to
275			conversation
276		And there was, like people got	Lack of structure
277		up and tried to walk out of the	allowed emotions
278		room and break the outer circle.	to come out
279		It was really, really intensely	
280		provocative, without it being set	
281		up to be.	
282		He just got us talking about it	
283		and he had the reflecting cycle	
284		from the room around. And he	
285	Not like process.	had us talking back to the	Trainer initiated
	Worked to help him	reflective cycle. I was thinking,	conversation on
	understand the session.	that was another pivotal moment	reflecting cycle

286		in the university in terms of	
287	Knowing what was	telling me about the importance	
288	happening in session is	of knowing what comes up for	Pivotal experience
289	r. How does one know?	you.	at university of
290			knowing self's
291		Because some people just didn't	emotions.
292		get it. You know, I know one	
293	Is it important what	guy just didn't get the idea of,	
294	components you do at	"We're going to talk about this	
295	different parts of	experience." He wanted to rant	
296	training? Developmental	and rave, and he couldn't detach	
297	model.	himself from those intense	
298		emotions. He just didn't have it	Importance of
299		in his toolbox.	detaching from
300		I: And the inability for him to	self's negative
301	Different supervisor not	detach from his emotions, do	emotions.
302	interested in his	you wonder why? Do you have	Importance of
303	experience.	an understanding about why that	talking about self's
304	Relating techniques of	might be?	negative emotions
305	supervision to models of		
306	therapy.	P1: Erm, (pause) well I guess a	
307		basic hunch might be that	
308		(pause) that I guess I have a	
309		couple of hunches. One is that	
310		some people, although they	
311	Why pause? Not want to	work in mental health, they find	
312	be negative	the experience of emotion	
313		themselves very difficult. So it's	
314	Three?	easier to work with other	Experience of
315	He likes supervisor who	people's problems than to	emotion difficulty
316	asks about him and likes	address what's going on for	for some
317	to know what is	themselves.	Easier to focus on
318	happening in session.		others emotions
	Does he like this as he	Other people I think are more	than own
	learnt from it/learnt r?	(pause) erm, they have a kind of	
	Is liking important?		

319		seniority. So because I am the	
320		clinician, I am not going to tell	Attitude of seniority
321		you about my experience. They	restricts r.
322		become quite aloof. So I think	
323		that kind of detachment from the	
324		process of being able to be	Detachment from r
325		reflective is a shield really, for	can be a defense
326	Are multiple placements		mechanism.
327	helpful? At the same	I: Do you feel you came into	
328	time?	training with a capacity for	
329		reflexivity?	
330		P1: I was thinking yesterday,	
331		(pause), like I come from a	
332		family of four boys, four sons, no	
333		sisters at all. And I was thinking,	
334		(pause) I remember	
335		conversations about me being	
336	Placements and Process	too emotional, as a person. I	
337	Reports are vital.	think that's probably why I	
338		became a psychologist.	
339		Because I am quite comfortable	
340		with a range of emotions. You	
341		know, I think although it's	
342	Good combination for	disastrous for you, when feel	Comfortable with a
343	him to develop r.	very depressed and very	range of emotions
344		anxious and agitated. But I'm	
345		not in those states, even though	
346		they might be transitory states, I	
347		appreciate it's amazing that you	
348		can get into such an emotional	
349	Leading by me.	state about something.	
350			Amazing intensity
351		So crying over the birth of my	of negative
		daughter. I love the fact that that	emotions

352		can be that powerful, that that	Able to observe
353		can throw me. But equally I can	self having intense
354	Agreed yet pause. Not allow full reflection	appreciate when a relationship	emotions
355		breaks up and I feel gutted and	Love powerful
356		pissed off, that's amazing also,	negative emotions
357		that you know, that kind of	Love effect of
358		separation can make you, it can	powerful negative
		floor you and it just takes away	emotions
359		everything from your life. And I	Recognise own
360	Leading. Hope he is	am someone who likes an	struggle
361	reflective about leading	underdog, so I think I do tend to	
362	and follows himself.	support people who struggle with	
363		emotion.	Own struggle
364	Family therapist- more		means able to help
365	models. Is it important to	So I have always felt like it's a	struggle of others.
366	be exposed to different	skill to be able to just, to be able	
367	models/different	to name it, and sit with it and	
368	supervisors/different	mess with it. Even though I	
369	therapist?	have not always been able to do	Skill to name
370	Powerful experiential	it myself. But I think it's (pause)	emotion. Skill to sit
371	workshop	a crucial component of mental	with emotion. Skill
372		health, and that's what we teach	to mess with it.
373		a lot of our patients, about	
		mentalisation or mindfulness or	
374	Men are men. Women	emotion regulation. These are	Mentalisation is a
375	are females. Why	all techniques about, I think,	technique for r
376	separate based on	reflectivity. Reflexivity, I keep	Mindfulness is a
377	gender?	saying the word wrong.	technique for r
378		(Laughter)	Emotional
			regulations is a
379	Goldfish/Little/Only: feels	I: You said over emotional as a	technique for r
380	disempowered?	person, does that mean you feel	Correct terms for r
381		that emotions are (pause) part of	
382		personality or part of the skills	
383		you learn in your environment?	
384			

385		P1: (pause) I said that I think my	
386		family said I was over emotional.	
387		So, I am not sure I think there's	
388a	No structure	such a thing as over emotion. I	
388b		think it's about emotion	
389	Experiential was a	regulation, when there's dis-	
390	conversation about the	regulation. So, erm, (pause) I	
391	course whilst being	think some personalities just	Emotional
392	observed	don't have a language for	regulation when
393		emotion.	disregulated is r
394			Some personalities
395		Like I said, some characters	do not have a
396		can't tap into that and can't	language for
397	Inference is cracked up	access it. In one of the	emotions
398	as no structure:	personality groups we run,	
399	Meaning?	there's a, in DBT, in the emotion	
400		regulation module, you talk	
401		about what is emotion? In the	Individuals with
402	Dynamics came out in	mind over mood book, there's a	personality
403	group.	whole chapter at the back on	disorders can't
404		what's the difference between	access emotional
405		emotions and thoughts?	language
406		It kind of strikes me that it's	
407		amazing that there are people	
408		who really don't get what is an	
409	Not meant to	emotion, what is a term for an	
410	provocative but group	emotion, and that you can kind	
411	experienced it as such.	of teach that.	
412		You can get into like really	
413		heated debates, in the DBT	
414	Therapist encouraged	groups, people get really pissed	
415	discussion on it	off when you say these are	Some people not
417	Reflecting cycle:	emotions. "No they're not,	understand
418	Meaning outside circle	they're not emotions they're	emotions
419	and inside circle spoke	something else." And I'm like,	
	back to each other.		



420	Pivotal experience for him as showed importance of knowing emotions.	“Really, they seem so basic.”	Trainer can	
421		When I say love or hate or anger	sometimes teach	
422		or anxiety. What’s contentious	emotions	
423		about them? And I am	Not recognize they	
424		fascinated that some people,	are emotions	
425		some patients especially, seem		
426		to get (pause) really vexed by	Naming emotions	
427		that.	seems basic for	
428			trainer	
429		Important to know why emotions came up. Why did some people not ‘get it’ in terms of not like talking about an experience.	I: In your view, I suppose with	Emotions are
450	that particular client group or		contentious for	
451	other client groups, can		some people with	
452	everyone learn emotional		personality	
453	regulation? Can everyone learn		disorders	
454	to manage their emotions?			
455	Need for ability to identify emotions and detach self from them in order to consider why he is having them. Not possible for this man. Why not? Toolbox implies learning possible?		P1: Well they can. So that’s the	
456			skill, when you’re sitting in a	
457			room with a client, where you’re	
458			feeling frustrated or you’re	
459		feeling bored, or you’re feeling		
460		scared, because you don’t know	Everyone can learn	
461		what to say next. You’ve got to	to manage	
462		be able to learn that process of	emotions	
463		emotion management.		
464		So I think it must be taught because there are lots of clinicians who struggle with it, but they still sit with difficult patients. So they’ve got some mechanism for controlling how they feel. Whether it’s just they cut in half, they distract, whatever. There must be a component of discomfort.		
465			Learn emotional	
466			management	
467			Learn emotional	
468			management in	
469			therapy process	
470			Essential to teach	
471			emotional	
			management	

472		So yeah we can teach our	Clinicians unaware
473	Uncertainty as it's a	patients this skill to a greater or	of struggle with
474	guess. Unknowing about	a lesser degree.	self' emotions due
475	r. Shouldn't he know as		to control
476	a trainer?	I: So the ability to understand	mechanism
		one's emotions and understand	
477	Some colleagues find	other's emotions, we might	Teach patients
478	emotions difficult and	understand as reflexivity? And	emotional
479	stops r process. Is this	you were saying something	management to a
480	true outside of	about mindfulness or	degree
481	colleagues? In general	mentalisation, about those	
482	about r?	concepts and how they fit in?	
483	Choose to work with	And I'm interested in that.	
484	others problems instead		
485	of their own. Inferred	P1: Yeah, because at the start I	
486	that they won't be	talked about it being erm,	
487	reflexive. Is this similar	(pause) being an awareness of	
488	to the outside?	process. So part of that process	
489		is the emotion. But a key	
490		component of that process is	
491		also what you're thinking about.	
492		It's also the process of what's	
493	Other colleagues have a	going on in your world at the	R is an awareness
494	seniority about them.	time. So it's not just the emotion	of emotions and
495	Narcissism? Place	regulation stuff, it's also spotting	thoughts
496	themselves outside of	that you're beginning to tell	
497	the therapy process in	yourself, "Ah this is really	
498	communication with	boring." Or, "I wish I could do	
499	others.	my shopping." Or that being	
500	Aloofness/Seniority –	able to tune into, "I'm drifting	
501	lack of being r. Is this a	away here." That's part of the	R is more than
502	refusal or an inability?	process of reflexivity as well.	emotional
503	Detachment from		regulations
504	process is a defensive	I: So, emotional regulation	R is noticing
	mechanism.	would play a part in somebody's	thoughts.
		ability to develop reflexivity?	

505			
506		P1: (pause) Yeah. Yeah it	
507		would do, because – but it's not	
508		the end goal. You can improve	
509		regulation, but dis-regulation in	
510		and of itself, means that, if you	
511		spot you are in an emotional	
512		turmoil, that's an aspect of that	
513	4 male siblings.	reflexivity. Because you're	
514	Interesting about	spotting that I'm distressed.	
515	experiential group		Aspect of r is to
	earlier.		recognise when
		So the end point isn't to	self is in emotional
		suddenly get calm and to feel	dis-regulation.
516		sated, and everything's okay.	
517		It's, "Do you know what, the	
518	Told that too emotional	alarm bells are ringing. Maybe	
519	as child. Being too	there is nothing I can do." So	
520	emotional is the way he	DBT is lovely, because it talks	
521	was born. People born	about tolerance. Well what can	
522	on spectrum.	you do to tolerate this feeling?	
523	Useful for him. Useful for		
524	being a psychologist.	And that's what we do as	
525	Useful for being r, i.e. to	clinicians isn't it? You sit with a	
526	be comfortable with	client who's erupting in front of	Aim is not to
527	range of emotions.	you, and you think, "Well I can't	change negative
528	Learnable?	really get out of the room. I am	emotions.
529	Comfortable with	going to have to tolerate this for	
530	emotions but family not.	another 48 minutes maybe."	Aim is to tolerate
531	Feel very negative	(laughter)	negative feeling
	emotions.	And you find a way to inter-	
	Can't be amazed in	personally work with that person.	
	those states	In spite of your own, you know	
		alarm bells ring and your head is	
532	Amazing to experience	telling you, you know you would	
533	this. Joy at human	rather not be there, or you would	
534	experience, good and		
535	bad. Not wish not to		
536	experience them.		

537		rather be or you'd rather your trainee was there.	Aim of therapist is to tolerate
538			
539	Likes being thrown by emotions, being overwhelmed by it.	I: Is it the process is something around better cognition, where you are able to think about what's going on?	Aim to find a way of working with client in spite of negative emotions
540			
541			
542			
543		P1: Yeah, absolutely.	
544			
545		I: Okay. And for you, do you feel that since your training, which you know I know was a while ago; do you feel that you have continued to develop in reflexivity? Or is it something that fluctuates?	
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551	Likes underdog, i.e. someone who experiences negative emotion.	P1: Erm (pause) I don't think I have any for – well yeah I suppose the training, like I've done further training, like becoming a DBT practitioner, added to my, reinforced my understanding of the utility of reflexivity. Going on this doctoral training, the top up doctoral training. They talked about how important reflexivity is, and that's where I got reflectivity and reflexivity mixed up. I was thinking, "Are they talking about something completely different? I'm not sure."	
552	Likes to support others who feel similar.		
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559	Skill to name emotion and 'mess' with it. What does mess mean. Mess means change it/alter it.		
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561			
562	Not always able to mess with it himself.		Further clinical training add to r
563			
564			
565	Ability to mess with it is good mental health		Training increased understanding of utility of r
566			
567			
568	Teach patients- idea of training patients too.		
569			

580		So I think it has continued to	Further research
581	Different models- do	develop. What I, what I'm	training adds to r
582	they mean the same	(pause) erm, always aware of,	
583	thing?	because I have trainees every	Confusion of terms
584	Mentalisation,	six months with the Oxford	for r
585	mindfulness and	course. It's a goal for me to	
586	emotional regulation are	observe increased reflectivity.	Use of terms for r
587	all techniques of r.	So they start off, I understand	different in different
588	Difference for you still	you know the first few weeks	trainings
589	needs outlining.	they're worried about who I am, I	Use of terms for r
590		am going to judge them, I am	different in
591		going to be quite shocked if they	research vs clinical
592		tell me they're bored and they	trainings
593		don't like a patient or something.	R continues to
594			develop
595		I start to introduce that language	Trainer's goal to
596		into the sessions, and say,	observe increase in
597		"What were you feeling? Were	trainee's r
598		you concerned about going to	Trainees worried
599		see this patient? Are you	about trainer's
600		anxious about the fact that	judgement of their
601		they're not getting as well as	negative emotions.
602		quickly as you would wish them	
603		to be? Are you excited about	
604	No about being	seeing this patient? Are you	
605	emotional but about	looking forward to the sessions?"	
606	regulating emotion.	I want them to talk to me about	Trainer asks
607		how they experience the	trainee questions
608		placement. I don't want to hear	about their feelings
609		about their formulation based	
610	Personality/Genes	understanding of the patient all	
611	determine language to	the time. I want to hear equally	
612	explain emotion?	about their, as you said the	
		experiential component of it.	

613	Some people cannot access identifying emotion or thinking about emotion.	So I find it amazing that clinical psychologists, who purport to be the crème de la crème in terms of psychology, a lot of them need a lot of encouragement to start to own up to their own emotional experiences.	Trainer encourage talking about trainees' experiences Trainer euqal emphasis on feelings of trainee and theory		
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622				Ideas of identifying emotion in models and in books.	I: So do you feel there is distinction between different types of training. So psychotherapy, counselling, counselling psychology, clinical psychology?
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629	Surprises him that people don't know what an emotion is.	P1: Certainly between counselling psychology and clinical psychology. I would tell you there's a gulf of difference. I don't know that they get taught about the power of reflectivity. I've got a clinical – well she was a clinical trainee from ... University but she's just joined my team. We have just employed her as a Band Seven. And she tells me about how reflective she is.			
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633			Thinks that naming an emotion can be taught. To everyone? Can messing with the emotion be taught?		
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640	Emotional discussion on emotion.	But I didn't observe her when she was first made a trainee. I saw her more when she came back on a year's specialist placement with us. Now I see it's beginning to emerge. But I look at her, personality as you		Clinical psychology trainees may not be taught about power of r.	
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647		mentioned earlier. It's part of the	
648	To him, it is clear they	personality and I think, "You	Psychologist say
649	are emotions and	must be able to spot that you're	they are reflective
650	doesn't understand why	a very anxious person and it	but not.
651	identifying emotions for	seeps through into your work	
652	some people creates	and what you're especially	
653	anger?	interested in." It's so observable	
654		and people do talk about it, but	
655		she doesn't ever – she's not got	
656	Angry/Worried?	that kind of self-awareness,	
657		which I think reflexivity is.	
658		I: Are there reasons why she	Personality
659		doesn't have that self-	reduces self-
660		awareness?	awareness.
661		P1: I think a lot of it is this	
662		hierarchy I mentioned earlier.	Others notice gaps
663		It's about I've graduated, I am a	in r in colleagues
664		clinical psychologist. We are the	
665		ones who are meant to do the	R is self-
666		treatment to others. We're	awareness
667		leading the service change. So	
668	Everyone can learn to	they believe that they are at the	
669	manage emotions. So	top of the hierarchy or near the	
670	people are born a	top of the hierarchy.	
671	certain way but can be	So in our conversations with the	
672	taught. How? Conditions	team I am in, when we were	
673	for teaching?	having these conversations.	Hierarchical
674		You remember I mentioned	attitude in clinical
675		earlier that we were talking	psychology
676		about, can you teach reflexivity	
677		to people? She was saying, "Oh	Placing self at top
678	Process or r = learn	yeah you can and we'll do this,	of hierarchy means
	emotional management	this and this." And I thought,	see self as doer of

679		(pause) "I'm not hearing you	treatment, not
680		saying you're going to be part of	participant.
681		that journey. You are going to	
682	Must be taught to	be part of teaching a skill to	
683	trainers as well.	other people."	
684			
685		Whereas I see it as, you stand	
686		up and you say, "Do you know	
687		what, when my nan died I was	
688		absolutely gutted. I couldn't	
689	Different mechanisms	believe what happened. It was	
690	exists. Detachment is	very different sitting with her	Placing self at top
691	different from r. Is one	when she was in hospital and	of hierarchy means
	more useful/valuable	feeding her tea. Compared to	teacher not learner.
	than another?	when I go into a nursing home	
692		and I see nurses give tea to	
693		other residents. There's a	
694	Discomfort means they	fundamental difference. When it	
695	experience some	was my nan it was upsetting.	
696	negative emotion.	When I go into a home, I'm	
697	Teach it but only to a	detached from it. But that	
698	degree- what is it	experience usually shapes how I	
699	dependent on?	appreciate what nurses do and	
700	Cannot teach it to	what they might struggle to do."	
701	everyone.		
702			
703		So I think you've got to tap into	
704		your own experience, and you	
705		have got to be able to vocalise	
706		what that was or what that is.	
707		And I don't hear...	
		So it's a bit about being able to	
708		disclose, and I think in a team,	
709		you do disclose. Because these	
710		are your colleagues, they are	
711		going to know bits about you.	
712		They do know that you've got	



713		things going on in your life.	
714		You've got a child or erm,	
715		(pause) you're going off to a	
716		conference to present. They	
717		know about those things.	
718			
719	R is an awareness of the	Your patients, you're not going	
720	process, which is partly	to self disclose to, so you may	
721	about emotion.	not use the skill in the same	
722	Other component is	way. It may be more of a private	
723	thinking.	tool that you're aware of. But	
724		you might disclose, you might	
725	Another component is	share with a patient that you're	
726	environment.	feeling this, or you're thinking	
727		about where this came into the	
728		room from. I've kind of	
729	Emotional regulation is	wandered off your point I think.	
730	one part of r.		
731	Noticing is another part.	I: No, it was really interesting,	
732	Noticing how one feels	what you said about as a team	
733	or noticing thoughts is	you thought about how to teach	
734	part of r.	reflexivity and the trainee came	
735		out with an A, B, or C about,	
736		"Well this is how we'll do it." In	Higher hierarchical
737		essence that's what my project	position means not
738		is trying to figure out. About well	see self as part of
739		how we all say we teach	teaching process.
740		reflexivity, but perhaps what are	
741		the best ways to teach it? And I	
742		am wondering how you would	
743		teach reflexivity?	
744			
745		P1: (pause) It depends on the	
		people you're teaching it to.	
		There should be an assumption	
		that the more experienced you	

746		are the more (pause) the more	Trainer self-
747		capable or the more capacity	discloses to
748		you have got for being able to	trainees.
749	Emotional regulation is	address your own responses.	
750	not goal of r. Improving		
751	regulation, it is noticing	Because early in your training	
	(spotting) that you are in	you will have all those	
	disregulation. Is this a	hesitancies about, "Should I say	
752	cognitive mechanism?	this? Should I do this?" And	
	Metacognition?	you need to get the permission	
753		to say that, early on in your	
754		career. That this is an important	
755		aspect.	
756		You're a component of therapy,	
757		as much as the homework,	
758		forms or the experiments you set	
759		up. What comes up in the room,	
760		is as important.	
761			
762	Point of r is not to get rid	So yes, earlier in your training	Importance of
763	of emotion but to notice	you need to be told that's	trainer using their
764	even if can't act on it or	something to value. And I think	emotional
	change it.	you're probably too concerned	experiences
765		with being competent and not	
766		making massive mistakes early	Disclosure is part
767		in your training. So that first	of being in a team.
768		year or so it's, yeah learn how to	
769	Uses language of DBT	sit with someone and to listen	
770	model- tolerance. Do we	and to summarise and reflect	
	have language for r? It	that back, and guide a session	
772	seems that borrows from	through a semi-structured	
773	models to conceptualise	interview, and goal setting. You	
	it? Does r straddle	know, there are all those very	
774	models? Does r take	basic things earlier on. And I	
	from models developed	think, yeah towards your second	
775	before and after its	year and then your third year,	
	conception?		
776			
777			
778			
779			

780		you start to see that vehicle of	Private tool of self-
781		your emotional experience, as	disclosure in
782		more crucial.	therapy
783		For more experienced clinicians,	
784		I would assume you got to have	Self-disclosure
785	Sharing understanding	gone through that stage, so I	used differently
786	with me.	would be having conversations	with patients and
787		about what came up for you?	trainees
788		And I would do that through self	
789		disclosure, through modelling,	
790		through showing (pause) my	
791		own self-awareness about what	
792		it is that I experienced.	
793		I: So when you – from your	
794	R allows you to stay in	knowledge of the different	
795	the difficult clinical	courses you've taught on, the	
796	situation.	different programmes,	
797		counselling, clinical programmes	
798		you've taught on, what parts of	
799		those do you see as teaching	
800		reflexivity?	
801			
802		P1: I think it is a counselling	
803		psychology ethos, from ...	
804		University and from ...	R teaching
805		University, I think it's there, so	depends on
806		embedded in what happens in	audience
807		the programmes. For other	
808		counselling and psychology	Experienced
809		courses I don't know. I don't	audience equals
810		think it's embedded in either of	more r capacity.
811		the clinical psychology courses	
812		that I know of. For IAPT, it's not	
813		taught on IAPT courses as well,	

814		not at all, no reference to it at all.	Permission seeking
815		That's all mechanical,	early in training
816		procedural. You know, "Remove	
817		yourself from the room." It's a bit	
818		more like quantitative and	Trainer gives
819		qualitative research as well isn't	permission in early
820		it? Where you own whom you	training
821		are and you're pushed and	
822		encouraged to do that, in	Trainee is an
823		qualitative. Whereas in	important
		quantitative, remove yourself, we	component of
		don't want to know who you are.	therapy
824		We want to know about data.	
825	Trained clinician does		
826	more training.	That's very tantalizing to a	
827	DBT training	cognitive behavioural therapist,	Trainees need to
828		who might to detach themselves	be told that their
829	Other training reinforces	from their clients. They see so	experience is
830	understanding of r, i.e.	many people they just want to do	valuable.
831	makes it clearer. Does	an exposure programme.	Early
832	training allow this in	They're not really concerned	preoccupation with
833	general or does	about what comes up for them.	being competent
834	exposure to other		
835	models allow this.	So I think it's embedded in the	First year of
836	Top up doctorate- talked	ethos of the course. It's all of	training, learn basic
837	about imp of reflexivity	the things I mentioned. I don't	things
838	and created confusion	think it's in case reports,	
839	on terms. What terms	actually. But all the other things	
	came up in clinical	I would imagine they do tap into	
	training?	it. But case reports are more	From second year
840	How are they different?	about, you know an assessment	start to see own
841	Interesting that not gone	that a trainee has, has the	emotional
842	on to get rid of	knowledge of a theory and can	experience as
843	confusion. Is everyone	apply that and can communicate	crucial.
844	confused about the	that understanding of	
845	different terms used. Are		
846	they talking about the		
	same thing?		

847	R has developed	knowledge, in a technical	Experienced
848	because of exposing self	manner.	clinicians must go
849	to other trainings both	I don't think that they're the	through stages of
850	clinical and academic	venue to demonstrate erm,	learning
851	(research).	reflexivity.	With experienced
852	IS training most effective		clinicians, model
853	way? Why if so? How	But I had really instructive	self-awareness
854	else can one learn r?	teaching at somewhere called ...	through self-
855	Sets self a goal to	last year. They were talking	disclosure
856	observe increased r.	about using vignettes and how	
857	How does he observe	boring it is. (laughter).	
858	this?	And they were saying, "Yes we	
859		all know being didactic isn't very	
860	Initial trainee worries	interesting, but we also know	
861	about judgement if they	that students kind of switch off	
862	report bad experience or	these days when they've got	
863	feelings about a client.	another vignette. So they said,	
864		"You've got to try to think	
865		creatively. Use storyboards, or	
866		whatever you can do to kind of	
867	Process of developing r:	get the information from a	R is embedded in
868	Ask them to identify	different point of view."	Counselling
869	emotions.		psychology
870		On my doctoral top up	programmes
871		programme, they were talking	
872		about tacit knowledge. This idea	
873		that you've got knowledge within	
874		you, that you don't know that	R is not embedded
875	Direct questioning	you've acquired. And it's only	in Clinical
876	Why closed questions?	when you're in a setting where it	Psychology
877	More useful than open	kind of 'A' joins 'C' that you	courses
878	questions, potentially	suddenly see the links and you	R not taught on
879	due to worries of	see that you've got an	IAPT courses
880	trainees?	understanding which is over and	
		above the basic units of	
		knowledge.	

881			R is like qualitative
882		So, these two ideas emerged	research as
883		within a month. And I was sitting	pushed and
884		next to a lady who delivers the	encouraged to own
885		same teaching session, but to	self.
886		the learning disability unit. So	
887	Hear about their	the batch of second years, we	No r is like
888	experience and the	go in and teach in the morning.	quantitative
889	model's understanding of	They have learning disability	research as
890	patient. Both as	sessions, and in the afternoon	remove self
891	important, like both his	they have older adult sessions.	
892	supervisors earlier.	They have paired it up, that in	
893		the morning they have a lecture	
894	My words. Too leading.	on loss with learning disabilities.	CBT therapist not
895		In the afternoon they have a	concerned about
896	Willingness to look at	lecture on loss with older adults.	self's experience.
897	own emotional		CBT tantalized by
898	experience is necessary	We've always said like, I've	detaching
899	to be the best	always said, "I get the rum deal.	themselves.
900	psychologist.	I go in in the afternoon and	Too many clients
901		they're already very depressed.	means CBT
902	How do you encourage	They don't want to talk about it	therapist wants to
903	yourself, your trainees,	anymore, they're switched off,	detach.
904	other psychologists?	it's horrible." (laughter) Like it's	R is embedded in
905	Infers that important to	really, really hard to go and talk	ethos of course.
906	own up to emotions.	about bereavement.	R is not in case
907			reports.
908		So, this lady and I were both in	Other components
909		this lecture together and she	of course tap into r
910	Points to clinical so ask	said, "Do you know that I am	
911	on a wider scale.	like, one of the UK's leading	
912		authorities on loss?" I was like,	Case reports
913		"No I didn't know that." I am	assess knowledge
		rambling a little bit, but she	of theory
		suggested that we look at our	
		teaching programmes together	

914		and we will change how we	
915		teach.	
916		So she looked at my programme	
917		and she said, "Yeah your stuff is	
918		like 20 years out of date." I talk	
919		about that in about a sentence or	
920		two about the ward and model of	
921	Clinical training don't get	loss and...	Vignettes boring
922	taught about the power		teaching method
923	of r. What is the power?	I was like, "Oh well okay, you do	
924	The importance, thus not	the theory, I will do something	Didactic teaching is
925	taught about importance.	very different."	uninteresting
926	Is it important/necessary	So I went into the room, and I	
927	for good practice.	was thinking, "Yeah I am going	
928	Dependent on values of	to be very creative." And I said,	
929	courses. Different values	"I am going to get you guys to	Trainers should try
	in different types of	tell me about your experience of	to think creatively
	training, different	loss. We're going to sit around	
	emphases. Good or	and it's going to be experiential.	
	bad?	But I don't want you to feel like	
930		it's threatening. Your experience	
931	Infers that he would	of loss is going to inform how	Use new ways of
932	assess her as not	you tell me how you're going to	get information
933	reflective. Distinction	work with these famous people.	from a different
934	between his and her	So you're going to make up the	point of view.
935	view. Why? Who is	vignettes, I don't know about	
936	right? Does it matter?	these people's backgrounds, any	Tacit knowledge is
937	See her as junior	more than you do."	the unknown
938	colleague not trainee.		knowledge within
939		So I stood up and I talked about	the self
940		my experience of my nan again.	
941		I gave them the paper about tacit	In seeing links,
942		knowledge, about this guy, going	recognize greater
943		through this memorial to the	understanding.
944		holocaust, and he hated it, it was	
945		dark, there was no light, it was	
946			
947	She is anxious and		
948	affects her work but she		

949	can't see this. Very	echoey. He came out, he's a	Learn ideas in different contexts
950	noticeable to him and to	psychologist. He was enraged	
951	others but she hasn't got	by how crap the architecture of	
952	self-awareness/r. This is	this memorial was. He was	
953	part of her personality	banging on about it six months	
	and she couldn't	later to his friends. Saying,	
954	develop beyond this.	"That was awful that place." And	
955		his colleague said to him, "But	
956		that's the point, they wanted you	
957	Self-awareness = r	to feel disassociated, so that you	
958		got the emotion. You were lost	
959		in this experience." He was like,	
960		"I'm a psychologist, I can't	
961		believe I didn't get that that's	
962		what it was about. It was being	
963		reflective. I was lost; this was	
964		what the whole thing was about."	
965			
966		So I got the clinical trainees to	
967		read it, thinking, obviously	
968		they're going to be saying, "I'm	
969	She is not self-aware	not going to tell this stranger	Trainees switched off due to teaching structure
970	about her own position	about how I feel when I've lost	
971	and places herself as	my partner or my cat or whatever	
972	superior. Narcissism?	it is." So I kind of gave them my	
973		personal experience and then I	
974		went for the jugular with, "Here's	
975		like an eminent guy, who I can't	
976		remember, and he's owning his	
977		naivety."	
978			
979		Then I gave them six famous	
980		people. I gave them the Queen,	
981		Nelson Mandela, and a few	
982		other people. I said, "You figure	
		out what their loss experience is,	



983		and I want you to present those,	
984		as (pause) however you wish to,	
985		back to me. So it's your	
986		knowledge. I am not going to tell	
987		you about models of	
988		bereavement. You've had a bit	
989		of theory this morning, so you	
990		can draw that theory out. Or you	
991		can think about your own	
992	Exemplified by removing	you when you were floored by	Trainer decide not
993	herself from being part	'X', 'Y' or 'Z' or whatever."	to teach theory
994	of the training. She goes		
	straight to it is a skill to		
	be taught.		
995		I got some amazingly powerful	
996		presentations. I got people	Trainer changed
997		acting, like role playing. Other	goal of lecture
998		people doing reflective circles	Goal of creativity
999		about, "Well what would the	
1000		Queen do in this situation?"	
1001		It was amazing, and it all came	Trainer asks
1002		from, yeah this kind of	trainees to talk
1003		opportunity of hearing about tacit	about experiences
1004		knowledge and try and be	of loss
1005a	For him, he draws upon	creative about how you get	Trainer asks
1005b	similar experiences to	people to learn.	trainees not to feel
1006	understand other		threatened
1007	peoples.	So I managed to get, I think,	Trainees make up
		more demonstration of personal	vignettes
		awareness in that couple of	
1008		hours than I ever had before.	
1009		And I went back about a month	
1010		later to do some more teaching	Trainer started by
1011		and they were like, "Hello Ian."	self-disclosure
1012		They were really happy to see	Trainer give
1013		me. It was like, they're not	trainees paper
1014			about a person's

1015		normally that emotional, the ...	negative
1016		girls. But yeah, it was good.	experience as
1017			demonstration of
1018		I: It sounds like it's changed the	theory
1019		way that you want to teach?	
1020			
1021		P1: Yeah because the second	
1022		session, I was like, "I'm going to	
1023		do it again, we're going to teach	Eminent
1024	Infers that newly	about team formulation." But I	psychologist can't
1025	qualified psych wasn't	want it to come out of them. I	believe not
1026	able to either draw on	can go in and I can be the expert	recognize meaning
1027	her own experiences or	and I can be detached from this	
1028	to relate this to another.	material. Or I could come in and	
1029		say, "Do you know what, you've	
1030		got your own experiences which	Trainees not self-
		are (pause) already instrumental	disclose to stranger
1031	Process is to use own	in your understanding of a	trainer.
1032	experience, and disclose	psychological process. And	
1033	to others what it was	you've all got your own	Trainer self-
1034	about for him.	conundrums about should we	disclose to
1035		say this? Or should we say	encourage trainees
1036		something about... So team	self-disclose.
1037		formulation is you can be	
1038	Important to disclose a	reflective about, do you do team	Eminent
1039	bit to team, to let them	formulation? What's your	psychologist
1040	know bits about you. To	position in the team? How do	reassures trainees
1041	not be worried about	you deal with the relationships	that not always
1042	criticism- same as he	you have with your colleagues?"	understand self.
1043	was saying about		
1044	trainees?	Yeah, again it was very	
1045		powerful. They talked about	
1046		their clubs as a system in the	
1047		university. Clubs as in a group	
1048		of people who go bowling and	
		other's that do basketball. Clubs	

1049		in as in, a club of them in a	
1050		placement at the same time.	
1051		So there's all these little	
1052		opportunities for them to be	
1053		reflective about, where can you	Trainer asks
1054	Not self-disclose with	do team formulation? How	trainees to use
1055	patients. Still have the	formally do you do it as well?	theory or own
1056	tool to use your		emotional
	emotional experience		experience
	but use it in a different		
	way.	And, I have to say it was quite	
1057		cushy for me, because I was	
1058		sitting back, listening to them,	
1059		tell me about their experiences.	
1060		Then they bring in the models as	
1061		well. They talk about systemic	
1062	Notice and say emotions	theory or Gestalt therapy and	
	in the room or thoughts	Gestalt models of	
	and wander with them.	understanding. And I'm like,	
1063		"That's it, they're bringing the	Amazing learning
1064		knowledge out." They didn't	from creative
1065		know this before they went in the	teaching
1066		room, but they were working	Trainers learning
1067		together to get it.	leads to creative
1068			teaching
1069			
1070		I: It sounds like it's a different	
1071		way of working, where it starts	
1072		with reflection, self-awareness,	
1073		personal awareness, and then,	Demonstration of
1074		they naturally bring in the theory	personal
1075		to start to put it in place?	awareness
1076			
1077		P1: Yeah, to flesh out what	
1078		they've described. So, and it	
		was done in a non-	Trainees more
1079		confrontational way. It wasn't	emotional with
1080		saying, "Look you don't get this."	trainer
1081	Didn't need to say this.	But I was going in saying,	

1082		“Counselling psychologists are	
1083		very good at thinking about their	
1084		own processes, and owning a	
1085		kind of emotional experience	
1086		that the clients have.” And I do	
1087		notice that, there are lots of	
1088		counselling psychologists in my	
1089	Different teaching	trust, who are much more	
1090	methods for different	comfortable saying something	Trainer wants
1091	people. Levels of	about their experiences.	teaching to come
1092	training? Types of		from trainees
1093	individuals?	Whereas lots of clinical	
1094	More experienced=	psychologists are quite aloof	
1095	higher the capacity to	about it. But I’m conscious of	
1096	address responses.	that kind of being them and us,	
1097	Capability/capacity can	in my head. But I can’t help but	Trainer build on
1098	grow? Grows through	notice that’s a difference and I	existing trainee
1099	training? Or grows and	assume it’s down to the	experience
1100	training helps?	regulatory of us counselling	
1101	Levels of training alters	psychologists talking about	Trainer role to
1102	difficulties gaining r.	reflexivity.	bring awareness to
1103	Earlier = permission to	I: I mean you pointed to	trainee’s existing
1104	say emotions and	something there, that you’ve	knowledge.
1105	thoughts.	changed in terms of your	Trainer ask
1106		approach which again is around	questions about
1107		personal awareness and	trainees’
1108	Trainer responsibility to	development and reflection on	experiences
1109	give permission. How	your own teaching skills.	
1110	does trainer do this? He	But also I wonder whether there	
1111	does this by	is something there about, well	Repeated powerful
1112	demonstrating and	the trainer has to be a particular	teaching
1113	asking questions.	way, in order to facilitate that	experience
1114	Teaching that trainees	type of learning?	
	are a part of the therapy		
	with the other		
	components.		

1115	Interesting he uses	P1: (pause) Yeah. Yeah,	
1116	active components as	because if you're not au fait with	
1117	example- is trainee an	being self-aware, and being, not	
1118	active component?	only being introspective but	
1119		being able to articulate your	
1120		introspection. So to put it out	
1121	Method = Tell trainees it	there for discussion or for	
1122	is valuable. This seems	consideration. I don't think you	
1123	explicit.	can do it.	Easier teaching for
1124	Thinks that trainees too	I think if you're too tightly	trainer
1125	worried about being	concerned, too anxious, too	
1126	competent	bothered by what it might mean	Trainees talk about
1127		if you, if you've got negative	own experiences
1128		thoughts about your clients, or	first.
1129	Method: first year is	you just don't like them or	
1130	basic counselling skills.	whatever. Or you're scared of	Trainees link own
1131	Is r in here?	them, or you're really – you	experiences to
1132		know, not often do people talk	theory.
1133		about the very positive emotions	
1134		to clients.	Trainees link
1135		But they do towards the end of	experiences and
1136		the sessions with clients. "I've	knowledge
1137		really enjoyed working with this	together
1138		patient." And those	
1139		conversations don't take place	
1140	Later on in training =	so much during it I think. People	
1141	scaffolding the learning.	are just caught up in it's working,	
1142	Further define the first	it's working. So I think if you're	
1143	year? Second/third year,	just not au fait with that, then	
1144	focus on emotional	you're not going to be able to	
1145	experience.	stand up and talk about and	Non-
		teach about it.	confrontational
			trainer

1146	For trained clinicians (trainees?), trainer should have directed conversations, use self-disclosure (model). Why not use directed questions or modeling earlier? Is it too much? Why? Dependent on individual?	I: So potentially it's important that trainers have certain traits themselves?	Trainee emphasise professional strengths to trainees. Trainer encourage positive aspects of counselling psychology professionals to encourage learning
1147			
1148			
1149			
1150		P1: Yeah, but if you're talking about kind of personality characteristics, I think it is about people who are comfortable with their emotions.	
1151			
1152			
1153			
1154		I: We should be reflective of what you said about trainees around those sorts of characteristics as well?	
1155			
1156			
1157		Clinical psychologists aloof about own emotional experiences. Counselling psychologists talk about r.	
1158			
1159	P1: Yeah, (pause) yeah.		
1160			
1161	I: Would you be able to take an anonymised example of a trainee with a high level of reflexivity and how you understand they develop this?		
1162			
1163			
1164			
1165			
1166	P1: Yeah there was a guy who I had, erm (pause) six months ago. I am a bit... (laughter) but I normally have like two trainees; I normally have four a year. So I have two at a time. And so, one of them, this guy was superb.		
1167			
1168			
1169			
1170			
1171			
1172			
1173			
1174	Embedded in ethos for counselling psychology and so embedded in programme. Does this mean that it is taught? How is it taught? Is it or should it be explicit?	He was, I would have employed him at a shot. If I could employ people as regularly as we've just	
1175		- first time ever we've been able to employ someone.	
1176			
1177			
1178			

1179		This guy was awesome, but his	
1180		colleague was awful. Real	
1181		difference between the two. And	Trainer must be
1182		I loved supervision with him. I	self-aware and
1183	Unaware of other courses	would go in and sit down. He	express self-
1184		would rush in eagerly, kind of	awareness.
1185		prepared to discuss what came	
1186		up for him. He was comfortable	
1187		with conversations about	
1188	Not taught on IAPT	supervision and erm, and what	
1189	courses, i.e. CBT. Is this	was good about supervision and	Unhelpful if
1190	about the application of	not. He found a way to be able	anxious about
1191	the model.	to talk about what was bad in	negative thoughts
1192		supervision. They developed	
1193		forms on his course for, what's it	
1194	Taught not to be emotional.	called? A supervisory evaluation	
1195		questionnaire. We'd had some	Unhelpful if scared
1196		teaching on it, about how people	about negative
1197	Analogy of research methods.	would either put everything's	thoughts
1198		good or they will put like a	
1199		middle point.	
1200		He had been brave, and he said,	
1201		"I don't like this about	
1202		supervision." He said, "I am	
1203		worried about you're going to get	
1204		angry with me or there will be a	
1205		reprisal for this." And I said,	
1206		"How can I get angry with you,	
1207		you're helping me understand	Trainer need to be
1208		what occurs in supervision, more	familiar with
1209		than any other trainee has."	positive and
1210		He was comfortable with it, he	negative emotions
1211		got it, and he was prepared to	to teach r.
		talk about it. So it's within his	

1212	CBT Therapist attracted to being removed/being detached from clients.	personality, erm, to be able to do that. He had been on placement with this same colleague; they had shared supervisors for about 18 months. I think they were a bit fed up of sitting next to each other as trainees.	Trainers must be comfortable with their emotions
1213	Being detached from emotions. Is this about the model? Or is this about the individuals who are attracted to this type of training?		
1214			
1215			
1216			
1217			
1218			
1219			
1220	Not concerned = not interested? Are they not interested because it is not useful. Using r may be not useful for them, i.e. discomfort. Or are they not given the opportunity to learn r?	But I was thinking, "What more evidence do you need." Either you've got it or you don't.	
1221		And I kind of took it as; I am going to help her become more reflective. Because she's next to someone who has got this skill which is going to serve him so well, for his whole career. And it was, "You've maybe not, you don't have that strength." And it was her aloofness, it was her wish to be authoritative and senior and have status. She didn't develop, (pause) not at all.	
1222			
1223			
1224			
1225	Ethos of course guides trainee experience.		
1226			
1227	Process reports/supervision important		
1228			
1229	Not learn r in case reports		
1230			
1231	But other training components are important for r. Which ones? Some more than others?	I: It's interesting to listen to you, because you use the term, "He's got the personality and he's got the skill." And one would assume that one is born like that, and the skill is something that one would learn. I am wondering what you think?	
1232			
1233			
1234			
1235			
1236			
1237			
1238			
1239			
1240			
1241			
1242		P1: Erm, (pause) well we're getting into personality theory. I (pause) I mean he (pause) he	
1243	Case reports not vehicle for r.		
1244			



1245		had learnt about me, so there's a	
1246		'rumourville' about what I'm like	
1247		as a supervisor I'm sure. And he	
1248		had someone in his year group	
1249		who was my supervisor,	Trainer loved
1250	Instructive teaching =	(laughter) who was my trainee,	working with good
1251	helpful. Is this the type of	before he was. So he had	trainee
1252	teaching and/or trainer.	known about my open style, but	
1253		so had she.	Superb trainee
1254		When we first met, I talked about	eager to talk about
1255		my strengths and weaknesses.	himself
1256	Using vignettes bores	He was prepared for those	Awesome trainee
1257	trainees as overused (?)	conversations. But he talked	comfortable with
1258	or not sophisticated	about life experiences, which	talking about good
1259	enough or not used	had made him who he was.	and bad in
1260	properly by trainer or	So he wasn't born with this	supervision
1261	trainee?	capability to be comfortable with	process
1262		his emotions, he was just; he	
1263		shared with me some very	
1264		difficult times. He got tearful,	
1265	Trainer teaching	briefly, and he didn't feel judged	
1266	strategies: Learn new	about that. I think he was able	
1267	strategies to stay fresh	to see that there was a value to	
1268	and approach teaching	it.	
1269	from different directions.		
1270		And that's what I've seen, with	Good trainee
1271		trainees who are capable of	express worries
1272		being emotional. I don't think it's	about supervisor's
1273		necessarily totally innate, I think	reaction
1274		it is, (pause) that they happen to	
1275	He learnt new concepts	be in circumstances where that's	Trainer helped by
1276	on training course about	moulded and that's shaped and	trainee to
1277	tacit knowledge.	that's valid, and they'll move on	understand more
		with that. But their next	

1278		supervisor might be dis-	
1279		interested in that.	
1280			Trainee's
1281		I think we have an interest as	personality enabled
1282		counselling psychologists,	him.
1283	And learnt to see links	definitely. I think we (pause)...	
1284	leading to more	You know I talk about self-	
1285	knowledge than	actualization often as well. I	
1286	acquired from course.	think it's part of, you know	
	The links between the	someone's got the capability	
	knowledge gives him	there, it will be a component of	
	more knowledge.	their... It will be added to their	
1287		repertoire of skills.	
1288			
1289			
1290		So, (pause) you know, it's not	
1291	Learnt two new ideas	everybody gets to the pinnacle	Either got r or you
1292	from training.	of their actualization do they?	do'n't
1293		Because people gravitate as far	
1294		as they can, upwards, if that	
1295		makes sense.	
1296			
1297		I: Mm. Let me ask you about	
1298		interviewing. When you	
		interview trainees or potential	
1299		trainees, how do you judge or	Aloofness stopped
1300		reflect on their reflexivity at that	trainee developing
		stage?	r.
1301			
1302		P1: (pause) Well, (pause) they	
1303		have a goal; they have a	
1304		supervision goal sheet. So,	
1305		(pause) they tend to have copied	
1306		the person beforehand with one	
		or two amendments. So it tends	
1307		to be on their sheet, I've noticed,	
		that I want to be more reflective.	

1308		Because I think they know that	
1309		that's something I am interested	
1310		in. So they do tend to have it on	
		there.	
1311			
1312		But your question is about	
1313		whether they...?	
1314			
1315		I: I'm wondering about actually	
1316	Trainer awareness of	entry to counselling psychology	
1317	bad atmosphere that	or clinical training, or any type of	
1318	means teaching is	clinical training programme.	
1319	difficult. Disliked it but	When you interview potential	
1320	didn't act on this.	trainees...	
1321	Time of day for teaching.		
1322	Awareness of	P1: Okay.	
1323	timetabling.		Supervisor talked
1324	How to manage this?		about own
1325		I: At that stage, how do you	strengths and
1326		assess reflexivity and who might	weaknesses
		be able to learn more about it?	Trainee talked
1327	Talks about knowledge	P1: Yeah, well I'm also lucky	about life
1328	base. Is this about	that I've been on the ...	experiences
1329	superiority?	Selection Panel. So there's a	Not born with
1330		group interview, and they set it	capability to be
1331		up where they have... Then	comfortable with
1332		eight people come in a room and	emotions
1333		then they do a task. Then they	
1334	His response to her	talk about the task. It's as	Trainee show
1335	statement – anxious?	simple as that. The task is fairly	emotions without
1336	She responded by	mundane. It's kind of make a	trainer's judgement
1337	looking at programmes	poster of what it is to be a	
1338	together.	psychologist. There's a bunch of	Trainee see value
1339		magazines and there's a table.	in showing
1340		And they stand around the table,	emotions
1341			

1342		they cut up and make a montage	Capacity for being
1343	Took the position of the	of what it is to be a psychologist.	emotions is
1344	knower.		moulded in
1345		And what you're watching is, as	circumstances
1346		one of the interviewers, is, well	
1347		I'm not really an interviewer; I	
		suppose I'm a group facilitator.	
1348		You're watching their	Supervisors differ
1349		interpersonal skills. You're	in interest in
1350	Forced to do something	watching their self-awareness	trainees emotional
1351	different as teaching	that suddenly one of the...	experiences
1352	theory was debunked.	You know they might be very	Counselling
1353	Would you have done	vocal and very dominant and just	psychologists have
	something differently	they've got no sense of self.	interest in
1354	anyway?	And they just try to run the show	emotional
		and they try to impress	experiences
1355	Forced to be creative.	everybody about how great their	Trainees have the
1356	Emphasises importance	idea is. There's no room for	capability
1357	of trainer and	anyone else.	R is part of
1358	environment and	And I think, (pause) what we've	repertoire of skills
	conditions on course-	done is, what they've done is,	
1359	space to be creative.	they've had someone from the	R is similar to self-
1360	Teaching strategy: First:	course, an external psychologist	actualisation
1361	Directive teaching- get	and a service user, be the group	Everyone has
1362	you/tell me.	task evaluators.	different
1363		We often defer to the service	capabilities for r.
1364	Second: Acknowledge	user. But it was amazing how	
	that threatening but tries	consistent we were in our	
1365	to say not to feel this.	opinion. Where the service user	
1366	Would that help?	would say, "I wouldn't want to be	
1367	Acknowledge potential	that person's client, because that	
	reactions to enable	person is dominant. They don't	
1368	progression in task?	know that they're dominant.	
1369		They don't know that they're just	
1370		erm, inconsiderate of others.	
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1380	Third: Start with him.	But equally I wouldn't want to be	
1381	Role model. Self-disclosure.	that person's client, because that	
1382		person doesn't have any	
1383	Fourth: Link to theory	presence. That person doesn't	Supervisor's
1384		have any awareness that they're	interests guide
1385		not in the room."	trainee's goals
1386		And it's such a strange	
1387		competition. You've got to kind	
1388		of be visible but you've not got to	
1389		be overly visible. It's very hard	
1390		for the trainees I think.	
1391		But what we're looking at is, their	
1392		interpersonal skills. And I think	
1393		(pause) that's a really good way	
1394		of judging people's erm, (pause)	
1395		reflexivity. Because, yeah, even	
1396		if it's just in ten minutes. Well it's	
1397		more like a half hour montage	
1398		experience. But, if they're not	
1399		really getting it in that setting,	
1400		(pause) you know they're falling	
1401		down our list.	
1402			
1403		So then they have an individual	
1404	Psychologist in story	interview as well. And then at	
1405	hard on himself as not	the end of the week, we do a	
1406	understand process for	sort of merger of how well did	
1407	him. Needed other to	people do on the individual	
	point it out.	interviews. You will get	
		academics who are brilliant and	
		they might be number one in an	
		individual interview. But if	
		they're number 64 in the group	
		interviews, they're not going to	

1408		get in. There's such a miss-	
1409		match between the two scores,	
1410		that they say, "That's alarming.	
1411		You know what was it about	Group interview is
1412		them that came 64 <sup>th</sup> in the whole	mundane task
1413		set?"	
1414		So it tends to be more difficult	
1415		when they're sort of 10 <sup>th</sup> in the	
1416	Assume responses to	individual interviews and they're	
1417	him by trainees. Also he	20 <sup>th</sup> in the group. And you're	
1418	is a stranger- is this a	saying, "Well which one do we	
1419	one off class? Or just a	value more? Where is their true	
1420	trainer so not know him	place?"	
1421	well. Does it matter? Is it		
1422	better not to be a	There is a discussion that really	
1423	stranger to teach r?	does centre on personality, on	
1424		moulderbility on actually could	
1425		this person be a risk to clients.	Interviewer
1426		You're really getting into the	assesses self-
1427	Fifth: State eminent	personality, without naming it, of	awareness skills in
1428	psychologist not always	the trainees.	group interview
1429	r and able to		
1430	acknowledge that.	I: Do you think there's a	Some trainees are
1431		relationship between academic	dominant and have
1432	Aim: teach trainees ok to	ability and reflexive ability?	no sense of self.
1433	share emotions		Some trainees
1434		P1: No, (pause), not	leave no space for
1435	Sixth: Use external	necessarily.	anyone else.
1436	figures and freedom to		
1437	choose how to do this,	I: So one could be number one	
1438	i.e. use theory if wish,	in the group task and also	
	use own	number one in the academic	
	knowledge/experience if	task?	
	wish, etc.		
	Aim is to understand		Defer to service
	someone else's loss		user

1439	experience by drawing on own experience.	P1: You could be, but you could	Service user and interviewer consistent
1440		be number one in the group task	
1441		and be charming as a person,	
1442		and you know facilitate others to	
1443		have their ideas heard. To be,	
1444		erm, to be saying, "Oh I think	
1445		we're running out of time here."	
1446		You know just mindful of lots of	
1447		little bits that kind of get the	
1448		group task achieved. But	
1449		actually just not have research	
1450		skills or have the experience, the	
1451		previous experience that's	
1452		required.	
1453	Outcome was amazing. Varied learning demonstrating r. Different types of approaches developed by trainees themselves. Importance of trainees creating learning themselves. Importance of doing something active/experiential?	So sometimes people are quite	Service user avoid trainees with no presence
1454		senior, but then they've fluffed	
1455		on the interview, and there's a	
1456		kind of... They invite them to	
1457		come back the following year,	
1458		with advice about, you know you	
1459		need to... That is about maybe	
1460		your personality being right, but	
1461		your (pause) your intellectual	
1462		kind of capability, not having	
1463		been honed just yet, that you	
1464		might be missing a placement or	
1465		you're references, you know,	
1466		didn't think you were	
1467	heavyweight enough for it,		
1468	intellectually speaking.		
1469	Importance of being creative about training.	I: Would they do it the other way	Lack of interpersonal skills leads to rejection
1470		around, where they suggest	
1471		somebody go away and try to develop their reflexivity?	

1472	Trainer openness and willingness to do things differently is important.	P1: Well they've never said that.	
1473		They have said, (pause) erm,	
1474		(pause), they have said, "Not this time (pause). I don't know if they've fed back. (pause)	Merge of individual and group interview
1475	Demonstration of awareness. Was this learning or showing existing capacity? Both have value in training contexts.	What tends to happen is, that if they've (pause) erm, (pause) if they've (pause) messed up on the kind of interpersonal skills, they're given another chance.	
1476		Because there is an appreciation that it is a little bit tight.	Academia is not enough for entry
1477		So if they apply again next year they could still get selected and get through that process.	
1478		It's anonymous to begin with obviously. So, (pause) they've got any chance as anyone else has, of getting to that stage.	
1479		You know the final 64 who come in for the group interviews.	Value of academia vs. interpersonal skills
1480		So then they would be given the same opportunity, and if they balls it up again, frankly, they might get feedback saying, "You're not right, you're not ready for this course." So they're never given, I think, an indication that it's their personality that might be getting in the way. But they are given a very clear, "No you're not coming	Trainer discussion on mouldability of trainees
1481	Indicated they liked this way of learning. Felt closer to trainer- is this important?		
1482			
1483			
1484	Girls: Adult female trainees. Trainer view of trainees. New for trainer too. Need certain trainer attributes?		
1485			
1486			
1487			
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1491			
1492			
1493			
1494	New teaching strategy is that it comes from them.		
1495			
1496	Trainer inspired by new learning		
1497	Team: about a group, not trainer vs. trainee.		Trainer discussion on personality of trainees
1498	Reduce power dynamics.		Trainers don't name discussion
1499			
1500			
1501			
1502			



1503	Is this what he feels	through this gate, not on this	as about
1504	other are like?/he was	course.”	personality
1505	like before?		
1506		I: For trainees, perhaps like the	
1507	Acknowledge trainee’s	female you said in supervision?	
1508	knowledge. And his own		No relationship
1509	willingness to learn. Do	P1: Oh yeah.	between academic
1510	you have to have		and r
1511	security in learning to be	I: Who hasn’t quite got it?	
1512	willing to learn new	What’s happening at the point of	
1513	things or train in a	entry for people like her?	
1514	different way?		
1515	Value other’s learning,	P1: Well I remember her from	
1516	other problems. Does	the interviews as well, strangely.	
1517	this ever get in the way?	And, (pause) she did seem to be	
1518	What happens if	(pause) personable. She didn’t	
1519	members of group have	make mistakes erm, (pause) so	
	different goals?/aims?	some of those groups of eight,	
1520		they’re quite savvy groups.	
1521	Team formulation is new	There’s a kind of common	
1522	word for me. Drawn from	understanding that (pause) you	
1523	experience/theory?	know, no one needs to put their	
1524	Relationship to r?	neck up on the line and to kind	R is not enough
		of try to dominate it. And those	
1525		are tougher groups I think to	
1526		separate. Because it’s like,	
1527	Powerful meaning	actually, they’re all very nice	
1528	emotional? Meaning he	people, they’re all very	
1529	can see the learning?	accommodating and they all say	
1530	How do you judge	quite clever things about what it	
1531	whether someone is	is to be a psychologist. And they	Trainees with right
1532	learning? And learning	all made reference to sort of – or	personality invited
1533	r? Are emotions an	lots of them made references to,	back
1534	indicator?	“Oh well this is how the mind	
1535		poster is.” Or, “This is how	
1536		there’s...” They’ve done a	

1537		poster – they’ve brought in	
1538	Practise in real world,	material from outside.	
1539	their world, this means		
1540	that it’s easier to learn?	I remember hers being quite,	
1541	Opportunities to apply	erm (pause) as coming across	
1542	learning outside of	as a very (pause) err, yeah a	Intellect can be
1543	training environment is	very personable interviewee or	honed
1544	essential for learning?	member of the group.	
1545	Repetition and		
1546	rehearsal.		
1547		What happened in supervision	
1548	Easier for trainer. How	with her, was that she... (pause)	
1549	do you know that the	her reflectivity... her comment	
1550	motivation is for trainees	about herself (pause) made me	
1551	rather than trainer.	think about; she seemed to have	
1552	Different mode of	a massive chip on her shoulder,	
1553	training that requires	about counselling psychology.	
1554	less trainer input.	At the end of the day I think she	
1555	Important to balance	really thought that it was a bit of	
1556	activities? Could this be	a snub that she was being	
1557	imbalanced depending	supervised by someone like	
1558	on trainer goals?	myself. And I think she saw	
1559	Next step from talking	herself as more capable. Erm,	
1560	about own experiences	(pause).	Recognition group
1561	is to bring in theory.		interview tight to
1562	Does the trainer lead	So when I addressed it with the	demonstrate
1563	this? It sound as if this is	course, because there has only	interpersonal skills
1564	raised by the trainees?	been two trainees that I have	
1565	Sounds like the trainee’s	gone to the ... course about and	
1566	create their own	said, “Do you know what I’ve got	
1567	learning. Role of trainer	concerns about how her and I	
1568	is as catalyst? As guide?	are working together. There’s a	
1569	Importance of working	lot of interpersonal stuff that’s	
1570	as a team. Learning is	not being said by her. But it’s	
	deeper as it is shared	there, in the room for me. She’s	
	learning? More than the	really pissing me off. I don’t	
	trainer but a group of	really like her any longer. Every	
	those with experience		
	and knowledge.		

1571		time there's a conversation	
1572		about how to do things, you	
1573	Checking theory is	know, she doesn't want any	Failure to perform
1574	driven by trainees?	support. She just wants to tell	interpersonal skills
1575		me this is how she's doing it.	second time leads
1576		This is the right way. There's no	to total rejection
1577		room for any consideration of	
1578	Theory acts to expand	another way. Erm, I don't feel	
1579	their own experiences.	like she's a particularly open	
1580		practitioner."	Interviewers never
1581	Importance of		state it's
1582	atmosphere/environment	And she got bogged down into,	personality getting
1583		"No I'm right and you're wrong."	in the way
1584	Important to allow many	You know, I took responsibility	
1585	opportunities for r?	by progressing it with her, by	
1586	Formal and informal	going to the course and saying,	
1587		"You need to find a way to help	
1588		me tolerate her, because she's	
1589	Informal vs. formal	doing my head in, as a trainee."	
1590	learning	And I really disliked her. I just, I	
1591		didn't like her at all. I would look	
1592	Emphasis on this word	forward to the supervision with	
1593	'cushy'. The emphasis is	her colleague. Brilliant, a real	
1594	on the trainees- how	splitting between the two. I	
1595	does the trainer work	loved his sessions. And then	
1596	here?	almost an hour later, she would	
1597		come in the door and it would be	
1598		like, "Oh God how long is this	
1599		hour going to last." Because she	
1600		doesn't appreciate, you know	
1601		I've got 15 years' experience. It	
1602		just doesn't matter to her. She's	
1603		right and err...	
1604	Trainer as facilitator	Yeah, it was interpersonal stuff.	Common
		She would say things like, "Well	understanding of

1605		I've got a caseload of three. I	how to do the
1606	Their existing knowledge. Aim to bring it out? Should trainer be providing more knowledge? How does bringing out knowledge relate to r? Maybe connections between them.	don't need any more patients." I	group interview
1607		would be like, "You can't have a	
1608		caseload of three." She would	
1609		be like, "You're bullying me into	
1610		seeing more people." "Alright	
1611		well have a caseload of three, is	
1612		that really, is that what you're	Trainees learn how
1613		going to be able to do when you	to pass group
1614		practice?" No sense of, (pause)	interview
1615			no sense of professionalism
1616		really. (laughter)	
1617		Which is about reflexivity, I mean	
1618		it's just, she did not understand	
1619		that there was a (pause), that	
1620		there was a reaction on her part	
1621	Trainer role: flesh out what they have described in a non-powerful way.	to me and she couldn't address	
1622		that.	
1623		Whereas I was saying, "You	
1624		know this is getting bogged	Awful trainee was
1625		down in who's right, and what to	personable in
1626		do, and there's a magic number	group interview
1627		of people that you should see	
1628		and I'm not allowed to take you	
1629		over that number." And it's not	
1630		Trainer attitude: Positive. Negative may lead to reluctance to learn. Point out	about that. But she wouldn't
1631	goal/aim/expectations	engage in conversations about	
1632	for professional role and	that. She would be black and	
1633	create aspiration. Set agenda.	white.	
1634		I: What kind of therapist do you	
1635		think she will be?	
1636		P1: An awful one. I don't think	
1637		she will be a very good therapist	

1638		at all. I think (pause) erm, she'll	Trainee saw
1639	Why in his trust? Due to	claim to be... (pause) She	herself as more
1640	this method of training?	wasn't an IAPT therapist, and I	capable than
1641	Due to approach of	had actually taught her as well	supervisor
1642	trainers and personnel?	on the IAPT course (laughter)	
1643		there.	
1644	Allowed to here. Does	But I remember her there also as	
1645	he feel elsewhere this is	being, you know, quite a useful	Supervisor share
1646	not	contributor in a group of 20 odd	negative emotions
1647	allowed/encouraged?	trainees. So she was (pause) a	about trainee with
1648	His experience in his	PWP worker, low intensity	course
1649	trust.	worker. She was desperate for	
1650	Draws distinction	the status of a psychologist.	
1651	between clinical and	I think she would be a bit of a	
1652	counselling. States	bully as a supervisor eventually.	
1653	clinical is 'aloof'- i.e.	And I wouldn't... You know, she	
1654	connotation is they are	won't be a reflective practitioner.	
1655	above this type of		
1656	experience.	But I think courses need to have	
1657	Acknowledge own bias.	close relationships with	
1658		supervisors. I think that's	
1659	Is it a difference or a	fundamental. One thing that did	Trainee's way is
1660	bias?	worry me about, about trainees	right way
1661		from (pause) counselling	
1662	Talking about r is	psychology, were that not	
1663	essential to learning r.	always was the course as	
1664		prepared I think to, to be a	Trainee is not open
1665		bridge between the trainee and	
1666		the supervisor.	
1667		Erm, I always felt that I was kind	
1668		of lucky that ... came out and sat	
1669		with me. I used to say, "Well if	
1670		you want to give me a trainee,	
1671		come out and sit with them and	
		me." Once a placement was	

1672		every six months. And he	
1673		enjoyed doing it. I think he liked	
1674		getting out on his motorbike.	
1675		You might need to take his name	
1676		out of the script. (laughter) And	
1677		I felt he showed an interest in his	
1678		trainees and I thought, "There's	
1679		the ethos that he's interested in	
1680		that."	
1681	Trainer agree. Too	Then the trainees kind of dried	Trainee not
1682	leading/closed a	up, when I went into older adults.	appreciate trainer's
1683	question?	And I said, "Well they need to	years of
1684	Trainer must be used to	have a bit of older adult	experience
1685	being self-aware, i.e.	experience and they need to be	
1686	must have r to teach r.	in the second or third year."	
1687	Yet how does one	And it kind of dried up. Then lots	
1688	assess oneself or	of barriers seemed to come up	
1689	organizations assess	about, "Well you're out in the	
1690	trainers for this?	sticks and we're not really able	
1691	Must be able to demo it	to get out there to look after	
1692	for trainees	them."	
1693	Must show r yourself to	And I thought, "But you're giving	
1694	allow teaching of r.	a trainee me as their supervisor,	
1695		don't you want to know that I am	
1696	Trainers must have a	still a decent person and I'm not	
1697	distance or be an	going to be some sort of horrible	
1698	observer from, the	supervisor?"	Trainer judge
1699	process of counselling to	So it started there, with the	trainee as lacking
1700	recognize concerns	course being, personal therapy	professionalism
1701	about treatment working	is good, but it's a very private	
	and both positive and	experience.	
	negative emotions about		
	client.		

1702			Trainee not identify
1703		I: So potentially more cohesion, in a sense between supervision, course and trainee?	her emotional reactions to trainer
1704			
1705			
1706		P1: Yeah, and you can raise concerns, and if you do it tactfully, for the trainees it can be a useful experience.	
1707			
1708			
1709		Personal therapy, you could coast. You could be very introspective. You could be very prepared to (pause) err, really work in personal therapy, but you might not.	Trainee not engage in conversations about relationship
1710			
1711			
1712			
1713			
1714	Emphasis on the positive. Why is this important? Is it easier to talk about the positive than the negative? If so, why does this not happen until the end?		Trainee only engage in black and white conversations
1715			
1716		Whereas I think your supervisor's not going to let you get off the hook. And if the course is, they're interested in you, their ethos is, "We want to know what's going on." That's a good thing.	
1717			
1718			Trainee with no r will be awful therapist
1719	Must understand/know the process.		
1720			
1721			
1722			
1723		I: That's all the questions I have. Is there anything you feel you would like to add?	
1724			
1725			
1726			
1727		P1: You know there's a continuum, and some people can be shifted along it and others maybe not. But maybe the idea is about, yeah, (pause) having a sentry at the door so that those who really don't have	Trainee desperate for status of psychologist
1728			
1729			
1730			
1731			
1732			

1733	Trainer must be comfortable with their own emotions. What does comfortable? What type of expression and communication would he see if someone was comfortable? Why is this a mediator for r?	that capability, they don't come	Trainee would be bullying as supervisor Trainee not be a reflective practitioner Courses need close relationships with supervisors  Counselling psychology courses not prepared to be bridge between trainee and supervisor	
1734		into the profession maybe.		
1735		Because we all know clinicians,		
1736		you know consultants at times,		
1737		who don't have this ability. And		
1738		you think, "Well..." And they're		
1739		the ones who don't have		
1740		trainees given to them. They're		
1741		kind of edged out I think. And		
1742		it's a (pause) it's a (pause), it's a		
1743		secret that they don't have this		
1744		skill. It's a secret to them. But		
1745		everyone else knows it, and so		
1746		that's why they don't get trainees		
1747		given to them. And they're not		
1748		Back to schedule as wish to have more specific example		entrusted with the development
1749				of people, I think.
1750				
1751	I: But would they...?			
1752				
1753	P1: So I think there are people			
1754	who get through the profession,			
1755	and it's not in their toolbox and			
1756	they survive, they're not... And I			
1757	think they are the ones who		Trainer enjoyed being bridge between supervisor and trainee	
1758	become bullies. They're the			
1759	ones who become (pause) very			
1800	obstinate about other people			
1801	have the problems. And they're			
1802	just emotionally uptight. They're			
1803	anal buggers really; because			
1804	they're not prepared to (pause)			
1805	just say it as it is. (laughter).			
1806	Talks about training in work place rather than one courses. Interesting as perhaps can put more energy in with 2 at a	Trainer ethos of interest in trainees		



1807	time than the group mentioned above.	I know one and he's just like,	Trainees dried up
1808	Very impressed by him.	really if you're going to get that ill	in older adults
1809	Why?	mentally and physically because	
1810		you just can't (pause) be looser	
1811		as a person, then you should be	Specific
1812		retiring. And you're at an age	requirements of
1813		where you could retire. What	supervisor led to
1814		are you doing? You're just doing	trainees drying up
1815		harm to yourself. Patients aren't	
1816		getting any better, you're not	Barriers from
1817		getting... There's no joy in the	course about being
1818		kind of working at that point. It's	the bridge
1819		nuts.	
1820	Why?	But I think at that point in your	Supervisor need
1821	Why?	career, you probably think, "I	for bridge for
1822		know it all." And so, and this is a	course
1823		clinical psychologist, I think if	Supervisor wants
1824	Trainee would be keen. 'Rush in' to supervision made trainer feel good?	they start off with this sense of,	course to ensure
1825	And open to discussing his own feelings-	erm (pause) entitlement and	good training
1826	encouraged by trainer as	seniority, and they get through a	
1827	good behaviour/learning.	career span where they've never	Personal therapy is
1828	Talked about process of supervision.	been challenged on that, then	a private
1829		they...	experience
1830		So there's a batch of trainees,	Course is an open
1831		who have qualified and they've	experience
1832		been employed by a Trust, and I	
1833		supervised four or five of them.	
1834	Allowable by trainer? 'Found a way' = implies	Virtually all of them have come	
1835	a useful way and non-	out saying, "Well I'm qualified	
1836	critical but constructive.	now." And they're almost kind of	
1837		going around like, "I'm an MD."	
1838		And you're like, "Do you know	
1839		what, it's great that you've	
1840	Evaluation of trainer, in this case supervisor.	qualified and the excitement that	

1841	Does this change/affect the trainer?	you're no longer on a training	Supervisors raise	
1842		course is there." Of course it's	concerns tactfully	
1843		there. But you see over the year	useful for trainees	
1848		of post qualification, that they	Trainees can coast	
1849		then erode a little bit. They're	personal therapy	
1850		like, "Yeah I can do everything."		
1851				
1852			And I think it's that awareness	
1853			that the world's quite a big,	Supervisor will not
1854		'Brave' implies fear of response. Power dynamic.	difficult place. There are a lot of	let trainee coast
1855			demands on a psychologist.	
1856			They're the ones who were	Course ethos
1857			better I think, once they get over	should be of
1858			the hump of, "I'm the best, I've	interest in trainees
1859			qualified from this university. I	
1860			am brilliant." Actually, the reality	
1861			is it's quite tough. And those	
1862			who go around still saying	
1863	they're the 'bees knees' are the			
1864	ones who are like, "You're the			
1865	ones who are going to be in	Continuum of r.		
1866	trouble in a year's time, you're			
1867	going to be off on sick leave, or	Some trainees can		
1868	ducking out of the career one	shift on continuum,		
1869	way or another." They do, I	others cannot.		
1870	think.			
1871		But the guy who was there, who		
1872		was very adept, he was very		
1873		young and I thought, "He has		
1874	Within his personality, i.e. born with it? Is this temperament? Is there any other reason he can do this?	got..."	Sentry must stop	
1875			those without	
1876			capability entering	
			profession	

<p>1877</p> <p>1878</p>	<p>Notice distinct difference and understand it in terms of personality, i.e. natural individual differences.</p> <p>You've got it or you don't. Similar to earlier phrase from his colleague.</p> <p>Can you help her if it is personality? To what extent?</p> <p>R is helpful skill. How do we know this?</p> <p>Aloofness: Sitting above, unwilling to learn or unable to learn. Trainee approach to learning affect the learning. Wish to be above and not willing to adopt position of learner.</p>	<p>conversations. I think new experiences can make you shift your...</p> <p>So the death of my nan was integral in terms of (pause) now I can understand the experience of loss slightly differently. But I had already had that preparedness to be reflective and to be open about that. But here was something that was instrumental for me and very powerful, that demonstrates, and that other people struggle with.</p> <p>So it's just that brings in (pause) to the room, conversations about something that other people find they don't want to talk about, I think.</p> <p>I: It allows you to develop that part of you?</p> <p>P1: Yeah, permission. Yeah.</p>	<p>Clinicians without capability are edged out</p> <p>Clinicians without capability do not know.</p> <p>Others know that clinicians do not have capability. Others do not entrust training to those without capability.</p> <p>Clinicians with no capability become bullies</p> <p>Clinicians with no capability are emotionally uptight</p>
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	<p>He adapted to be what his supervisor wanted? Or they fitted well?</p> <p>Rumourville = accepted amongst colleagues. Seen as different or odd?</p> <p>Other trainee had not adapted to him.</p> <p>As supervisor, he set the scene of the openness.</p>		<p>Clinicians with no capability do harm to themselves and patients No joy in working without no capability r.</p> <p>Sense of entitlement equals lack of capability for r Sense of seniority equals lack of capability for r</p> <p>Sense of being a doctor can stop learning process</p> <p>Erode over year post training</p>
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	<p>Prepared by rumours. By his past experiences?</p> <p>Talk on a personal level.</p> <p>Not born with capability. What does 'just was' mean? Is this then learned? Combination?</p> <p>Comfortable means showing emotions and not feeling judged?</p> <p>Value is part of r? but how?</p> <p>Implies some of it is innate along with environment.</p> <p>Circumstances could be in training. Does earlier experiences or earlier learning experiences affect this?</p>		<p>Lot of demands on psychologists</p> <p>Awareness of wider demands is helpful</p> <p>Getting stuck in thinking they're the best is unhelpful</p> <p>Thinking they're the bees knees leads to career trouble</p> <p>New experiences makes you shift Establishing neuro pathways leads to being r Able to have those conversations means more r</p> <p>Personal experience of trainer helped him</p>
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<p>Process of change for trainee.</p> <p>Dependent on trainers.</p> <p>Uses 'we' – separation of interviewer.</p> <p>Person centered term – belief in everybody's capability. So why was the female trainee not learning? Not ready? Move to self-actualisation at different times or this is different for her.</p> <p>Limit for each individual.</p> <p>Should have asked more about self-actualisation</p>		<p>understand differently.</p> <p>Preparedness to be reflective allows openness to new experiences</p> <p>Permission to develop self .</p>
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	<p>and theory driven understanding.</p> <p>Refers back to supervision. This seems to be his most essential role as a trainer.</p> <p>Mould selves and goals to fit on form. How do you judge if they are more reflective? What are criteria?</p>		
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	<p>Process of interview: Group interview with 8 potential trainees.</p> <p>Group interview: Task to measure....</p> <p>Why choose mundane task? To enable focus on each other. Not too cognitively challenging and allowing therefore of interaction.</p>		
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	<p>.... Interpersonal skills and self-awareness. How does he measure this? Seems subjective?</p> <p>Judge by own interpretation. Is this helpful? Unhelpful? Open to bias and wholly dependent on interviewer approach.</p> <p>Make it more objective through multiple interviewers from various aspects of clinical work and thus</p>		
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	<p>have a shared perspective? Yes people working together or asked to work together may well share same perspective anyway. Helpful?</p> <p>Differences of opinion deferred to service user. They are prominent voice.</p> <p>Consistency amongst interviewers surprising.</p>		
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	<p>Competition- judging one directly against other. Interviewers know what they are looking for- visibility without dominance.</p> <p>Interpersonal skills are indicative of r. Name these interpersonal skills.</p> <p>Interview Process continues with individual interview and then results compared.</p>		
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	<p>Academically strong tend to perform well in individual interviews.</p> <p>Not always in group interviews.</p> <p>Awareness of large mismatch will result in rejection.</p> <p>Value of group vs. individual. Value of interpersonal skills vs academic ability (if this is what the individual interview measures)</p> <p>Important question is how mouldable is someone based on their personality.</p> <p>What personality is mouldable? What</p>		
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	<p>personality are you looking for? What personality relates to r?</p>		
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	<p>Interpersonal skills and the moudable personality aren't enough for training. How important is r in training? Good for clinical work? Good for research? Good for academic ability? Does r help or indicate potential in other areas?</p> <p>Intellectual weight and experience is more important than interpersonal skills overall.</p> <p>One can improve this but could one improve interpersonal skills?</p>		
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Allowed another opportunity the following year to understand if they have changed? Or they just could not meet expectations in that particular situation.

	<p>If consistently fail to demonstrate interpersonal skills, then may not be selected again for interview.</p> <p>Clinical training not right for them perhaps because of their personality.</p> <p>Do course outline this clearly? Can course or individuals outline this clearly? i.e. types or personalities that would suit clinical programmes. Does this vary depending on clinical programme?</p>		
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	<p>Seem to have interpersonal skills meaning that she didn't really? Or not enough?</p> <p>Trainees can learn an interview skill to achieve in the interview and demonstrate evidence of skills even if not possess them fully?</p> <p>Leaning in interviews-how to do it. Results in forced/pretend impression management not fully representative of individual or of measurement?</p>		
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	<p>Learn what they should be saying or doing? How do they know this? Repeated experience of attending interviews across course or across years? Coaching sites?</p> <p>Very personable. Does this mean she wasn't or wasn't enough?</p> <p>Aloofness again.</p> <p>Trainer felt it was about his profession that she felt it as lower than hers as clinical psychology. Is</p>		
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	<p>this the trainer, the trainee, the environment?</p> <p>Addressed concerns with course.</p> <p>Trainer experiences interpersonal stuff but trainee either doesn't identify it or not acknowledge it. This identification and/or acknowledgement is related to r for him.</p>		
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	<p>No flexibility. No allowing trainer's viewpoint.</p> <p>Closed practitioner. Not willing or able to learn. Not wanting to learn.</p> <p>Not able to see grey areas. Need for right and wrong- inflexibility. Approach to learning- there are facts and non-facts/right way and wrong way. Is this influenced by personality? Prior learning?</p> <p>Progress with her- in order to encourage r. Thus feels essential to have r in order to progress. Yet no as it is about him managing her. Does he alter his approach to learning if not fit with trainee? Should trainees adapt to trainers or vice versa or shared.</p> <p>Very positive emotions towards the other who is more like him. The trainer also has a right way and a wrong way. Is he inflexible? The other end of the spectrum</p>		
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	<p>from her but inflexible in his way too?</p> <p>Trainer experience important to share for r.</p> <p>Seems like battle.</p> <p>Lack of r impedes learning. Lack of flexibility impedes or is r?</p> <p>R relate to professionalism. Why laughter? Frustration, no change.</p>		
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	<p>Not understand reaction within supervision or address it. Thus r is lacking the identification and working with the emotions.</p> <p>Not be a good therapist as inflexible, unprofessional, lacks r.</p>		
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	<p>Rationale/motivation for training indicator of learning approach or style. This trainee has to learn to reach goal of status, not learning for learning sake.</p> <p>Not be r.</p> <p>Importance of relationships between training components, particularly supervision as potentially more external component in this example.</p>		
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	<p>Different clinical courses have different framework to connect components of training. Counselling psychology weaker in links to supervisors on placements.</p> <p>Important for trainers to show interest, make effort with trainees. This encourages learning? And learning r?</p>		
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	<p>Approach of trainers and training institutions is important. To help supervisor and therefore help trainee. Links are significant in training environment.</p> <p>Link to personal therapy as other external component. Common view that unknown whether supervisor or personal therapist is good or bad for trainee's</p>		
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<p>experience. How would training organization ensue this? What would they look for in supervisor or therapist? Demands for placements.</p> <p>Supervision less dependent on trainee as supervisor can take action to address learning needs. Yet then dependent on supervisor qualities and goals.</p> <p>Personal therapy dependent on trainee's use of it and this is unknown as it's a private experience.</p> <p>This work would look like what?</p> <p>Assume supervisor's have common goals. Is this true? How would one define them? Seem intrinsically interested in trainee's development? And have been and are</p>		
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	<p>interested in own development. Is there a link between wanting to develop oneself and wanting others to develop too?</p> <p>Continuum of r, some people can move along it whilst others cannot/ What are the requirements for moving? From trainee? From trainer?</p> <p>Encourage increased security at interview to assess capability more readily.</p> <p>Infers professionals who have been in the work for a longer period may have been admitted to profession whereas now they would not be and that they are not trusted with trainees.</p>		
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	<p>Lower r unknown to the person. They don't know they are missing something, but others do. Is this true overall?</p> <p>Trainees are valuable and trainers are entrusted care, like parents for development reasons. Depends on available resources perhaps?</p> <p>Become dominant as lack development/lack r. Inflexible, similar to trainee described earlier.</p> <p>Meaning emotions aren't available to them or others?</p> <p>Not prepared, or like the secret, not able. Both possible. Contradiction here.</p>		
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	<p>Feels inflexibility leads to being unwell.</p>		
	<p>Trainees who might start with sense of entitlement may not change in training and thus more unlikely that they will change in their careers as never challenged. Status after training and promotion means less likely to be challenged.</p>		

	Viewed as unhelpful.		
	Need for learning and development to continue. Goal not be be qualified but goal to be a good psychologist. What is a good?		

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	<p>Neuro pathways: ask around this. Do they have to be there? Should have asked.</p> <p>New experiences create new neuro pathways, thus important to be open and approachable to new experiences.</p> <p>Learnt more about loss from personal experience. Showed openness to learning but had the willingness to be like this before.</p>		
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	Trainer gives permission.		
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**Appendix AD: Interview J: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Original Transcript	Exploratory Comments	Emergent Themes
1 2 3	I: So the first question really is just asking what your professional title is?		
4 5	P1: So I am a counselling psychologist.	Counselling Psychologist	<b>Job title</b>
6 7	I: How long have you been doing that?		
8 9 10 11	P1: Erm, (pause) So I qualified as a counselling psychologist in 2005. So, what that's seven years, since qualification?	7 years	<b>Years of experience</b>
12 13	I: How long have you been training?		
14 15 16 17 18 19 20 21 22	P1: Erm, (pause) about the same. I started training just about the same time I was finishing off my own training. So that's a question for another day. I was just finishing off when I actually came into being a trainer myself, which was quite a weird experience.	7 years	<b>Years of training</b>
23 24 25	Yeah, so I've been training for about as long as I've been qualified.		

<p>26</p> <p>27</p> <p>28</p> <p>29</p> <p>30</p> <p>31</p> <p>31</p> <p>33</p> <p>34</p> <p>35</p> <p>36</p> <p>37</p> <p>38</p> <p>39</p> <p>40</p> <p>41</p> <p>42</p> <p>43</p> <p>44</p> <p>45</p> <p>46</p> <p>47</p> <p>48</p> <p>49</p> <p>50</p> <p>51</p> <p>52</p> <p>53</p> <p>54</p> <p>55</p>	<p>I: What was your professional identity before being a counselling psychologist?</p> <p>P1: Erm, (pause) I don't think I really had one. Erm, (pause) I mean I had been studying for about ten years, or a bit less than that. I did an undergraduate degree in psychology, and then a PhD in psychology, before I started counselling psychology training.</p> <p>So, erm, I guess the identity I had just before I started the programme, was very much a student sort of researcher type identity.</p> <p>I came back into studying after a period of, erm, being a musician, as you probably know. Erm, and yes I've been a sort of working musician, trying to make it in the music business. I spent about five or six years doing that, since I left school. Finished my 'A' Levels and then did that, and then came back to study.</p> <p>So if I did have an identity it was as a musician I guess.</p>	<p>Student, researcher, musician</p>	<p><b>Previous professional identity</b></p>
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56	I: Throughout that path, that		<b>Introduction to reflection/reflexivity</b>
57	course, when did you first come		
58	across the term reflection, reflexivity?		Undergraduate studies
59			
60	P1: It's an interesting question.		
61	Erm, (pause) I did an		Module
62	undergraduate module in my	Undergraduate	
63	BSc degree, in the third year,	studies: 'An	
64	called 'An introduction to	introduction to	
65	psychological counselling, the	psychological	
66	psychology of counselling'. That	counselling'	
67	was led by Paul [Hicksonburgh		
68	0:02:15] who was a counselling		
69	psychologist. A bit of a mentor to		
70	me I guess, in terms of the		
71	interests I developed.		
72	The reason that popped into my		
73	head, was because in response		
74	to your question, I realise that		
75	was the first contact I had with,		
76	proper contact I had with the		
77	idea of counselling psychology,	Where own initial	
78	and where my own initial interest	interest in the	Importance of the
79	in the importance of the	importance of the	therapist's self
80	therapist's self and personal	therapist's self and	Personal
81	development. The importance of	personal	development
82	understanding yourself, erm,	development	
83	really began.		
84	However, even though I think		
85	that's a relevant context, that		
86	comes to mind when answering		
87	your question. I don't have a		
88	specific recollection of coming		

89	across the term or the concept,		
90	reflexivity, at that stage.		
91	Erm, and actually, it's an	Discovered reflexivity	
92	interesting question, because	when I was in my own	During counselling
93	(pause) I would probably say	counselling	psychology training
94	(pause) that I came across it	psychology training	
95	when I was in my own		
96	counselling psychology training,		
	that's really where it came up.		
97	I: How would you define it now?	Determine the	<b>Definition</b>
98		difference, or whether	Reflexivity and being
99	P1: (pause) Well I think that the	there is a difference	reflective are two
100	interesting thing for me, is that,	between the notion of	different notions
101	erm, and this is something that	reflexivity and the	
102	I've been meaning to look into	notion of being	
103	and read up on. Is that, I have	reflective	
104	been trying to work out in my		
105	head, what the difference is, or		
106	whether there is a difference,		
107	between the notion of reflexivity		
108	and the notion of being erm,	Reflexivity is slightly	
	reflective, or being self-reflective.	different to self-	
109		reflection	
110	Erm, now reflexivity is a term		
111	which, they seem to be used	Reflexivity comes up	
112	inter-changeably. But my sense	a lot in research.	
113			
114	So reflexivity is a term which,	Reflexivity is about	<b>Reflexivity</b>
115	really comes up a lot in the	the idea that,	Subjective
116	context of research. And is all	fundamentally, is the	foundations of all
117	about, my understanding is it's	subjective	knowledge,
118	all about the idea that, erm,	foundations of all	
119	fundamentally, is the subjective		



120	foundations of all knowledge and	knowledge and	interactions and
121	err, interactions and the process	interactions, and the	understanding
122a	of understanding, is always	process of	
122b	subjectively based.	understanding is	
123		always subjectively	
124	So the implication is that it's	based.	
125	actually logistically impossible to		
126	separate one's self from a	Logistically	
127	process of inquiry. That you are	impossible to	
128	always implicated, at a	separate one's self	The self is linked to
129	fundamental level, in the process	from a process of	the process of inquiry
	of inquiry and understanding.	inquiry.	and understanding
		You are always	
130		implicated, at a	
131	That means that you as an	fundamental level in	
132	enquirer, are part of the process	the process of inquiry	
133	itself. And that in order to	and understanding.	
134	understand the implications that		
135	has for the knowledge you	Part of the process	
136	generate, you have to identify	itself as an enquirer.	
137	the influence, or attempt to try		Identify the influence
138a	and identify the influence that	To understand the	that subjective has on
138b	your subjectivity has on the	implications that has	the process
138c	process.	for the knowledge	
		you generate, you	
		need to identify	
		influence, or attempt	
		to try and identify the	
		influence that your	
139		subjectivity has on	
140		the process	
141	So it's about kind of,		
142	understanding the		
143	embeddedness of yourself and	Understanding the	
144	all ourselves in this process.	embeddedness of	

145	Trying to adopt a reflective	yourself and all	Understanding the
146	stance, where you turn back on	ourselves in this	embeddedness of
147	yourself and try and look at that	process	self in the process
	process, using the capacity that	Trying to adopt a	
	is kind of uniquely human, I	reflective stance	
	guess, that capacity to reflect.	where you turn back	Reflective stance
		on yourself and try	Capacity to reflex
148		and look at the	
149		process, using the	
150		capacity to reflect	
151	So it's a kind of erm, (pause) – I		
152	guess the idea of a reflex, is that	You will automatically	
153	you automatically will assume	assume that there's	
154	that there's some kind of looking	some kind of looking	Partially automatic
155	at oneself, or unpicking at a	at oneself, or	process
156	process or critiquing what's	critiquing or reviewing	
157	happening in a process. That	a process	
158	should be automatic, if you're		
159	really trying to produce some	Should occur	
160	kind of knowledge, or	automatically	
161	understanding that's genuinely		
162	transparent and attempting to be		
163	comprehensive, in the broadest		
164	sense.		
165	I: It's interesting, because you		
166	used a phrase there around		
167	automatic. Do you feel reflexivity		
168	is something that is uniquely		
169	human, that is automatic? Or do		
170	you feel it's something that		
171	(pause) you've developed over		
172	the years?		
173			

174	P1: Yeah, erm, yeah I mean I did	A process that people	
175	use the term automatic and	are committed to.	The process requires
176	that's interesting, I guess that's		commitment
	the kind of value that I'm		
177	bringing in as a professional,		
178	that means it should be		
179	something – a process that		
180	people are committed to.		
181		Not automatic.	Not completely
182	I don't think it's automatic. I don't	Natural tendency is to	automatic
183	think it's something that happens	not reflect.	
184	automatically or inevitably. It's in		Natural tendency is to
185	fact, I think sometimes it's		not reflect
	actually the natural tendency is		
186	away from doing that.		
187	Sometimes it's quite effortful to		
188	have to engage in that process.		
189			
190	I guess what I'm saying is, my	Clinicians should	
	use of that term, is that I think,	engage in reflexivity	
191	clinicians who subscribe to the	regularly	Clinicians should
192	importance of it, should engage		engage in reflexivity
193	in it regularly.		regularly
194			
	I: May I ask you about your		
195	effortful path in terms of learning.		
196	When would you say it started?		
197			
198	P1: (pause) I think, (pause), I		
199	think that's a really big question.		
200	Erm, (pause) because I think		
	actually, it takes me back to the		
201	experience I had of attempting to		
202	answer your first question.		
203			
204			

205	Which is trying to locate the		
206	origins of something, erm, which		
207	isn't actually necessarily easy to		
208	identify initially.		
209	So, (pause) I guess I would say	Development of my	<b>Effortful path of</b>
210	that there was probably a part of	own ability to be	<b>learning</b>
211	the development of my own	reflexive that began	Unconscious process
212	ability to be reflexive, that began	before I was	
213	long before I was conscious that	conscious that that	Through training,
214	that was what was happening.	was what was	development of
215		happening	capacity, more
216	Then, part of the development of		conscious, and
217	that capacity, which was	Development of that	purposeful
218	engaged with in a more	capacity, more	
219	conscious, purposeful way, in	conscious, purposeful	
220	the context of training. And I	way, in the context of	
221	think that's probably the case for	training.	
222	a lot of people who come into		
223	this field.	Training in this area	
224		allows you to realise	
225	Is that, it's only when you kind of	that you've been	Fundamental
226	get into the process of training in	developing some of	characteristics of a
227	this area, that you realise that	these fundamental	counselling
228	you've been developing some of	characteristics that	psychologist
229	these fundamental	define being a	
230	characteristics that define being	counselling	Awareness of
231	a counselling psychologist.	psychologist.	development
232			
233	All sorts of factors, like your own,	Genetic disposition	
234	probably genetic disposition. All	Life experiences	
235	sorts of life experiences, other	Influential people to	<b>Influential factors of</b>
236	people, you know, that have	your development	<b>development:</b>
	been influential to your		Genetic disposition
	development. That have, in a		Mentors
	way, modelled or helped you to		

237	develop this capacity. That you	Modelled or helped	People influential to
238	didn't identify as being a	you develop this	your development
239	reflective capacity, until you	capacity	Modelled behaviour
240	came into training and		
241	somebody said, "Part of the		
242	reason that we've selected you		
243	for this programme is because		
	you seem to have this kind of,	Embryonic kind of	
244	already developed, this	ability	Embryonic ability
245	embryonic kind of ability, that's		
246	fundamental to what we're		
247	looking for." And then it gets		
248	named.		
249			
250	Then people say, "And it's really		
251	important because, all these	Being able to be	Important
252	theories about why, and being	reflective is important	
	able to be reflective, is so	for being a good	
253	important for being a good	therapist	
254	therapist." Then you think, "Ah		
255	yeah, I can see that." Then you	Once identified, start	Identification leads to
256	start working on it more	working on it more	conscious effort to
257	consciously.	consciously	work on skill
258	So I would say that, I only really		
259	became aware of the fact that	Awareness of term	
260	this term, or the developing it in	when started training	Training generates
261	a conscious way, when I started		awareness
262	training.		
263			
264	But when I think, one of my		
265	earliest memories, and this is a		
	weird kind of memory that has		
266	come to mind. One of my earliest		
267	memories is of sitting, as a small		
268	child, in a school assembly in		

269	primary school, probably about five or six years old, at the most.		
270			
271	It was a Catholic primary school,		
272	and we had all sorts of kind of		
273	discussions about God and		
274	things like that.		
275			
276	I remember sitting there,		
	wondering about, with the nature		
277	of the universe and where it		
278	ends, and having this profound		
279	sort of feeling of, "But it can't end		
280	because then what happens	Transcendental	Transcendental
281	after that?"	moment of realizing	moments
282		there are massive	
283	And there is this kind of moment	questions in life that	Positive relationship
284	of, I don't know, almost a kind of	are so meaningful	of enquiring about the
285	transcendental moment of	and powerful, and	world
	realising that there are these	having a positive	
286	massive questions in life that are	relationship to that	
287	so meaningful and powerful and,	kind of way of	
288	having a positive relationship to	enquiring about the	
289	that kind of way of enquiring	world	
	about the world.		Reflective
290		Reflective kind of	characteristic was
291	That's reflective kind of	characteristic that	present at an early
292	characteristic, that I can see	was there at an early	age
293	now, looking back, that was	age	
294	there at a very early age.		
295			
296	I: Interesting, because earlier on		
297	you said, "Often people retreat		
298	from that, rather than go towards		
	it." I am kind of wondering, from		
299	what you've described, are there		

300	particular environments where it		
301	was helpful, in terms of		
302	developing reflexivity, even if		
303	you don't feel it?		
304		Counselling	
305	P1: Yeah, I mean I think (pause)	psychologists like the	
306	I think that, my sense is that, for	idea of being	
307	me and maybe for a lot of people	reflective	
	who come into counselling		
308	psychology, they like the idea of	Even though it might	Meaningful process
309	being reflective. So even though	be effortful, it's a	Meaning way of being
310	it might be effortful, it's a	meaningful kind of	Meaningful
311	meaningful kind of question, kind	question, kind of	questioning
312	of process or way of being.	process, or way of	
313		being	Effortful
314	So I think that even though it's		Desire to want to do it
	effortful I think a lot of people	Despite being	
315	kind of seem to want to do it. I	effortful, a lot of	
316	think it's the kind of people who,	people want to do it	
317	just (pause) aren't interested that	People who aren't	
318	probably wouldn't come in to this	interested in it, are	
319	line of work.	unlikely to become	
320		counsellors	
321	But actually, sorry could I just		
	clarify that other part of your		
322	question? Because you're		
323	asking about, (pause) kind of the		
324	context in which one would try		
325	and promote development? Can		
	you clarify about what you		
326	mean?		
327			
328	I: Maybe an easier way of asking		
329	it, is about what you just said,		
330	about well why are some people		
331	interested and some not?		

332			<b>Factors influencing</b>
333	P1: Erm, yeah I mean I don't		<b>interest</b>
334	know the answer to that. I think	Early experiences of	Early experiences of
335	it's a very interesting, again	attachment	attachment
336	rather a big question. I suspect	relationships	Self-reflective
337	that erm, (pause) a lot of it is to	Self-reflective	capacity
338	do with early experiences of	capacity	Mode of relating to
339	attachment relationships and the	Mode of relating to	self
340	extent to which a self-reflective	oneself	Exposure to primary
341	capacity or mode of relating to	Extent to which you	care givers in early
342	oneself as being, the extent to	are being exposed to	development
343	which you are being exposed to	the important primary	
344	the important primary care givers	care givers and other	
345	and other people who are	people who are	
346	important in your early	important in your	
347	development.	early development	
348	So I guess my own kind of		
349	(pause) that's a question that	Influenced by	Literature
350	I've been interested in myself,	literature	Research
351	and so my answer is, to some		
352	extent, influenced by bits and		
353	pieces of literature that I've read,		
354	to try and sort of find out.	Development of	
355	There's loads of interesting	mentalization an self-	
356	literature that I've come across	reflective function	
357	about the development of		
358	mentalsation and self-reflective		
359	function, which I think makes a		
360	lot of sense.	Not something that	
361	So I guess what I'm saying is	happens	
362	that, erm, I think that being self-	Uniquely human	
363	reflective is not something that	characteristic that is	
	happens – I said it's a uniquely		



364	human characteristic. I think it's	there but it's not	
365	a uniquely human characteristic,	always developed	
366	that is there potentially, but it's		
367	not always developed.		
368	I think in order for it to be	Developed via	Developed via the
369	developed there are certain	contextual elements	presence of
370	kinds of contextual erm,	that need to be	contextual elements
371	elements, developmentally that	present for the	
372	need to be present, for that	potential to be	
373	potential to be properly realised.	realised	
374			Psychoanalytic theory
375	So (pause) erm, the whole idea	Psychoanalytic theory	
376	of reflection, is there, I'm very	Daniel Stern	
377	influenced by some of the	Win Collott	
378	psychoanalytic theory around	Peter Fonagy	Development of self
379	that. You know work of people		Relationship with
380	like Daniel Stern or [Win Collott	The way in which you	oneself
381	0:12:42] or you know, Peter	first develop a sense	
382	Fonagy, or people like that,	of self	
383	who've talked about the way in		
384	which you first develop the		
385	sense of – that you have a self,		
386	that you are a separate person		
387	from other people	The way in which you	
388		start to have a	
389	The way in which you start to	relationship with	
390	have a relationship with yourself,	yourself	Experience reflected
	which is through having your		back to oneself
	experience reflected back to		
	you, through somebody else.	Having your own	
	And that, you know, the	experience reflected	Fundamental
	fundamental embeddedness of	back to you through	embeddedness of
	our experience of ourselves in	someone else	own experience of
	relationships with other people.	Fundamental	oneself through
		embeddedness of our	relationships

391	Other people are the mirrors to	experience of	People as mirrors
392	ourselves.	ourselves in	
393		relationships with	
394		other people	
395		Other people as	
		mirrors	
396			External process
397		Starts as an external	Internalise capacity to
398		process	reflect
399	We internalise that capacity to	We then internalize	
400	reflect on ourselves, but it starts	that capacity to reflect	
401	externally as a process, where	on ourselves	
402	somebody else performs that		Learned behaviour
403	function, we haven't got it yet.		Developed behaviour
404		Learned behaviour	Modelled behaviour
405	So we learn it, we develop that,	Developed behaviour	
406	if we've had that modelled for us.	Modelled behaviour	
407	So I guess I would say, that if		
408	you've had it modelled for you,		
409	and I would probably also guess		
410	that if you've then, as a more		
411	kind of later stage of		
412	development, you've continued		
413	to have developmental		
414	experiences, maybe with		
415	significant others, where there's		
417	a kind of a more conscious		
	culture or emphasis on reflection		
418	on life and being interested in		
419	those kind of questions. About		
420	what's happening for me and		
421	happening for you, and feelings		
422	and a way of relating to the		
423	world, which asks these		
424			

425	questions, continually. That kind	Post verbal	Post-verbal
426	of reflective mode of relating.	development	development
427		Narrative that you	Self-narrative
	I think if that continues to then	identify in life	Identity
428	be part of your erm, (pause) you	Identity	
429	know, post verbal development,		
450	rather than a kind of pre-verbal		
451	stage, it continues to be a		
452	narrative that you identify in life.		
	Then I suspect that what		
453	happens is, you then develop an		Positive experience
454	identity where that becomes an	Positive experience	increases future use
455	important part of how you see	increases the	
456	yourself.	likelihood of wanting	
457		to continue to do it	
458	Perhaps if you experience it in a		Negative experiences
459	positive way, giving meaning to		hinders capacity to
460	your life, then it would be	Negative experiences	reflect
461	something that you would want	may hinder the	
462	to continue to do.	development of the	
463		fundamental capacity,	
464	I guess, by contrast, if you've	making it difficult to	
465	had developmental experiences,	use it naturally	
466a	which haven't really modelled		
466b	this reflective capacity, or helped		
467	you to develop it. Then (pause) it		
468	probably doesn't matter how		
469	much you get exposed to the		
470	idea of it later on. If you haven't		
471	developed the fundamental		
472	capacity, or there are deficits in		
473	your ability, then it's going to be		
474	very difficult for you to, erm, to		Cognitive origins
475	kind of have a natural inclination	Developmental	Psychological origins
476	to do that, or be another way.	origins	Development origins
477			

478	So I have it has really important	Cognitive,	
479	developmental origins, you know	psychological	
480	cognitive, psychological	development origins	Part of ones culture
	developmental origins. Then I	Becomes part of your	(family and wider
	suspect that, at a later stage of	culture	culture)
	development, the extent to which	Family culture	Conscious part of
	it becomes an important part of	Wider culture	identity
481	your culture. You know your	Conscious part of	
482	family culture and maybe wider	your identity will	
483	culture. Then part of your	determine whether	
	conscious part of your identity,	you continue to be	
484	then will determine whether you	interested in it	
485	kind of, you know, continue to be		
	interested in that.		
486			
487			
488			
489			
490	So I would say that's what		
491	determines whether somebody		
492	is naturally reflective or not.		
493			Psychological
494	I: Also that's something you see		mindfulness
495	in the clinical work as well?	Psychological	Ego strength
496		mindfulness	Reflective capacity
497	P1: Erm, (pause) Yeah, I mean	Ego strength	
498	in clients, yeah. Erm, yeah	Reflective capacity	
499	definitely. I mean it's interesting		
	to think about the fact that for a		
500	long time (pause) whether or not		
501	we would consider, and one of		
502	the criteria that is still used,		
503	words that are still used is like		
504	psychological mindfulness or		
505	ego strength or reflective		

506	capacity. To determine how		Difficult life
507	likely we think a client is to		experiences may
508	benefit from or be able to	People with really	hinder capacity
	engage with what we're offering.	difficult life	
509		experiences may not	
510	And that's an interesting one.	have the capacity at	
511	That reflects the fact that most of	all	
512	my clinical practice has been in		
513	primary care. Where you won't		
514	see, you're not supposed to take		
515	on people who've had really,		
516	really difficult experiences,		
517	where they don't have that		
	capacity at all.		
518			
519	I: We're not naming it, but I		
520	suppose I was wondering about,		
521	you were talking about mirroring		
522	of the self earlier on, and		
523	separation of self and others. I		Personality disorders
	suppose for me that language is		and psychosis may
524	around personality disorders. Is	Deficits in reflective	cause deficits in
525	that the language you were	capacity or	reflective capacity or
526	thinking it was around?	mentalization relates	mentalization
527		to people with	
528	P1: Yeah, definitely, definitely.	personality disorders	
529	When I think of deficits in	and psychosis	
530a	reflective capacity or		
530b	mentalisation, erm, I am thinking		Compromised
531	about people with personality	Unable to develop the	psychological
532	disorders, psychosis.	ability due to	development
533		compromised	
534	Where the developmental	psychological	
535	experiences are such that that	development	
536	person's psychological		
537	development has been so		

538	fundamentally compromised,		Affect regulation
539	that they haven't even	Supports Affect	Level of distress
540	developed that ability.	Regulation	
541		Determined whether	
	I guess my view is that the	or not somebody is	
542	whole, I'm not saying anything	distressed	
543	that other people haven't written		
544	about. But that reflective		
	capacity, the reason why I think		
545	it's so important, not just to kind		
546	of, a cultural choice, it's because		
547	I think it's what supports Affect		
548	Regulation. Affect Regulation is		
549	what determines whether or not		
550	somebody is distressed.		
551			
	So when you talk about		
552	personality disorders that's what		
553	I think about.		
554			
	I: Let me ask a bit more about		
555	your training. You said that you		
556	(pause) there was where it		
557	became a place where you		
558	recognised what reflexivity was,		
559	and a place where you		
560	purposefully developed it.		
561			
	What components of your		Personal therapy
572	training or outside of training	Personal therapy	Research
573	helped you develop it?		
574		Research	
575	P1: Erm, (pause) well I think		
576	personal therapy was a, erm, a		
577	really important part of it. But the		
578	other thing that came into my		

579	mind, the second thing that		
580	came into my mind, was my own	Common factors and	
581	research actually.	integration and trans-	
582	Because, thinking about it, the	theoretical kinds of	
583	PhD research that I did, which	ingredients in therapy	
584	was all about, trying to give		
585	expression to this sense, this		
586	realisation that I had had as an		
587	undergraduate. Because [Paula		
588	Hickson 0:18:00] actually talked		
589	a lot about common factors and		
590	integration and trans-theoretical		
591	kind of ingredients in therapy.		
592			Fundamental
593	I remember sitting there and		importance of self
594	thinking, "That just makes so	The fundamental	Fundamental
595	much sense to me." At that point	importance of the	importance of the
596	a very naïve person, I didn't	self, and the	therapist
597	really know anything about	therapist, is the	
598	different roles of therapy. I just	fundamental tool	
599	thought, "That just makes so		
600	much sense." The fundamental		
601	importance of the self, of the		
602	therapist, that's the fundamental		
603	tool.		
604			
605	So I think that when I then did		
606	my own PhD research, which		
607	was very much exploring that		
608	idea, I would look back and say		
	that my own research was a way		
	for me to kind of, (pause) erm,		
	think about that, myself.		

609	I: This is prior to your counselling		
610	psychology training?		
611	P1: Yeah, yeah.		Exposed to via
612			research
613	I: So the process of doing the	Research exposed	
614	research, was something that	me to the idea	
615	developed your reflexivity?		Application of theory
616	P1: Yeah, I think it did a bit. I		to self and
617	think it did in the sense that, err	Applied theory to	understanding
618	(pause) in a limited way. But in a	myself or my own	
619	sense that it kind of exposed me	kind of understanding	
620	to – I read lots and lots about it.		
621			
622	So I think inevitably I was kind		
623	of, erm, (pause) applying some		
624	of that theory to myself or to my		
625	own kind of understanding.		
626	Because all along I was planning		
627	to go and do the training myself,		
628	I had a very long winded route. I	PhD was like an	Academic exploration
629	won't bore you with the details	academic exploration	of the fundamental
630	about why I did that. But, the	of some of these	concepts of therapy
631	idea was that I was always going	fundamentals of	
632	to try and do it myself.	therapy that made a	
633		lot of sense to me	
634	So, in a way the PhD was like an		
635	extended kind of, academic		
636	exploration of some of these		
637	fundamentals of therapy, that I		
	thought made a lot of sense to		
	me.		



638	So I guess in theory I was kind		
639	of applying it all to developing		
640	the kind of therapist I thought I		
641	want to be. But yeah, I mean...		
642	I: So was the subject matter,		
643	potentially of the research, not		
644	the research process itself?		
645			
646	P1: Correct.		
647			
648	I: Okay. So you would say	Personal therapy as a	
649	personal therapy. May I ask why	challenging	
650	personal therapy? Why did it	experience	
651	help develop reflexivity?		
652	P1: Well I mean (pause) I mean		
653	personal therapy I think is, was		
654	for me, quite a challenging		
655	experience. Erm, and (pause) it		
656	was really a space where		
657	(pause) I didn't really have a		
658	wear a hat, as being a therapist		
659	or being a researcher. I could		
660	just go into those sessions as		
661	me.		<b>Personal therapy</b>
662	In many respects quite the		Intellectualisation is
663	opposite end of the idea of doing	Don't need to	not required
664	the PhD, where you can have a	intellectualise it at all	
665	nice intellectual way of thinking		Issue management
666	about the notion of your own	How to manage the	by reflecting on
667	personal development.	issues in your	where the issues
668	I guess personal therapy is the	personality and	arise from
669	other end of the scale, is where	where do they come	
		from?	

670	you don't need to intellectualise		
671	it at all, and it's not really about		
672	anything other than you've got		
673	all these issues in your		
674	personality, (laughter) and where		
675	do they come from? And how do		Receiving feedback
676	you manage them?	In counselling, having	based on your
677		the things you have	thoughts allows
678	So, I guess that was quite a	communicated	insight
679	challenging erm, err, experience,	reflected back to you,	
680	because, (pause) a therapist, a	which may be only	Metaphor of a 'mirror'
681	psychoanalytic therapist, who is	partially clear in your	
682	quite sensitive to, and observant	own mind or hidden	Increases reflective
683	about what they think you're	in some way.	capacity and
684	telling them, they think you're		commitment
685	communicating. Then tries to		
686	reflect back to you, you know,	Part of the mirror -	
687	some of the things that maybe	Nobody has directed	
688	are kind of only partially clear in	your attentions	
689	your own mind or hidden in	towards so far	
690	some way.		
691	That's a part of the mirror, that	Broadened reflective	
692	probably nobody has directed	capacity	
693	your attentions towards so far,	Increased	Heightened sense of
694	probably.	commitment	attunement to one's
695			inner experience
696	So it kind of, it really broadened	Heightened sense of	
697	my sort of reflective capacity and	attunement to my	
698	erm, made me much more	own inner experience	
699	committed in a way, to...	Felt meaningful	
700			
701	You know, I'd come out of		
702	sessions feeling a much more		
703	heightened sense of attunement		
704	to my own inner experience.		

700	Erm, and it felt nice, it felt nice to		
701	have that experience, and it felt		
702	meaningful.		
703			
704	So I guess, (pause) that has		
705	been really important to me.		
706			Shared goal amongst
707	I: It sounds like the model was		techniques
708	the most important out of that. I		
709	wonder whether you feel other	Shared goal between	
710	models would be able to teach	different techniques	
711	reflexivity or develop reflexivity		
712	for the therapy?		
713			Adopting multiple
714	P1: Absolutely, absolutely. I		perspectives in
715	think there are loads of different		relation to your
716	ways of developing it. Erm, I		experience that
717	suspect that if we try, I think		facilitates insight and
718	there's lots of different	Seeing whether you	deeper understanding
719	techniques, but I think there's	can take up a	
720	probably some shared goal that	different position in	
721	they all have.	relation to your	
722		experience that kind	
723	You know, which is all about	of facilitates a clearer	
724	seeing whether you can take up	understanding	
725	a different position, in relation to		
726	your experience, that kind of		
727	facilitates a clearer		
728	understanding. There's		Multiple approaches
729	innumerable techniques to do		Psychoanalytical
730	that, you know. Therapy is full of		approach
731	ways of trying to get clients to		
732	think about themselves, in a new	Psychoanalytical	
	or different way, or in a more	approach – not the	
	objective way.	only approach or best	

733	So yes I do, I have got my own	approach for	Supervision
734	personal sort of biases I guess,	everybody	Yoga meditation
735	about why I think the		Collection of
736	psychoanalytical approach is		experiences develop
737	useful. But I wouldn't say it's		capacity
	necessarily the only approach or	Supervision	
738	the best approach for everybody.	Yoga meditation	
739		experience	
	Erm, and yeah I think that would	Constellation of	
740	be... And I don't just think	experiences in life	
	therapy is. I mean, you know,	that have all served	
741	there's supervision, there's also	to develop a reflective	
	my own sort of, (pause) yoga	capacity and continue	
742	meditation, experience, that's	to do so	
743	relevant to mention. But I think		
744	there's been a constellation of		
745	experiences in my life, that have		
746	all served to develop a reflective		
747	capacity and continue to do so.		
748			
749	I: Yoga meditation would be one		
750	of those?		To increase
751			understanding of
752	P1: Absolutely, absolutely.		yourself
753		Different goals	
754	I: May I ask why?	Part of what they do	
		is the same	
755	P1: Because, one of the things	Increasing your	
756	that erm (pause) that I think is	understanding of	
757	shared, between the practice of	yourself and who you	
758	yoga meditation and	are	
759	psychological therapy, or at least		
760	my way of thinking about		
761	psychological therapy, is that		Self-observational
762	they have a similar – they have		capacities
763	different goals, but there's part of		

764	what they do that's the same. It's		
765	all about increasing your	Meditation is a	
766	understanding of yourself and	technology about	Directs attention to a
767	who you are.	sharpening your self	minute moment –
		observational	awareness of
768	I think the great thing about	capacities	psychological,
769	meditation is that, erm, it's a		physiological and
770	technology, if I can use that	Directs your attention	emotional processes
771	word, which (pause) erm, is all	in a very microscopic	
772	about sharpening your self	moment to what's	
773	observational capacities. Erm,	actually going on	
774	so it's a particular practice that	inside you	Reconstructive
	directs your attention in a very,	psychological,	process
775	very microscopic moment to ____	physiologically and	
776	[0:24:11] to what's actually going	emotionally	
777	on inside you on a psychological		
778	or physiological and emotional.	Reconstructive	
779		process – trying to	
780	So, if I'm sitting in a therapy	work out the answers	Refining capacity to
	session, I am engaging with the	and connect it to	observe rather than
781	process, but there's also a	other things	intellectual activity
782	reconstructive process. I am		
783	trying to work out the answer	In meditation, you	
784	and connect it to other things. I	don't engage in that	
785	think that's really helpful.	kind of explanation or	
786		intellectual activity.	
787	But in meditation you don't	It's about refining that	
788	engage in that kind of	capacity to observe	
789	explanation or intellectual		Identification of
	activity. It's just about refining		thoughts and
790	that capacity to observe. I think		emotions
791	that's what so useful about it.		
792			
793	So let's say, for example, I'm in a	Ability to identify	
794	conversation, or I'm in a lecture,	fleeting thought or	
795	or in a therapy session. I think	feeling via meditation	

796	that because I practice meditation, I will notice		Assists in automating the process
797	something, that just a fleeting		
798	thought or feeling, that's just		
799	there for a moment and goes,	Meditation helps this	
800	and I'll note it.	become automatic and regular	
801	That's not something that I think		
802	I would have been able to do, or		
803	do it as kind of automatically or		
804	regularly. As I think happens to		
805	me now, if I hadn't engaged in		
806	this process of, you know, this		
807	kind of meditative process.		
808	So I see that as also erm		
809	(pause) for me being an		
810	important tool or experience that		
811	has developed, my ability to		
812	reflect on myself.		
813			
814	I: That's interesting, because it		Continual process
815	sounds as if you feel it's		
816	developing, it hasn't finished. It's		
	kind of a continual process. And		
817	I wonder whether you feel that,	Continual process	
818	that it will continue to develop?		
819			
820	P1: Oh yeah. Oh gosh, I think		
821	that, (pause) I think that the		
822	reflective process, the whole		
823	point of it for me is that it doesn't		
	end, erm (pause). I am		Different from
824	wondering now is whether my		personal
825	capacity to reflect on myself will		development
826			

827	increase over time? I think it	Difference between	
828	probably will, I think it will.	self-reflection and	
829		personal	
830	But in my mind there's a	growth/development	
831	difference between, well there is		
832	a separation between the		
833	process of self-reflection (pause)		
834	and the process of personal	Self-reflection is the	
835	growth and development. I don't	process one needs to	
836	think they're the same thing.	engage in to	
837		maximise the	
838	I think that self-reflection is the	developmental	
839	process one needs to engage in,	process.	
840	to maximise this developmental		
841	process. But engaging in self-	However, engaging in	
842	reflection doesn't automatically	self-reflection doesn't	Reflection maximises
843	result in personal development	automatically result in	drives developmental
844	and growth. Which is why just	development and	processes, and
845	doing meditation doesn't	growth	prevents stagnation
846	necessarily (laughter) reach the		
847	parts that maybe the	Reflective activities	
848	psychoanalysis would reach.	drives development	
849		processes	
850	So I guess what I'm saying is, I		
851	think that the reflective activities,		
852	is almost like the kind of engine		
853	that drives the developmental		
854	process. If you don't engage in it		
855	you're not going to get that far.		
856			
857	So I would say the reflective		
858	ability I've got now, I think is		
	quite well developed, and I don't		
	know whether I could develop it		
	more, I probably could, if I went		

859	back into therapy or had more		
860	time to meditate.		
861	But certainly, the process of		
862	personal development or growth,		
863	I think is probably about that far		
864	from where I probably will end	Reflective activity	
865	up. I think there's a huge amount	prevents stagnation	
866	more.		
867			
868	But what's frustrating is that, I		
869	don't know, I think the reflective		
870	activity keeps me from		
871	stagnating, but I don't feel at this		
872	point in my personal and		
873	professional life that I'm really		
874	developing hugely.		
875	I think if I had the time and		
876	money and inclination to go back		
877	into therapy. If I didn't have two		
878	young children, I would be		
879	meditating for an hour at the		
880	beginning and the end of the		
881	day. I think if I was to re-engage		
882	with those processes, I think I		
883	would feel a greater sense of		
884	movement and satisfaction in my		
885	personal growth.		
886			
887	It feels like it's kind of slowed		Reflective capacity
888	down a bit, from the early		can grow
889	training experiences and the		
890	things that I was forced to do.	Potential for growth in	
891		reflective capacity	
892	I: But there is potential?		



<p>890</p> <p>891</p> <p>892</p> <p>893</p> <p>894</p> <p>895</p> <p>896</p> <p>897</p> <p>898</p> <p>899</p> <p>900</p> <p>901</p> <p>902</p> <p>903</p> <p>904</p> <p>905</p> <p>906</p> <p>907</p> <p>908</p> <p>909</p> <p>910</p> <p>911</p> <p>912</p> <p>913</p> <p>914</p> <p>915</p> <p>916</p> <p>917</p> <p>918</p> <p>919</p>	<p>P1: I think there's potential, and I think there's reflective capacity that keeps it kind of moving in the right direction.</p> <p>I: What's really interesting to listen to for me, is I asked you about the components of your counselling psychology training, and you've named external things. You've named the PhD, meditation, personal therapy. Which you could also say is external to the course.</p> <p>Would you say there were components of your actual counselling psychology training that helped you develop reflexivity?</p> <p>P1: Yes, I think there were.</p> <p>I: As much as the other components that you've named?</p> <p>P1: Erm, (pause) probably not. Erm, yes I understand what you mean, the therapy you can engage in as separate from the course. But I engaged in it because it was a requirement of the training. So I would see that as part of the training process.</p>	<p>Assisted development, but not as much as the other components</p>	<p><b>Formal training</b></p> <p>Assisted development</p>
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920	And the supervision, which was		
921	massively important as well.		
922	But, in terms of the actual		
923	experiences of the training itself,		
924	outside of the supervision and		
925	the therapy, which wasn't		
926	provided by the training		
927	programme itself, you know. It		
928	was provided by supervisors and		
929	therapists outside of that.		
930	There were a few moments, or	Psychodynamic	Psychodynamic
931	bits of the training, where I felt	module where the	module
932	that they actually actively	reflective stance was	
933	facilitated that process.	modelled in the	
934	So there was a psychodynamic	teaching	Generated interest
935	module, run by a particular	Moments of insight	and insight
936	person, where that kind of		
937	reflective stance was modelled	Counselling and skills	
938	in the teaching. There were	training course that	
939	points where I had insight, and	was interesting	
940	gone, "Oh that's really		
941	interesting."		
942	I think there was also a		Most important
943	counselling and skills course I		contexts were
944	did just before I started the	Most important	external to core
945	training, which was really	context for	syllabus
946	interesting as well. Which I think	developing a	
947	had some kind of 'ha ha'	reflective capacity	
948	moments.	were the ones that	
	But no, I definitely think that,	weren't central to the	
	erm, the most important context	core syllabus	

949	in which I developed a reflective		
950	capacity were kind of the ones		
951	that weren't really central to the		
952	core syllabus. Stuff that I did		
953	myself, outside.		
954	I: Which is interesting.		
955			Teaches reflexivity
956	P1: Yeah, absolutely.		
957			
958	I: And brings me to your course.	Course teaches	
959	So for your course and your	reflexivity – big	
960	team, (pause) does your course	emphasis on finding	
961	teach reflexivity? If so, how do	ways to do that more	
962	you think it does?	effectively	Deficit in training
963			
964	P1: Erm, I think we do, and I	Influenced by findings	
965	think we do, partly because,	of own research and	
966	erm, I think there has been a big	realizing that there is	
967	emphasis on finding ways to do	a deficit in the training	
968	that more effectively, over the		
969	last five or ten years.		
970			Providing students
971	Erm, which has, to some extent,	Reflective practitioner	with an opportunity to
972	been influenced by the findings	module which is	develop their
973	from my own research and	about explicitly	understanding of
974	realising that there is this kind of	recognizing this	being a reflective
975	deficit in the training, and	concept and what it's	practitioner
976	wanting to try to address it to	about, why it's	
977	some extent.	important to the	
978		training, and allowing	
979	So I think the way that we've	students an	
	done it historically, is there's this	opportunity to	
	reflective practitioner module,	develop their own	
	which is all about, erm (pause)	understanding of that.	
	recognising very explicitly this		

980	concept and what it's about, why		
981	we might think it's important to		Research related to
982	the training. Giving students an	From research,	developing trainee's
983	opportunity to develop their	engaging in various	reflective capacities
984	understanding of that.	kinds of exercises	
985		that all have the goal	
986	I: That's the one that stems from	of trying to develop	
987	your research?	the trainees' reflective	
		capacities	Other contexts where
988	P1: Yeah, yeah. Then, engaging		reflective capacity
989	in various kinds of exercises,	Focusing on other	can be developed
990	that all have the goal of trying to	important contexts –	
991	develop the trainees' reflective	personal therapy, and	
992	capacities.	supervision – where	
		you have an	
993	And saying very explicitly to	opportunity to	
994	them that there are these other	develop this skill	
995	important contexts, like personal		
996	therapy and supervision, where		
997	you've got a really important		
998	opportunity to focus on		
999	developing this skill, and these		
1000	are some of the ways you can		
1001	use it.		
1002	These are some of the issues		
1003	that we try and maybe highlight		
1004	for you, when you're here, that		
1005	you can take away and work on		
1006	or think a bit more about. So I		
1007	think we have done it.		Commonly used
			concept
1008	I: What did your research tell you	Concept of personal	Not well defined
1009	and what exercise did you put in	development, self-	
1010	as a result of it?	awareness, reflection	
1011		were commonly used	

1012	P1: Okay, one of the things that I	but were not	
1013	found in my research, was that	sufficiently well	
1014	the counselling psychology	defined	
1015	trainers and trainees at this time,		
1016	which is probably about ten		
1017	years ago now. Erm, (pause)		
1018	they all agreed that the concept		Need for opportunity
	of personal development, self-		to develop
1019	awareness, reflection, they were	Trainers and trainees	understanding of
1020	words that everyone used, but	both identified that	terms
1021	nobody really felt were	they were not	
1022	sufficiently well defined.	provided with an	
1023		opportunity to really	
1024	Certainly trainees didn't feel like	develop an	
1025	they had a proper opportunity to	understanding of	Training too focused
	really develop an understanding	these terms.	on academic
1026	of what those were about. Erm,		
1027	and that importantly, trainees'	Training tended to be	Need to be
1028	erm, and the trainers, they	too academic and not	sufficiently
1029	agreed. That was the irony, they	sufficiently	experiential
1030	both realised the problems, the	experiential.	
1031	deficits, they felt that the training		Training and personal
1032	tended to be too academic and	Incorporate personal	development to occur
1033	not sufficiently experiential.	development into the	simultaneously
1034		training process	
1035	They wanted to have more		
1036	opportunities to have		Reflecting on process
1037	experiential work, do experiential		via experience and
1038	work and bring the kind of	Reflecting the	supervision
1039	personal development aspect of	process of how you	
	the training process more into	learn to become a	
1040	the main body of the training.	professional via your	
1041		own individual	
1042	So it wasn't just kind of about	experience and	
1043	theory and stuff, and it wasn't	supervision	
1044	just about research. But it was		

1045	actually more, more genuinely		
1046	reflecting the process of how you		
1047	learn to become a professional.		
1048	Which is more like, all the stuff		
1049	that Donald [Chen 0:32:36]		
1050	talked about. About research,		
1051	about the way you learn to		
1052	become a professional, you		
1053	know, through your own messy,		
1054	individual experience and		
1055	supervision and stuff.		
1056	So I guess that was what		
1057	seemed to be missing, and that		
1058	suggested in this study. Then		
1059	the module and the exercises		
1060	developed, were directly		
1061	responding to those key areas of		
1062	deficit.		
1063	So okay, people don't think the		
1064	concepts are well defined, so		
1065	let's have a lecture where we try		
1066	and define what those concepts		
1067	are, and get trainees to give their		
1068	own personal – a bit like what		Share rationale
1069	you've asked me today. How		
1070	would you define these		
1071	concepts? What do you think it		
1072	means to you? And critically		
1073	engaging students in a direct		
1074	way about these things.		
1075	"Why do you think it's an		
1076	important part of the training?"		

1077	So you develop a shared rationale, so it feels meaningful.		
1078			
1079	Erm, and then, you know, "Why are you here? What kind of		
1080	valued experience have you had		
1081	that maybe has influenced?"		
1082	"How did this self-reflective		
1083	capacity developed for you,		
1084	before you came on this course?"		Understanding and educating students why these concepts are important
1085			
1086	"The training process is started	Having conversations	
1087	long before you came here, what	that help students	
1088	kind of experiences have you	realise why they need	
1089	had that have shaped it? What	to be thinking about	
1090	are the potential pros and cons	these concepts.	
1091	of (pause) the experiences		
1092	you've had, and how they might		
1093	influence yourself."		Experiential
1094			
1095	I mean all sorts of kind of		
1096	exercises. They're all about	Experiential as	
1097	having conversations that help	opposed to giving a	Teachers to model
1098	students to go, "Oh yeah, I can	lecture	this way of thinking and relating to
1099	see why I need to be thinking		experience
1100	about that."	Having a discussion	Open discussions
1101		and reflecting, and	and reflections
1102	I: The shared parts, the	modelling this way of	
1103	experiential?	thinking and relating	
1104		to experience	
1105	P1: Yeah, experiential as		
1106	opposed to just like giving a		
1107	lecture. So it's not just about		
1108	erm, somebody standing at the		
1109	front of a class, in front of a		

1108	group of people, providing		
1109	information and everyone writing		
1110	it down. It's not about that, it's		
1111	about not having a lecture,		
1112	sitting in a circle and discussing		
1113	and reflecting, and modelling,		
1114	very much modelling this way of		
1115	thinking, this way of relating to		
1116	experience.		
1117			
1118	I: For you, watching the trainees		
	going through those new		
1119	modules, I know it was years		
1120	ago now, and you were going to		
1121	talk about more current ones.		
1122	But, did you see a difference, did		
1123	you see a change?		
1124			
1125	P1: Definitely. I think so, but then		
1126	I would say that wouldn't I?		
	(laughter) I was hoping to see a		
1127	change. I mean you would need		
1128	to do, like a kind of, an		
1129	experiment with a control group	Feedback from	
1130	that didn't have it, to see, you	students about how	
1131	know, to attribute those	useful they found it	
1132	differences. Because there are		
1133	all sorts of other things that are		
1134	going on for the trainees that are		
	going to have an affect on		
1135	development of this capacity.		
1136			
1137	But certainly in terms of the		
1138	feedback from students, about		
1139	how useful they found, erm, the		
1140	module and what they found		

Measure success by student feedback

Feedback from students about how useful they found it



1141	useful. It corresponded, largely		
1142	with what I was hoping to		
1143	achieve. So erm, so I would		
1144	hope that there were differences.		
1145	And the assessment for that		
1146	module, which doesn't exist		
1147	anymore, but does this year,		
1148	was an essay which was all		
1149	about demonstrating your ability		Ability to reflect is a
1150	to reflect on an experience in		key characteristic
1151	depth, and demonstrate	The ability to reflect	
1152	reflective learning from your	was a key	
1153	experience.	characteristic that	
1154	So it kind of very directly, erm,	trainers were looking	
1155	sought to assess, very directly,	for when they	
1156	erm, how well students were	interviewed people	Form of reflective
1157	able to demonstrate some of		capacity is important
1158	these competences that the	Wouldn't accept	
1159	module was looking to develop.	someone into the	
1160	One of the key things that I also	course unless they	
1161	found in my research, was that,	could see that	
1162	erm, (pause) that the ability to	someone had some	
1163	reflect was a key characteristic	form of reflective	
1164	that trainers were looking for	capacity	
1165	when they interviewed people.		
1166	So they wouldn't accept		
1167	somebody on a course unless		
1168	they could see that somebody		
1169	already had that kind of (pause)		
1170	reflective capacity.		
1171			

1172	I: How would they have judged that? And how will you judge that?	Questions directly inviting candidates to reflect on why they want to do the training	Asking candidates to reflect
1173			
1174			
1175	P1: I don't know how they would have judged it, erm, it's been a long time since I looked at all the data. I only ended up using a small amount of what I'd got.	What experiences in their life they feel might have influenced their interest in going into this rather usual kind of line of work	
1176			
1177			
1178			
1179			
1180	But the way that I do it, in interviews with trainees, the way that we do it here, I think is, (pause) erm, (pause) you know we've got questions in the interview which are directly inviting candidates to reflect on why they want to do the training.	Seeing how a student responds to an invitation to share their thoughts about why they want to do this and how they understand the role of being a therapist as part of their own identity and development	Understanding of how the role of being a therapist aligns with their own identity and development
1181			
1182			
1183			
1184			
1185			
1186			
1187			
1188			
1189			
1190			
1191			
1192	Erm, so how a student responds to an invitation to share their thoughts about why they want to do this, and how they understand the role of being a therapist as part of their own identity and development, is a really key way in which we look for that.	Non-defensive stance in responding to the question	Non-defensive responses
1193			
1194			
1195			
1196			
1197			
1198			
1199			
1200			
1201	I: So how would you know what a good answer was?	Some sense of an appreciation of why the question might be relevant	Appreciation of question relevance
1202			
			Access to coherent ideas

1203		Response material –	
1204	P1: Erm, I think there are a	how readily able to	
1205	variety of things that we look for,	access a coherent set	
1206	in an answer to a question like	of ideas	
1207	that. One is, erm, the kind of		
1208	non-defensive stance in relation		
1209	to the question.		
1210	Erm, (pause) and hopefully, err,		
1211	some sense of an appreciation		
1212	of why the question might be		
1213	relevant. But then I think it's		
1214	really about what material the		
1215	person produces in response.		
1216	How readily they are able to		Expansive and
1217	access a coherent, erm, you		exploratory reflection
1218	know set of ideas in response to		
1219	the question.	Reflection, which	
1220		develops into	
1221	So for example, somebody says,	something more	
1222	“Oh I've never really thought	expansive and	
1223	about that before.” Or, “I don't	exploratory, has more	
1224	know, I'm not quite sure, maybe	potential	
1225	it's this, maybe it's that.” And it		Generous response
1226	doesn't go very far, and it just		
1227	kind of stops. That's not	Someone who has	
1228	necessarily a good answer.	clearly thought about	
1229		this kind of thing	
1230	Somebody saying, “Oh I'm not	before and who can	
1231	quite sure, I've never really	provide a coherent,	
1232	thought about it.” But then they	comprehensive,	
1233	reflect, and then it kind of	personalized	
1234	develops into something more	response which feels	Emotional generosity
1235	expansive and exploratory. I	generous	
	think that's got more potential.		

1236	I guess towards the more ideal	Emotional generosity	
1237	end of the scale, somebody who	in their response that	
1238	has clearly thought about this	they're able to share	
1239	kind of thing before, erm, and is	non-defensively	
1240	able to give you a fairly		
1241	coherent, comprehensive		
1242	response, personalised		
1243	response, which feels kind of		
1244	generous as well.		
1245	There is a kind of emotional		
1246	generosity in their response, that		
1247	they're able to (pause) share,		
1248	non-defensively. They're not		
1249	necessarily holding back in a		
1250	way that feels inappropriate or		
1251	makes you concerned that		
1252	there's something there, that has		
1253	caught them off guard or that is		
1254	unresolved in some way, and		
1255	they feel an anxiety about talking		
1256	to you about it. Or even a worry		
1257	that they could be stigmatised in		
1258	some way if they do.	Ability to reflect	
1259	The paradox is, that a good sign		
1260	is not whether or not somebody		
1261	has had some kind of difficult		
1262	traumatic experience. And I am		
1263	not saying that you have to have		
1264	had one of those in order to be		
1265	able to get onto a course.		
1266	(laughter)		
1267	It's not whether or not you've		Unable to identify link
1268	had one, it's really, for me, it's		between experience

1268	about your ability to reflect on it.		and becoming a
1269	So another kind of potentially	Danger when	counsellor
1270	worrying answer, would be, erm,	someone hasn't	
1271	where somebody answers in	identified the link	
1272	such an effusive way, it's very	between their	
1273	clear there's actually a lack of	experience and why	
1274	separation in their mind.	they want to be a	
1275	Between some formative	helper or rescuer	
1276	experience and why they want to		
1277	do this job.		
1278	So there's something that's		
1279	propelling them to be a helper or		
1280	a rescuer, that's clearly related		
1281	to some earlier experience, and	Capacity to reflect	
1282	they haven't quite realised that	and provide some	
1283	there's a link there. One	kind of coherent	
1284	important link, they haven't	narrative, non-	
1285	opened up their own reflective	defensively, that	
1286	space about that, and that's a	produces a	Understanding of
1287	danger for me.	meaningful	relevant experiences
1288	So you could take it to the other	interesting answer	
1289	extreme.		
1290	Reflected on relevant		
1291	So what I'm looking for is really a	experiences to a	
1292	capacity to reflect, to provide	point where they	Diffuses potential
1293	some kind of coherent narrative,	have a handle on it	negative impact of
1294	erm, non-defensively, that		their experience on
1295	produces a meaningful,	Reflective ability	their practice
1296	interesting answer.	enables them to put	
1297	But also suggests that the erm,	into perspective	
1298	the (pause) the person has	relevant experience	
1299	(pause) has reflected sufficiently	Diffuses any potential	
	on relevant experiences, to the	negative impact their	

1300	point where they've got a handle on it.	experience might have on their practice	
1301			
1302	So their reflective ability enables		
1303	them to put into perspective		
1304	some relevant experience.		
1305	Which in a way diffuses any		
1306	potential, or minimises the		
1307	potential, negative impact that		
1308	that experience might have on		
1309	their practice.		
1310			
1311	It's that reflective capacity that		
1312	helps them to say, "Well I can		
1313	see why my experience might		
1314	influence – my own personal		
1315	experience might influence my		
1316	practice as a therapist. But if I		
1317	can see that and put it over	Scope for developing	
1318	there, I can keep an eye on it	a more systematic	
1319	and I can use it in a way that	kind of model on how	
1320	serves my clients. In a helpful	to assess evidence of	
1321	way, rather than in a, you know,	reflective capacity in	
1322	unconscious way, guiding the	response to certain	
1323	process." Do you see what I	kinds of questions	
1324	mean?		
1325			
1326	But I think it's a very interesting		
1327	question. I'm sure there's more		
1328	scope for developing a more		
1329	systematic kind of model of how		
1330	you would assess, erm,		
1331	evidence of reflective capacity in		
	response to certain kinds of		
	questions, that are designed to		
	elicit that kind of material. I think		
			Scope for developing systematic model on how to access evidence of reflective capacity

1332	there's probably lots of scope for that.		
1333			
1334	I: Is that something you would be		
1335	interested in?		
1336			
1337	P1: Yeah it is, it would be		
1338	fascinating to do that. I was just		
1339	sort of wondering whether that's		
1340	something that you're interested		
1341	in, I guess. That's why I was just		
1342	thinking ahead about scope for		
1343	(pause) developing a more		
1344	systematic approach.		
1345	Because what I imagine is		
1346	interesting about some of these		
1347	conversations, that you're		
1348	having, is I've just given you		
1349	what I feel is quite a		
1350	personalised answer to that		
1351	question. Which is to some		
1352	extent influenced by literature		
1353	and theory. But is probably		
1354	mostly influenced by my		
1355	experience of doing it, and I		
1356	haven't systematised it in any		
1357	way.		
1358			
1359	I've had to pull together an		
1360	answer to your question. It		
	wasn't on the tip of my tongue or		
	anything. It probably should be,		
	and probably could be, with a bit		
	more research.		

1361	I: Do you think, I mean through		
1362	the interview process, you		
1363	obviously get a wide spread of		
1364	trainees year after year. Do you		
1365	get a wide spread of trainees		
1366	who say have lower and higher		
1367	levels of reflexivity?		
1368	P1: Yes.		
1369			
1370	I: Would you be able to take an		
1371	example of a trainee with a high		
1372	level of reflexivity and just talk		
1373	about why you think they have		
1374	this ability, or have acquired it?		
1375			
1376	P1: Okay, so just to clarify. Do		
1377	you mean at the point of the		
1378	applications or then when the		
1379	people actually come on to the		
1380	programme?		
1381	I: When they come on to the		
1382	programme, I presume you kind		
1383	of know a bit more about them.		
1384			
1385	P1: Yeah, I think what we hope		
1386	is that by the time we've decided		
1387	to offer them a place on the		
1388	course, that they've all kind of		
1389	demonstrated the kind of, you		
1390	know, a good enough level. But I		
1391	think there is still massive		
1392	variability.		
1393			



1394	So I think somebody who is at		
1395	the higher end of that, you know,		
	(pause) I just think they		
1396	demonstrate all those – it's the		
1397	same kind of stuff I think I was		
1398	talking about before, you know.		Questioning or
	The same (pause) criteria that I		insightful comment
1399	might look for in a poor, okay,		
1400	good and very good answer to		
1401	the question of reflective		
1402	capacity in an interviewee, I	Question or comment	
	think it's the same thing.	or observation that	
1403		shows a high level of	
1404	So (pause) if you get a trainee	reflective ability	
1405	on the course (pause) now, who		
1406	I would think maybe has good		
1407	reflective capacity. The way I		
1408	would see that, or perhaps see it		
1409	being evidenced, is if you're		
1410	doing like a teaching session		
1411	and a lecture on a topic or you're		
	discussing a case. Everyone's		
1412	kind of thinking about these		
1413	issues.		
1414			
1415	Then somebody will ask a		
1416	question or make a comment or		
1417	an observation, which sticks out		
	to me as showing a high level of		
1418	reflective ability.		
1419			
1420	I: Do they tend to be the same		
1421	people who perform well across		
	the whole programme?		
1422			
1423			

1424	P1: (pause) I don't know, it's a		Correlates with
1425	good question. Probably,		performance
1426	generally speaking, probably		
1427	yes, but not exclusively.		
1428	I: Okay, I suppose I'm just		
1429	wondering about that, because	Reflective ability	Strong clinical work
1430	there are so many different	would correlate with	and research skills
1431	components. There's the	performance	
1432	research component and then		
1433	there's the case studies, etc. I		
1434	suppose I'm wondering if there's		
1435	any – you've noticed any ____	Excellent reflective	
	[0:44:39].	ability, high standard	
1436		or clinical work and	
1437	P1: It's a really apposite	research	
1438	question, you could do that. You		
1439	could try and assess people on		
1440	reflective ability and see how it		
1441	correlated with the rest of their		
1442	performance.	Reflexive ability	
1443		coupled with an	
	My anecdotal sense, is that	intellectual	
1444	there would probably, just for the	competence that	
1445	sake of illustration. I think there	enables them to	
1446	are probably three main groups.	apply this reflective	
1447		capacity to clinical	
1448	There are the students who, I	work and research	
1449	think have got really excellent	questions.	
	reflective ability, and you see	Sophisticated way of	
1450	that both in high standard of	thinking about	
1451	clinical work and high standard	problems.	
1452	of research.		
1453			
1454	Because I think what they		
1455	demonstrate, is a level of		

1456	reflexive ability that comes out,		
1457	it's coupled with an intellectual		
1458	competence, that enables them		
1459	to apply this reflective capacity,		
1460	both to clinical work and to		
1461	research questions.		Strong clinical skills, weak research skills
1462	It's about a sophisticated way of		
1463	thinking about problems. In		
1464	research, high level research is		
1465	all about getting into that	Naturally self-	
1466	underlying assumptions and	reflective, not as	
1467	they're giving rise to problems in	academically strong.	
1468	research areas, just like it is with	Excellent clinicians	
1469	clients.	but struggle with	
1470		research work.	
1471	So I think the students who have		
1472	got that kind of high level of		
1473	reflective ability and also good		
1474	academic intellectual ability,		
1475	seem to be able to perform well		
1476	across the programme.		
1477	I don't there are probably a		
1478	group of students who are kind		
1479	of naturally self-reflective.		
1480	Perhaps not as intellectually		
1481	academically strong, where the		
1482	reflective ability seems to serve		
1483	them better in their clinical work,		
1484	than it does in their research		
1485	work, and they don't necessarily		
1486	do as well.		Weak research and clinical skills
1487	This is that group of students		
1488	who historically, you know,		

1488	would probably, erm (pause)		
1489	who don't have that kind of		
1490	(pause) that combination, that unusual combination that we	Struggle in both areas.	
1491	look for and need in counselling		
1492	and psychology. Maybe clinical		
1493	psychology training, the		
1494	academic ability and therapeutic		
1495	ability, and scientist practitioner		
1496	thing, kind of really manifests.		
1497	Who may be, their natural skin is		
1498	they can be really good		
1499	clinicians, but they struggle a bit		
1500	more with research. They can do		
1501	it, but it takes a bit more effort.		
1502			
1503	Then I think there is probably		
1504	that third group of students, who		
1505	struggle in both areas. Their		
1506	reflective ability is probably at a		
1507	fairly basic, okay, but fairly basic		
1508	stage, and they need to really do		
1509	a lot of learning and		
1510	development.		
1511	It's a steep curve, both in		
1512	understanding the applicability of		
1513	that capacity to their work with		
1514	their clients. The clinical work		
1515	with the clients and also with		
1516	research students.		
1517	But I think there are groups of		
1518	students who have good		
1519	reflective practice, but aren't		

1518	necessarily good at research or		
1519	as good at research as some		
	other students might be.		
1520			
1521	I: It's interesting in terms of that		
1522	third group, whether you've		
1523	come across any trainees,		
1524	(pause) across the decade, who		
1525	have a lower level of reflexivity		
1526	and haven't been able to learn it		
1527	from the training? The other		
1528	components of the course. Have		
1529	you come across anyone like		
1530	that?		
1531			
1532	P1: Yeah.		
1533			
	I: Could you talk about an		
1534	anonymised example?		
1535			
1536	P1: Yeah, erm, (pause) I'm just		
1537	trying to think of a good		
1538	example. (pause) Yeah I mean		
1539	there are a few examples.		
1540			
	One example that comes to		
1541	mind is, err, a trainee who		
1542	(pause) failed, has used up all of		
1543	their attempts to try and pass a		
1544	couple of pieces of assessment		
1545	in year one of the programme.		
1546			
1547	Where their reflective capacity		
	was either, the main thing that		
1548	was being assessed or a very		
1549	important part of what was being		

1550	assessed. For example the		
1551	reflective essay that I talked		
1552	about, reflective practitioner		
1553	model. Or that are processable,		
1554	both of which, those capacities		
1555	are really important. And he just		
1556	struggled and struggled and		
1557	struggled. He used all four		
1558	attempts to pass that piece of		
1559	work, and he didn't.		
1560			
1561	It was very difficult, because he		
1562	was given a lot of feedback, and		
1563	he had a lot of discussion with		
1564	Marcus, to try to help him		
1565	develop his understanding of		
1566	what it was that was lacking in		
1567	his work.		
1568			
1569	He improved his work		
1570	significantly, but not significantly		
1571	enough to pass some of these		
1572	key pieces of assessment. So he		
1573	failed the programme in the end		
1574	and he had to leave.		
1575			
1576	I: How do you understand that,		
1577	for him? What was it about him		
1578	that didn't allow that?		
1579			
1580	P1: He was quite an unusual		
	student, maybe not, you know. I		
	am just trying to think, there		
	might be some other examples		
	which I could try and talk about		
	as well.		

1581			
1582	But this particular student, I did		
1583	have a question about whether		
1584	there was some – I always		
1585	wondered whether there was		
1586	some kind of learning disability		
1587	there, that was relevant.		
1588			
1589	Erm, that was linked to this		
1590	fundamental deficit in his		
1591	reflective capacity. Erm, for		
1592	which, maybe there was very		
1593	little he could do, perhaps at this		
1594	stage, anyway.		
1595			
1596	One of the things I would		
1597	always, always say, is that my		
1598	commitment is that, you don't		
1599	know what somebody is capable		
1600	of over time. The questions that		
1601	we look at, is whether somebody		
1602	is ready enough to succeed on		
1603	the programme now, with the		
1604	level of resources and time that's		
1605	available in the programme?		
1606			
1607	So this student, I think what was		
1608	going on was that, erm, he was		
1609	very intellectually interested and		
1610	engaged. He had relevant		
1611	experience and clinical settings		
1612	before coming on to the course.		
1613	He had a very agreeable		
1614	demeanor. Something likeable		
	about him, and very, very		
	enthusiastic.		

1615			
1616	But really it was only, and he		
1617	was quite a quirky character. But		
1618	it was only really once we were		
1619	into the training and we started		
1620	to see erm, how he was		
1621	responding to certain kinds of		
1622	questions in lectures, or		
1623	attempting to demonstrate		
1624	certain kinds of competences in		
1625	assessments, that we became a		
1626	bit more concerned about him		
1627	being perhaps in a slightly		
1628	different stage of development.		
1629	Quite far away from where some		
1630	of the other students were.		
1631			
1632	So some of the competences		
1633	were quite well developed.		
1634	Some of them really weren't		
1635	developed. It was like kind of		
1636	pseudo developing. On the		
1637	surface it looked like he could do		
1638	it, but when you actually got him		
1639	to work with clinical examples,		
1640	erm, and one of the things that		
1641	clearly demonstrated this		
1642	problem, this deficit, and one of		
1643	the reasons he failed some of		
1644	these pieces of coursework, was		
1645	because of erm, the way of this		
1646	lack of reflective ability, led to		
	what we felt were erm, ethical		
	erm, problems in his work.		



1647	For example around physical	Clear feedback	
1648	contact with clients who had		
1649	been abused, but not	however are still	
1650	necessarily noticing that that	unable to develop	
1651	might be a relevant issue, when	that area of	
	it was pointed out.	competence	
1652			
1653	Then, when it was pointed out,		
1654	and I think this is really crucial.		
1655	When these issues are pointed		
1656	out, I think it's very indicative, it's		
1657	very diagnostic, if I can use that		
1658	word, how well somebody is able		
1659a	to respond to that feedback.		
1659b			
1660	When somebody is given very		
1661	clear feedback about problems,		
1662	deficits, and then they still aren't		
1663	able to develop that area of		
1664	competence, to an adequate		
1665	level, that's a pretty clear		
1666	indicator that they are at a		
1667	developmental stage, in relation		
1668	to that competence, that means		
1669	they're not really ready to		
	continue this programme.		
1670			
1671	I: It sounds like that's hard to		
1672	pick up at an earlier stage. If		
1673	they've got that pseudo		
	competence, if you like, it		
1674	sounds like it's hard to, until		
1675	you're in depth learning, to pick		
1676	up on it?		
1677			
1678			

1679	P1: Yeah, I think so. It's a real		
1680	challenge, because one of the		
1681	things that comes out in the		
1682	selection process, is you have		
1683	very little time, relatively little		
1684	time and resources, erm, and err		
1685	(pause) you also want to be		
1686	inclusive.		
1687	You don't want to go for a		
1688	stereotypical student, the same		
1689	kind of clone type person, every		
1690	time. You want to be allowing of		
1691	difference and being as		
1692	generous, erm, as you can with		
1693	trying to facilitate the range of		
1694	individuals who can populate this		
1695	profession, and who are needed		
1696	to populate this profession.		
1697	So you try and be facilitative and		
1698	sometimes you make the wrong		
1699	decision or you don't know until		
1700	later on.		
1701	I: Let me just take you back a bit.		
1702	Because you started to talk		
1703	about the reflective module and		
1704	err (pause) I would be interested		
1705	to learn more about the	Reflective practice	
1706	components of the current	groups. Space at the	
1707	training course, that you feel	end of the day, every	
1708	promote reflexivity?	week for year one	
1709	P1: Like a teacher, yeah. Okay,	students and every	
	so that module that we talked	fortnight for years two	
		and three students	

1710	already about, that module	where there's no	
1711	doesn't exist anymore, at least	lectures or agenda.	
1712	not in its current form. But what	It's a space for	
1713	we've done is, we've tried to	reflection and for	
1714	retain the important learning	modelling reflection	
1715	components in other areas of the	by the facilitator but	
	programme.	also other trainees in	
1716		the group.	
1717	So one of the key ways in which		
1718	that module, the spirit of that		
1719	module continues within the		
1720	programme, is in the erm,		
1721	(pause) the reflective practice		
1722	groups, that are now a		
1723	fundamental component of the		
1724	three year programme.		
1725			
1726	So that's a sort of space at the		
1727	end of the day, every week for		
	year one students and every		
1728	fortnight for years two and three		
1729	students. Where there's no		
1730	lectures, there's no agenda.		
1731		Supports student's	
	It's a space for reflection and for	development.	
1732	erm, the modelling of reflection		
1733	by the facilitator, but also other		
1734	trainees in the group to other		
1735	trainees in the group.		
1736			
	It's really, erm, a space in which		
1737	(pause) all sorts of experiences		
1738	or different strands of the		
1739	learning process, come together,		
1740	erm and are woven, hopefully,		
1741			

1742	together in a coherent way, by		
1743	the students and the team.		
1744	In a way that supports the		
1745	students' development. So they		
1746	talk about their clinical work and		
1747	what we've got is a kind of err		
	(pause) a design in the		
1748	programme, which I think maps		
1749	on to different components that		
1750	need to constitute the design of		
1751	a course like this. But separates		
1752	them out, artificially, at least		
1753	initially, and then brings them		
1754	together.		
1755			
1756	So for example in year one, the	Integrative space and	
1757	first part of the teaching day is all	the mechanism that	
1758	about theory and it's quite	facilitates the	
1759	lecture based.	integration is a	
1800		reflective process.	
	The second part is all about		
1801	skills practice where there's very		
1802	little, as you know, very little		
1803	lecture and it's all about trying	Think about the role	
1804	things out, developing the actual	of the self and what's	
1805	skills.	going on whilst	
1806		performing practical	
1807	Then the third part of the day is	work or thinking	
1808	where, all of those things can be	about the skills	
1809	thought about and brought		
1810	together in the trainees actual		
1811	practice.		
1812	So it's an integrative space, and		
1813	the mechanism that facilitates		

1814	the integration is a reflective		Important in research
1815	process. So I guess that's one of		
1816	the key ways in which places in		
1817	which it resides in the course.		
1818			
1819	What we're trying to do with that		
1820	module that happens in the		
1821	second bit of the day, is also try		Philosophical position
1822	and build in and demonstrate,	Research training	
1823	you know when trainees are		
	doing the practical work or		
1824	thinking about the skills. Is to try		
1825	and get them to think about, as		
1826	they're doing it, the role of the		
1827	self and what's going on and	Important	
1828	trying to get it there, as it	philosophical position	
1829	happens. Then you reflect on it	as a counselling	
1830	later.	psychologist	
1831			
1832	So I think there are all sorts of		Identification of topics
1833	ways in which we try and do it.		interesting to
1834	But I think I would also like to		students
	say that, one of the things		
1835	perhaps I haven't emphasized		
1836	so much, I think it's also relevant		
1837	to the topic, and certainly this		
1838	question you are asking now. Is		
1839	the research, the research	Recognising that the	
1840	training. The importance of	kind of topics	
	reflexivity in research.	students are	
1841		interested in say	
1842	Now we emphasize very, very	something about	
1843	strongly, particularly in the early	them	
1848	part of the research teaching on		
1849	the programme, this important		
1850	philosophical position that you		

1851	have as a counselling		
1852	psychologist. That I outlined and		
1853	I think is very consistent with my		
1854	own definition that I gave you at		
1855	the beginning of our interview,		
1856	about what I think reflexivity or		
1857	self-reflective capacity is.		
1858	So we say to trainees, "Look,		
1859	this is a research module or		
1860	research modules. You are		
1861	going to have to find a research	Reflexivity is not just	
1862	question, develop a research	relevant in the clinical	
1863	question. But before we do any	setting, but in the	
1864	of that, erm, (pause) we have to	research setting	
1865	recognize that the kind of topics		
1866	that you're interested in at this		
1867	stage, they are going to say		
1868	something about you.		
1869	That's likely to have a very		
1870	important bearing on the		
1871	development of your ideas and		
1872	maybe even the viability of a		
1873	particular idea you're interested		
1874	in."		
1875	So what we try to point out to		
1876	students, very early on, is how		
1877	reflexivity is not just relevant in		
1878	the clinical setting, but in the		
1879	research setting. An analogy I		
1880	only use in teaching is, erm, the		
1881	research process and the		
	therapy process.		

1882	So, the parallel is the client, and		
1883	your relationship to the client,		
1884	who has got a problem, or a set		Engagement with
1885	of problems, and you're trying to		research population
1886	understand that. Bring to bear		Personal process
1887	certain strategies, inquiry,		
1888	learning strategies, to try and		
1889	address that problem, that		
1890	question that the client's got.		
1891			
1892	The analogy is, use a researcher	Personal process that	
1893	and a research question, the	engages one with a	
	problem. There are massive	research population	
1894	parallels between those two		
1895	things.		
1896			
1897	So just like you might be		
1898	interested in – attracted in		
1899	helping clients or maybe certain		
1900	kinds of populations, the analogy		
1901	is, why are you interested in this		
	topic are? Why are you		
1902	interested in this clinical		Should always be
1903	population? What draws you to		operational
1904	working with people with		
1905	personality disorders?		
1906			
1907	So there's some kind of personal		
	process for you, that engages		
1908	you with that population.		
1909		Reflective capacity is	Fundamental skill
1910	There's also similarly a personal	an overarching	Finer characteristic
1911	process that's engaging you with	stance that you	
1912	that research question, and that	should always be	
1913	topic. Just like you have to be	operating as a	
1914	self-reflective about how your		

1915	own underlying issues and	counselling	
1916	motivations shape and colour	psychologist	
1917	your practice, and your approach		
1918	to solving that problem with the		
1919	client. The same is going to be		
1920	true for the approach you take	Fundamental skill	
1921	for addressing that research	Finer characteristic	
	question or that research		
1922	problem, that topic.		
1923			
1924	So we try and make very, very		
1925	clear to the students, that a		
1926	reflective capacity isn't		
	something that you just do with		
1927	your clients, it's an overarching		
1928	stance that you should always		
1929	be operating as a counselling		
1930	psychologist.		
1931			
1932	Whatever the practice is, even if		
1933	it's teaching or sitting in a		
1934	meeting or whatever it is, it's a		
1935	fundamental skill, that I would		
1936	say, is one of the finer		Dependent on
1937	characteristics of what we do.		teaching styles,
			priorities, stances and
1938	I: It sounds like you've overtly		theoretical
1939	fed it into every aspect of the		orientations
1940	training, which seems very		
1941	distinct from your training. I		
1942	suppose one of the interesting		
1943	parts for me as well, is that you		
1944	have been a trainer pre and post		
1945	the doctorate changeover. And	Differences in how	
1946	in a sense you seemed to have	programmes are	
1947	approached the doctorate in a	taught based on the	



1948	very particular way, as in drawing on the reflexivity, and making sure it's an integral component of it.	styles, priorities, stances, and theoretical orientations of the trainers who provide that experience for the trainees	
1949			
1950			
1951	Do you feel that there is erm,		
1952	(pause) do you feel that there		
1953	are differences in terms of how		
1954	programmes are taught,		
1955	dependent on the trainers?		
1956			
1957	P1: Almost inevitably. Erm,		
1958	(pause) yeah I mean it's		
1959	inevitable that the way in which		
1960	these things get talked about,		
1961	taught in training programmes, is		
1962	going to be very much related to		
1963	the styles, the priorities, stances,		
1964	theoretical [orientations 0:59:38]		
1965	of the trainers who provide that		
1966	experience for the trainees,		
1967	inevitably.		
1968			
1969	I mean I wouldn't say I've got		
1970	enough experience of other		
1971	programmes to sort of, (pause)		
1972	talk very specifically about that. I		Philosophical fit
1973	mean, the main two programmes		
1974	that I compare are this one, and		
1975	the one I did as a trainee. And I		
1976	spent a lot of time because I did		
1977	my PhD there as well, and that's		
1978	quite a long time ago.		
	But yeah, erm...		

1979	I: I suppose I'm wondering, one		
1980	of the things we talked about	Philosophical fit	
1981	before this, was you've just done	transcends the	
1982	interviews, and as the course	professional affiliation	Epistemological
1983	leader you're choosing your		stance
1984	team. So in a sense they're		
1985	guided by your stance around		
1986	reflexivity, and how you feel the		
1987	course should be.		
1988			
1989	I suppose it's interesting in terms		
1990	of how people approach		
1991	reflexivity. But actually, I	A shared	
1992	suppose you're recruiting people	philosophical stance,	
	in terms of that stance?	and epistemological	
1993		stance surround	
1994	P1: Definitely. I mean I think	things like the	
1995	when we interview people to join	importance of	
1996	the programme team, one of the	reflective practice	Broad understanding
1997	most important things in my		
1998	opinion, is the philosophical fit. I		
1999	think to some extent, that even		
	transcends the professional		
2000	affiliation. Because we've got		
2001	clinical psychologists on the		
2002	programme team.	How you understand	
2003		the learning	
2004	That's an interesting thing, you	experience, critiques	
2005	know, in counselling psychology	of strengths, and	
2006	training. I think that's (pause) the	weaknesses of	
	reason why it works, in my	different kinds of	
2007	opinion, is because, and this	models	
2008	was clearly identified in the	Critiques of current	
2009	selection process. Is to do with	psychological therapy	Team culture
	the philosophical, a shared		
2010	philosophical stance. And an		

2011	epistemological stance, around		
2012	things like the importance of		
2013	reflective practice, around a view		
	about a fluid epistemology, in		Goodness of fit
2014	research. You know, how you		
2015	understand the learning	Seeing whether these	
	experience, critiques of	things fit with the	
2016	strengths and weaknesses of	culture developed	Expand and
2017	different kinds of models.	within the team	challenge the team
	Critiques of what's happening in		
2018	the world of psychological		
2019	therapy.		
2020			
2021	These are all conversations that	Goodness of fit	Mindedness
2022	were had with people, being		
2023	interviewed for the programme.		
2024	Where you could identify where	Someone who can	
2025	somebody sat in relation to	expand and	
2026	these very important, kind of,	challenge it is a good	Growth opportunity
2027	narratives, debates and so forth.	thing	
2028			
2029	Part of what I was trying to do,		
2030	was to see whether, the way		
2031	somebody thinks about those	Mindfulness	
2032	things, fits with the way the		
2033	culture that's developed within		
2034	the team, and about how we		
	approach those issues.		
2035			
2036	Not looking for absolute		
2037	uniformity. But looking for a		
2038	basic goodness of fit.		
2039			
2040	Actually somebody who can		
2041	expand it a bit more and		
2042			

2043	challenge it is probably a good		
2044	thing.	How potentially	
2045		important influence	
2046	But there's a kind of, how can I	can be	
	put it, like mindedness.		
2047			
2048	I: To create a sharedness but		
2049	with the opportunity for growth?		
2050	P1: Absolutely, yeah. So I think		
2051	that's really important. Yeah, I		
2052	can think about how we do that		
2053	here on a course. But I don't		
2054	know how they will do that. I		
2055	couldn't comment on how they		
2056	do that in other places.		
2057			
2058	But yeah, I think one of the		
	things that your question makes		
	me think about is, the potential.		
	How potentially important		
	influence can be of like a course		
	leader. You know, on defining		
	the erm, the emphasis of the		
	course and the culture that		
	develops.		
	But you know, it kind of		
	happens, my experience is		
	what's happened for me as a		
	course leader, is that it is a kind		
	of funny kind of erm, happy		
	coincidence of inter-mingling of a		
	variety of different people and		
	factors that seems to work. Then		
	you think, "Oh we've got		

	<p>something here that we can build on.” Then it becomes more of a coherent identity, over time.</p> <p>Over time you harness something and realise you’ve got something really good going.</p> <p>I: That’s all the questions I have. I am aware of your time. Is there anything you would like to add, or anything you feel I’ve left...</p> <p>P1: Erm, (pause) I mean, (pause) no I think it’s been a really enjoyable experience. I hope it’s been useful, what I’ve said.</p>		
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**Appendix AE: Interview K: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Original Transcript	Exploratory Comments	Emergent Themes
1 2	I: Would you tell me your job title please?	Senior lecturer in counselling psychology	<b>Job Title</b>
3 4	P1: Erm, I am a senior lecturer in counselling psychology.		
5 6	I: And how long have you held that position?	Two years	<b>Years in current role</b>
7	P1: Erm, two years.		
8 9 10 11	I: Okay, and you're also a counselling psychologist. How long have you been a counselling psychologist for?	8.5 years	<b>Years as a counselling psychologist</b>
12 13	P1: Mm (pause) err, (pause) erm, eight and a half years.		
14 15 16 17 18 19 20 21	I: What kind of training do you offer, both within your role and outside your role over the last eight years?  P1: Erm (pause) training (pause) outside of my lecturing role you mean?  I: Yeah.		<b>Training offered</b>

22	P1: Outside of my lecturing role, erm,		Supervisor
23	as a supervisor (pause) so that's kind		
24	of the training I would say that I offer.		Teaching trainees and
25	Erm, so I (pause) just erm, I mainly		qualified therapists to
26	(pause) focus on (pause) working		work integratively
27	integratively, so teaching people how		
28	to erm – trainees or qualified		Trainees – to think
29	therapists, but err, (pause)		integratively, beyond
30	particularly trainees about thinking		a particular model
31	integratively, so not just thinking		
32	within a particularly model.		
33			Working with refugee
34	Erm, (pause) and erm, I've also done		training
35	some training to people in the NHS.		
36	Erm, regarding working with		
37	refugees.		
38	I: Okay, thank you.		
39	P1: Erm, yeah.		
40	I: What do you understand by the		<b>Reflexivity –</b>
41	term reflexivity?		<b>Definition</b>
42	P1: I understand of being – that		Ability to reflect on
43	reflexivity means to (pause) be able		how you are affected
44	to reflect on how you are affected		and impacted by
45	and impacted by things that are	Influence by	things that are
46	happening around you. So by what	what the client	happening around
47	the client says or by (pause) erm, the	says, or the	you
48	room that you're working in, or erm	room you're	
49	(pause) the expectations of the place	working in, or the	Influenced by what
50	where you work or the perceptions,	expectations of	the client says
51	what you think are the expectations	the place where	
52	of the client and so on.	you work or the	Influenced by the
		perceptions, and	working environment

53	And erm, (pause) how in a way you	what you think	
54	react to them, so what your own	are the	Influenced by
55	processes are. Erm, (pause) and	expectations of	workplace
	how, you know whether these	the client.	expectations or
56	processes are kind of coming from.		perceptions
57		How you react to	
58	Erm (pause) so I see it as a kind of	clients, and what	Client expectations
59	an ongoing process. That it's not,	your processes	
60	you know, this is me and this is the	are, and where	Ongoing process
61	client and this is what's going on. But	the processes	
	it's more like it keeps constantly	are coming from.	
62	shifting and changing. I don't know if		Constantly changing
63	it makes sense, what I'm saying?		
64			
65	I: Yes, it does. How do you		
66	understand how you've acquired the		<b>Acquisition</b>
67	ability to be reflexive?		
68			
69	P1: Mm (pause) I think through		
	supervision, err, yeah I would say		Through clinical
70	through clinical supervision, whilst I		supervision whilst
71	was training. And then, (pause) I		training
72a	think erm, doing case studies and		Case studies and
72b	process reports, actually also made		process reports
73	me much more aware.		
74			
75	I mean (pause) I remember kind of		
76	hating doing them while I was		
77	training. You know, not the case		
78	studies, but the process reports.		
79	Erm, but as I was progressing I could		
80a	really see the point of doing them.		Progress reports
80b	Erm, (pause) and (pause) yeah, so		enabled me to look at
81	these kind of pieces of work forced		own processes and
82	me, to look at my own processes and		look at what's
83	what's going on, and what's		



84	happening in the room let's say, with		happening in the
85	a client.		room with a client
86			
87	But I would say mostly it's been		
88	clinical supervision. Erm, and then if I		
89	think about, let's say reflexivity in my		Clinical supervision
90	research in like my PhD, it would be		
91	my academic supervisor.		Reflexivity in research
92			
93	I: Mm, so from your training as a		Academic supervisor
94	counselling psychologist it would be		
95	primarily supervision, clinical		
96	supervision, and the process and		
97	case studies?		
98	P1: Yeah.		
99			
100	I: So, can I ask first of all about the		<b>Supervision</b>
101	supervision? Would you be able to		
102	describe to me what it was that		
103	allowed you to (pause)?		
104	P1: Erm, (pause) it was the fact that I		Feeling safe
105	was very fortunate, I think, to have		
106	erm, supervisors who helped me to		
107	feel very safe. So in one of my		
108	placements, for instance, (pause)		
109	one of the placements I had		
110	throughout the three years I was		
111	training, (pause) and erm, erm,		
112	(pause) he was very good, even		
113	though he was a counselling co-		Differentiating the
114	ordinator, he was very good at		roles between being a
	differentiating the roles between		manger, counselling
	being a manager, counselling co-		
	ordinator and supervisor, in the room		

115	with me. In the room, where we had		coordinator and
116	supervision, he was just my		supervisor
117	supervisor. And, (pause) erm, it was		
118	made explicit, you know, about		
119	confidentiality. Erm (pause) so I think		
120	first of all, making me feel safe. Erm		Confidentiality was
121	(pause) the fact that there wasn't a		explicit
122	judgemental stance. I felt that		
123	anything I could say was okay. Erm		Non-judgmental
124	(pause) so I think first of all, it was		stance
125	that. Then it was maybe the		
126	questions that were being asked.		
127			Questions being
128	Irrelevantly of the placements that I		asked
129	was working, it happened so that		
130	most of my supervisors were actually		
131	from psycho analytics,		
132	psychodynamic kind of background.		
133			Psychanalytic
134	I: Very interesting.		Psychodynamic
135			
136	P1: Yeah. So, there would be a lot of		
137	focus on what's happening for you in		
138	the session? What's happening for		
139	the client? What do you think that		
140	might mean?		
141	Erm (pause) there would be space to		
142	ask how I am. So to bring a little bit		
143	of my own stuff in, and become		
144	aware of how (pause) these might be		
145	affecting, erm, you know, how I am		
146	working.		
147			Client and therapist
			focused

148	So my background or what's		
149	happening in my life at the moment,	Focus on what	Interpreting and
150	and so on.	was occurring for	reflecting upon
151	Erm, (pause) and all of these, all of	both client and	meaning
152	these made me much more aware of	therapist during	Reflecting on own
153	(pause) erm, (pause) them, (pause),	the session, and	feelings
154	the kind of exchange of (pause) I		Awareness of how
155	don't know, of (pause) unspoken		own experiences and
156	information and thoughts and so on.		feelings may be
157	And, (pause) and spoken kind of		affecting the session
158	communication that may be going on		
159	between client and therapist. Also		
160	how, let's say expectations from both		
161	sides, or even from their placement		
162	can affect the work.		
163	I: So it seems to be something about		Awareness of self as
164	awareness and the mediators for that		a therapist
165	for you were around, the safeness of		
166	the environment. The questions		
167	being asked, and also something		
168	about the model, the psycho analytic		
169	model?		
170	P1: Yeah.		
171			
172	I: Do you feel that, that is an		
173	experience (pause) that is unique to		
174	you or, do you feel that those are		
175	(pause) conditions whereby they		
176	would help anybody develop		
177	reflexivity?		
178	P1: I think they would help anyone,		
179	develop reflexivity.		

180			
181	I: So that's the supervision. If I ask a		
182	bit more about the case studies and		
	the process reports. I suppose firstly		
183	would you differentiate between		
	them, in terms of the amount that		<b>Unique</b>
184	they helped you develop reflexivity,		
185	or do you feel they were similar?		
186			
187	P1: (pause) Erm, (pause) I think the		Anyone can develop
188	process reports may be helping you		reflexivity
189	more, because they really get you to		
	focus on what's going on and what		
190	am I saying? At that particular time,		
191	what's going on for me?		
192	I: And so they (pause) because they		
193	are asking what's going on for you,		
194	they ask questions of you?		
195			<b>Process reports</b>
196	P1: Mm. So you need to make – to		
197	become aware of let's say, you		Focus on what's
198	know, why I was reacting in this way.		going on and what
199	I sound angry, why was I angry?		you are saying
	What could have potentially been		
200	going on for me that day? Or,		Focus on what's
201	(pause) what could this client be		going on for you at
202	reminding me of?		the current time
203			
204	Erm, case studies also get you to		
205	think about these things, but it's in a		
206	more kind of general way. And		
	because you discuss maybe a few		
207	sessions, you know, it's more		
208	general.		
209			

210	Whereas a process report can be		Awareness of why I
211	very particular, you know, ten		was reacting in this
212	minutes from a particular session,		why
213	where you really have to focus on		
214	that.		
215	I: It's interesting you use the kind of		
216	idea of awareness, when you're		
217	talking about clinical supervision.		<b>Case studies</b>
218	Because when you're talking about		Less specific
219	process reports, you're asking		More general
220	yourself the question. I imagine you,		
221	or whoever it is, would have to		
222	(pause) be in a certain state, in order		<b>Process report</b>
223	to be able to (pause) respond to that		Very particular
224	self questioning?		
225	P1: Mm, yeah.		
226	I: Do you feel there are, both from		
227	your own personal experience, as a		
228	trainee, and teaching, do you feel		
229	that there are differences in how,		
230	potentially individuals use clinical		
231	supervision, or the process reports?		
232	P1: Yes, yes definitely. I mean I erm		
233	(pause) I think, (pause) as a		
234	supervisor myself, so after I qualified.		
235	Because until then I only had my own		
236	experiences of supervision, which		
237	actually were all, as I said earlier,		
238	good, erm, safe, you know very		
239	much promoting erm, reflective erm,		
240	space and so on.		

241	Erm, when I started becoming a supervisor, I became aware, you		
242	know from what trainees were telling		
243	me, that (pause) let's say from other		
244	supervisors, or from other		
245	placements and so on, they had		
246	quite different supervisory		
247	experiences, where, err, you know		
248	they needed to focus just on the		
249	content.		
250	So this is what we did, this is what		
251	we're going to do next time. This is		
252	what you should do to challenge this.		
253	This is what you should do to		
254	challenge that. And there was very		
255	little space (pause) for what's going		
256	on, for the trainee in that session.		
257			
258	How does the client make you feel?		
259	You know, why did you think you		
260	responded that way? You know,		
261	what are your thoughts about this		
262	person? Do you like them? Do you		
263	not like them? You know, erm		
264	(pause) all of that.		Supervisor experiences are varied
265	And I felt that people were not really		
266	getting that, and that actually made it		
267	very difficult for them to (pause) think		
268	about process and to discuss		
269	process, in their process reports.		
270	I: So it sounds very important about		Lack of focus on what was occurring for the
271	what type of supervision it was?		
272			

273	P1: Mm, yeah, yeah.		trainee during the session
274			
275	I: And so, (pause) what perhaps		
276	would you see as, a helpful type of		
277	supervision?		
278	P1: Erm, (pause) well a helpful type		
279	of supervision I think the way the		
280	supervision is, depends to an extent		
281	to whom your supervisee is. So for		
282	instance, if you have someone who		
283	in the first year, or someone who is		
284	about to work on a model that		
285	they've never worked before. Apart		
	from providing a space for reflection,		Reflectivity
286	you also need to probably be a bit		encourages trainees
287	more, offering a bit more guidance,		to think about the
288	offering a bit more practical kind of		process and discuss
289	advice, of, "I suggest you do this."		process
290	Or, "I don't think it's a good idea to		
291	do that." That kind of thing.		
292	Erm (pause) whereas later on, erm,		
293	maybe you know in the second or		
294	third year, and especially when		
	people are qualified, (pause) it		
295	doesn't need to be so much – there		
	doesn't need to be so much		
296	guidance.		<b>Helpful Supervision</b>
297			
298	But there needs to be more of just		
	letting the supervisee present		
299	(pause) and ask questions that get		
300	them maybe to think, of the client or		
301	of themselves in the session, in a		
302	different way.		

303			Trainee dependent
304	So, erm (pause) for instance, asking		
305	questions like, err, "How was it being		<b>First year trainee</b>
306	in the session? How did it feel being		Providing a space for
307	in that session?" Or, erm, (pause)		reflection
308	"What was eye contact like?" Or,		
309	"Non-verbal communication like?" Or		Offering guidance and
310	things like that. Or, "I wonder why		practice advice
311	you responded that way?" Or, "How		
312	did that make you feel?"		
313			<b>Second or third year</b>
314	Erm, (pause) and so opening up the		<b>trainee, qualified</b>
315	space for that, and also I think,		
316	(pause) erm, in my experience, as a		Less guidance
317	supervisee, and as a supervisor,		
318	supervisees tell me that they find that		Supervisee present
319	really helpful.		and ask questions
320	I always ask them, generally how	More focus on	Generate thinking of
321	they are, erm (pause) you know, if,	letting the	the client or
322a	let's say something seems to be a bit	supervisee	themselves in a
322b	of erm, difficulty, is that something	present and ask	different way
323	that is relevant to them in their	questions that	
324	personal life? Does that remind them	get them to think	
325	of something in their personal life?	of the client or	
326		themselves in a	
327	I make it very clear from the	session in a	
328	beginning that they can pretty much	different way	
329	say whatever they want. That I won't		
330	– that I consider it much better		
331	practice to say, "I don't actually – he		
332	really annoys me." Or, "This client		
333	really annoys me." For example. And		
334	just explore why that is, rather than		
335	to (pause) not say anything, in the		
	fear that I may judge it negatively.		



336		Opening up the	
337	So kind of, allowing the supervisee	space for	
338	the space to say what they feel. You	supervisee to	
	know, "He makes me sleepy." Or,	explore their	
339	"He's boring." Or, "I find it really	sessions with	
340	difficult to concentrate." Or you know,	clients in a safe	
341	all of that.	place	
342			
343	I: So your initial clinical supervisors		Asking how they are
344	sounds like they had those attributes.		
345	Whereas other supervisors perhaps		Any difficulties
	didn't let you point it out in terms of		
346	your colleagues?		Relating difficulties to
347			personal life
348	P1: Yes.		
349			
350	I: So are there certain attributes or		
351	characteristics of supervisors that are		
352	(pause) essential for developing		
353	reflexivity within that context?	No limitations to	
		what can be	
354	P1: Yeah, I think so. And these	discussed	
355	characteristics are, I think you need		
356	to have err (pause) I think you need	Explore why	
357	to have (pause) I would say more of	feelings emerge	
358	an humanistic approach to how you		
359	(pause) you see people in		
360	supervision, and how you approach		
361	your supervisee. And (pause) to,		Providing a space for
362	from a psycho analytic perspective,		the supervisee to say
363	be aware of, (pause) transference or		what they feel
364	counter-transference issues, err and		
365	making maybe even some		
	interpretations between you and the		
366	supervisee and the supervisee and		
367	the client.		

<p>368</p> <p>369</p> <p>370</p> <p>371</p> <p>372</p> <p>373</p> <p>374</p> <p>375</p> <p>376</p> <p>377</p> <p>378</p> <p>379</p> <p>380</p> <p>381</p> <p>382</p> <p>383</p> <p>384</p> <p>385</p> <p>386</p> <p>387</p> <p>388</p> <p>389</p> <p>390</p> <p>391</p> <p>392</p> <p>393</p> <p>394</p> <p>395</p> <p>396</p> <p>397</p> <p>398</p> <p>399</p>	<p>Erm (pause) yeah, but I think you need to just erm (pause) the humanistic – what I mean is about err (pause) being empathic towards your supervisee, also being genuine, you know, trying not to kind of have a (pause) “I’m the supervisor and you’re the supervisee.” Kind of low down kind of (pause) idea.</p> <p>Erm, (pause) and just allowing them, if there is something that they need to bring in, even for a little bit, you know, something personal, and that’s relevant to bring it in, that’s what I think.</p> <p>I: Would, (pause) the other side of things be true? So if you found your supervisor helpful because of the characteristics they had, the ones you just mentioned. (pause) Would you have had certain characteristics that would make you receptive to those type of questions and that kind of awareness, self- awareness?</p> <p>P1: Yeah I suppose so. I suppose so, erm sorry just going back to your previous question. I am thinking of course, you know, you can’t just, as a supervisor, at least, that when you are dealing with fairly new trainees, you can’t just not really, just reflect and so on.</p>		<p><b>Supervisor Attributes for Developing Reflexivity</b></p> <p>Humanistic approach</p> <p>Psychoanalytic perspective</p> <p>Awareness of transference and counter-transference issues</p> <p>Interpretations between you, the supervisee, and the supervisee and the client</p> <p>Empathetic Genuine</p>
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400			
401	You do need to offer some advice,		
402	okay. Or you do need to enquire		
403	about different kind of perceptions,		
404	let's say. Possibly different		
405	perceptions, to enable the trainee to		
406	see, or the supervisee to see, maybe		
407	a different angle, okay.		
408			
409	But it's just the outlook that's kind of		
410	more humanistic. Erm (pause) no		
411	about being, you mean as a		
412	supervisee having certain		
413	characteristics?		
414			
415	I: Yes, as a trainee yes.		
416			
417	P1: To be able to benefit (pause)...		
418			
419	I: How did you benefit when you...?		
420	Or why did you benefit I suppose is a		
421	better question.		
422			
423	P1: Erm, I think because erm (pause)		
424	I (pause) I didn't have a defensive		
425	kind of attitude. Err, (pause) that		
426	(pause) I'm here to learn, but I'm also		
427	kind of here as a (pause) as person,		
428	as an individual in my own right. I		
429	don't know if that makes sense?		
430			
431	But I didn't have like a (pause) I think		
432	I just had like, a kind of confident		
433	(pause) attitude, that people maybe		
434	picked up on. I think a lot of people		
435	kind of confuse confident with		
436			
437			
438			
439			
440			
441			
442			
443			
444			
445			
446			
447			
448			
449			
450			Offer advice
451			
452			

453	arrogant, and they think that they		Enquire about
454	have to be really (pause) timid or		different perceptions
455	something like that, in supervision.		
456	And never say anything, you know,		Enable to supervisee
457	God forbid, the supervisor thinks he's		to see a different
	wrong.		angle
458			
459	But (pause) I think it was just the fact		
460	that I had a kind of a confident		
461	attitude in that, I'm willing to learn		
462	and I'm open to what you say. But I		
463	am also a person in my own right.	Outlook is more	
464	And I was just very receptive and	humanistic	
465	non-defensive.		
466	I think these were the things that,		<b>Supervisee</b>
467	that really helped. Because then I		<b>Characteristics</b>
468	didn't feel (pause) I didn't feel		
469	threatened.		
470			
	I: Do you think you brought those		
471	attributes to training with you?		Non-defensive
472	P1: Yeah, definitely.		
473			Willingness to learn
	I: And so, I suppose my next		
474	question is around, (pause) do you		Present as an
475	feel that you (pause) acquired		individual person
476	reflexivity prior to training?		Confident attitude
477	P1: (pause) Erm, (pause) I don't		
478	think so. I don't really think so, no. I		
479	mean thinking about it now, it would		
480	have also, through my therapy I		
481	would have acquired reflexivity,		
482	thinking about it now.		

483			
484	But it wouldn't have been necessarily		
485	regarding to my work, it would be		
486	more about being more aware of		
487	myself as a person, (pause) that was		
488	through therapy.		
489	I: And the therapy was part of the		Willingness to learn
490	training?		
491			
492	P1: Yeah, so no, it wouldn't have		Open to supervisors'
493	been before. I don't think that before		comments
494	(pause) no I don't think so.		
495			Receptive
496	I: It's interesting you spoke about		Non-defensive
497	certain attributes or characteristics		
498	that you had, that made you open to		
499	the experience. And so I'm		
500	wondering about (pause) I suppose,		
501	would you have seen those in your		
502	development? That actually they		
503	would have been mediators for		
504	reflexivity, at the point of training?		
505	P1: (pause) You mean the		
506	confidence and that kind of thing?		<b>Reflexivity</b>
507	I: Yeah, the confidence and you said		<b>Acquisition</b>
508	open to learning.		
509	P1: Mm (pause) yes I think so, yeah I		
510	think so.		
511			
512	I: What about on a wider scale, how		Acquired through
	do you see it for others? So for you,		training
	you feel that you really developed		

513	reflexivity and came across it when		
514	you were training and particularly in		
515	personal therapy, clinical supervision		
516	and case reports and process		
517	reports.		Personal therapy –
518	Do you feel that, (pause) everyone		awareness of myself
519	can acquire reflexivity at any stage in		as a person
520	their life?		
521			
522	P1: (pause) Only if they are willing to		
523	be open to it, otherwise not.		
524			
525	I: That's interesting.		
526	P1: I don't think so. I think there are		
527	people who can be, who think that		
528	they are open (pause) and know		
529	what's going on with them, but they		
530	don't.		
531	Well they deep down know, but they		
532	don't show any of that, and they don't		
533	want to show and they don't really		
534	want to admit. So no.		
535	I: And would you say – I mean it's		
536	interesting in terms of thinking about		
537	people perhaps who are patients,		
538	versus people who are trainees.		
539	Have you come across that in both		
540	arenas?		
541	P1: I was thinking more like people in		
542	general. Erm (pause) erm, (pause)		
543	people as trainees, (pause) err,		

544	trainees that I've worked with, I saw		
545	them develop reflexivity, eventually.		
546			
547	People whose work I marked, I saw a		
548	complete lack of reflexivity and I		
549	don't really know what happened to		
550	that.		
551	Patients, yes, I see patients who are		
552	(pause) who have no, or a tiny, tiny		
553	bit of reflexivity. But then I also see it		
554	that it might be that they've never,		
555	you know they've never learned to be		
556	this way.		
557			
558	I think, I think asking for someone to		
559	think (pause) about themselves in a		
560	way that, I suppose that counselling		
561	psychologists or counsellors or		
562	psychotherapists are asking		
563	something about themselves, is		
564	something that doesn't come		
565	naturally to people. Err, so (pause)		
566	it's not always easy to expect people		
567	to become, to get reflexivity while		
568	they're in therapy.		
569			
570	Some do, and some (pause) get a		
571	tiny bit, by the end (laughter).		
572			
573	I: What's the difference between		
574	those that do and those that get a		
575	tiny bit?		
576			
577	P1: Erm, (pause) what I've observed	Some people are	
578	is that, it matters very much what	able to be open,	
579		and believe they	
580		are open and	
581		know what's	
		going on with	
		them, but they	
		don't.	

**Acquisition at any  
life stage**

Willing to be open to it

582	really makes a difference, is how		
583	(pause) they themselves - how much	Don't always	
584	reflexivity has been around them	want to show it	
	while they have been growing up, I	or admit it.	
585	would say.		
586			
587	So people who, (pause) have		Trainees – able to
588	learned not to show emotions. That		develop reflexivity
	you know, whatever it is, I just, you		
589	know, buckle up and I don't say		
590	anything and I just get on with it. And		
591	I just do things, and I don't think		
592	about things. Erm (pause) I find that		
593	these are people who are much		
594	harder to develop reflexivity.		
595	I: And so, for you it's important that		
596	there's an environment of reflexivity		
597	when (pause) someone's younger?		
598			
599	P1: Erm (pause) I think so, yeah, I		Patients – able to
600	think so.		develop reflexivity
601	I: And may I ask, what is an		
602	environment of reflexivity? Say take		
603	for yourself, presumably you would		
604	apply the same thinking?		
605	P1: Erm (pause) people who		
606	generally maybe talk, express		
607	emotions, you know, being in an		
608	environment where emotions are		
609	expressed, good or bad. Where		
610	discussions about emotions take		Doesn't occur
611a	place. Where things are not just		naturally
611b	swept, you know bad things are not		



612	just swept under the carpet. Erm		
613	(pause)...		
614			
615	I: May I ask if that's true for your	It's not always	
616	background as well?	easy to expect	
617		people to get	
618	P1: Erm (pause) yeah I mean in my,	reflexivity while	
619	you know in my environment, in my,	they're in therapy	
620	let's say family, we would generally,		
621	emotions were generally expressed.		
622	Negative emotions were not really		
623	allowed to be expressed. But (pause)		
624	you were not just expected to		Exposure to reflexivity
625	(pause) just cope with things.		growing up
626	You know, (pause) it was okay to not		
627	feel great, for a while.		
628	Erm, (pause) so that kind of made it		
629	okay. It was alright to (pause) admit		
630	that nothing's perfect, you know. Erm		
631	(pause) whereas with people that I've		
632	dealt with, who really struggle to		
633	become reflective and understand		
634	what it is, (pause) in my experience		
635	they come really from environments		
636	where (pause) err it's like, everything	People who have	
637	just has to appear good.	learned not to	
638	Yeah, it's very much about	show their	
639	appearances. Things appearing good	emotions – less	
640	to others. And keeping up the	likely to develop	
641	appearances, you know.	reflexivity	Environment of
642			reflexivity during
643			development

644	So, and I think it can be more – it can		
645	even be sometimes, even at a		
646	cultural level, I don't know.		
647			
648	I mean I do know the fact that in		
649	Greece people generally (pause)		
650	express emotions erm, (pause) what		
651	you see is what you get, usually.		<b>Reflexive</b>
652	Even the language doesn't have		<b>Environment</b>
653	(pause) certain wording that you get		Express emotions
654	in English, that (pause) you may be		Open
655	saying something else, but you say		communications
656	something else. (laughter) In Greek		Discussions around
657	this doesn't really exist, so (pause)		emotions
658	things are a lot more straightforward.	Express good	
659	So expression of emotions is a lot	and bad	
660	more straightforward and is a lot	emotions	
661	more acceptable.		
662	I think that can promote reflexivity.		
663	No, maybe age as well, I don't know.		
664	I: Age?		
665			
666	P1: Erm (pause) as you grow you		
667	can become more reflexive. But		
668	(pause) maybe not. I think that's very		
669	(pause) – I think it really depends. I		
670	think if you (pause) if you maybe are	Brought up	
671	with someone who can be quite	discussing	
672	reflexive, then you can also become	emotions.	
673	quite reflective.		
674	I: So for you there's something about		
675	a kind of developmental zone if you		
676	like?		

674			
675	P1: I think so.		
676		It was okay to	
677	I: Whereas, there has to be	not feel great for	
678	something within that, that would	a while	
679	then lead to, you used the idea of a		
680	willingness to learn?		
681	P1: Yes.		
682			
683	I: That would then lead you to be		
684	able to develop that later on in life?		
685	P1: Yeah, I think an openness I		
686	would say. An openness to it, to think		
687	about one's self and think about		
688	others and (pause) erm, (pause)		
689	yeah, in a kind of maybe non-	Things	
690	defensive stance I would say.	appearing good	Cultural influence
691		to others and	
692	I: You talked about environment and	keeping up	
693	the importance of that. Where would	appearances	
694	you place ideas around personality?	impedes	
695	P1: How do you mean?	reflexivity	
696			
697	I: Genetics. I suppose you talked		
698	about nurture, I suppose I'm		
699	wondering about how you feel about		
700	(pause) how and whether nature fits		
701	in?		
702	P1: So from? (pause) I think that, you	In some cultures	
703	know, that genetically, well from birth	the expression of	
704	you have a certain temperament,	emotions is a lot	

705	yeah I think that's like the term in	more	
706	developmental psychology.	straightforward	
707		and accepted	
708	So temperament, I think you are		
709	definitely born with (pause) a		
710	personality. But that personality		
711	(pause) can mould and kind of be		
712	moulded and changed, and shaped		
713	throughout your life.		
714			Age – surrounding
715	Erm (pause) yeah, erm (pause) I		yourself with others
716	don't know, I mean I'm thinking let's		who are reflexive
717	say about Penelope and the baby.	You can become	
	And I'm thinking, "Yeah she's	more reflexive	
718	generally quite smiley, she's	with age	
719	generally you know, very social,		
720	she's happy being with other people."	As you grow you	
	So I'm thinking, "Well she most likely	can become	
721	is someone who will be (pause) quite	more reflexive –	Developmental zone
	social.	dependent if you	of reflexivity
722		are with	
723	But then (pause) I don't know, let's	someone who is	
724	say if both I and Peter were, didn't	quite reflective	
725	want to meet anyone or just by		
726	ourselves and (pause) didn't		
727	communicate with anyone, and so		
728	we didn't show that meeting with		
729	people is good, then she might		
730	become someone who is very much		
	of an introvert.		
731			
732	So I don't know (pause) I don't know		
733	how much (pause) erm, how much		
	genetics can actually maintain, stay		
734	throughout one's life.		

735	I: So perhaps the environment can		Openness to
736	have more of an impact in the		reflexivity
737	shaping?		
738			Non-defensive stance
	P1: I think so, yeah.		
739			
	I: Let me ask you, erm, you came		
740	back to personal therapy during		
741	training earlier, as another		
742	component whereby you felt you had		
	learned reflexivity. (pause) How do		
743	you feel you learned it, within		
744	personal therapy?		
745			
746	P1: Erm (pause) by the therapist		
747	asking questions like (pause) erm,		
748	(pause), "How did you feel?" Or,		
749	"What kind of affect do you think		
	you've had?" Or, "Why do you think		
750	you did that?" "What was going on		
751	for you?" (pause) Erm (pause) yeah		
752	and eliciting let's say maybe (pause)		Temperament from
753	feelings or (pause) thoughts and so		birth
	on, that, you know, were there, but		
754	you hadn't become aware of.		
55			
756	I: And in terms of the different		
757	components you've mentioned about		Born with a
758	your training, would you say, I mean		personality, that can
759	you mentioned clinical supervision		be changed and
760	might be stronger than case studies		shaped throughout life
	or process reports. Where does		
761	personal therapy fit in, in the kind of		
762	way you felt you developed the most,		
763	for reflexivity?		
764			

765	P1: (pause) I would say, clinical		
766	supervision and then personal		
	therapy, and then (pause) erm, and		
767	then the case study and then the		
768	process reports and then the case		
769	studies.		
770			
771	But the thing is, that what I'm thinking		
772a	about, is that, clinical supervision		
772b	developed much more my reflexivity		
773	in terms of my clinical work. Whereas		
774	personal therapy (pause) helped me		
775	to be more reflective about myself,		
776	and my relation to other people		
777	around me, you know, in my		
778	environment. Like the people speak		
779	in therapy about, that kind of thing.		
780	Does that make sense?		
781			
782	I: Would you explain a bit more, is		
	there a relationship between the		
783	two? Or do you see them as		
784	separate?		
785			
786	P1: Erm (pause) I think you have to		
787	become (pause) mm, I haven't		Environmental
788	thought about that. Err (pause) I think		influence
789	probably you need actually to		
790	become more reflective about		
791	yourself (pause) and gain awareness		
	about yourself through therapy.		
792			
793	And in parallel have the supervision,		
794	but I think you need to become more		
795	reflective about yourself, (pause)		
796	first. (pause) Yeah I think so.		

<p>797</p> <p>798</p> <p>799</p> <p>800</p> <p>801</p> <p>802</p> <p>803</p> <p>804</p> <p>805</p> <p>806</p> <p>807</p> <p>808</p> <p>809</p> <p>810</p> <p>811</p> <p>812</p> <p>813</p> <p>814</p> <p>815</p> <p>816</p> <p>817</p> <p>818</p> <p>819</p> <p>820</p> <p>821</p> <p>822</p> <p>823</p> <p>824</p> <p>825</p> <p>826</p> <p>827</p>	<p>I: So it's important to have a self-awareness before an awareness of others?</p> <p>P1: (pause) Mm, (pause) maybe.</p> <p>I: For you?</p> <p>P1: Yeah, I think so. I mean (pause) I don't know because I'm thinking of someone I know, who erm, (pause) who is very (pause) erm, (pause) she's very aware of (pause), she thinks that she's very aware of others, but she's not really. (pause) She's not aware of herself or of others.</p> <p>So yeah, in a way, yeah I think you need to be aware of yourself (pause) first, and then of others.</p> <p>I: Could you be aware of yourself but not aware of others? Or are they intrinsically linked do you think?</p> <p>The example you gave was of somebody who is aware of neither. (pause)</p> <p>P1: I don't know, somehow if you're just aware of yourself and not aware of others, then that's quite (pause) well you've stopped at some developmental stage somewhere,</p>	<p>Therapist asking questions like</p> <p>how did you feel, what kind of affect do you think it had, why do you think you did that, what was going on for you?</p>	<p><b>Personal therapy</b></p> <p>Reflecting on feelings and the impact on oneself</p> <p>Eliciting feelings or thoughts that you hadn't previously been aware of</p> <p>Clinical supervision, followed by personal therapy, for influencing reflexivity, followed by process reports and then case studies</p>
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828	where it's all about you. I don't know,		
829	no I don't think so, I don't think you		
830	can actually.		
831			
	I: That's interesting.		Clinical supervision
832			developed reflexivity
833	P1: I don't think – I mean (pause)		in terms of clinical
834	you can be aware of others but not		work
835	(pause) but at the same level at the		
836	same kind of maybe superficial level		Personal therapy
837	that you are also aware of yourself.		developed reflexivity
			about myself and in
838	But to be, (pause) at a deeper level,		relation to others
839	aware of others, you also need to be		around me and my
840	aware of yourself at a deeper level		environment
841	as well.		
842			
843	I: Mm. (pause).		
844			Need to be reflective
845	P1: I don't know if that makes sense?		about yourself and
846			gain awareness about
847	I: Mm, it makes sense. I was going to		yourself through
848	follow that by asking about (pause)		therapy to be
849	you're eight years on from there. Do		reflective about others
	you feel that you've continued to		
850	develop?		
851			
852	P1: Yeah, definitely.		
853			
	I: How do you know?	Need to be	Self-awareness
854		reflective about	before awareness of
855	P1: Erm, (pause) because I erm,	yourself before	others
856	(pause) I've become more aware of	being reflective	
857	myself about other things, you know.	in supervision	
858	Things that (pause) erm, I wasn't		
859			



860	aware of, because I hadn't come		
861	across them, during my training.		
862	Erm (pause) so you know, I think		
863	very kind of (pause) two big		
864	influences in the eight and a half,		
865	nine years since I stopped my		
866	training, was I think, just being a kind		
	of a therapist and a supervisor		
867	myself.		
868			
869	So becoming aware of (pause) the		
	impact that, of how much I bring		
870	myself into that, and the impact that I		
	can have on others.		
871	Because I wasn't aware of (pause)		
	that impact, because I had never		
872	been in that position.		
873			
874	Also working with people, with		
875	victims of torture and seeing - finding		
876	out about this other (pause) aspect of		
877	the world, that you're not aware of,		
878	unless you deal with it, you work with		Awareness of self but
879	it. Err, and seeing how I react to that.		not others
880	Yeah.		
881	I: So the new experiences that you		
882	had, allowed more development?		
883		Stopped at some	
	P1: Yes, yes.	developmental	
884		stage	
885	I: Which is interesting, because it	somewhere	
886	relates to what you said about	where it is all	
887	openness, to learning.	about you	

888	P1: Yeah.		
889			Awareness of self can
890	I: And is reflexivity you see as		occur superficially and
891	something that will continue to		at a deeper lever
892	develop or do you see it is stopping		
893	or plateauing at some point?		Intrinsically linked
894	P1: No, I think, I think it can continue		
895	to develop, the more you become		
896	aware of (pause) other experiences		
897	or of other roles you take in your life.		
898		Awareness of	
899	I mean I'm even thinking, you know,	others on a	
900	being pregnant was an experience or	deeper level	
901	becoming a mum is an experience.	required you to	
902	So you have become reflective	be aware of	
903	(pause) about that. About how do I	yourself on a	
904	feel about a man. Would I bring in,	deeper level too.	
905	you know, why do I respond the way		
906	that I respond and so on.		
907			
908	So I think it continues, as long as you		
909	(pause) – I think that if you have new		
910	experiences in different fields of work		
911	or, you know, you take on new roles		
912	in your life, or you meet new people,		
913	maybe that (pause) bring something		
914	different. A perspective that you		
915	hadn't thought about before.		<b>Continual</b>
916			<b>development</b>
917			Awareness of self
918	That way of reflectivity will develop		Awareness of things
919	maybe at a wider and a faster pace,		beyond training
920	currently develop.		
921			
922	Erm (pause) if you continue (pause)		
923	working with what you've always		

917	been working, it might be, it would		
918	still continue, but maybe not as much		
	as or not as fast.		
919			
	But err, I think it will continue		
920	throughout life, but you need to		Impact on others
	continue being open to it as well.		
921			
922	I: May I ask you a bit about training		
923	now? Your role as a trainer?		
924			
925	P1: Mm.	How much of	
926		myself impacts	
927	I: How do you teach reflexivity?	others	
928	P1: Erm (pause) erm, how would I		
929	teach it, or how do I teach...?		
930			
931	I: How do you?		
932		Seeing how I	
933	P1: Okay. Erm, I am not involved as	react to areas	
934	such in the module that teaches	and aspects of	
	reflexivity. But, erm, (pause) for	the world I'm not	New experiences
935	instance in one module that I was	aware of	allowed development
936	teaching, which was professional and		
937	ethical issues. I would kind of hold		
938	discussions with the students about		
939	the role of supervision. What do they		
940	discuss in supervision? What's		
941	important in supervision? What do		
	they feel they need to get from it?		
942	How do they contribute and so on?		
943			
944	To really get them to think as to		
945	(pause) to really get them to think		
946	about the process of what needs to		

947	be – what is process in therapy for		
948	them?		
949			
950	So what is it that they need to		Continue to develop
951	become aware of and how can they		
952	discuss that in supervision. So they		
953	become more aware of it and they		
954	work with it.		
955			
956	Erm, so I teach that for instance.		
957	Erm, and generally I would get them	Develop by the more aware you become of other experiences or of other roles you take in your life	
958	to read articles that would be quite		
959	thought provoking and, then hear		
960	feedback and get them to think of,		
961	what could have influenced the ideas		
962	that they got from the article, or the		
963	opinions that they formed about the		
964	article.		
965			
966	Erm, so for instance, erm, you know,		
967	we've had, there was this articles		
968	that was erm talking erm, about, it		
969	was by [Rosa Rist 0:41:00] actually.		
970	It was talking about erm, the [IACT		
971	0:41:02] and making a parallel about		
972	erm, (pause) a particular kind of		
973	language used in the book, '1984'.		
974	Err, kind of the dictatorial kind of		
975	outlook and how [IACT] can be like		
	that, and how you have to use		
	certain language, let's say, for err,		
	when you talk with clients and so on.		
	And it was interesting that, err, there		
	was one trainee who works in [IACT],		
	and he thought that it was too much,		

976	and he didn't like it, and da, da, da,		
977	da, da. You know, and the others,		Continual process
978	actually especially the ones who		
979	worked in kind of more long term,		Encouraged by
980	non-NHS placements. Were like		openness
981	"Yeah, she's absolutely right." You		
982	know, "This is it." And completely		
983	agree. So I got them to think of,		
984	"What do you think might be		
985	influencing your opinions? Isn't it		
986	interesting that, you know, this		
987	trainee, who works in [IACT] thought		
988	this. And you guys thought that and		
989	what do you think is influencing all		<b>Teaching reflexivity</b>
990	that?"		
991			
992	So I got them to think about that and		
993	that's reflective practice.		
994			
995	I: So the idea of having (pause)		
996	discussion about the self, and your		
997	response?		
998a			
998b	P1: Err, yes. What influences your		
999	response, you know. What is it about		
1000	you or what is it about maybe where		
1001a	you're working and so on, that erm,		
1001b	affects how you're thinking and your		
1002	response to this article. Your opinion		
1003	about this article.	What do they	Hold discussions
		discuss in	around the role of
		supervision?	supervision
		What's important	
		in supervision?	
		What do they	
		feel they need to	

1004	P1: Erm, (pause) because with a bit	get from it? How	To encourage
1005	of prompting, or just with the	do they	students to think
1006	questions of, you know, "What do	contribute?	about the process of
1007	you think about the fact of this?"		supervision
1008	They are able to come with		
1009	comments, which shows that (pause)		
1010	they thought about it and they can be		
1011	quite reflective.		
1012	I: Okay.		Creating awareness
1013	P1: For example, err, another erm, in	What do they	
1014	another module that I'm teacher,	need to become	
1015	which is about working with	aware of	Reading thought
1016	difference and diversity. I actually		provoking articles and
1017	spent quite a few, I think three kind of		hearing feedback,
1018	sessions, err, talking with them about		opinions and thoughts
1019	what is it about difference, what do		
1020	we mean by difference?		
1021			
1022	My difference, you know, what could		
1023	my difference to (pause) the person		
1024	next to me be, and so on. And is it		
1025	bad or is it good or, erm, should we		
1026	erm, perceive difference as, you		
1027	know, once we embrace difference,		
1028	then can we talk about it without		
1029	being defensive and so on.		
1030			
1031	And that really got them thinking and		
1032	they were able to really think of		
1033	themselves in terms of difference,		
1034	and reflect on how that's impacting		
	them, their relationship with clients,		
	how generally they live their lives.		

1035	And they were able to be reflective		
1036	about that.		
1037			
1038	Then I also gave them an example of		
1039	how I would write an essay, that was		
1040	actually asking them to reflect about		
1041	difference, in their clinical practice.		
	And err, I gave them an example of		
1042	how I would have written an essay		
1043	based on me.		
1044			
1045	So I gave them an example of how		Identify what is
1046	one can be reflective, without		influenced your
1047	needing to be defensive or anything		opinions
1048	bad being about it. Just I am being		
1049	aware of my difference, and how this		
1050	may be impacting. Where is this		Discussion about the
1051	coming from? How it may have		self and your
1052	impacted my clinical work and so on.		response
1053		What do you	
1054	And then in research, when I'm	think is	
1055	working with research in supervision,	influencing your	
1056	I generally kind of try to get the	thoughts? What	
	students to think of, you know, what	role does your	
1057	are your expectations from this? You	experience play	
1058	know, what do you think you might	in these	
1059	find? So, (pause) how do you think	thoughts?	What influences your
1060	that might be affecting what you're		response
1061	looking for? Or, why have you just		
1062	looked at the literature that suggests		What is it about you
1063	this? What about the literature that		or where you're
1064	suggests that? You know, so where		working that affects
1065	is that coming from? Erm (pause) so		how you're thinking
1066	this way, I promote reflexivity.		and your opinion?
1067			
1068			

<p>1069</p> <p>1070</p> <p>1071</p> <p>1072</p> <p>1073</p> <p>1074</p> <p>1075</p> <p>1076</p> <p>1077</p> <p>1078</p> <p>1079</p> <p>1080</p> <p>1081</p> <p>1082</p> <p>1083</p> <p>1084</p> <p>1085</p> <p>1086</p> <p>1087</p> <p>1088</p> <p>1089</p> <p>1090</p> <p>1091</p> <p>1092</p> <p>1093</p> <p>1094</p> <p>1095</p> <p>1096</p> <p>1097</p> <p>1098</p> <p>1099</p>	<p>I: And you said you don't teach on modules that are dedicated to teaching reflexivity. Would you be able to talk about the course as a whole, in terms of how it teaches reflexivity?</p> <p>P1: Erm, (pause) first of all by having modules that are particularly about (pause) erm, reflective process. So there is a module about erm, you know reflecting on how we practice, within different modules and (pause) how we write process reports and case studies, and so on, and that gets the students to think about that.</p> <p>I: And within that one, what are the mechanisms by which (pause) reflexivity is taught?</p> <p>P1: I wouldn't really know, to tell you the truth. But I think it's more about maybe doing role plays or observing a session and the discussing it, in groups or in pairs or with the tutor, with a big group.</p> <p>Also I think, in the second and the third year I think there are, the first one as well, (pause) yeah, in all years there is a reflective group practice, that erm others teach and I think it's just a forum really to be discussing, what has been taught about a particular model or a</p>	<p>What do you think about this?</p>	<p>Assess reflexivity through prompting and questioning</p>
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1100	particular intervention or theory, and discussing clients.		
1101	And I think generally discussing		Thinking about self in terms of differences
1102	clients, bringing case studies, which		
1103	is something that I do as well, is very		
1104	much something that students	How this could	
1105	benefit from, to become reflective.	impact their	
1106		relationship with	
1107	So, say a student brings a case and	clients and	
1108	informally presents it to the others,	generally their	
1109	and then it's kind of peer supervision,	lives	
1110	but (pause) as a tutor you can kind of		
1111	facilitate the discussion and prompt,		
1112	to enable some reflective process.		
1113	I: (pause) From your perspective,		
1114	(pause) you can see how you're		
1115	teaching it or it's being taught across		
1116	the courses. What is your impression		Non-defensive
1117	from the trainees as to (pause) what		
1118	they perceive as the components of		
1119	teaching reflexivity?		Being aware of difference and how this may be impacting
1120	Do they think of it as the experiential		
1121	groups you talked about, or the		
1122	discussions in lectures you talked		
1123	about, or some of the components		
1124	from your training, like case reports,		
1125	process reports?		
1126			<b>Research</b>
1127	P1: I think the, erm (pause) – I'm		
1128	talking about first year trainees only,		Expectations
1129	because that's kind of the experience		What do you think you will find?
1129	I've had so far, erm, in the years that		
1130	I've been working here. Erm, I think		

1131	they see it as more explicit. So it's		How do you think that
1132	kind of, "Oh we learn reflexivity in the		might be affecting
1133	reflective practice groups and		what you're looking
1134	working on the process reports and		for?
1135	doing the case studies, err, and		
1136	maybe reading a little bit about it for		What does the
	the research proposal." But they		literature say?
1137	don't (pause) maybe, even though,		
1138	let's say I would emphasize that this		
1139	is what we're doing, we're focusing		
1140	on the process.		
1141			
1142	And, maybe with the difference in		
1143	diversity essay, because it's a		<b>Course as a whole</b>
1144	reflective essay, they got that. That		
1145	again, this is about reflexivity.		
1146	I think otherwise (pause) unless it's		Modules that are
1147	in the module title, err, and in the		about reflective
1148	module booklet kind of, they don't		process
1149	really realize that maybe this is		
1150	reflexivity.		
1151			
1152	Erm, I would like to think that maybe		
1153	by the third year it's become more		
1154	part of themselves, and then they		
1155	can, kind of see it and (pause) do it a		
1156	bit more automatically.		
1157			
1158	I: So from the first year there's a		
1159	developmental stage that you see		
1160	them going through?		
1161			
1162	P1: Yeah, yeah.		
1163			Role plays

1164	I: That's interesting. And if you were		Observing therapy
1165	to design your own module, or		sessions and
1166	programme for developing reflexivity,		discussing it
1167	what would you include on it?		
1168			
	P1: (pause) Mm, (pause) I think I		
1169	would probably erm, try and include,		
1170	involve, depending on the student,		
1171	on the amount of students, involving		
1172	(pause) erm, members of staff that		Reflective group
1173	could take, maybe, (pause) three or		practice – open forum
1174	four students each. And so that it's		for discussion
1175	not a massive group.		
1176			
1177	Erm, and within these little groups,	Topic regarding	
1178	erm, present cases, so that there is a	a particular	
1179	constant kind of erm, (pause) there is	model or	
	a constant err, mirroring let's say, of	intervention, or	
1180	how supervision can be, that	theory, and	Case studies
1181	promotes, that helps the other	discussing	
1182	person being reflective. I don't know	clients	
	if I'm making myself clear.		
1183			
1184	But it would be like little peer		
1185	supervision groups, where let's say	Discussing	
1186	the tutor would be the supervisor.	clients	
1187	Erm, and through the facilitation of		Peer supervision
1188	the group and the questions being		
1189a	asked, and so on, it would get,		
1189b	gradually students to be thinking in a		
1190	more reflective way about		
1191	themselves, about the clients and		
1192	others would all be learning.		
1193			
1194	Erm, (pause) and also in those same		
1195	groups erm, also discussing the		

1196	research, because I think that's a big		
1197	part of it as well. Discussing the		
1198	research and getting to think about		
1199	what is it that you want to do.		
1200			
1201	Not, "Can I do this?" And, "Is this		
1202	doable?" But more like, "This is what		
1203	I want to do, why, what would we		
1204	make the connections? How would I		
1205	effect the study? And the outcome.		
1206	I think if you have a really big group it		<b>Trainee perspective</b>
1207	can feel maybe a bit unsafe. Erm		
1208	(pause) that's why I would want kind		
1209	of smaller groups. I think that's		
1210	probably how I would (pause) I would		
1211	design it.		
1212	In these small groups as well, you		Explicit learning
1213	know, you would show them how to		
1214	write process reports, what process		
1215	reports are about.		
1216	I mean in my understanding, a good		
1217	process report doesn't need to show		
1218	that someone did a brilliant CBT		
1219	intervention. But it's about		
1220	understanding why I did what I did,		
1221	and what was going on for the client.		
1222	But I think a lot of the students think		
1223	that they need to get a piece of work,		
1224	that maybe very poor in process, but		
1225	shows something done brilliantly		
1226	well. So in a way, I would like this	Don't focus on	
1227		the process	

1228	ideal module, to really kind of drill into them what the process is about.		Don't really realise it is reflexivity
1229			
1230	I: You said you worked mainly with		
1231	first year trainees, for the last couple		
1232	of years. Do they vary in terms of the		
1233	level of reflexivity?		
1234			
1235	P1: Yeah, yeah.		
1236			
1237	I: How do you understand that?		
1238			
1239	P1: Erm (pause) by their readiness to		
1240	understand and pick up, when you		Developmental stage
1241	are talking about reflexivity. So	By third year, it's	
1242	(pause) erm, (pause) yeah by that.	become more	
1243	Erm, but how reflective they are	part of	
1244	when discussing something or	themselves and	<b>Own</b>
1245	responding, responding to erm	kind of see it and	<b>Module/Program</b>
1246	(pause) to something that is being	do it more	<b>Design</b>
1247	said.	automatically	
1248	I: Maybe we could take an example?		
1249	Anonymized example of a trainee		
1250	with a lower level of reflexivity?		
1251			
1252	P1: Yeah, I mean for example, erm,		3-4 students per
1253	a trainee with a very low level of		group
1254	reflexivity has been someone who,		
1255	let's say is working with difference		
1256	and diversity, and you will probably		
1257	understand who this person is. But		
1258	(pause) it's the only person from the		
1259	whole group of trainees who's not		Present cases
1258	white British. Erm, and (pause) when		
1259	I was discussing difference, erm,		

1260	(pause) it was like, saying, "Well how		Mirroring of how
1261	has it been for you for example." I		supervision can occur
1262	said, "What background do you come		Promotes reflectivity
	from?" He was like, "Oh British."		
1263	"Yes, but your parents where are		
1264	they from? I mean because obviously		
1265	you don't look white British. So		
	obviously you're from somewhere		
1266	else." And erm, (pause) so he said		
	where his parents were from, and he		
1267	said how sometimes there is tension		Peer supervision lead
1268	when he goes back to his parents'		by the tutor
1269	home country. Tension between		
1270	being what he is expected to be		
1271	there and being British.		
1272	And I said, "Well so in a way, this is		
1273	kind of a difference, let's say		
1274	between you and your colleague		
1275	here, who has been born here,	Questions are	
1276	parents born here, generation after	asked which	
1277	generation. So you kind of maybe	would encourage	
1278	have a bit of a different experience,	students to think	
1279	compared to her. So that in a way is	in a more	
1280	a difference."	reflective way	Discuss research
		about	
1281	And he was like, "No, err I don't ever	themselves,	
1282	see myself as different. I don't – I've	about the clients	
1283	never had a different experience."	and others	Understanding why
1284			they want to do the
1285	For him, difference, he had to think of		research
1286	difference let's say, between him and		
1287	a client who is disabled, for example,		
1288	who is blind.		
1289			

1290	Whereas the way I was discussing		Smaller groups feel
1291	difference, was that difference could		safer
1292	be anything, it could be, you know,		
1293	your client having an experience of		
1294	mental illness and you not having an		
1295	experience of mental illness. And,		
1296	erm how that might affect, let's say		
1297	your clinical work. It doesn't have to		
1298	be something very clear cut, but very		
1299	obvious, let's say.		Write process reports,
1300			describe what they
	But the fact that there was so much, I		are about
1301	sensed, (pause) so much		
1302	defensiveness about somehow		
1303	(pause) looking different means that		
1304	it's something somehow bad or racist		
1305	or something like that. I found that		
1306	this really kind of limited reflexivity.		
1307	Does that make sense?		Understanding why
			they did what they did
1308	I: It's his defensive stance that limited		in therapy and what is
1309	his development in that situation?		occurring for the client
1310			
1311	P1: Yes, very much so.		
1312			
1313	I: Do you think he will go on to		
	(pause) develop reflexivity or more		
1314	reflexivity?		
1315			
1316	P1: I hope so, I mean, throughout the		
1317	lectures, you know, this was an		
1318	example in the second or third		
1319	lecture. And (pause) in the very final		
1320	one, he still seemed like he had a		
	long way to go compared to the		
1321	others, who had actually really gone		

1322	for it. But erm (pause) he had shown		
1323	progress.		
1324			
1325	But I think that maybe in therapy or		
1326	(pause) I don't know where, there		
1327	would still need to be more work and		<b>Differences in</b>
1328	more work done. And maybe there's		<b>reflexivity</b>
1329	something that makes him feel		
1330	unsafe, or (pause) I don't know.		Readiness to
1331	I: Can we take an example from the		understand and
1332	other end, about an anonymized		identify when you are
1333	example of a trainee with a high level		discussing reflexivity
1334	of reflexivity that comes to mind?		
1335	Might they have this capacity at this		Level of reflectivity
1336	stage?		during discussions or
1337			responding
1338	P1: Erm, (pause) yeah I am trying to		
1339	think. (Pause) I mean there was this		<b>Low level of</b>
1340	other student, who erm (pause) was		<b>reflexivity</b>
1341	erm, she was in the very last kind of		
1342	workshop that we did.		
1343			
1344	Erm, I was asking her what she's		
1345	thinking of writing in her essay and		
1346	so on. And (pause) she was saying		
1347	how, where she works, there was		
1348	this Jewish lady who came, and then		
1349	she immediately made a comment		
1350	about how she's got, she the client		
1351	has got a Jewish nose. And err, how		
	(pause) the trainee herself is Jewish		
	and she's very careful not to let		
	anyone know that she's Jewish.		
	Because she worries about maybe		
	the assumptions that other people		



1352	will make, about her being Jewish		
1353	and so on.		
1354			
1355	And, I started discussing with her,		
1356	“Well I wonder if it’s your own		
1357	assumption that people will make		
	assumptions, you know. And maybe		
1358	there are certain assumptions that		
1359	you would make about people being		
1360	Jewish or your assumption of		
1361	yourself as being Jewish, and so on.		
1362	So is it about really, (pause) by not		
1363	saying that your Jewish, who are		
1364	you? Who are you doing it for? Are		
1365	you really doing it for your clients or		
1366	for yourself or what is that about?”		
1367			
1368	And she was really able to kind of		
1369	work with that and realize that		
1370	actually the client could well have		
1371	known that I was Jewish and that’s		
1372	why she made the remark about the		
1373	Jewish nose. Because, from my		
1374	name, you can see, one who knows		
1375	could see that I’m Jewish. (laughter)		
1376	So that it’s really my own kind of		
1377	maybe stereotypes that I think		
1378	people will make.		
1379			
1380	Erm, so that was quite high, quite		
1381	good reflexivity.		
1382			
1383	I: Why do you think she was able to		
1384	do that, whereas the male you spoke		
1385			

1386	about before, wasn't able to do		Understanding of difference
1387	something similar?		
1388			
1389	P1: (pause) Erm, I don't know really,		
1390	maybe she's much more confident as		
1391	a person? I think she's more		
1392	confident generally, more grounded.		
1393	Maybe (pause) she feels that (pause)		
1394	there's less stigma around (pause)		
1395	there's been less stigma around her,		
1396	I don't know. I'm making		Defensiveness
1397	assumptions here that maybe the		
1398	other one never wanted to feel		
1399	different.		
1400	You know, he really wanted to be		
1401	British, as the same white British boy		
1402	next door, kind of thing. I don't know.		
1403	Erm, whereas she never probably		
1404	had that. She was just comfortable		
1405	being (pause) Jewish, being different		
1406	to, I don't know, white kind of		
1407	Protestant English, for example. And		
1408	she was comfortable with that.		
1409	Whereas the other one wasn't		
1410	comfortable with looking different.		
1411	I: You said the first years they vary,		
1412	which in the two examples in terms		
1413	of reflexivity. Do you assess		
1414	reflexivity at this stage of interview?		
1415			
1416	P1: We do, yeah we do assess a		
1417	reflective ability.		
	I: How do you do that interview?		

1418			
1419	P1: You mean when people apply?		
1420			
1421	I: Yes when people apply for selection?		
1422			
1423	P1: Erm (pause) by (pause) well by asking things like, "Why would you want to erm (pause) – what do you think – what life experiences do you think led you to probably becoming a therapist?" So to see if they are able to think of what, if there was something in their life that has kind of affected them or that they can reflect. That it has become part of them and (pause) has led them to want to help others. Or maybe they want to sort themselves out, or something like that.		<b>High level of reflexivity</b>
1424			
1425			
1426			
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1434			
1435	Erm, (pause) what difficulties they may find on the course. Again, that can show reflective ability. Err, so you know you may get someone who will say, "Oh I'm very organized anyway so it won't be a problem."		
1436			
1437			
1438			
1439			
1440			
1441	Or you may get someone who will say, "Well actually I think I may find it quite difficult thinking about myself and that maybe working with someone who has got schizophrenia might be difficult, because my mum has schizophrenia."		
1442			
1443			
1444			
1445			
1446a			
1446b			
1447			

1448	I mean that shows kind of reflective		
1449	ability. Also personal therapy, if		
1450	they've had personal therapy, that		
1451	usually is an indicator that they may		
1452	have got some more self-awareness.		
1453			
1454	Erm, yeah, and then in research,		
1455	when we ask about their research,		
1456	we ask about (pause) erm, ethical		
1457	issues that may have been raised or		
1458	may be raised by their research.		
1459	So to see if they have any		Identification of self-
1460	understanding of how research or		imposed assumptions
1461	research questions can affect		
1462	someone.		
1463			
1464	Erm, (pause) or you know what are		
1465	their expectations of research? Then		
1466	how this might affect what they want		
1467	to find. So that's how we do it.		
1468			
1469	I: Are there any components you		
1470	would like to add to that, from your		
1471	own experience of developing		
1472	reflexivity?		
1473	P1: (pause) Erm, maybe like, (pause)		
1474	I don't know, maybe writing an		
1475	essay, a short essay. You know like		
1476	a page or two, erm (pause) about		
1477	erm, (pause) what would it be about?		
1478	(pause) I don't know it could be		
1479	something like, erm, (pause) what		
1480	has led me to want to become a		
	therapist and (pause) erm, what do I		

1481	think from my own experiences, I		Own stereotype of self and what I think other people will think
1482	could bring to the course and might affect me. Potential difficulties. What		
1483	might I learn? And you would be		
1484	looking for someone who goes		
1485	beyond the (pause) you know what		
1486	they think the reader wants to see.		
1487	(laughter).		
1488			
1489	I: Dig a bit deeper?		
1490			
1491	P1: Yeah.		
1492	I: That's all the questions I have. Is		
1493	there anything I've missed out or	Confident	
1494	anything you would like to add?		
1495		More grounded	
1496	P1: (pause) Erm, (pause) I think that		
1497	just kind of becoming, just in a way		
1498	being reflective, you know gaining		
1499	reflexivity erm, (pause) I think in a		
1500	way can make you look generally at		
1501	the world in a different way and kind		
1502	of not be judgemental I suppose.		
1503	Being more open towards other		
1504	people generally. Erm, but I think one		
1505	needs to be careful as to the extent		
1506	that they go. You know because I		
1507	think sometimes people can (pause)		
1508	just take a reflective process a bit too		
1509	far, and then kind of lose the wood		
1510	from the trees. And you need to stay		
1511	grounded to reality, in reality to an extent.	Comfortable with self	

<p>1512</p> <p>1513</p> <p>1514</p> <p>1515</p> <p>1516</p> <p>1517</p> <p>1518</p> <p>1519</p> <p>1520</p> <p>1521</p> <p>1522</p> <p>1523</p> <p>1524</p> <p>1525</p> <p>1526</p> <p>1527</p> <p>1528</p> <p>1529</p> <p>1530</p> <p>1531</p> <p>1532</p> <p>1533</p> <p>1534</p> <p>1535</p> <p>1536</p> <p>1537</p> <p>1538</p> <p>1539</p> <p>1540</p> <p>1541</p> <p>1542</p> <p>1543</p> <p>1544</p>	<p>I: I mean you mentioned models there, you said psychoanalysis helped you in that context with your supervision. Do you think (pause) reflexivity is taught differently according to which model is taught?</p> <p>P1: (pause) Possibly, I don't know, possibly. I mean (pause) from my experience, let's say with erm, people who I have supervised who have been working in a kind of quite strict CBT kind of protocol treatment. Like [IACT] setting. Reflexivity is very minimally taught.</p> <p>Whereas, I think in psychoanalytic can be taken a bit too far. Erm, (pause) you know, I mean for me personally, with the supervisor that I had, the one that I had for the three years, one of them, who was very psychoanalytic, whereas the others were not so hardcore. Erm, they were more integrative person centred and psychodynamic. With the psychoanalytic one, there were some things I didn't really agree with or I found them a bit too far-fetched.</p> <p>Erm (pause) so maybe yes they are taught differently. They are taught differently and maybe there is more of an emphasis on symbolism and interpretation in everything. Erm, in psychoanalysis. Whereas I</p>		<p><b>Interview</b></p> <p>How has your life experience led you to becoming a therapist?</p> <p>Ability to reflect</p>
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1545	personally don't think that it always needs to be the case.		
1546		See if they are	Identifying potential
1547	I: Mm, like you were saying earlier, to be able to (pause) see the wood for the trees?	able to identify	difficulties
1548		something in	
1549	P1: Yeah, especially with the	their life that has	
1550	psychoanalysis, like proper hardcore	affected them or	
1551	psychoanalysis, I find that sometimes	that they can	
1552	people can take it a bit too far, and	reflect.	
1553	they hide, they hide behind	What has led	
1554	symbolisms and interpretations and	them to wanting	
1555	they hide the reality, you know?	to help others	
1556	Everything's a projection or		
1557	whatever, something like that.		
1558	I: So it's important, what kind of		
1559	training [you have 1:09:32]?		
1560	P1: Erm, yeah I think so.		Personal therapy
1561			Self awareness
1562			
1563			
1564			
1565			Ethical issues
1566			
1567			
1568			
1569			Impact of research
1570			and research
1571			questions on
1572			participants
1573			
1574			

1575			Expectations of research
1576			
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1588			Writing a short essay
1589			to demonstrate reflexivity
1590			
1591			
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1597			
1598		What has led me	
1599		to want to become a therapist.	
1600			
1601			
1602		What do I think	
1603		from my own experiences I	
1604		could bring to the	



1605		course and might	
1606		affect me?	
1607			
1608		What might I	
		learn?	
1609			
1610			
1611			
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1613			
1614			
1615			
1616			
1617			
1618			Openness
1619			Non-judgmental
1620			
1621			Stay grounded in
1622			reality
1623			
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1636			
1637			
1638			CBT – reflexivity is
1639			minimally taught
1640			
1641			
1642			Psychoanalytic – can
1643			be taken too far
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**Appendix AF: Interview L: Transcripts, Exploratory Comments and Emergent Themes**

Line Number	Exploratory Comments	Original Transcript	Emergent Themes
1 2 3  4 5 6 7 8 9 10 11 12 13 14 15 16 17		<p>I: So can I start, just to ask you for the tape, just to define your professional title?</p> <p>P1: Yes, I am Director of Education for (*removed for confidentiality) where I am involved with developing courses and training in creative and relational approaches and therapeutic communication skills for working with children and young people, and I am a psychotherapist and integrative arts psychotherapist. And I have been involved with educating and training therapists all my life, in one form or another.</p>	<p>Continuing to learn; identification of absences in helping abilities or new problems.</p>
18 19 20  21 22 23 24 25 26 27	<p>Finding new interests, expanding learning by expanding career. Find holes in understanding or find new passions.</p>	<p>I: So you've been involved with it across your professional career, but also before that?</p> <p>P1: Erm, (pause) Well I am the daughter of two teachers, erm, and I have always been involved with education in one form or another. And as soon as I finished my degree, I trained in drama and movement therapy.</p>	

28	Interested in “all my life”-	And within a couple of years I	
29	drawn to therapy and	was leading, course leader for	
30	teaching?	the training that I’d done. And I	Student to trainer-
31		went on to do another training	insider perspective
31		and integrative arts	necessary
33		psychotherapy and (pause)	
34	What was this like?	again had the same experience	Universality of
35	Watched others being	of, going on to develop the	experience
36	helped; saw how it feels	programme that I’ve done, as a	
37	to help others; vocation	student.	
	vs. work		
38		So I have kind of been,	
39		educationally, that’s the sort of	
40		culture, where I come from.	
41		I: And across that journey,	
42		where did you come across, I	
43	Want to pass it forward,	suppose first the term reflexivity	
44	want to make it better?	and second, (pause) perhaps an	
45		understanding of reflexivity, even	
46		if it didn’t have a name at that	
47		point?	
48		P1: Yes, I think I’ve had an	
49		understanding of reflexivity long	
50		before erm, having any	
51	Universality of	knowledge of a word for it. And	
52	experience	probably, (pause) the process of	
53		going into therapy oneself.	
54		Because psychotherapy’s a very	
55		reflexive process, as well as I	
56		would understand that, in terms	
57		of reflecting on your own	
58		subjective experiences and	
59		finding references from within, to	
60		connect to those experiences	

61		outside of oneself. And making	R helps you
62		links between your subjective	understand outside
63		perspectives on the world and	world
64		the object analysis of the world	
65		externally, in some way.	
66		So probably therapy, and I went	
67		into therapy very, in my late	
68		teens, personally. So I think I	
69		started my journey of reflexivity	
70		in therapy in my late teens,	
71		starting to reflect on myself, and	
72		life as I understood it, and the	
73		world as I experienced it and	
74		perceived it, in that context.	
75	Exists as an intangible		
76	'thing' with or without a	I: And may I ask how it	
77	definition.	developed from that point? If it	
78	Do we need a word for	did indeed develop?	
79	it? Gives a way to talk	P1: Erm, (pause) well I think	
80	about it more easily?	probably psychotherapy very	
81	Therapy focuses a lens	much values subjectivity, and	
82	on the self and pushes	the subjective experience per se.	
83	towards reflection	And so, having taken erm	
84		(pause) erm, my first degree was	
85		in Drama and English and	
86		Theatre Studies and Literature	
87		and that's in a sense, erm, in	
88		engaging with theatre and art,	
89		that's a reflexive process in a	
90		sense. Beginning to reflect on	
91		texts and performance.	

92	Understanding yourself	And then going on to train in	
93	means understanding	Drama and Movement Therapy	
94	your place with others	and linking my experience of	
95	and the world.	psychotherapy with my love of	
96		the arts, and bringing those	
97	Understanding of the	together. I think, probably, erm	
98	world comes first from	(pause) that journey of self-	
99	understanding the	reflection and perceiving and	
100	subjective self.	trying to make sense of and	
		understand the world around	
101	Starts as personal	me.	
102	exploration of self.		
103		I: Mm, and do you find it, was	
104		really interesting earlier, you said	
105		that personal therapy was the	
106		start of the journey for you. Then	
107	Learning about self	you went on to develop	
108	means understanding	reflexivity through different	
109	multiple perspectives.	areas. And I am wondering	
110	Can only know how the	whether they were different	
111	self perceives others and	methods within perhaps the	
112	the world.	drama and the English and the	
		dance and the movement, that	
113		enabled you to learn?	
114			
115		P1: Mm, I think (pause) very	R is a Creative
116		much so really, that using the	process
117		arts, and the arts in	
118		psychotherapy, which has been,	
119		I guess my long term interest,	
120		has been in the creative process	
121	Valuing importance of	and the imagination, the human	
122	the self's experience.	imagination. Erm, (pause) and	
123	Does that also mean	the inner life really, and tapping	
124a	seeing self as subjective	into one's experience of oneself	
124b	with others? And how		



125	then you understand	and the world through the	
126	others within and in spite	imagination.	
127	of your lens?		
128		Play and all the arts, drama,	
129		music, movement, sound and	
130a		play, puppetry, poetry, dance. It	
130b		could be anything at all that	
131		enables that freedom of	
132	Reflection is always in	expression and self- inquiry.	
133	the communication		
134	between individuals.	I: Do you recall a kind of, an	
135	Used perhaps more in	example for you, in perhaps the	
136	certain	training, arts psychotherapy or	
137	professions/certain	English or the drama, where you	
138	interactions. We use it	felt that imagination, that	
139	when it's useful to us?	creativity was something that	
140	E.g. how to gain positive	was developing in you?	
141	affirmation?		
142		P1: I think always, always. I	
143	In Drama, need to	think that's sort of my basic	
144	communicate emotions	philosophical base and would be	Imagination
145	to audience- to allow	that it's always developing in you	
146	audience to feel thus	and that, erm, the imagination is	
147	need to portray honest	a portal to the source of that	
148	emotional	capacity for development and	
149	communication. Possible	growth and insight and	
150	through reflection?	awareness. And so (pause) I	
151		think, probably that's what I do in	
152		my work with people in	
153		psychotherapy and supervision	
154		and consultancy and teaching, is	
155		try to support tapping into that	
156		(pause) insight.	
		I: Mm, so I mean you mentioned	
		imagination as a portal to	

157		reflexivity. How would you define	Objective vs.
158		reflexivity for you?	subjective
159			
160		P1: (pause) Well I think it's	
161		something to do with engaging	
162		the inner life and subjectivity in a	
163		process of reflection. So that you	
164		are looking inwards (pause) as	
165		well as outwards. And that there	
166		might be a process of (pause)	
167		gathering data and analysing	
168		that data in objective ways. And	
169		that's part of research or	
170		studying theories and different	
		ways in which people have	
171		conceptualized erm, situations or	
172		challenges or problems.	
173			
174		But in a way, always drawing	Making sense
175		from an engagement with one's	
176		own subjective faculties in	
177	Relation between art and	evaluating that, and making	
	psychotherapy? Art is	sense of that. And also, midwife	
178	expression of honesty,	and midwifing and catalysing	
	emotion? Reflection is	that in other people.	
179	honesty with the self and		
180	emotions and and an	I: Midwifing, may I ask?	
181	understanding of how		
	they interact with others	P1: Midwifing. Freud's term for	
182	and the world.	the psychotherapist was like a	
		midwife.	
183	Knowing yourself first is		Her theory of R =
184	important.	I: How interesting.	it's potentially there
185	How does imagination fit		and comes out in
186	here?	P1: Yeah, that they in a way,	therapy
187		they catalyse and facilitate, a bit	

188		like Maslow's self-actualization	
189	Both the ability to ask	or Jung's individuation. You're	
190	questions about the self	trying to support someone to	
191	and then the freedom to	come fully into being, as who	Reflection as a
192	be able to express it.	they are.	vehicle for self
193			liberation.
194		And sometimes all the facts in	
195		the objective world can push	
196		people back in, to a box, rather	
197		than liberate them to trust their	
198		own (pause) instincts and	
199		thoughts and feelings.	
200		I think probably when I think	
201		now, and in talking to you, I think	
202	Trying to understand	feminism was probably a big	
203	how imagination fits in	influence on my, erm, (pause)	
204	for her understanding of	thoughts and feelings about	
205	reflexivity?	reflexivity without having ever	
206		conceptualized it that way.	
207		Certainly I studied feminism and	
208		thought a lot about it, for a	
209		period in my life. And a lot of the	
210		French theoreticians, theoretical	
211		perspectives on (pause)	
212		feminism and female subjectivity	
213		and (pause) even film theory,	
214		and critical theory, and issues	
215		like Laura Mulvey's work on the	
216	Why? Imagination allows	male gaze. That women are	
217	you to experience	constructed through the	
218	different situations,	perception of (pause) erm, the	
219	different stories, different	masculine. In the media, in	
		culture and therefore, our	
		relationship to ourselves, as	

220	emotions thus widens	females is mediated by the male	
221	perspectives?	gaze, in some way.	
222			
223		So, I think the emancipation with	
224		female subjectivity was a very	
225	Uses imagination to tap	conformative thought for me.	Hesitation about
226	into insight across all	Developmentally in my first	how theory
227	forms of helping/teaching	degree, in studying Feminist	underpinned
228		Critical Theory. And so probably	learning R vs. clear
229		that's inadvertently and	knowledge that
230		unconsciously underpinned a lot	therapy definitely
		of my understanding since.	gave her R.
231		Though I don't necessary refer	
232		back to that.	
233			
234		I: Mm, it's really interesting	
235		(pause) listening to your	
236		development. Because in some	
237		ways it feels that the text,	
238		whether feminism or perhaps	
239		English text or drama text, kind	
240		of led you (pause) to enhance	
241		your reflexivity. But on the other	
242	First comes an	hand you are also saying that	
	understanding of the self	imagination did as well. And for	
243		me, I'm wondering how those	
244		two related for you?	
245			Subjective vs.
246		P1: Mm, I guess erm, (pause)	objective
247		the psychotherapeutic process	
248	Once you have your own	starts a journey of self inquiry.	For her the other
249	data about the self, then	And feminism in a sense	conflict is between
250	move towards	enhances the (pause) need for	holding onto inside
251	understanding the self in	that. By way of emancipating	vs outside norms.
252	an objective way.	your own thoughts and feelings	R is a way to
253		from those that have been,	empower the inner

254		(pause) erm, that you may have been indoctrinated or	world and not be swayed by the
255		constructed by and through, that	outer world.
256		might not belong to you.	
257			
258		So it enhances the kind of, moral	
259		and emotional responsibility, to	
260	Starts with the self	heighten looking inside yourself,	
261		rather than outside yourself, for	
262		answers and truth.	
263		And then in terms of the	
264		imagination, that would be really	
265		just a vehicle, a vehicle through	
266		which to deepen and strengthen	
267		that contact.	
268		I would probably have to say,	Theory (Feminism)
269		inevitably fairly influenced by	vs. Relational
270		Jung in my own very lengthy	Experience
271	Meaning here?	Jung analysis. And dreams, and	(Therapy) vs. Dp
272		listening to dreams as a, (pause)	(Jung)
273		spending many years writing	Theory "gives" you
274		down one's own dreams and	vs. Therapy (you
275		wondering at them, is a very	"experience")
276		reflexive process actually in	
277		itself.	
278		Erm, (pause) and then in terms	
279		of the arts, finding images and	
280		symbols and metaphors to	
281	Therapist helps bring the	express and contain (pause) and	
282	self out. They already	communicate, aspects of the	
283	exist as themselves but	inner world. I don't know if any of	
284		that makes sense to you?	

285	need help to be fully	I: It makes sense to me. I	
286	them.	suppose, (pause) I'm wondering	
287		about (pause) you've got to this	
288		point where you are able to deal	
289		with those things, to subject	
290		yourself, erm, to erm, (pause) a	
291		kind of critical rationale if you	
292		like. And I suppose I'm	
293		wondering (pause) as you went	
294	Being in world prevents	into personal therapy when you	
295	the true self thus	were younger, was there	
	prevents knowing	something about you, that	
296	oneself fully and	allowed you to look inwards, to	
297	engaging with others	develop, and to use your	
298	fully and reflexively.	imagination?	
299			
300		P1: I think probably erm, (pause)	
301		there might have been, (pause)	
302		sort of erm, (pause) some erm,	
303		inherent sensibilities in that area.	
		Because I was a very	
304		imaginative child, in my, erm,	Emotional
305		imaginative life was always very	destabilisation
306		strong. But I think trauma,	needed to reflect
307		trauma really.	
308			
309a		That's how I went into therapy.	
309b		So I obviously won't go into that	
310		here. But it was trauma that	
311		initiated my (pause) erm, me into	
312		the context of having to look	
313a		inside.	
313b			
314	Another subject that she	And so more than anything, a	
315	learnt- interest in broad	sort of outpouring of distress,	
316	range of things perhaps		

317	enables more reflexivity	and (pause) than a sort of	
318	through more	(pause) rational decision.	
	experience, more		
319	knowledge, more contact	I: So something about being put	
320	with different theories	under pressure, and something	R = Tool to heal.
321	and people. Or that	about imagination, for you,	
322	enquiring minds find	allowed that process to start	
323	enquiring subjects-	happening?	
324	interested minds.		
325		P1: Yes, I think probably yeah.	
326		Probably wouldn't necessarily	
327		have happened. It was more of a	
328	Gives examples of how	kind of break – a bit like, there's	
329	views can be	that book with a great title called,	
330	constructed rather than	'Breakdown or Breakthrough'.	
331	based on reality and	Erm, (pause) I like that title, so	
332	honesty.	sort of some form of breakdown	
333a		really. Although I wouldn't say	
333b	Move the self further	that I had a breakdown. I had	
334	away from a true	experienced a trauma which	
335	understanding of	was, which broke me down, in	
336	themselves as more	some ways. And a lot broke	
337	layers to uncover. More	through, in that process,	
338	intricacies.	particularly around subjectivity.	
339			
340		I: May I ask, in a more general	
		way about others, in terms of	
341		how do you see it from perhaps	
342		trainees or clients that you've	
343		worked with, in terms of (pause)	Therapy- must
344		their ability to acquire reflexivity?	experience R.
345			
346		P1: (pause) I think people need	
347	To learn to critique a	a lot of support to acquire	
	subject outside of the	reflexivity. I think it, in a way it's	
348	self might help critique	a very supportive context, that	

349	the self. Does it have to	my reflexivity was borne out of,	
350	have a personal	which is a one to one therapeutic	
351	relevance to aid the	relationship.	Freedom &
352	learning?		creativity
353		But in education I think people	(imagination)
		need a lot of support	
354		interpersonally and emotionally	
355		to dare, to wonder at the world	
356		from their own perspective, and	
357		to interact with ideas.	
358			
359		Because people are often, and	
360		perhaps this links with feminist	
361		perspectives. They don't trust	
362		their own thinking, or their own	
363		feeling or their own perspective,	
		and they're much more likely to	
364		sacrifice that for the other. And	
365		they're much more likely to	
366		believe some authoritative other	
367		than themselves.	
368			
369		And so I find in my work, it's a lot	
370		of confidence building. (pause)	
371		And I think that's probably where	
372		the imagination comes in.	
373		Because when people start to be	
374		able to use images and thoughts	R comes from
375		and feelings to explore (pause)	within. Requires
376		erm, ideas, they discover a lot.	another to bring it
377		There's a process of relation,	out.
378		and they, in that process, they	
379	Need to distinguish	start to develop some authority.	
380	between social	In that what emerges out of	
381	constructs and the self.	them, is actually really	
382		interesting. And at least as	



383	How do we know what is	interesting as anything they	
384	ours and what is given to	might find from outside. And that	
385	us?	when they interact, a personal	
386		process with professional	
387		development it creates a much	
388		more substantial and meaningful	
389		developmental and educational	
390	Moral responsibility as a	I: Is that something that they find	
391	therapist? As a human	is valuable within them?	
392	being in contact with	P1: Mm, the personal points of	
393	others? To know yourself	reference from within.	
394	so to have better	I: Mm, and so (pause)	
395	relationships with	potentially, if somebody had that	
396	others?	within their early experiences or	Find first a
397		their childhood environment,	relationship with
398		(pause) in your view they would	self through
399		be more likely to develop	Imagination and
400		reflexivity at a high level? Or to	then expand
401		have it without the...?	relationship with
402			self to R.
403	Imagination – need to	P1: Yeah, (pause) I think they'd	
404	use a mental image of	(pause) it's interesting isn't it? I	
405	the self? Unconstructed	mean Jung in his work, (pause)	
406	and reconstructed.	what I really like about the	The internal
407		collective works of Jung, for his	relationship allows
408		time is, he seemed such a brave	them to trust
409		person (pause) to keep alive this	themselves.
410	But then is that also a	dialectical tension, between	
411	construct applied and	empirical science and	
412	how is that different from	Gnosticism. He kept that alive	
413	imposed constructs? Do	and it's a really dialectical	Once internal
414	we need constructs to	tension throughout all his writing.	relationship is

415	provide a framework for understanding ourselves	At a time in history where you might fall on one side or another,	established, can engage with external life in a helpful manner.
417	either in standing with them or opposing them?	very easily. (pause) Because of the political and cultural conditions required you to move in one or another.	
418			
419			
420	Listening to dreams=		
421	listening to the unconscious self.		
422	Thinking and writing as	And that's one of the things I love about Jung, is his reflexivity in that regard. In terms of	
423	process of developing reflection.	keeping that dialogue between Gnosticism and empirical science alive. And that inner knowing (pause) with external (pause) erm, you know research.	
424			
425			
426			
427	Why need of art to express inner world/emotions?	And that somewhere between the two, is err (pause) a more honest (pause) erm, appraisal of the truth.	
428	Difficulty with using words to express or fully express? Finding expansive ways to show inner world promotes wider understanding		
429			
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469		way. And I think that's an ethical responsibility around person	
470		centred approaches to	
471		psychotherapy, which is a really	
472		good ethic I think.	
473			
474		People – theories change from	
475		generation to generation and	
476		practices change from	Inner knowledge
477		generation to generation and	first step to
478		(pause) what one era says is	understand
479		right and best for people, the	external world and
480		next era says is not. In child	hence find truth.
481		development, in education, in	
482		therapeutic approaches.	
483			
484	Imagination an escape	So I have an inherent mistrust of	
485	from trauma, from	expertise and its implementation.	
486	emotions or maybe more	So ethically, in terms of my	
487	likely a way to process	values and principles, in the	
488	difficult emotions.	work I do, I'm always interested	
489		to support people, to find the	
490		confidence to define their	
491	Early traumatic	problems for themselves. And to	
492	experiences create	discover the answers to those	
493	intense (all children have	problems, from within.	
494	intense emotions) AND		
495	perhaps ongoing	Because I kind of believe that	
496	unresolved unlooked	ethically that's worthwhile, and I	
497	after emotions. But not	don't feel like I'm (pause) erm,	
498	everyone will go to	imposing on them something	Humanistic therapy
499	therapy/look inside even	that might be less reliable.	allows freedom for
	if unbearable emotion-		R. Above other
		I: Have you felt that in your	therapies.
		career, the kind of change in	
		culture towards reflexivity? Is	

500	what makes it different	that something that's happened	
501	for her?	in your career?	
502			
503		P1: (pause) Erm, (pause) I think	
504		it's hard to answer that, with one	
505		answer, because it's a very	
506		postmodern world, and there are	
507		so many multiple narratives	
508		happening in this postmodern	
509		world. I think in some areas	
510		we've become more reflexive in	
511		our approaches and in others	Mistrust outside
512		less.	world
513		I: For you?	
514		P1: For me personally, I think	
515		I've probably been quite (pause)	
516		erm, consistent, and I haven't	
517		really moved on it much. In that I	Internal world is
518		just very much value reflexivity	trustworthy
519		and it's integral to my approach	
520		to education, which has always	
521		been an experiential approach to	
522	For people, why	educating.	
523	breakthrough rather than	It's always been full of arts	
524	breakdown? Are they	based techniques for (pause)	
525	different? Does one lead	developing insight and	
526	to the other?	understanding.	
527		I: I mean you brought up	
528		education and training, which I	
529	Breaking down the self	am really interested to hear	
530	to rebuild the self. Do we	about. (pause) Is the way that	
	need a crack to be made	you teach reflexivity similar to	

531	in order for reflexivity to	how you acquired your own	
532	be enhanced? Burst	reflexivity?	
533	bubbles.		
534		P1: I'm sure I should have	
535		studied reflexivity a bit more, as	
536		an idea, as a concept. And I	
537		think I would probably benefit	
538		from a bit more (pause) rigorous	
539		and scholarly thought about	
540		what reflexivity is.	
541		I think it's a fabulous concept	
542		actually, that warrants a bit	
543		more, erm, thought on my part.	
544		So I would say that, erm,	
545		because I might be unconscious	
546		of aspects of it, or (pause) erm,	
547	Need to find and accept	a more clearly defined (pause)	
548	a supportive	conceptual understanding of	Learn experientially
549	environment therapeutic	what reflexivity is from an	
550	or training environment.	objective, or from a range of	
551		different perspectives, might	
552		enhance my use of it, in the	Art enhances
553		context of therapy and/or	insight. Creativity
554	Specific relationships	education. So I would say in an	
555	with people- one to one,	open way, that I've probably got	
556	or close to? Trainers	lots to learn about it,	
557	personalities,	conceptually.	
558	commitment, passion	I: Do you think the different	
559		experience you had with	
560		feminism, with Jung and	
561		psychotherapy, with English text,	
562	Does this reflect on who	did they approach reflexivity in a	
563	she takes on	different way, for you to reach	
564	course/training and how?		
565			
566			
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572			
573			

574	How does she offer this	this stable core of how you	
575	support?	understand it?	
576	To dare- challenging		
577	To wonder – new ideas	P1: I think all of that asks you for	
578		your opinion. Erm, (pause) I	
579		think there's a value to that. You	
580		know what do you feel? I think a	
581		mother said to me recently, she	
582	Reflexivity is learning to	was struggling really with an	Still more in
583	know and trust own	issue with her child. And she just	internal world.
584	thinking.	said to me, "Oh I wish I had a	
585	Knowing self is replaced	book that could just tell me	
586	with pleasing/fitting in	(pause) what to do." And she	
587	with others.	was asking me for a reference to	
588		a book. Well there are loads of	
589		books in the field, that I could	
590	Starting from	have referred her to. But I said,	
591	parents/school/peers/into	"Well I'm interested – I wonder	
592	adult life. Why more	what you would feel and think in	
593	likely? As it's during the	your book. If you were to look	
594	formation of the self and	into your book, as a mother."	Outside learning
595	also how we form the	Because I think mother's	comes second.
	self.	instincts are very de-valued. And	Can enhance but
596		I think they easily sacrifice their	only if inside
597		own authority as (pause)	exploration is
598		mothers and the maternal	ongoing
599		instinct on the throne itself, to	
600		make some decisions.	
601			
602		So I'm interested in what's in	
603	Relationship to self – use	people's own books, as well as	
	of imagination- develops	the vast amount of commercial	
604	a trust in the self and	texts that are emerging on the	
605	from there confidence	expertise of this, that and the	
606	grows.	other. That people feel they	
607			

608		should read, that can potentially	
609		take them away.	
610			
611		I think there was a wonderful	
612		(pause) writer, Paracelsus. He	
613		was an alchemist, a medieval	
614		alchemist. And he's made some	
615		fantastic angry speeches, that	
616		amuse me a lot. One of which he	
617	Understanding the self	says something like, "You	
618	aids deeper learning.	academic physicians..." He's in	
619	Why?	a rage and he says, "You lead	
620		people by the nose, when they	
621	Need to understand the	have more (pause) healing in	
622	process of	their own back garden."	
623	understanding first		Internal world most
624	before you can the work	I: Mmmm.	imperative.
625	to understand others?	P1: Yeah, "You talk drivel, you	Job of
626	Self first as more	academic physicians, you talk	therapist/trainer to
627	accessible than others.	drivel and you lead people by	validate that. Give
628		the nose when they have more	confidence.
629		healing in their own back	
630	Only points of reference	garden."	
631	for them? Learn more	And I think, you know, that's in a	
632	when something is	sense, I am interested in	
633	personal and all therapy	everybody's back garden,	Theory has
634	learning is likely to be	(pause) and what's inside them.	capacity to reduce
635	personal- as it's about	(laughter)	R if internal work
636	being human.	I: That's really interesting,	not focused on.
637		because presumably that's then	
638		how you teach? But you also	
		teach within institutions, or	

639		organisations. How does that work?	
640		P1: Well I think, that dialectical	
641		tension, keeping it alive. (pause)	
642		Keeping it alive, that dialectical	
643		tension between theory,	
644		research, between studying	
645		and...	
646		I: Back yards?	
647		P1: Yeah. What's out there and	
648		what's in here and what's the	
649		relationship between the two.	
650		And ethically I find that (pause)	Internal world first
651		you know I'm a bit concerned	
652		about the future of the world	
653		actually. In many different ways,	
654		I often fear for the future of our	
655	Good to live with duality.	society and the directions that	Need to have an
656	Being flexible	it's going in. In the whole range	interest as a trainer
657	psychologically is helpful	of different areas. And so, I feel	to enable trainees
658	for R.	that increasingly, to look within,	
659		is a practical as well as moral	
660		imperative. Because people are	
661		trying to sell us this and sell us	
662		the other, and...	
663	Is this also true now- a	I: It's the fear of where we're	
664	dichotomous society.	being led, by the nose to?	
665	Either good/bad- politics,	P1: Yeah, by the nose, exactly. I	Keep the tension.
666	culture, people, leaders,	think look within, find the	
667	brain, emotions? CBT	answers within yourself and, in	
668	teaching emotions are		
668	good or bad and should		



669	be reduced/got rid of/normal levels.	terms of the things that really satisfy human beings, by way of fulfillment.	
670			
671			
672		I don't know that they lie out there, and reflexivity, in its own way, might be a key or a route to wondering more about what we ourselves think or feel or (pause) perceive.	Tension essential to keep focus on internal world.
673			
674	R is holding dichotomies open		
675			
676			
677	Staying true to your own self knowledge,	I: I mean is reflexivity something you feel you've got and you've developed and you're there? Or do you feel it's a process that continues?	
678	observing research with different narratives and holding an open and not wholly specific narrative.		
679			
680			
681	Flexible.		
682		P1: Definitely think it's a process. Reflexivity has process sort of written into it, to my mind. It's never something...	
683			
684			
685			
686			
687		I: So you will continue to develop?	
688			
689			
690		P1: Yeah and develop and evolve different ways. In terms of education, err, I think universities have become more responsive to reflexivity. And I know that in terms of validating courses, which was the question you asked me about. There's more respect and interest, erm, from universities in the reflexive	
691	Asking about how to keep it open and flexible alongside how to make it specific enough to name and teach?		
692			
693			
694			
695			
696			
697			
698			

699		process, in teaching and	
700		learning.	
701		I: And you've found that	
702	How to allow space for	recently?	
703	this freedom in teaching?		
704	How to allow this work to	P1: I've found that over the	
705	happen in an	course of my (pause) work	
706	individualized way?	evolving educational	
707		programmes, validated by	Continue to learn R
708	Person Centered- follow	universities. I think there is	
709	the client- should we	generally more respect for	
710	follow the student? Do	reflexivity that's emerged.	
711	we follow the student?		
712		I: How long have you been	
713		training, just so I know?	
714			
715		P1: Erm, (pause) probably	
716		training myself or training other	
717		people?	
718	Allow change, allow		
719	flexibility, allow teaching	I: Training others.	
720	to straddle cultures and		
721	generations with there	P1: Probably, it's over 20 years.	
722	being multiple narratives-		Training institutions
723	not a dichotomous one.	I: And do you find there's a	and accreditors
724		distinction between training	require reference
725		within an institution, sorry, a	to it.
726		university setting, versus training	
727		in other settings?	
		P1: Well again I've always lived	
		with that dialectical tension,	
		because whilst I've done visiting	
		lecturing in different university	
		contexts or have been external	
	How then does she		
	teach R?		

728		examiner to programmes, or	
729		involved in one way or another, I	
730		have often worked in private	
731		institutions that were working in	
		partnership with universities.	
732			
733		So I think that's liberated, there's	
734		been something quite liberating	
	From an individualized	about that. Being able to create	
735	approach. How does this	the conditions in which you	
	work in a group context?	deliver education, whilst also	
736		taking all the really great	
737		valuable things of university	
738		involvement, which I'm really	
739		keen on.	
740			
741		I wouldn't like to be involved with	
742	Self-knowledge is the	therapy training without	
743	most reliable – good	universities.	
744	barometer for then		
	understanding others	I: May I ask why?	
745			
746		P1: Because they can rely a little	
747		bit too much on their own	
		opinions and their own thoughts	
748		and feelings and intuitions. And I	
749		like the rigor of a university	
750		regulatory framework. The fact	
751		that it places certain demands	
752		(pause) by way of quality and	
753		standards and student rights.	
754			
755		I: So something about having the	
		authority structure there, but also	She can create the
756		having the freedom?	conditions that she
757			

758		P1: Yeah. And accountability. I	believes leads to
759		like universities structures by	R.
760		way of being accountable to	
761		(pause) the discipline and	
762		accountable to the student and	
763		the process. So the	
764		transparency and the rigor of	
765		(pause) university bureaucracy I	
766		like.	
767		I: So the training courses that	
768		you've run, whether erm (pause)	
769		perhaps with more or less	
770		freedom. How have you taught	
771		reflexivity in those contexts?	
772		P1: Erm, (pause) through arts	
773		based experiential teaching and	
774		learning strategies.	
775		I: Would you be able to describe	
776		a bit more for me, what that	
777		would look like?	
778	R is an experiential	P1: Yeah, for example, in terms	
779	process in teaching and	of working, say erm, (pause) err,	
780	learning	in a supervisory context. Or in	
781		terms of investigating and	
782		examining case material in some	Gives rigour to a
783		way. Would be to maybe make	process of
784		an image of your relationship, as	developing R that
785	Arts-based- not a	a psychotherapist, with the child	is only just gaining
786	singular approach thus	that you're working with.	respect.
787	not scientific as such.		
788	Multi faceted	Use a sound play, for example,	
789	approaches.	to create an image of that	

790		relationship, and that would	
791		bring in the unconscious and all	
792		kinds of aspects that might not,	
793		as yet, be known to the person,	
794		working with that child, about	Through creativity
795		either the child and them or their	
796		experience and perception of the	
797		child and them, would come into	
798		being, in symbolic ways. And	
799		provide an opportunity for more	
800		reflection and analysis on that,	
801		and more making sense of that.	
802	Lack of background	Then you can feed into that,	
803	knowledge on R.	concepts and theories and ideas	
804	Interesting- is it useful to	that might support that process	
805	have both- an	or work.	
806	understanding on the R	I: So the kind of middle part of	
807	lit so far as well as doing	that process was about widening	
808	it/learning it through the	perceptions from the	
809	self.	unconscious?	
810		P1: Yeah.	
811		I: And would that be the person	
812		or the lecturer coming in, with	
813		the person or peers coming in	
814		with the person?	
815		P1: I would say a process, a	
816		creative and relational process. I	
817	Unknowing as well as	think that's my key term at the	
818	unconscious?	moment, because I am	
		developing at the moment, a	
		course in creative and relational	

819		approaches to wellbeing. And so	
820		that is a very inter-personal and	
821		intro-psychic process	
822		simultaneously. Erm...	
823	Again, understanding not		
824	just one approach from	I: May I just ask what's the – I	
825	the research but	want to kind of phrase this in the	
826	accepting a multiplicity of	correct way. Is there an aim that	
827	perspectives. Holding	encompasses reflexivity for that	
828	the tension between	course?	
829	them.		
830		P1: Erm, (pause) I think the	
831		journal, which I've shared with	
832		you some of the journal entries.	
833		Erm, I think the journal, a	
834		reflexive journal. Which I don't	
835		actually refer to as a reflexive	
836		journal, but it is. And, I really talk	
837		about it in the context of	
838		reflective practice. That would be	
839		a term that I would use, more.	
840			
841		But you could equally probably	
842		say, reflexive practice or a	
843		reflexive journal for the purpose	
844		of reflective practice.	
845			
846		I: Do you think the terminology	
847		makes a difference whether we	
848		even use words like reflexivity or	
849		reflexive practice?	
		P1: Err (pause) yes and no. Yes	
		and no. Somehow, in a way	
		reflexive for me, by way of	
		association, almost goes a little	

850		bit deeper than reflective. It's	
851	Start with how your feel.	sort of even, kind of encourages	
852	The self understanding	more of an invitation from within,	
853	first.	rightly or wrongly.	
854		I: So you feel it digs deeper?	
855			
856		P1: Yeah, rightly or wrongly, that	
857		would be one of my	Reflexive practice-
858		associations. Which is why, I	internal world first
859		think I've probably under used it,	
860		as a concept, and I probably	
861		should study it a bit more	
862		carefully and think about it more.	
863			
864		But certainly journals, and I've	
865		discovered, in a way, more	
866		recently in this course, in	
867		particular. Erm, because for	
868	Ask her to trust in her	example in psychotherapy	
869	own self.	training I have often had	
870		academic essays (pause) or	
871		dissertation, and personal	
872		journals, for personal processing	Internal world
873	Does everyone have	of different images, or thoughts	
874	instincts? Are instincts	or feelings or dreams that come	
875	always of value? Outliers	up. And, historically they have	
876	maybe and participant is	been quite separate.	
877	referring to clients who	Whereas the course that I am	
878	have a stable, safe	involved with at the moment,	
879	sense of self?	we've brought those together	
880	In this instance.	more. (pause) In the interests of	
881	Devalued by whom?	professional practice. And it's	
	Society, culture, the self-	partly (pause) erm, was borne	
	all?	out of wanting them to dig	

882	Throne- interesting	deeper within themselves to use	No set definition. No set wording.
883	phrase? Power to	creative process to reflect on	
884	disempower.	their work with kids.	
885	The 'should' intellectual	But also, simultaneously, you	Altering traditional assignment types to use them for R.
886	reads put more layering	know, to consider some really	
887	on the self and takes	important external world things,	
888	people away from their	and to be able to assess and	
889	own self and self-	evaluate if they'd taken that it.	
890	direction. Can we find a		
891	way to synthesise others	I: So that was their part of the	
892	experience/knowledge	sound and play process of	
893	(research) and the	bringing in external text?	
894	interaction of the self		
895	with that, and add to the	P1: Yeah. I mean in terms of	
896	self's understanding	'Every Child Matters'. You know	
897	without taking it away?	they need to know the actual	
898		sort of facts of the matter in	
899		terms of 'Every Child Matters'	
900		and the facts of the matter about	
901		the common assessment	
902		framework. So to invite them in	
903		their journals to talk about that,	
904		and define those.	
905	Is this dichotomous? Self	But then to use (pause) err, their	More creative assignments
906	as true source and	imagination to create collages	
907	academia as a	and sculptures and, err (pause)	
908	distraction. Can they be	drawings and (pause) to critically	
909	seen as multiple	reflect in a sense. It's been	
910	narratives with the truer	amazing some of the things that	
911	narrative somewhere	have come up, in bringing those	
912	between them?	aspects together. It's much more	
		interesting than keeping them	External theory must be balance with internal world.
		apart.	



913		I: Can you think of an example of something that comes to mind?	Bring them together.
914			
915			
916		P1: Yeah, lots of (pause)	
917		wonderful things like making	
918		erm, (pause) making a house.	
919		One student made a house	
920		(pause) a sculpture of a house,	
921		with 'Every Child Matters' in it,	
922		with the floors of the house.	
923			
924		And on the top part, they put all	
925		the sort of, you know,	
926	Teaching seems more	governments speak about	
927	related in its process to	staying healthy and making a	
928	therapy work with clients.	positive contribution and	
929		economic wellbeing. Then,	
930		underneath, on the floor below,	
931		they put the shadow aspect of	Can work from
932		the fact that actually children	external to internal
933		aren't, don't have enough to eat	world- process of R
934		in our society. And they are	is ongoing and
935	How do you teach R to a	unable to make a positive	theory work better
936	whole group?	contribution, because of all kinds	when it is then
937		of trauma, abuse, neglect,	related back to
938		poverty. There's conditions of	internal world.
939		education and they went around	
940		and were able to unleash some	
941		of the shadow aspects	
942		underneath the persona of that	
943		ideal.	
944		So I think probably, in fact when	
		I did my own Master's Degree in	
		Jung, the shadow was the	
		concept that I looked at in my	

945		dissertation. And a reflexive	
946		journal was part of my (pause)	
947		MA.	
948			
949		I: So for you, you were already	
950		drawing together the kind of	
951		academia essays. The reflexivity	
952		within, prior to this course, by	
	Draw attention to what's	your own training?	
953	the self and what's		
954	projected from the world	P1: Yeah.	
955	and holding both points		
956	of view.	I: Do you feel that's something	
957		that's important, in terms of, I	
958		suppose the initial question	
959		would be around, do you feel	
960		that things like case studies or	
961		process reports or dissertations,	
962		in your experience, do help with	Imagination of the
963		reflexivity?	trainee shown to
	Seems to find the		trainer.
964	external more unsafe	P1: Definitely, (pause) yeah I	
965	and thus more reliance	think they do, and I think (pause)	
966	on the self.	really important actually. The	
967	Seems biased. Can we	more I'm talking about it to you,	
968	add to our own	the more I'm really feeling how	
969	knowledge from the	important it is. By way of	
970	research of others and	qualitative research methods as	
971	then critically use this	well. (pause) Particularly in	
972	alongside our	relation to the field of	
	understanding of self?	psychological therapies, in any	
973	This would be more	shape or form.	
	trusting of the self- that it		
974	can distinguish between	I'm particularly concerned about	
975	what is true/false or	the research methodologies that	
976		have emerged out of clinical	

977	helpful/not from the	psychology and cognitive	
978	outside world.	behaviorial therapy and the use	
979		of randomized control trials to	
980		evaluate psychological	
981		therapies. I think it's the wrong	
982		(pause) research methodology in	
983		itself.	
984			
		I: May I ask why?	
985			
986		P1: Err, because I don't think it	
987		erm (pause) takes enough	
988		account of complexity (pause)	
989		and context in the fact that	
990		human beings are very	
991		individual. Jung's term is	
992		individuation and I think that	
993		human beings are very unique	
994		and individual. And what works,	
995		what's medicine in one situation	
996		will be poison in another.	
997			
998		And in my practice, as a	
999		therapist, I work very differently	
1000		with different people, in	
		accordance with their own	
1001		subjective values, beliefs, ideals,	
1002		religions, cultural contexts,	
1003		backgrounds. And I think there's	
1004		a fantasy that you can	
1005		standardize and that you can	
1006		manualize and that you can	
1007		apply things in very systematic	
1008		ways. Which is (pause)	
1009		appealing in the simplistic	
		reductive way. And in practice I	

1010		think just, (pause) isn't - it	
1011		doesn't work, it doesn't work.	
1012		And we are under a delusion.	
1013			Focus on externally
1014		Then you look at the motivations	focused
1015		for that, and underneath that,	assignments are
1016		and underpinning behind that,	'poison' to R.
1017		there's a lot of financial and	
1018		professional drives, that are	As they do not
1019		underpinning that process of,	focus on individual.
1020		research methods and funding	Too objective.
1021		and, I think there's a lot of moral	
1022		and ethical investigation that	
1023		needs to take place.	
1024			
1025		I think that's why we need our	
1026		subjectivity to (pause) perceive	Subjective vs.
		things accurately and to critically	objective
		reflect and not to be, to lose	
1027		contact with that, and trust, for	No way to
1028		example, any poor client who	standardise
1029		comes into get a six week	learning R, needs
1030		intervention of CBT. Who gets	to be
1031		told that, you know, if they have	individualized.
1032		different thoughts, their life	
1033		experience will be different. And	
		if they can't, have a different	
1034		mindset. That they're	
1035		fundamentally really responsible	
1036		and to blame for their suffering.	
1037		Because they weren't able to...	
1038			
1039		I: Break the mould?	
1040			
1041		P1: Yeah, and I think we need to	
		break out of these moulds.	

1042		Because they're not creative and	
1043		they are not good for us as a	
1044		country. And they are not good	
1045		for our social and economic	
1046		wellbeing.	
1047			
1048		I: You've just answered my	
1049		question actually. I was going to	
1050		ask, in a sense the training	
1051		course that you've structured,	
1052		(pause) is a structure in itself.	
1053		Yeah, I was going to ask about	
1054		the mechanisms for individuation	
1055		within that.	
1056		You just mentioned creativity,	
1057		which is the activities that... Do	
1058		you feel that (pause) the trainees	
1059		you train, do they learn reflexivity	
1060		differently? In different ways or	
1061		at different rates?	
1062		P1: Yeah they do, they do. And	
1063		that's why they need personal	Creative is
1064		tutors and they need to have one	attached to
1065		to one reflective practice.	individualized
1066		(pause) And they need to have	approach.
1067		people to constantly cast	
1068		invitations and curiosities to what	
1069		they feel and what they think.	
1070		Because they don't trust, or	
1071		believe that what they feel or	
1072		what they think, would have any	
		value.	

1073		I: This sounds like it's really	
1074		important, for what you do is, to	
1075		(pause) like you said with clients,	
1076		and for yourself, is to give them	
1077		the authority and build their self-	
1078		confidence.	
1079			
1080		P1: Yeah.	
1081			
1082		I: So is there something	
1083		important about how trainers	
1084		are?	
1085			Activities in training
1086		P1: Erm (pause) well I think the	for R: Personal
1087		way to do that is to role model it,	tutors, 1-2-1
1088		in some way. And also to	reflective practice.
1089		(pause), for me I work	
1090		relationally as a teacher, it's just	Need another
1091		the way I am. Some teachers	outside to give
1092		are more relational than others.	them freedom to
1093		And it's not just about imparting	trust their internal
1094		information. It's about having an	world.
1095		emotional relationship with that	
1096		person. That's supportive and	
1097		empowering and helps to build	
1098		their confidence and self-esteem	
1099		about their opinions and their	
1100		beliefs, and enabling and	
1101		catalyzing them to express that,	
1102		and to discover that.	
1103			
1104		I: And see you just the way you	
1105		are?	
1106			
1107		P1: Sorry?	
1108			

1104		I: You said, "That's just the way I am." And I'm curious about, why is that just the way that you are?	Trainers must model R. Be not say.
1105			
1106			
1107		P1: Err (pause) I don't know	
1108		actually. I don't know, probably	
1109		some of the formative	
1110		experiences I discussed earlier.	Having a deep
1111		Erm, (pause)...	emotional
1112			relationship with
1113		I: I'm just curious, because if you	trainees develops
1114		want trainers to teach reflexivity	trust and
1115		and there are attributes that	confidence.
1116		encourage that, I wonder around	In essence, a
1117		that?	therapist role?
1118			
1119		P1: (pause) I sometimes think	
1120		that (pause) a lot of the wisdom	
1121		in our world is inside the people	
1122		who don't speak. (pause) Or	
1123		who, express least. Sometimes	
1124		you know, the very quiet people	
1125		have got a massive amount of	
1126		wisdom inside them.	
1127			
1128		And I discovered this when I first	
1129		started teaching. Because in	
1130		groups the students who spoke	
1131		the most and who were the	
1132		noisiest and the loudest, and the	
1133		first to come forward. (pause)	
1134		When I had individual tutorials	
1135		across the students, I would find	
		out that (pause) there were all	
		these quiet people in the group,	
		that had such a wealth of	

1136		(pause) valuable perspectives	
1137		and thoughts and information	
1138		that they never came forward	
1139		with.	Internal world is
1140			guide to R.
1141		So I found my job as a teacher	External
1142		is, to say, "Well I'm wondering,	representations are
1143		you know, what stops you from	not an accurate
		actually sharing that with the	guide.
1144		group?" Or, "What stops you	
1145		from coming forward with your	
1146		opinion?"	
1147			
1148		So I kind of think that reflexivity	
		might be an important concept to	
1149		unleash some of the hidden	
1150		wisdom in the more introverted	
1151		hidden corners of our world. And	
1152		stop some of the very	
1153		extroverted, power hungry ideas,	
1154		from coming to the top, in	Need for 1-2-1
1155		personalities, that might not	relationships to
		have everybody's best interests	enable different
1156		at heart.	kinds of people to
1157			offer their internal
1158		I: I mean you mentioned	world. Groups don't
1159		personalities, do you see that as	work for all.
1160		a, kind of component of people's	
1161		ability to either teach or to learn	
1162		reflexivity?	Trainer as therapist
1163		P1: I think (pause) personhood,	
1164		in a way it's inviting people's	
		personhood, that would be one	
1165		way of thinking, in my mind,	
		rightly or wrongly, about	



1166		reflexivity. Inviting their	
1167		personhood to the table.	
1168			
1169		Sometimes people can be shy	
1170		and inhibited, who have the most	
		valuable and wonderful	
1171		personhood. If you can	
		encourage and support them to	
1172		come out of their cave. They've	
1173		got so much to give to people,	
1174		and so much to offer.	
1175		So I'm interested in hidden	
1176		treasures, inside people.	
1177			
		I: So it sounds like it's hard – you	
1178		can't tell just by (pause) looking	
1179		at somebody, or just by talking to	
1180		somebody. It has to be a much	
1181		more involved, ____ [0:45:00]	
1182		process?	
1183			
1184		P1: Yes.	
1185			
		I: And in that, for you, do you	
1186		believe that everybody can	
1187		develop reflexivity?	Right environment
1188			for working on R.
1189		P1: (pause) To different degrees	
		and different extents, yes. I think	
1190		everybody's got that potential.	
1191			
1192		I: May I ask about, potentially a	
1193		trainee that has, what we might	
1194		consider, or what you might	
1195		consider, a lower level of	

1196		reflexivity, and how you	
1197		understood that for them, and	
1198		what happened, during the	
1199		training?	
1200			
1201		P1: (pause) Err (pause) I think	
1202		again it's different. You could	
1203		take someone, for example, at	
1204		two ends of the spectrum.	
1205		Someone who's come from	
1206		(pause) Ghana. Who's not had	
1207		much formal education. And	
1208		whose transference onto erm,	
1209		sort of UK information and	Inate possibility
1210		knowledge and expertise, and	
1211		education, might be to (pause)	
1212		look up to that and to position	
1213		their own inner world	
1214		perspectives. Erm, as being	
1215		lesser than, or less interesting,	
1216		or less important, or less	
1217		authoritative or meaningful.	
1218		And so that person might need	
1219		to develop more confidence, and	
1220		maybe a range of teaching and	
1221		learning strategies, like, not just	
1222		written journals, but verbal vivas,	
1223		interviews like today. Because	
1224		he might be able to speak in	
1225		words, in a conversational way,	
1226		more than he would be able to	
1227		articulate in writing.	

1228		So a range of teaching and	
1229		learning methods and vivas, I	
1230		find are very useful by way of	
1231		almost a reflexive (pause)	
1232		methodology for assessment	
1233		processes, as well as journals.	
1234		I: So people might express	
1235		reflexivity differently and	
1236		therefore have different	
1237		strategies, individualized	
1238		strategies.	
1239		P1: Yeah, and he might need	
1240		confidence building, you know.	
1241		You might say to him, or he	
1242		might say, "I don't know." You	
1243		might ask him a question and he	
1244		might say, "I don't know."	
1245		But he does know, but he	
1246		doesn't have the confidence to	Teaching methods
1247		put that out there, or believe that	that allow for
1248		what he feels is valid.	deeper learning of
1249			the self and to
1250		So that might be almost a	understand the
1251		therapeutic task, a little bit.	internal as
1252		Encourage him to (pause) dare,	opposed to relying
1253		to find his voice and speak.	on external world
1254			learning.
1255		Someone else might be, for	
1256		example, a university professor,	
1257		whose a bit more (pause) trained	
1258		in an academic mode, (pause)	
		that means that they look at	
		things in a very intellectual,	

1259		conceptual way to begin with,	
1260		and they've been trained out of a	
1261		capacity, to actually wonder for	1-2-1 relationship
1262		themselves what they think. You	allows trainer to
1263		know they've had the 'I' written	ask questions,
		out of all their essays (pause)	enquire for the
1264		from early on.	other so that the
1265			trainee can then
		I: Literally.	enquire.
1266			
		P1: Yeah, literally the 'I' has	
1267		been eliminated and they pride	Trainer as
		themselves on their fantasy	therapist
1268		about their objectivity. And	
1269		therefore, it's a very different	
1270		task to sort of deconstruct that,	
1271		and to try to support them to	
1272		value (pause) and to make	
1273		contact even (pause) with what	
		they might feel or think. Or	
1274		intuitively or (pause) emotionally	
1275		or imaginatively, rather than just	
1276		intellectually.	
1277			Internal focus is
1278		So it's a different task I think,	essential and if
1279		with each student.	missing negates R.
1280			
1281		I: Is different.	
1282		P1: Mm.	
1283			
1284		I: I was going to ask, for the	
1285		university professor, would they	
1286		have to (pause) get something,	Conflict- types of
1287		for want of a better word, in	people. Internally

1288		order to want to put the 'I' back	vs. externally
1289		in?	focused.
1290			
1291		P1: Well certainly I think it	
1292		impacts on practice. (pause) And	Intellectualisation
1293		for example at the moment my	as defense or
		training work and my educational	avoidance of
1294		work is involved with practice	internal world.
1295		(pause). You know I am	
1296		interested in improving practice,	
1297		working with children.	
1298			
1299		And (our organization), our	
1300		approach is to learn from	
		vulnerable children, how to care	
1301		better. And, I particularly love	
1302		that philosophical base, because	
1303		it's a humble one.	
1304			
1305		And so, (pause) err, I feel there's	
1306		a (pause) a very important, by	
1307		way of duty of care, and service	
1308		delivery, to maintain an	
1309		approach that really respects the	
		child's subjectivity.	
1310			
1311		So, as a practitioner working	
1312		with children, I think unless you	
1313		can start to respect your own	
1314		subjectivity, (pause) with all its	
1315		myriad of complexities and	
1316		chaos, it will be very difficult to	
1317		really meet a child with all theirs.	
1318			
1319		Because you might still be	
1320		coming from an authoritarian	

1321		(pause) paradigm where you're	
1322		trying to control them or coerce	
1323		them or manipulate them or tell	
1324		them what to do. Rather than	
1325		genuinely creating the conditions	
1326		for them to discover who they	
1327		are.	
1328		I: Do you apply that philosophy	
1329		to your own course, you know, I	
1330		suppose particularly reflexivity,	
1331		but understanding from your	
1332		students, (pause) how they have	
1333		progressed and what has	
1334		enabled them to progress, from	
1335		the course, and then placing it	
1336		back in? Is the kind of bottom up	
1337		philosophy still there with	
1338		training?	
1339		P1: Absolutely yeah. I would say	
1340		that's a key component of my	
1341		(pause) approach as a teacher.	
1342		I: May I ask how you do that,	
1343		what method you use to (pause)	
1344		gain an understanding of how	
1345		they develop reflexivity, what	
1346		they would like more or less of?	
1347		P1: Mm, I think again a range of	
1348		different ways. Just constantly	
1349		asking them to reflect on their	
1350		experience in the here and now,	
1351		(pause) and how they are	
1352		experiencing. Erm, (pause)	

1353		what's happening? Whatever	
1354		that is, and how did you find that	
1355		process? I might say, (pause),	
1356		they might have done something	
		practical and I might say, "Right,	
1357		move with the partner to a	
1358		different place in the room and	
1359		then just reflect back on that,	
1360		and how you experienced that	
1361		process and what you're taking	
1362		away from it, and what you're	
1363		learning."	
1364			
1365		So at a very kind of fundamental	
1366		level, then (pause) in terms of	
1367		being participant in their own	
1368		self-assessment. Writing their	1-2-1 relationships
1369		own self appraisals and their	with students.
1370		own self evaluations and doing	Directing them to
1371		peer assessment and feedback	their internal worls.
1372		from each other. And	To pay attention.
1373		encouraging them to reflect on	
1374		processes with one another.	
1375		Erm, (pause) also staff student	
1376		liaison, I'm someone who likes	
1377		that. Which is I like, I like	
1378		collaborative (pause)	
1379		approaches to evaluating	
		anything. I always do that in my	
1380		client work. I always look at	
1381		developing collaborative aims for	
1382		working with people. And then,	
		evaluate outcomes	
1383		collaboratively, just in a simple,	
1384		"How do you feel that's gone for	

1385		you? You know, what's worked,	Self-assessment &
1386		what hasn't worked? What are	Peer assessment
1387		you valuing? Is there anything	on their progress.
1388		you would like me to do	R on process
1389		differently? Is there anything you	encourages further
1390		feel, you regret on hindsight?"	development of
			overall R.
1391		And in terms of teaching, you	
1392		know, "Tell us what's been	
1393		useful in the course. What's	
		helped you and what hasn't	
1394		helped you?"	
1395		I: What have they said, out of	
		curiosity, in relationship to	
1396		reflexivity?	
1397			
1398		P1: Erm, (pause) they love	
1399		reflexivity. They love it.	
1400			
1401		I: What are the things that	
1402		they've said, "Actually that's	
1403		really helped me." Like you said	1-2-1 emotional
1404		for you, personal therapy, and	relationship
1405		then potentially then, what's kind	
1406		of come up for them?	
1407			
1408		P1: Well I mean I could err,	
1409		(pause) I'll send you, if you like,	
1410		some of the comments from...	
1411			
		I: That would be okay, I would be	
1412		very grateful.	
1413			
1414		P1: Yeah, because you've seen	
		the journal, I'll send you some	



1415		comments from students. You	
1416		know, it hasn't just impacted my	
1417		professional practice. This has	
1418		been a personal journey of self-	
1419		discovery. I found it really	
1420		rewarding for me, personally, as	
1421		well as professionally. I've	
1422		discovered myself on the course.	
1423		Or this has changed the way I	
1424		think about myself and the world	
1425		around me. You know, it's about,	
1426		it's changed the way I mother my	
1427		child. It's changed the way I am	
1428		in my families.	
1429			
1430		To make qualitative differences	
1431		to the way people experience	
1432		themselves and the world	
1433		around them, and the way they	
1434		feel they might be able to	
1435		(pause) impact on it, or be	
1436		impacted by the world around	
1437		them in a (pause) meaningful	
1438		progressive, inverted commas,	
1439		"progressive" in a way that feels	
1440		that they've – that they're going	
1441		in a good direction.	
1442			
1443		I: I'm wondering, through the 20	
1444		years that you've done this, what	
1445		is it about this course that's	
1446		substantially different, for you,	
		that has allowed that self-	
		development?	

1447		P1: Err, (pause) well it's different	
1448		courses I've taught on or, the	
1449		courses I've been responsible	
1450		for (pause) post-graduate	
1451		training in drama and movement	
1452		therapy. Master's degree in	
1453		integrative arts, psychotherapy	
1454		and now.	
1455		Looking at a Diploma course,	
1456		we're going back to really basics	
1457		actually. Because I want to try to	
1458		widen access. (pause) And the	
1459		problem is those, a lot of the	
1460		training has become very, very	
1461		expensive and inaccessible to	
1462		the children's workforce, i.e. the	
1463		people who are dealing with kids	
1464a		on a day to day basis.	
1464b		I: The coalface?	Courses that she
1465		P1: Yeah exactly. So I want to	can shape for her
1466		try to get (pause) to those	understanding of
1467		people, some of the knowledge	R.
1468		and expertise that needs to be	
1469		disseminated more widely,	
1470		around emotional literacy and	
1471		creativity and imagination,	
1472		applied therapeutic thinking. So	
1473		that they can feel a bit more	
1474		supported and well resourced.	
1475		I: So the ones that have perhaps	
1476		made more of a difference to	
		you personally as well, have	

1477		been the ones that you were	
1478		able to take more responsibility	
1479		for?	
1480			
		P1: Yeah.	
1481			
1482		I: They've had more of an	
		impact.	
1483			
1484		P1: And I think those ones that I	Enable trainees to
1485		have been able to do that, I think	explore internal
		I've probably, without ever using	world to aid their R
1486		the term, created a very reflexive	and thus their
1487		culture. Culture, cultural context	work.
1488		is one that's imbued with	
1489		reflexivity. But I've not really	
1490		used the term, so you're bringing	
1491		a new consciousness.	
1492			
		I: I suppose I wondering with the	
1493		people that are coming in,	
1494		especially with the widening	
1495		access. (pause) Do you look for	
		(pause) people, trainees, to have	
1496		a certain level of reflexivity when	
1497		they come to you?	
1498			
1499		P1: Erm, (pause) we do	
1500		experiential interviews.	
1501			
		I: May I ask you to describe that,	
1502		because I haven't heard of that	
1503		before?	R culture must
1504			permeate course,
1505		P1: Erm, (pause) an experiential	course
1506		interview would be in which they	assignments and

1507		need to be able to talk a little bit	content must not be in conflict. All should be fed in and back to the internal world of each individual.
1508		about themselves, in some way.	
1509		So to be able to reflect on	
1510		themselves and share that, in a group context.	
1511		And also be able to play,	
1512		because they need to have skills	
1513		to enter a child's inner world.	
1514		That's the very sort of....	
1515		To have the skills to enter child's	
1516		inner world, you need to be very	
1517		reflexive, really. Gosh or else	
1518		you could do a lot of harm, if you	
1519		weren't a bit.	
1520			
1521		I: So there's already a	Seek for R through self-r in group context.
1522		component that you are looking	
1523		for, the kind of confidence that	
1524		you talked about earlier, the self-	
1525		confidence to be able to (pause)	
1526		remove yourself from you and be	
1527		in the kids world, be in the child's	
1528		world?	
1529		P1: Yeah.	
1530		I: So you're already for some	
1531		level of self-confidence at	
1532		interview stage?	
1533		P1: Mm, to be able to take risks	
1534		and tumble out into a game. You	
1535		know, (pause) and to be sort of	
		sensitive enough to be aware of	

1536		the other, through play. And to	
1537		have some degree of empathy	
1538		and flexibility, and err (pause)	
1539		not to be so caught up with your	
1540		own self, that you're very stuck	
1541		or inhibited, or unable to dare to	
1542		be open, for fear of shame.	
1543		But again all these things,	
1544		(pause) sometimes all you need	
1545		to be able to do is to see the	
1546		potential in a person.	
1547		I: And how do you see that?	
1548		How do you notice it?	
1549			
1550		P1: I don't know really, it's a very	
1551		intuitive thing. Have they got	
1552		enough of the right attitude to be	
1553		able to learn it?	
1554		I: And the attitude is?	
1555			
1556		P1: Something about their	
1557		willingness and openness to	
1558		discovery. If people are very	
1559		closed, (pause) you can't really	
1560		go anywhere. Erm, and people	
1561		are, to different degrees, shut	
1562		down in different ways, we all	
1563		are. But err, if I feel there's a	
1564		scope to facilitate more	
1565		openness.	
1566		Sometimes it's great to have a	
1567		student who can't represent all	

1568		those things at the beginning.	
1569		But by the end, they are really	
1570		fantastically capable in that area.	
1571		So I wouldn't exclude anyone,	
1572		(pause) that I thought had a	
1573		chance really.	
1574		I: Is that what you find from your	Characteristics for assessing capacity for R? Signals of willingness and openness
1575		course? You find that (pause) in	
1576		the end they've all developed	
1577		somewhat towards where	
1578		they...?	
1579		P1: Oh definitely, yeah. Yeah	
1580		they definitely all develop,	
1581		(pause) or they leave. You know	
1582		some people drop out, for	
1583		different reasons. But, you know	
1584		we haven't got a high dropout	
1585		rate. And they all, yeah they'll all	
1586		get there in the end, if you have	
1587		a bit of faith in them. That's what	
1588		I think.	
1589		I: I'm just aware of the time.	
		That's all the questions I've got.	
		Is there anything you feel I've	
		missed out or anything you feel	
		you would like to add?	
		P1: (pause) Just I think it's great,	
		ethically to be (pause) I think	
		that ethically, it's really important	
		(pause) to reflect on reflexivity	
		actually. I think it's a good thing	
		to be doing. I think anything that	

		<p>brings attention and thought and awareness to a concept like that. That's building bridges between the inner world and the outer world, is a good thing and (pause) I've enjoyed talking to you.</p> <p>I: I'm glad, I've enjoyed our meeting.</p> <p>P1: Thank you.</p>	<p>Her method works.</p>
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