Shadows in the Reflective Journey – Trainee Clinical Psychologists’ Experiences of Reflective Practice

Emily Connolly, Duncan Moss & Jacqui Stedmon

University of Plymouth
A critique does not consist in saying that things aren't good the way they are. It consists in seeing on just what type of assumptions, of familiar notions, of established and unexamined ways of thinking the accepted practices are based... To do criticism is to make harder those acts which are now too easy. 
Foucault (1982)
Reflective practice is widely recognised as an essential competency for healthcare professionals within the UK.

BPS incorporate reflective practice into their accreditation standards for doctoral training programmes (BPS, 2019)

Programmes must demonstrate trainee clinical psychologists develop as ‘reflective scientist practitioners’ (BPS, 2019, p. 8)

Anecdotally, many psychologists identify being “reflective” as a key skill/unique aspect of our profession.
Trainees arrive on training at various stages of reflective development, e.g. needing explicit explanation vs integrated thinking. (Brown, Lutte-Elliott, & Vidalaki, 2009)

Different courses make use of different methods to facilitate and develop reflection including reflective practice groups (RPGs), reflective journals, essays, and reports (Clearing House for Postgraduate Courses in Clinical Psychology, 2018).

Despite it’s presence within course structures and competency frameworks, little research has explored reflective practice further.
Some authors have suggested the inclusion and importance ascribed to reflective competencies was predominantly driven by governmental intervention as opposed to evidence of benefit (Ixer, 2016).

Gilbert (2001) argued this has resulted in an individualised focus of self-awareness (surveillance) as opposed to a critical examination of wider structures and influences.
Clarà (2015, p. 261) stated reflection to be ‘unanimously recognised in the field to be ambiguous’

Given the difficulties in operationalising reflective practice, trying to “assess” it is challenging.

Taylor (2006) argued that reflective assessments remain problematic given they have largely been taken at face value rather than seen within a wider social context.
Aim/purpose

To explore Trainee Clinical Psychologists’ reflective journeys.
To explore whether trainees narrated any dilemmas within their journeys.
Ten final year Trainee Clinical Psychologists. 7 female, 3 male.
From a total of 8 Course programmes.
Recruited via course administration teams.
Skype/phone interviews – approximately 1 hour.
Use of narrative inducing question – “Can you tell me about your reflective journey?”
Analysis


Thematic analysis focused on the ‘whats’ or spoken content of the narrative.

Structural analysis focused on the ‘hows’ and was used to interpret how narratives were organised and used to contribute to an overall plot.

Performative/dialogic analysis focussed on ‘who’ a narrative was targeted at and ‘why’ it was performed as such for immediate and future audiences.
Reflective journeys

Probably like less of a linear process, and more kind of backwards and forwards, and at times being more reflective, and times of not, and sometimes being reflective and not knowing you are because you didn’t have the terminology to pinpoint it as that. (Chloe)
Three positions in relation to reflection: Natural reflector, growing reflector, Unreflective

Temporally ordered narratives pre-dating training.

Narratives of progression/growth irrespective of position

Growth was organised around enablers and obstacles to reflection. Specific enablers included: personal therapy, their cohort, and hearing different perspectives.

Trainees were unequivocal in their narration of reflection as an important part of their practice (and for some their identity).
I went to my personal tutor and I said, “Do you think this would be good for [coursework]?” And he went “No there isn’t anything specific you’re reflecting on”. And that made me think “Well this isn’t a genuine piece of work”. Then I went away after that, and I wrote out just for myself the thing that I actually wanted to reflect on and I kind of wrote it all out in a narrative format and that kind of laid it to rest for me. (Lauren)
Am I able to open?

And yeah part of it also felt like saying something, not to impress the other cohort but to not sound stupid, and not sound like you don’t know what you’re talking about. So it wasn’t completely open, it wasn’t completely natural. (Aaron)
What are the consequences of being open?

Don’t really admit that you’re that vulnerable... you still have to be a functioning practitioner... still have to give off this kind of, [puts on voice] it affects you and you have an understanding but you can still keep it together... ultimately you know it’s not about you, it’s about the client... So it’s almost like it needs to be packaged in a certain way that’s socially acceptable, because if you go too far people are like [talks dramatically] “Woah, woah, woah, woah!” [laughs] can they do the job? (Anna)
Training was storied as a period of growth in trainee’s reflective journeys. Previous literature has found similar constructs of enablers and obstacles within reflective development accounts (Kiemle, 2008).

Previous literature has highlighted the role of RPG facilitators in the imposition of structure. (Brown et al., 2009; Knight et al., 2010; Lyons et al., 2019). ‘The Course’ character took on a similar role within trainee stories.

Trainees narrated an understanding of meaningful reflection as open and authentic but constructed the enactment of this as problematic. Within a context of reflective competencies there is considerable pressure on reflectors to say, ‘the right thing’ (Taylor, 2006, p. 197).
Discussion

Some trainees perceived there to be risks to enacting openness.

Previous research has highlighted both personal and interpersonal risks perceived by trainees in reflective practice tasks (Spendelow and Butler, 2016) and dilemmas in the navigation of expressing “the personal” in a professional context (Woodward et al, 2015).

Wider healthcare literature has critiqued the increased emphasis on self-awareness as neglecting the examination of wider structures and influences (Gilbert, 2001).
Limitations

Assumed shared understanding.

Further trustworthiness checks.
More questions than answers (!) but hopefully encouragement of further questioning and exploration around current practices.

Questioning/inspecting/exploring the constructed narratives of reflection and the consequences of this.

Discussing reflection/reflective practice as a concept (like any other) with it’s dilemmas can offer reassurance.

Trainees storied enablers throughout their reflective journey, these kind of enablers may be helpful for others to find alternative reflective spaces.
Questions?
References


