

[Thank you for submitting your revised manuscript to *Reflective Practice*.](#)

-



[Manuscript ID: CREP-2012-0047.R1](#)

[Title: A RIVER RUNS THROUGH IT: ENHANCING LEARNING VIA EMOTIONAL CONNECTEDNESS. CAN PROBLEM-BASED LEARNING FACILITATE THIS?](#)

[Authors: Keville, Saskia](#)
[Davenport, Becci](#)
[Adlington, Becky](#)
[Davidson-Olssen, Isis](#)
[Cornish, Michael](#)
[Parkinson, Andrew](#)
[Conlan, Louise-Margaret](#)

[Date Submitted: 05-Dec-2012](#)

[A RIVER RUNS THROUGH IT: ENHANCING LEARNING VIA EMOTIONAL CONNECTEDNESS. CAN PROBLEM-BASED LEARNING FACILITATE THIS?](#)

ABSTRACT

The ability to undertake therapeutic work either directly or indirectly is central to many Clinical Psychology posts. This paper focuses on the acquisition of skills and knowledge gained through experiential learning components of a Clinical Psychology doctoral training programme following the introduction of Problem-Based Learning (PBL) into its academic curriculum in 2006 (Nel *et al.*, 2008).

At UH, PBL began life for many Trainees as a content-focussed exercise developed to highlight how one might assess, formulate and intervene with issues presented within a case. Over time the task has increasingly incorporated a process focus, in which the content facilitates PBL groups to reflect on a broad range of concurrent processes, including personal contexts, interactions with others, and the influence of wider systems. This paper explores the overall learning experiences of PBL for Trainees within one PBL group and how the exploration of underlying personal and group processes may facilitate a personal and emotional connection with the 'client'. Further, we consider modes of conveying this information to enable an audience to emotionally connect with the case and the experiences of the group members. We conclude with a consideration of what we may learn for the benefit of future PBL groups within other disciplines.

INTRODUCTION

Training to be a Clinical Psychologist involves three years of full time postgraduate study at a doctoral level. Clinical Psychologists work in diverse fields often understanding and supporting people in distress, their families or the surrounding systems. The ability to undertake therapeutic work with clients (individually/in

groups/within staff teams), is central to many Clinical Psychology posts. Within training, Trainees have to demonstrate the attainment of competencies over the three years of training within three separate yet integrated spheres: academic, clinical and research. This paper focuses on the acquisition of skills and knowledge gained through experiential learning components of the academic programme.

Trainees are on campus two days per week attending lectures, tutorials and small group discussions. Until recently, few Clinical Psychology training programmes in the UK incorporated Problem Based Learning (PBL) as a teaching and learning strategy (Stedmon, Wood, Curle, & Haslam, 2005). The Doctoral Clinical Psychology Programme at the University of Hertfordshire (UH) introduced PBL into its academic curriculum in 2006 (Nel *et al.*, 2008). PBL facilitates self-directed learning and group collaboration (Hmelo, 2004). It encourages Trainee Clinical Psychologists to consider case vignettes similar to those they may encounter during their clinical work. They work with a group of fellow Trainees with the support of a facilitator from the Course Team. After 5 or 6 weeks the groups present 20 minute presentations incorporating conceptualisations of the case vignette and potential interventions to their peers, the Course Team and regional Clinical Psychologists.

Content and Process within PBL

At UH, PBL is evaluated via the group presentation and an individual reflective account of 1500 words. The marking criteria focus on the content, the group process and the presentation itself. There may be differing individual preferences for group members to focus on the group process or content. Focus on content often predominates in the early phases of PBL (Nel *et al.*, 2008). Allowing the exploration of underlying motivations for this drive can facilitate the group to reflect and connect with automatic responses. Both task and process are important; without a content focus the group may become too introspective or attached to a reflective position and unable to produce a presentation, and without reflection on process the group may lack a coherent emotional understanding of each other and the clinical material. Further, the content often facilitates groups to reflect on a broad range of concurrent processes, including inter and intrapersonal experiences and the influence of wider systems. Increasingly, the presentations have developed into an emotionally-based narrative enabling the group and audience to connect with the case material and each other.

Overview

This paper explores the learning experiences of a PBL group on a Clinical Psychology training programme following the completion of their PBL programme. We join them after their final exercise, reflecting on factors that may have helped or hindered their development. Each member of the group has written a reflective narrative to convey their own unique experience of PBL and for the audience to read these diverse experiences first hand.

This article then goes on to consider how the exploration of underlying personal and group processes may facilitate emotional connection within themselves, each other and the 'client'. Further, we outline some

implicit and explicit means of conveying this information within the presentations to enable an audience to connect emotionally with the case and the experiences of the group members. We conclude with a consideration of what we may learn for the benefit of future PBL groups within other disciplines.

REFLECTIONS

Each of the Trainees independently agreed to participate and write a reflective narrative they were comfortable sharing. This was to ensure that the Trainees had maximum control over how their experiences were 'voiced' in this paper. We are aware that the reflections presented are only a small proportion of the many thoughts and feelings that were experienced during or after the exercises and consequently, they remain subjective, incomplete and open to further elucidation and/or reinterpretation by us and any reader. We will now share these narratives.

Becci:

When I was asked to think about what aspects I liked and disliked the most about PBL, my thoughts focused on one theme – emotional connectedness. The experiences I encountered during the two years of working in this way pushed me to be emotionally connected, sometimes willingly and sometimes by force. As Trainee Clinical Psychologists, one would imagine that our default position would be to connect to those we offer support to, those we work alongside and those we share our lives with; however, this has not always been my experience. It is emotionally draining, challenging and sometimes terrifying to stay connected to the experiences of human life; however PBL has helped me to see the importance of maintaining this connection.

In placing us in small PBL groups, we were obliged to contemplate cases as a team which often resulted in different opinions and fractured relationships. The times I found most difficult, but from which I gained the most, were when we were encouraged to connect to the case. The idea of connection may sound simple but in my experience, it is often anything but. There could be a number of explanations why people chose to or cannot connect to cases they are working with; however, I have found there are often two reasons for non-connectedness: protection and pressure.

At times in my lived experiences, personal and professional, I have seen and heard difficult things. Sometimes shielding ourselves from distress can lead us to shut our eyes and put fingers in our ears and while this strategy at times is important for self preservation, allowing ourselves to connect to the emotion of a person's story, I believe, is invaluable to our work as psychologists. In PBL when I was encouraged by my colleagues and facilitator to allow myself to 'let the story in' I was able to get closer to the individuals behind the 'problem' and consider them sensitively in their context.

PBL afforded us time as a group to think about the person, the family and the system in the cases. My reflections from working in the National Health Service is that sometimes as busy clinicians in busy services,

referrals are discussed and decisions are made quickly due to time pressures. I have experienced this during my career and feel that it is often the unfortunate reality of the services that we often work in. Sometimes when faced with a multitude of referrals, it can reduce our ability to think carefully and sensitively about the person or the family whose details are contained in those pages. PBL enabled me to experience the value of making time to discuss cases. Following the PBL experience, I feel strongly about holding individuals in mind and allowing them to 'step' from the referral page as words and into 'life' in the emotional world.

My PBL reflections are just my thoughts and feelings from the experience and may be different to other members of my group. I hope that in sharing my thoughts, about the importance and difficulties encountered when connecting to a case, those reading this think about their own clinical practice and their own connections.

Becky:

Thinking about what PBL was like for me, I feel I can best describe my experiences using the metaphor of a novel, one which I had been initially hesitant to pick up but in which I soon found myself engrossed, at times unable to put it down yet wanting to delay the end as I began to wonder what I would do with myself once PBL was over. Throughout the story of PBL, I found my role shifted, from that of a pivotal character to an extra, to that of a reader observing what was happening and trying to make sense of the intricate relationships developing among the characters. From these alternative perspectives, I was able to learn the back story to the characters and think about how these shaped the persona of the group. Moreover, I was able to draw on some of the emerging themes and experiences to develop a better understanding of my role in this story (and in other stories in my life). There were times when I saw the pieces of the story slotting into place; giving me answers to questions that I hadn't realised I had asked, and sometimes wished I hadn't learned the answer to.

The ability to move between roles was something I found particularly helpful in the story of PBL. As I found myself becoming more connected to the characters and emotionally involved in the unfolding stories, the ability to shift my perspective gave me the opportunity to choose when it was right for me to connect and when to observe. Indeed, there were times when I could not see the page for the tears in my eyes as I experienced the emotion of the story. However, there were also times when I fought against this, when perhaps because of other things happening in my life, it was too painful to connect with the characters. At these times, it was useful to be able to take a step back and to become the reader once more, or to fold down the corner of the page and put the book down altogether.

As with any good book there were twists and turns, hardship and humour. Each PBL exercise brought with it new challenges, dilemmas, and a deeper understanding of the characters and how they worked together to overcome these obstacles. Nevertheless, there were times when it became difficult to untangle the complexities of the story and see how the story could move forward. At these times, the narrator (facilitator) played a pivotal role, giving us an overview of what had happened thus far and helping us to see things we may

have missed. However, unlike a 'typical' narrator – removed from the story, it was her willingness to join with the group's experiences that made her insights meaningful.

Isis:

Having spent much of PBL feeling completely unable to hold onto any coherent understanding of what was taking place or how I was academically and/or personally benefiting from the experience, looking back now it is a revelation to finally identify just how much of my and the groups experience was defined by autonomy and dependency.

I think most teams would agree that working with others can, on occasion, pose challenges and that a working environment in which your productivity and direction is either hampered or facilitated by others is not an easy path to tread. Having been exposed to the group dynamics which can emerge during the PBL process, I feel that one's approach and comfortableness with autonomy and dependency influences how one manages oneself in this professional situation.

From a personal perspective, being born into a family who valued independence and autonomy over dependency, I found dependency on others for academic success and interpersonal growth frustrating. I also found it difficult to accept that, on occasion, the group was silenced by difficult subject matter and relied on particular group members to voice the issues. However, after further consideration I now wonder whether my values around independence and autonomy were incompatible with others, who may have felt comfortable and more able to tolerate the necessary group dependency and commitment to group cohesion. I also wonder if my drive for autonomy and independence was, in other instances, advantageous and allowed me to voice difficulties without fear of rejection. In short, the boundaries and limitations of my roles and personal position became more obvious and I was able to identify when an alternative role and position might be more helpful.

Due to this, the fact that PBL had the potential to trigger this kind of exploratory thinking has been one of the most tangible benefits of my clinical training as it has given me insight into how I behave in teams, the origins of this behaviour, the professional advantages and disadvantages of taking this type of role and the personal impact of taking a particular position in teams. This has been particularly useful when working in a clinical forum and I find myself more able to take the role of an intelligent rebel, voicing difficulties and presenting alternative perspectives, without emotionally investing to the extent where I feel that my view should become the dominate narrative. I think this is key in avoiding professional frustration and for reducing ones risk of 'burn out'.

On concluding on my PBL experience I feel compelled to highlight how the presence of six individuals, with diverse and sometimes incompatible views, has contributed to my critical thinking, reflective abilities and reflexivity and the fact that I will carry the voices heard during PBL throughout my professional career. They

have been internalised now and serve to chatter, object and present alternative perspectives whenever I attempt to think from an unbiased perspective.

Andrew:

Starting PBL seemed a daunting process. It had been much discussed before even beginning clinical training and I knew it would be an integral part of my experience at the University of Hertfordshire. The prospect of focusing on group process was even more daunting and, as I soon found out, for others in the group. In these early stages there was a shared feeling of wanting to contribute as much as possible to the group task and so focus on process seemed counterproductive. However, once we had accepted the notion of focusing on process we were more able to let things unfold naturally.

As our journey continued I believe we found a good balance between using our group time to discuss task and process. We managed conflict effectively and used it to bring us closer as a group. This was a shared learning curve for us all; however, I believe that I found it particularly difficult as I had a tendency to avoid conflict. This was something that I continued to work on for the rest of my PBL journey.

As we grew more connected as a group we spent time talking about the other groups and in particular, what other groups had said about us. On the one hand this created a sense of group cohesion which strengthened our group connections. However, continually looking out as opposed to looking in started to become unhelpful. On reflection I believe that during this time we were looking to others to help us form our group identity.

Despite our ever-developing willingness to engage in conflict and learn from it, there were times when we avoided having difficult conversations. During these times we felt unconnected as a group and were unable to work on the task. Our facilitator was in the position (in the group, yet objective) to ask us difficult questions and push us into places and conversations we were resisting. This allowed us to become unstuck and connect with each other again.

The impact PBL has had on me leads me to believe it will be the most significant of all my experiences throughout the doctorate of Clinical Psychology. Without doubt, I have learnt that a group is much greater than the sum of its parts, that difficult conversations can result in deeper connections and that it is these connections that are the vital ingredients for successful, personal and professional interpersonal relationships.

Michael

I had the impression that my experience of PBL was very different to the rest of the group. While the rest quickly found their feet and appeared at ease reflecting on themselves, the group, and the task at hand, I found myself getting lost. From the first task, I found myself questioning what was the purpose of PBL, what would I learn from it and how could I learn without someone teaching me?

This initial confusion turned into frustration. I didn't get the point of it, and when others appeared to, I felt like I was being left behind, which further fuelled my resentment. I found myself getting frustrated with what felt like repetitive conversations, and my perception that the other groups members were more interested in talking about 'the group processes' than the actual task at hand. I remember commenting early on that we were reflecting for the sake of reflecting and my view was that moving forward with the task would give us material to reflect on. All this reflection felt self-indulgent and I thought time would be better spent preparing for the presentation.

As the PBL process became more familiar the initial confusion subsided and the exercises became enjoyable and gave us a chance to be creative with our presentations. However, this increased creativity led to competition between the three PBL groups. While most of the group were reluctant to acknowledge this it appeared to me that everyone wanted to make our presentation as creative as possible. I was concerned that this would be at the expense of the content, and for our presentation to be more style than substance. It still seemed that I was not on the same wavelength as the rest of the group.

During the initial task I missed a session that shaped the group dynamics. It was a key moment that appeared to shape the group development. When I returned it felt like I was playing catch-up to the rest of the group. There were two things that happened that helped me to become more connected with the group. Firstly, in the penultimate task I was given the opportunity to express my feelings about my PBL experience so far. This experience, while being exposing and leaving me feeling vulnerable, allowed me to feel understood and validated by the group, which I had not felt until that point. Secondly, just before the final exercise, the group put on a workshop at a PBL conference in Dublin. This stressful but successful experience created a new identity to the group to which I was now part of.

Once these occurred I found myself enjoying the process a lot more, and it opened me up to sharing more of my reflections with the group, which I had been reluctant to do before through fear of further distancing myself from others.

Now I am at the end of my PBL journey I'm still not convinced that I fully understand PBL, but looking back I do think that the five PBL exercises have helped me to develop my reflective skills working with clients and within teams, and I hope that this will help me to become a more competent psychologist in the future.

Louise:

In 1859 Charles Dickens wrote, *"It was the best of times, it was the worst of times..."* While Dickens may not have had PBL in mind when he wrote these words, this is the phrase I think of most frequently when trying to sum up my experiences of PBL to someone who may never have done it. My PBL experiences (both the good

and the ugly) mean so much to me. But even now, having come out at the other end of the process, I struggle to find the precise words to convey what it is exactly that means so much.

The word 'intense' may be near the top of the list, but even if this word appeared in extra large font with neon light bulbs flashing all around it, this still wouldn't encapsulate my experience! But then, how do you sum up such a complex mix of feelings, especially when they seem so dependent on interactions with others in your PBL group?

Throughout my PBL journey, this sense of voicelessness and struggle were key themes for me. When I first encountered hostility in my PBL group work it was the result of attempting to provide comfort and support to a peer who hadn't felt listened to. At the time I was surprised that my efforts were met with reproach and isolation; I now realise that I may have touched upon issues of power and vulnerability we were not ready to explore. I then became paralysed in the face of such emotion for fear of doing or saying the wrong thing, but noticed that it wasn't just me who responded in this way. We all became disconnected from one another when there was unvoiced frustration in the room. It was only through learning to work through the 'icky-ness' (as we had come to call it), that we learnt to reconnect and work together – functionally, adaptively, healthily. As one might expect, this was an ongoing process throughout each PBL experience, in which we knew that we wouldn't get to a good place without addressing 'the difficult stuff', but often we still feared scenes of confrontation.

In the beginning we would turn to our facilitator, as though she had all of the answers. Each time we encountered difficulties, she supported us to create the safety to sit with the 'icky-ness', 'burst the boil', 'unblock the drain' (and many other unsavoury yet accurate phrases!) in order to reconnect. Reconnecting was not about sharing *everything*, but about having the courage to trust that the group could bear each others' emotions. Demonstrating a willingness to have those difficult conversations was the key to establishing a place of 'safety'. Whether one chooses to acknowledge the difficult stuff or not, it will still be there, having an impact. By bringing it in to consciousness, we then have more control over it, and our emotional responses to it. Although this can feel like a huge risk, the pay-off is worth it.

Although I still feel that words may perhaps never do my PBL experience justice, I have come to understand that what my PBL experiences have given me can never be intellectually known and understood; it has to be *emotionally experienced*, warts and all. One has to be authentic within the group, in order to be a group, authentically.

DISCUSSION

Each Trainee was given an overview of the focus of the paper. In order to ensure each voice remained independent, themes were elicited by the facilitator (SK) which were individually shared with each author

ensuring they resonated with their experience. When these were confirmed the paper was shared with all the authors and then a process of ratification ensued. We are aware that the perspective of the facilitator may have influenced the elicitation and interpretation of themes; other themes and a differing focus could have been identified and elicited.

These accounts highlight several recurrent and significant themes in explaining individual Trainee 'journeys' through PBL learning. These themes are: emotional congruity and connectedness, connecting with disconnection and facilitating disclosure through validation and compassion.

Emotional congruity and connectedness

There were strong emotional responses within many of these accounts, ranging from the frustration and confusion described in Michael's account, to fear and futility described by Andrew and Isis respectively. Related to this, these narratives highlight another theme: the dilemma of connecting or disconnecting from a wide array of experiences occurring within the PBL process. It can be risky speaking out and sharing one's internal experience, especially if one believes it differs from other group members. In a group much may remain unspoken. Whilst frustration, anger or anxiety may be more prominent emotions, these may be secondary to another underlying experience, namely vulnerability (Keville *et al*, 2010; Safran & Muran, 2000). Allowing individuals to voice and express their experiences can help people to connect within themselves and/or with other group members. As highlighted in the narratives of Becky, Andrew, and Louise, this requires a milieu of trust and safety, and a facilitator can be pivotal in providing this.

Within these narratives the ability to speak out seemed to facilitate greater connection. Often in a group setting, we may not hear the whole of what is going on. Until people share their story, it can be hard to know why they may be interacting in the way they do. This can sometimes silence and frustrate group members on either side of this dynamic as described in Louise's, Michael's and Isis' narratives. Unlike therapeutic contexts, within PBL there is no assessment process to gain knowledge of the individuals' within the group. In clinical settings, often it is only when a person's context is known that one can begin to understand their position. So, rather like a therapist, one key role of a facilitator may be to wait, to accept and to remain compassionate to each individual's stance. If the facilitator is willing to work relationally modelling openness and emotional congruity, others may do so too; after all, PBL is a relational activity. Together a shared understanding may be built and people may remain congruent (authentic) to their fundamental experience(s). Further, remaining open to the process of what is occurring within one's self and others, can also facilitate this understanding; when this works just enough this can enable the 'flow' to occur, particularly when the group is stuck.

Connecting with disconnection

As illustrated in Becci's, Isis', Andrew's and Louise's narratives an unwillingness to connect emotionally may stilt the flow of the group. Avenues may be shut down, the unsaid may predominate and confusion may ensue.

Sometimes it may be possible to explore this via later reflection or in vivo; for example, as Michael highlights when he was able to speak out about his disconnection. As highlighted in Louise's narrative it may feel like "*a huge risk*" to open up, connect to, and draw others into a discourse, one which requires a certain amount of courage and strength. When this is possible others in a group may highlight a similar struggle. In our experience, it is often a minority that actively maintain disconnection (consciously or unconsciously). By facilitating openings to discuss struggle(s), those who wish to connect, do so, unblocking the stagnation (Keville *et al*, 2009). Further, sometimes just naming the disconnection can facilitate connection. Even if disconnection remains, connecting with disconnection can be a form of connection in itself. Allowing others to be as they are and speak out about their position may be important ingredients in helping the group function enough to work effectively together and produce coherent and meaningful presentations.

Facilitating disclosure: validation and compassion

Many of these narratives highlight the importance of allowing difficulties to be voiced, of the unsaid to be spoken and for this to be welcomed from a position of validation and acceptance. A powerful example of this can be found in Michael's narrative, which describes how being given the space to talk about his feelings towards PBL allowed him to feel "*understood and validated by the group*". When people are unwilling to speak out or feel silenced, this can prevent group members emerging so that all the group members strengths can be utilised. Often individuals within a group may be unaware of what they have to offer, even if it may be evident to others. The process of opening up, speaking out and acknowledging one's vulnerabilities can be powerful and necessary for a group to realise its potential. However, for this to occur group members have to be secure enough to open up and share their fears. As we have noted, connecting with the vulnerability that speaking out can elicit, can mean some remain silent about their true experience. Indeed, without a sense of safety, it is likely that some group members remain reluctant to share. Further, how the group responds to revelations is equally important. Silence after a revelation can impact on an individual's ability to open up in future interactions. Sometimes individuals in the group are able to respond. When they are not, it is the facilitator's role to validate, empathise, contain or contextualise what has been expressed. Ensuring that group members come to a point of relief rather than regret at sharing an emotive experience or vulnerability can be essential in enabling the group to emerge. Conversely, the group may disconnect and recoil if silence is allowed to predominate and people retreat into their shells. By allowing voices to be heard, the group can negotiate difficult hurdles, artificial dams can be broken down and the flow can resume (even if some silences or silencing remains).

The use of implicit and explicit creativity within presentations

This group is at the end of its PBL journey. Looking back, the ability to connect on an emotional level to the case vignette was an important part of their process, as voiced in the accounts of Becci, and Becky. Their ability to convey this to the audience enabled the production of theoretically strong yet emotionally congruent presentations. This group achieved this via implicit and explicit creativity. Implicitly, they were able to explore

personal emotional experiences within group sessions, conveying this to the audience through diverse theory-practice links. Further, they explored group process by reflecting on intra and interpersonal dynamics. Explicitly they used videos, sound recordings, music and performance to convey sensitively emotion underlying the case material. For example, in a child vignette involving domestic violence they effectively used the recording of a 999 call from a child witnessing a violent attack from their father to their mother (thus presenting difficult material others may have avoided); within the learning disability vignette they used music, video, acting and PowerPoint slides to give voice to a non-verbal person with a severe learning disability. Within both of these presentations the wider systems and the emotive experience of individuals within those systems were also considered. At UH, other groups have used letters, metaphors, plays, performance art, dance and role plays demonstrating a wide range of media to portray meaning and understanding.

Implications for Training and Education

The wider social context

This PBL group did not occur in isolation; it occurred within the context of training to become a Clinical Psychologist with a wider cohort of two other groups developing and growing within their own unique ways. These wider contextual experiences interact in diverse ways so that one can never say what is influencing what and in what way. Further, given PBL presentations use clinical material, the wider context is also influenced by the wider systems (for example: family, school, employment, or governmental). Considering these contexts may facilitate understanding, allowing group members to present and accept alternative yet equally valid perspectives. These narratives highlight the opportunity PBL provides in enhancing Trainees' ability to find their voice, speak out, and reduce the desire for their own viewpoint or position to predominate.

Relevance to the wider learning community

Clinical Psychology has a unique advantage to explore the personal within the professional environment. A major component of a Clinical Psychologist's role is working with distress across the lifespan. Consequently, the content of learning for Clinical Psychologists has a focus on the emotion and the context of individuals' lives; for example, the role earlier life experience may have in the aetiology and maintenance of current distress (Hayes et al, 2003).

At UH, PBL provides an opportunity to explore the boundary between the personal and the professional. Over the years many Trainees have embraced this process and the content of their presentations increasingly incorporates personal and emotional contexts to understand and connect with case vignettes. Similarly, awareness of the processes of group working is increasingly becoming more central to their PBL experience. Whilst this may not be directly relevant to other professions, everyone who joins a course or team has their own personal context; this may influence the way they learn or interact with others. Allowing the exploration of process within any learning environment can facilitate more functional group working - enhancing interpersonal skills and facilitating academic development.

Allowing the flow to be as it is

Creating a safe environment where people can express themselves in their own way and at their own rate, can allow the group to function as a whole. Difference is multifaceted: within and between individuals, groups or facilitators; even the facilitation of each group can be different. There is complexity in this myriad of experience, but the bottom line is we are all humans with the same basic needs. Similar to each river, in any given context we are all within the movement of the flow whether we want to be or not. We may be resisting it, directing it, or surrendering to it. Given that trainees have to complete PBL tasks to qualify, each Trainee has to generally flow in the direction the group is going in; yet how they start this process and where they finish may be starkly different. The obstacles in the way may be similar, yet placed in uniquely different positions and ways. Yet we all know a river when we see it; there is uniformity to them. It is only in looking more deeply that we may see how they differ; rather like humans on their life journeys, or in this context, individuals within a PBL group.

Facilitating a PBL group is a unique privilege. It can be an opportunity to be human and congruent. This parallels a therapeutic environment, where we truly sit with an individual and have the permission to find out their unique life stories. With this knowledge we may understand context and underlying reasons for an experience, facilitating us to think how a situation can be different. This may enable movement onto alternative paths more fitting with personal values enabling the achievement of goals (Hayes et al, 2003) and with a greater ability to tolerate distress (Linehan, 1993; Hayes et al, 2003).

References

- Hayes, S.C., Strosahl, K.D., & Wilson, K.G (2003). *Acceptance and Commitment Therapy. An Experiential Approach to Behaviour Change*. New York: Guilford Press.
- Hmelo, C. (2004) Problem-based learning: What and how do students learn? *Educational Psychology Review* 16, pp. 235-266.
- Keville, S., Nel, P.W., Uprichard, S., McCarney, R., Jeffrey, S., Ford, D., & Leggett, S. (2009). Reaching the Journey's End: Reflections on the final phase of a problem-based learning group. *Reflective Practice*, 10(5), 589-599.
- Keville, S., Nel, P.W, Jeffrey, S., Ford, D., Leggett, S., McCarney, R., & Uprichard, S. (2010). In the eye of the storm: Should I stay or should I go? Reflections on the middle phase of a problem-based learning group. *Reflective Practice*, 11(5), 669-680.
- Linehan, M. (1993). *Skills training manual for treating borderline personality disorder*. New York: Guilford Press

Nel, P.W., Keville, S., Ford, F., McCarney, R., S Jeffrey, S., Adams, S., & Uprichard, S. (2008). Close encounters of the uncertain kind: Reflections on doing problem-based learning (PBL) for the first time. *Reflective Practice*, 9(2), 197-206.

Pica, M. (1998). The ambiguous nature of clinical training and its impact on the development of student clinicians. *Psychotherapy*, 35: 361-365.

Safran, J. D. and Muran, J. C. (2000) *Negotiating the therapeutic alliance: A relational treatment guide*. New York: Guilford Press.

Stedmon, J., Wood, J., Curle, C. and Haslam, C. (2005) Development of PBL in the training of Clinical Psychologists. *Psychology Learning and Teaching*, 5, pp. 52-60.