

**The Path towards a Professional Identity: An IPA Study of Greek Family  
Therapy Trainees**

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## **The Path towards a Professional Identity: An IPA Study of Greek Family Therapy Trainees**

### **Abstract**

*Objective:* Contemporary psychotherapy research has focused considerably on practitioners' training and education. The impact of training on professional development and the application of therapeutic skills has been the primary focus of empirical literature. The aim of this paper is to present the experiences of seven family therapy trainees regarding their personal paths toward the development of professional identity as they underwent training in systemic psychotherapy.

*Method:* The in-depth interviews were analysed using Interpretative Phenomenological Analysis .

*Results & Conclusions:* Seven themes were identified: The Quest, Developing by Relating, Learnings, Personification of Training, Use of Self, Self-Care and Empowerment, and Reflecting on the Role of the Therapist. The findings are discussed with regard to the development of the 'therapist as a person', gaining acknowledgment and autonomy, and the development of a community of therapeutic practice.

### **Keywords:**

family therapy training, experiential learning, community of practice

**6,159 words (inc abstract and refs)**

## **Introduction**

Research in psychotherapy training has focused on change processes in the personal and professional development of trainees (Bennetts, 2003; Bischoff & Barton, 2002; Carlsson, Norberg, Sandell, & Schubert, 2011; Folkes-Skinner, Elliott & Wheeler, 2010; Nel, 2006). Even though the experiences of therapists' training have been identified as a significant factor influencing therapy outcome (Rønnestad & Ladany, 2006) empirical evidence appears to focus more on the trainees' use of techniques and less on the therapist as a person (Carlsson & Schubert, 2009).

Psychotherapists' development has been defined as a process that "includes change, is organised systematically and involves succession over time" (Skovholt & Rønnestad, 1992, p. 505). Professionals from various psychotherapy disciplines were studied by Rønnestad and Skovholt (2003; Skovholt & Rønnestad, 1992, 1995) who identified six stages of therapists' development, starting from a lay helper and beginner status and moving to senior professional level. Kral and Hines (1999) studied the process of acquiring a competent sense of professional self in family therapists based on the six-stage model delineated by Friedman and Kaslow (1986). The model includes: state of anticipation for first client-contact, dependency on supervision, therapists' tendency to take charge, development of own sense of identity, independency and collegiality. Kral and Hines' (1999) study empirically supported this model and ascertained that there is a five to six year time frame for therapists to consider themselves competent professionals.

In literature with a similar focus, Bennetts (2003) reports that trainees' primary concern is to be acknowledged as advanced psychotherapists both by internal (sense

of competence in applying therapeutic skills) and external points of reference (authorities' and senior clinicians' feedback). In a psychodynamic training context, the training experience is construed as a process of de-construction of the self for the new therapist-self to emerge (Folkes – Skinner et al., 2010). In family therapy training, Nel (2006) explored the 'de-skilling' and 're-skilling' states of trainees in the various training stages. Six family therapy trainees explicated how training was overwhelming, how they were asked to remove all previous knowledge in the field (de-skilling) and in the end how they reclaimed a more confident self (Nel, 2006). Studies on fluctuations in family therapy trainees' self-confidence have indicated that in the outset there is great variability in trainees' confidence (confidence reactive to every situation), dominated by anxiety and fear (Bischoff, Barton, Thober & Hawley, 2002). Later in training, trainees become more comfortable in handling the role of the therapist and finally, a delicate compensation of confidence takes place, where trainees acknowledge their uniqueness as therapists, use themselves as important tools in therapeutic process, and, at the same time, experiment and become more flexible in the application of theory (Bischoff et al., 2002).

In their study of critical incidents for first year trainees Howard, Inman and Altman, (2006) found that issues of professional identity, self-awareness, self-insight, belief in one's abilities, supervision, and the development of a conceptual framework for therapy appear to be important learning factors that contribute to professional development. Hill, Sullivan, Knox and Schlosser (2007) explored five counselling psychology doctorate students' journals and the results indicated that trainees were primarily concerned with applying skills in the 'correct' way as indicated by instructors and learnt by applying helping skills which were clearly outlined. Later in

training they acquired the ability to use self-reflection in clinical work, felt more comfortable in the role of the therapist and more able to connect with clients. A study on an experiential undergraduate 13-week course focused on the trainees' personal development exploring their experiences of training (Pascual-Leone, Wolfe & O'Connor, 2012). This qualitative study of 24 trainees revealed 28 clusters under two abstract categories entitled professional development (perceiving new aspects of process, making interventions in client process, emerging professional identity, trusting client's process and understanding therapists' role and technical difficulties) and self-development (self-improvement, self-understanding, self-expression, connecting with people, accept others' weaknesses and empathically listening).

Another aspect in the development of professional identity is the internalisation of educators' or supervisors' demeanour or behaviours (Bennetts, 2003). Directive, supportive, challenging supervision appears to help trainees cope with anxieties (Hill et al., 2007) and peer, tutor and supervisor support are deemed to be significant in stress reduction (Truell, 2001). In Ögren and Sundin's (2009) study of group supervision it was found that non-authoritarian supervisors who emphasised the trainees' competence and shared their experience contributed positively to their development and group supervision gives opportunities to learn from peers' experiences.

#### *Rationale of the study*

In psychotherapy empirical literature there appears to be a "longstanding need for research on the subjective experiences of psychotherapy trainees" (Pascual-Leone et al., 2012, p. 164). The dynamic processes that take place during training and how they

affect the therapist as a person are significant and valid subjects for research (Carlsson et al., 2011). More systematic interpretative analysis is needed in order to understand trainees' development and internal changes they undergo (Folkes – Skinner et al., 2010; Pascual – Leone et al., 2012) in various training contexts and approaches (Hill et al., 2007). Trainees' reflections and internal reactions to training appear to be important research issues and a shift has been made from outcome studies to studies that explore the variety of psychotherapy trainees' experiences (Hill et al., 2007). Moreover, within the European context dialogue regarding the training and the licensure of therapists has predominated professional training centres and associations (Ginger, 2009). This type of problematisation has not coincided with the research literature and as Lorentzen, Rønnestad and Orlinsky (2011) conclude, although there are many professional psychotherapists in Europe there is “no psychotherapy profession” and this is a crucial issue in training since “personal qualities are more important for therapeutic process and outcome” (p. 141). Moreover, there is little if any research on psychotherapy training in Greece although a conflict laden dialogue on European criteria and standards of practice has just begun in the country.

The focus of this study is on a non-manualised, non-academic psychotherapy training in a national context where no formal accreditation is available for psychotherapists. The aim of this study is to gain a better understanding of the trainees' experience of an intense systemic training program and the process of their professional and personal development as psychotherapists. The goal was to look in an open and in-depth manner into the personal path of practitioners struggling to acquire acknowledgment and professional identity via the criteria they set for themselves.

## **Method**

### *Training context*

Participants were recruited at the Family Institute of Chania, Crete, a non-academic, part-time systemic psychotherapy training centre where the facilitator holds the position of the “naïve” teacher who promotes the trainees’ unique qualities. The Institute offers theoretical orientation groups consisting of five different modules: pragmatics of systemic thinking, theoretical and methodological underpinnings of the divergent schools of systemic psychotherapy, systemic theory and therapy as it is has been developed and applied by the Institute, developing one's own psychotherapeutic praxis. The experiential and therapy groups aim to deepen the integration of personal, interpersonal, and theoretical knowledge. The trainees participate in three such groups: dialogical group interaction, genogram group, and psychodrama group. The dialogical interaction group aims to introduce trainees to group facilitation practices and self-experience within group dynamics. The genogram group’s goal is to deepen the trainees’ understandings of family systems theory, their family of origin dynamics and how they have impacted on their personal and professional development. The emphasis in the psychodrama group is the application of dramaturgical techniques and the creation, maintenance and de-construction of common understandings of reality. The groups are facilitated by the same psychiatrist – facilitator and co-facilitators. The course is accredited by the European Family Therapy Association and adheres to their standards of training and practice. Most trainees take four to six years to complete the course attending on a part-time basis.

### *Participants*

The first author conducted the recruitment and interviewing of the participants. She attended various training groups as an observer at the Institute for three months and presented the research aims to twenty five trainees. Those interested in participating contacted her via phone or e-mail and interview dates were scheduled. Seven trainees agreed to participate. Confidentiality and anonymity were ensured, as names or all identifying information were omitted from the data using code-names for each participant (P1, P2...P7). Although this is a small number of participants, given the analytic and detailed analysis of the data according to IPA guidelines and the idiographic nature of the epistemology, a small sample is preferred (Smith, Flowers & Larkin, 2009). The details of the participants appear in Table 1.

### *Ethical Considerations*

Participants were informed on the purpose of the study and consent was received prior to interviewing. There are no clear ethical guidelines for conducting research in Greece. Two of the researchers were trained in the UK (EF & SB) adhering to BACP and BPS ethical guidelines. This study complied with the BACP's Ethical Guidelines for Researching Counselling and Psychotherapy (Bond, 2004).. Specifically, we sought written consent, , respected anonymity, ensured participants' welfare and respected their right to withdraw..

### **Table 1. Demographics**

### *Interviews*

Semi-structured interviews were conducted by the first author, which took place at the participants' clinical practice premises. Prior to the interviews, the research team had

decided to use open-ended inquiries that would provide in-depth information on the participants' individual experiences and meaning of training (see Table 2 for examples of the interview questions). Participants were probed to discuss their stories, ideas freely and reflectively (Smith et al., 2009; Smith & Osborn, 2007). Interviews lasted from 40 to 90 minutes, were all transcribed verbatim and reviewed for accuracy.

## **Table 2: Interview Questions**

### *Method of Analysis: Interpretative phenomenological Analysis*

The goal of this study was to capture how participants made sense and convey the processes involved in professional identity formation during training experiences. Interpretative Phenomenological Analysis (IPA) (Smith, 1996; Smith, Flowers & Larkin, 2009; Smith & Osborn, 2007) has been applied as the suitable method since our main concern was to focus on the micro-analysis of the experiential claims made by the participants in order to generate a persuasive analytic account (Smith et al., 2009) of their stories. Toward this goal, each interview transcript was separately coded line-by-line, using descriptive, linguistic and conceptual comments. For each transcript a table was drawn with right and left margins where codes for every line of the text were recorded. After all the transcripts were individually coded by three researchers, all the codes were collected in the margins of separate tables. Superordinate themes emerged through dialogue and a constant comparison process of data analyses. In this fashion the connections and interrelations of the initial codes were schematically mapped out revealing patterns and themes that were observed in the data on all seven protocols and by the three researchers. These themes were

further clustered on an abstract level. The analysis process was interactive and required repeated returns to the raw data to check meanings and connections between themes and transcripts (Shinebourne & Smith, 2010). The authors discussed the data comprehensively and thoroughly at the end of every stage of analysis. This procedure of arriving to interpretive consensus provided richness of in-depth and alternative interpretations of the transcripts (Hill et al., 2007; Howard et. al., 2006; Rønnestad & Skovholt, 2003), limited the impact of the subjective bias of a single researcher (Morrow, 2005) and bolstered the reliability of the analysis.

*Reflexive statement:* All authors of this paper are also teachers. We have experiences of studying abroad in countries where counsellor and psychotherapist training involve some formal regulation. We have struggled to comprehend the development of professional identity in Greece where neither training nor licencing (e.g. accreditation) is regulated. At times we have felt frustrated with the lack of training of some practicing counsellors and psychotherapists in Greece and we have been left feeling mere witnesses of poor practice. Instead, we have tried to shed light in the experience of a small group of trainees who choose to set their own goals and go through a training while they make sense of their professional identities.

## **Results**

Data analysis revealed seven themes that captured the meaning of the retrospective accounts of the participants; the emergent themes are presented below.

### *The Quest*

Six out of seven trainees referred to their training as a journey in developing understanding and inquiring into personal and professional meanings. They found a space where they acquired depth in their understanding of themselves, their relationships and received care from their peers and trainer: “It was intense...all this reconstruction that is taking place through training, but also through individual psychotherapy. However, it is mostly done in the group [...] but each person is a story. Each one’s story gets beautifully mixed with the others’. That is what I like about systemic theory.” (P2). Moreover, they had the opportunity to practice skills and learn about psychotherapy theory and the competencies it entails. As P4 mentioned: “Learning is like the process of life; you try, you succeed, you fail... you turn inwards, you become more self-aware mainly. It is a journey, a continuous one...it entails the element of change” (P4). More importantly, they reconstructed their stories and found meaning in their personal and professional lives which they highlighted as core experiences in the process of developing professional identity.

### *Developing by Relating*

All participants highlighted the significance of the groups, which is a basic element of their training. They found self-disclosure in the group of colleagues to be a challenging process, yet it was also an opportunity for them to observe themselves through collegial mirroring and identifications. In the personal development groups: “You face your own issues in the group because you have a mirror opposite to you [...] you have eight mirrors. You see that all these issues you have...they are human. You see your own issues as well as those of the others” (P5). They described the importance of sharing, managing boundaries, establishing a secure sense of self in the

group process, and underscored that they thereafter preferred to work in contexts where dialogue and co-reflection were available

### *Learnings*

All trainees in this study contrasted the way of learning on this course to the one they were used to as undergraduate students. The course helped them move away from the academic manner of learning towards an experiential model of acquiring knowledge. As P6 explicated: “The way of learning and teaching was experiential, you participated actively so you could see the outcome in you first of all... and the presentation, the way of teaching through real cases, role plays, and all this, I think it was very useful. You could get straight to the point and the theoretical part of training was basically adding to the experiential.” (P6). They described the processes of learning in the groups as experiencing, observing and developing understanding through, with, and alongside others: “I always borrowed, like copying and pasting, those things that were appealing to me of course, but basically I was inspired by all this, I went through training with pleasure knowing that I would always gain something.” (P7). They found themselves challenged in developing an open-minded perspective of self, work, others, and life and described a process of becoming open to new ways of understanding their clients and eliminating diagnostic filters that blurred their praxis.

### *Personification of Training*

Reflecting on their training, six of the seven participants “personified” it to the person of the trainer and his multiple roles. Describing their experiences,, they gave emphasis to the teacher as a role model: “One of the most important things for me [...] was that

there was a man who was many things at the same time, he is the facilitator, the therapist.... He is a very significant person for me. If there was someone else, regardless the approach, maybe, indeed, I wouldn't be feeling all this, I wouldn't be gaining things...the person contributed a lot, for me to make the approach appealing" (P2). The training program offers choice of a variety of groups and trainees felt that it catered to their individual needs. The participants also voiced ambivalence towards training, referring to it as "heaven and hell" at the same time: "So, it has been a lovely process for me, in which I may feel as though I am going through the Symplegades Rocks- and other times it is like I am in heaven. I mean it is a process that it can be difficult, but it can also be nice and easy. If I drew it, it would be hell and heaven I guess... contradictory things" (P1). The Symplegades metaphor symbolises an odyssey through a very treacherous passage to find one's port; in this case, professional identity.

### *Use of Self*

All trainees in this study noted that personal therapy and the development of self awareness encouraged them to be more empathic and understanding not only for their clients, but also in their personal relationships. They learned to base their judgements and therapeutic hunches on how their clients felt or experienced a particular situation on their own experiences of the therapeutic process. They surmised that if techniques worked for them in therapy, they would then be effective for their clients as well: "For me someone becomes a therapist when they have worked a few things out. Because if I don't, I won't be able to acknowledge that whatever the other person stirs up in me is actually my own issue. If you can't do that, then you are not able to work, you would harm the other person" (P3). Through the experiential methods of learning,

they were better able to use their selves and to appreciate the embodiment component of the therapy process, as P4 explains: “I was getting too much into the sessions; I was feeling the session in my body. The person was talking about their issues that hurt them so much, and I felt that I am taking them (those experiences) completely in my body... I feel it on my shoulders, in my body... which is another point of reference which is very important for me, to which I wasn’t paying too much attention before.”

(P4)

### *Self Care and Empowerment*

All participants mentioned how training helped them come to terms with their weaknesses and limitations as therapists, whereas before they would feel threatened by them: “I just expect less, I don’t have so many expectations any more. In the beginning I had more. Okay, I now say “whatever it is I will give, I will do it with good will” [...] I did everything I could, I don’t have any guilt. But I do believe you can’t help everybody. It’s okay, if I am not the right therapist for them, then I am not” (P3). As a result of this maturation they approached themselves and their actions in non-punitive ways and felt more accepted by their trainer and peers, which, in turn provided them with a sense of personal and interpersonal acknowledgment and appreciation. They reported that they felt relieved from their anxieties and guilt regarding their clinical work by forming realistic expectations for themselves as therapists. The supportive and non-judgmental attitude of the training program empowered them in their work and helped them feel more confident in establishing boundaries: “In those very experiential and profound groups, even the theoretical or psychodrama ones, there was this element for me, that I blame myself for stuff... and

in these three years of personal therapy I have become more “okay” with me, I care for myself more” (P5).

### *Reflecting on the Role of the Therapist*

Even though participants in this study had been in training for two to nine years, only two felt comfortable enough to attribute the title ‘therapist’ to themselves. Five participants felt that they are “trying to become” or “expecting to become” therapists, or even not sure that they would practice as one: “First of all, I don’t feel like a therapist, ok? I am not a therapist. I hope someday I will become one. I am a psychologist. I have the degree and the right to practice in this profession. And I am trying to be a therapist” (P5). They felt more secure using the title “psychologist” as they were referred to in the undergraduate degree they acquired at university and the official professional licence they were endowed with from their local prefectures. They found the title “therapist” to be an imposing one, attributing a “magical” component to a profession where one had to be a “healer” and hold all the right answers. For all participants in this study, a therapist is defined by the therapeutic relationship, the dynamic process of relating; that is something, beyond therapeutic tools and skills. As they mentioned, “I believe it is a sort of art, it really has to do with our need, to be useful and helpful. At least for me [...] I think what makes a therapist is how you can use in a valuable way what you are” (P4).

### **Discussion**

The results of this study indicate that training is viewed as a journey in which the participants are looking for knowledge and skills, but mostly self-awareness and self-acceptance; empowerment to take on a very powerful identity. They learn through

observing and experiencing, absorbing the personal and interpersonal learning groups provide. They learn how to care for themselves as persons and as therapists, but also how to use their self in clinical practice. The role of the trainer appears to be significant for them, as they appear to idealise him. It was difficult for the participants to use the word ‘therapist’ to identify themselves though they readily discussed gaining acknowledgement in the role by their peers and by developing common understandings and praxis—a community of practice.

### *Communities of practice*

Becoming a therapist has been described in the literature as a type of apprenticeship, where a socialisation process takes place and the trainees learn and practice ways in becoming and being therapists (Carlsson et al., 2011). In such communities, members share a concern or passion, develop collectively and individually their capabilities through sharing and interaction (Wegner, 1998). The training community studied here adheres to the model of a community of practice. During training, participants engaged in joint activities (theoretical discussions, marathon groups, therapy and supervision groups, role playing and psychodrama) in which they found themselves helping each other, seeking new ways of expressing themselves, sharing experiences and collectively developing their professional identities. The relationships they constructed enabled them to learn from their interactions, creating communities of concern amongst peers and trainer [communities of people that help rather than evaluate (Carlson & Ericson, 2001)]. Communities of practice, shaped in training groups, are important since they provide a structure to share the professional development process with others and have them witnessed and storied by their peers (Carlson & Ericson, 2001). In this community they shared a repertoire of resources,

stories, tools and ways of addressing family issues, in short a shared practice. The sense of belonging, in which each trainee develops their own attitudes, values and ideas related to the field, appears to be very important for defining the therapist's professional self (Wegner, 1998). In Carlsson et al.'s (2011) study trainees' motive was to become members of a superior group of therapists, achieve recognition and better work opportunities, acquiring the prestige of having such accreditation. Trainees in this study aimed at professional development by belonging to a community and they found a space where they were listened to, accepted and supported on a personal and professional level.

#### *Acknowledgment and autonomy*

In Nel's (2006) study trainees experienced a de-skilling period in the beginning of the training when they adopted a student's role and removed previous knowledge. However, towards the end of their training, they entered a re-skilling period when they felt confident and autonomous as they saw the results of their assessed work. Moreover, in Bischoff et al.'s (2002) study, family therapy trainees reported feeling comfort in their role of therapists during the latter stages of their training. Participants in the present project entered the de-skilling phase in their training when they abandoned the academic way of learning and thinking and adhered to a more experiential one. Even though they had completed two to nine years of training, had all worked in therapy settings, and had moved on to the re-skilling phase of professional development, they continued to seek training as independent therapists and felt awe and a sense of not being 'fully prepared' to call themselves therapists. Trainees appear to search for acknowledgment both from internal (learning skills, self improvement) and external (supervisors, senior clinicians and other authorities) points

of reference (Bennetts, 2003). In the present study, trainees seemed to seek acceptance from their peers in their groups as well as from internal sources. Although they advanced to the professional stage of use of self and placed a high regard for the therapeutic relationship, they seemed to find it difficult to integrate the therapist role as part of their personal identity, leaving this imposing title for ‘master-therapists’; they hold on to the title--psychologist, an official license. This result coincides with an international study in which professional identity has been found to be mostly connected with the title of “psychologist” rather than “psychotherapist” (Orlinsky, Ambühl, Rønnestad, Davis, Gerin, Davis, Willutzki et al., 1999). External accreditation criteria, which vary significantly amongst countries and nationalities, play a key role in the way practitioners identify themselves professionally. It appears that accreditation criteria and the fulfilment of standards may function as professional development milestones and, in his capacity, enhance therapists’ self-confidence (Bischoff et al., 2002).

#### *The role of the trainer*

The trainer of the setting holds multiple roles. During this multi-layered contact with trainees (supervision, personal therapy groups, theory groups etc), the latter spoke about how they idealised him as if he were the source of learning, as opposed to a corpus of systemic therapy theory and practice. They found that he held all the properties of a “very good therapist” and saw him as a role model for their clinical work. They learnt by imitating him, many times disregarding theory, which agrees with the Rønnestad and Skovholt (2003) model of imitation of the supervisor for the beginner’s stage as well as the external dependency that features the advanced student stage. Previous research has suggested that supervision should meet trainees’

individualised needs based on the developmental stage of their professional path (Rønnestad & Skovholt, 1993). Especially in group supervision, the trainer needs to be both an effective group facilitator as well as a competent clinical supervisor (DeStefano et al., 2007). Trainees achieve acknowledgment and confidence in their work when they manage to individuate and become independent practitioners (Nel, 2006). Participants in the present research study seemed to struggle with the above-mentioned process of individuation. They chose to hold on emotionally to the safe place of the training context and resisted viewing themselves as autonomous and competent practitioners who could work away from their ‘training’ community.

#### *Implications for training*

“Psychotherapy training is complex and multi-faceted” (Pascual-Leone et al., 2012, p. 154). A variety of approaches are applied in Marriage and Family Therapy education. Courses assess what trainees have learnt and how they apply this learning following a specific curriculum (Nelson & Smock, 2005). This study revealed the internal struggles of trainees in their effort to become therapists when external criteria are absent. Valuing self-reflection, use of self, interactions in groups and experiential learning, participants strived to formulate their own professional identity. The study underlined how the ‘person of the therapist’ should be a focus of training. Therapists’ internal reactions and personal characteristics have a major impact on therapy process (Hill et al., 2007; Orlinsky et al., 1999; Woodcock & Rivett, 2007) and trainees develop beyond “straight application of techniques” (Pascual-Leone et al., 2012, p. 154). Trainees have to develop the ability to use personal qualities for the benefit of their clients, and creatively make themselves tools for therapy. Training should encourage technical skills as well as the ability to interact on a deep personal level

with clients via the use of self. Therapists tend to abandon rigid application of techniques and develop their own preferred styles of clinical work (Cornille, McWey, Nelson & West, 2003; Skovholt & Rønnestad, 1992) and they need the group and personal reflection that experiential training techniques can offer in navigating the path towards this accomplishment. Helping trainees gain self-awareness and ways of communicating thoughts, feelings and stories assists and empowers them in becoming better-equipped practitioners. Short-term manualised training has been found to have less effect on trainees' internalisations of learnings (Stein & Lambert, 1995). As the results of this study strongly indicate, long-term, non-manualised and experiential training has great influence on students' identity development especially when these are embellished through interactions in groups. Encouraging trainees to speak about how they experience training and practice enhances self-awareness and self-reflection, important sources of confidence and competence for therapy work (Howard et al., 2006).

#### *Limitations and suggestions for future research*

The present study offers a phenomenological analysis of the accounts of trainees belonging to a specific therapy discipline. Due to the small number of participants in the study the results should be considered as a conceptualisation of the stories of the participants, without claiming to have implications for family therapy training courses in general. Furthermore, the narratives of the trainees offer a retrospective account of their experience, which may be prone to distortions and bias (Orlinsky et al., 1999).

The findings of this study shed some light on the trainees' internal and emotional processes during systemic psychotherapeutic training which may be helpful for trainers and trainees in understanding the multifaceted and dynamic process of

professional development. Moreover, the study raises important points to the contentions European context regarding psychotherapy accreditation criteria and licensure requirements. Further research is needed to illuminate these processes.

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## **Tables**

### **Table 2. Summary of Results**

Theme	Verbatim Examples from Interviews
The Quest	<p data-bbox="517 344 1315 674">“It was intense...all this reconstruction that is taking place through training, but also through individual psychotherapy. However, it is mostly done in the group [...] but each person is a story. Each one’s story gets beautifully mixed with the others’. That is what I like about systemic theory.” (P2)</p> <p data-bbox="517 786 1315 1182">“It is the fact that I wake up in the morning and I realise ‘I have been looking at this window for such a long time and look at how wonderful it is’ and something sweet touches me inside. And this is growth; to be able to offer myself the space and time to observe something more than the givens that surround me.” (P5)</p>
Developing by Relating	<p data-bbox="517 1301 1315 1630">“We cared, we cared for each other and we cared for the people we worked with, we had many, many things in common, and, anyway, in this way one could help the other, learning form their examples. I mean, when one talked, they talked for everyone” (P7)</p> <p data-bbox="517 1742 1315 1998">“As time moves on [in the groups], the members come to know each other very well and learn about my intimate matters, and learn about my fears and, anyway, all these issues I bring in the groups. So it makes it easier for me to</p>

	<p>talk, to accept a few things [...] for me it has been like learning a new way to express these issues.” (P1)</p>
Learnings	<p>“You care about the eyes you see opposite to you and not about the label you have put on them.” (P5)</p> <p>“I always borrowed, like copying and pasting, those things that were appealing to me of course, but basically I was inspired by all this, I went through training with pleasure knowing that I would always gain something.” (P7)</p>
Personification of Training	<p>“One of the most important things for me [...] was that there was a man who was many things at the same time, he is the facilitator, the therapist.... He is a very significant person for me. If there was someone else, regardless the approach, maybe, indeed, I wouldn’t be feeling all this, I wouldn’t be gaining things...the person contributed a lot, for me to make the approach appealing” (P2)</p> <p>“OK, the trainer himself as a model of a therapist was masterful at reframing and resynthesising ... because he is so open, giving, authentic” (P6)</p>
Use of Self	<p>“For me someone becomes a therapist when they have worked a few things out, because you can’t work all things,</p>

	<p>with yourself. Because if I don't, I won't be able to acknowledge that whatever the other person stirs up in me is actually my own issue. If you can't do that, then you are not able to work, you would harm the other person" (P3)</p> <p>"He (trainer) left us space to see ourselves, to know others, I think it is a process that taught me many things about myself and helped me touch some very profound things in others" (P5)</p>
Self Care and Empowerment	<p>"In those very experiential and profound groups, even the theoretical or psychodrama ones, there was this element for me, that I blame myself for stuff... and in these three years of personal therapy I have become more "okay" with me, I care for myself more" (P5)</p> <p>"I don't fall apart when I receive negative feedback; I am now trying to make use of it. It's like I see things in a more calm way now as opposed to before (the training)" (P7)</p>
Reflecting on the Role of the Therapist	<p>"I don't feel like a therapist, it is easier for me to talk to you as a person rather as a therapist [...] Look, this year I doubted whether I am going to be a therapist or not...I doubted it but without bitterness. I mean, I thought to myself, if it comes about, it would be good, it is not my target, and, as I said earlier, I went to this training for personal development [...] I don't see it as a professional goal [...] I</p>

	<p>mean, I might do something different” (P1)</p> <p>“Yes, I believe this is a title which is acquired after a lot of training...a lot...and here in Greece we use it widely, you are what you say you are, I am a psychologist...I am doing psychotherapeutic sessions, but I don’t claim to be a psychotherapist [...] I believe the psychotherapist goes through an extra-extensive training. We learned how to use some tools but we don’t have that training” (P2)</p> <p>“To me, the love for the profession, makes the therapist. I mean, you must really feel it, coming out from inside you. I was half-a-person when I was doing a different job” (P3)</p>
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