Experiences of Personal and Professional Identities during Clinical Psychology Doctoral Training

Volume 1

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Acknowledgments

I would like to dedicate my thesis to the following people who have inspired me along my journey.

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Abstract

This study explored newly qualified Clinical Psychologists’ (CPs) experiences of personal professional development (PPD) during doctoral training. In particular there was a focus on their experiences of their personal and professional identities.

Within literature relevant to PPD in Clinical Psychology training, personal and professional development were largely conceptualised as separate processes. Yet models of reflective practice would suggest that an awareness of the personal self is necessary for effective clinical work.

The research questions were ‘How do newly qualified CPs experience their personal and professional identities during doctoral training? and ‘How do they experience the boundary between their personal and professional development?’ To respond to these questions seven newly qualified CPs were interviewed regarding their experiences of their personal and professional identities during training. A qualitative research design was employed and Interpretative Phenomenological Analysis was used to analyse the data.

Three superordinate themes were identified within the data: Developing self-acceptance; Enhancing awareness of self and others; Taking risks and managing uncertainty.

Within these results there was a strong message of an inextricable link between personal and professional identities. It seemed that participants started from a position of being themselves, and during training negotiated the dilemmas of learning a professional role. In order to do this they would often look to others for how to negotiate this process. Yet this process could create challenges, as bringing one’s personal self into the professional arena was not always seen as acceptable. If participants were able to show personal aspects of themselves this could make them feel vulnerable and, therefore, these processes held an element of uncertainty. Where participants were able to show their personal selves and felt validated, this allowed for developing self-acceptance. The implications for clinical training and the clients with whom CPs work are discussed.
1. Introduction

The focus of this Introduction was the personal and professional development (PPD) of trainee Clinical Psychologists (CPs). In order to ensure the usefulness of this review, literature relevant to PPD but not directly commenting on it was included, for example on reflective practice (Schön, 1987). The review then discussed identity and how Clinical Psychology (CP) training may influence trainees’ experiences of their identity as part of their personal and professional development.

1.1 The current NHS context for training Clinical Psychologists

At the time of writing, training as a Clinical Psychologist in the United Kingdom required the completion of a three-year doctoral training programme. The aim of CP doctoral training is to train CPs who meet a range of competencies as detailed by the British Psychological Society (2014). On graduation from this training course it is expected that they meet standards for registration by the Health Care Professions Council (HCPC). Programmes include academic, clinical and research components. However, there is variation amongst courses in how this is implemented.

1.2 Experiences of clinical training

The focus of this review was not on the general experiences of trainee CPs but the following studies were relevant as they highlighted some of the challenges that training may present. This was important when considering the personal and professional development of trainees as their experiences of training are likely to influence their development.

Kuyken, Peters, Power and Lavender (1998) investigated stress and the psychological adaptation of psychologists to clinical training. They had a high response rate to their questionnaire and a sample with varied demographics. However, they did not survey third year trainees, which may overlook the developmental trajectory of trainees. Of note they found that appraisal processes, particularly of threat and avoidance coping, predicted much of the variance in psychological adaption. That is, how a trainee construes their experiences during training, and then their approach to coping with these, will impact on how they adapt to the demands of the course. Overall, they concluded that trainees report high levels of perceived stress but as a group do not show significant problems with psychological adjustment. However, more than 25% of trainees experienced difficulties, particularly in terms of self-esteem, work adjustment, depression and anxiety. Significant differences between training courses were found in terms of work adjustment and depression, although the authors did not suggest reasons for this.

Pica (1998) described his own experiences of clinical training and commented on the associated
ambiguity and anxiety. He asserted that this often leads to rumination about therapeutic work when at home. Both Kuyken et al., (1998) and Pica (1998) highlighted some difficult experiences associated with training, which may impact on both the personal and professional lives of trainees. Interestingly, this review revealed that much research about the experience of training to be a Clinical Psychologist has been carried out by trainees themselves, suggesting a need and desire for this kind of research, by those in training.

1.3 The reflective and scientist practitioner models

The BPS Standards for Doctoral Programs in Clinical Psychology (2014) highlighted that one of the overarching goals of training is for trainees to have:

“Clinical and research skills that demonstrate work with clients and systems based on a scientist-practitioner and reflective-practitioner model that incorporates a cycle of assessment, formulation, intervention and evaluation.” (p. 8-9)

The scientist-practitioner model had its origins in the Boulder Conference on Graduate Education in CP (Raimy, 1950). Shapiro (2002) highlighted that “a scientific approach should inform all the work of clinical psychologists” (p. 234), which included their practice drawing on scientific methods and being informed by the research evidence base. The reflective-practitioner model (based on the work of Schön, 1987) focuses more on the process rather than methodology of practice. This model requires clinicians to take a meta-cognitive approach, that is, to stand outside of their work and reflect on what is happening (Youngson, 2009). Programmes with different course philosophies have responded to these competencies in different ways. For example, some courses have responded to the reflective practitioner aspect by utilising experiential learning, in addition to traditional didactic teaching. Perhaps this has been because of the link between experiential learning and self-reflection (Kolb, 1984), which may then improve reflective practice.

It could be argued that the scientist-practitioner model focuses more on technique in therapy, which has led to a focus on evidence-based practice (e.g. see Cochrane, 1972). A reflective-practitioner model could be considered to relate to the therapeutic alliance (e.g. see Bordin, 1979), as the focus is on self-reflection as a therapist, including the clinician’s impact on others (Lavender, 2003). Goldreid and Davilla (2005) highlighted that both therapy alliance and the intervention procedure play a significant role in whether change occurs, suggesting the importance of both models of practice.

This review now focused on reflective practice and its relevance to personal and professional development of CP trainees.

1.4 Reflective Practice

Drawing on the work of Schön (1987), Lavender (2003) described four central concepts to reflective
practice:

1. Reflection in action (reflecting cognitively and emotionally on what one is doing and will do next, in the moment)
2. Reflection on action (engaging in the reflective process retrospectively)
3. Reflection about your impact on others
4. Reflection on the relationship between the work and the self

These concepts all required the clinician to be aware of what they bring to the therapeutic encounter, for example, their assumptions, belief and cultural values. The development of these skills has come implicitly within lecture content and also more explicitly within the personal and professional modules of academic programmes. It also required practitioners to consider how they interact and connect with their client.

The reflective practitioner model suggested that self-awareness is critical for effective practice. This self-awareness could be considered in terms of personal as well as professional development. The importance of bringing the personal into awareness and for this to inform reflective practice has been suggested by several authors, framed as the person of the therapist in therapy (e.g. Aponte, 1992).

Rønnestad and Skovholt's (2003) longitudinal study of almost 5000 therapists showed that engaging in reflective practice allowed them to continue to develop professionally throughout their careers. This reinforces the idea that self-awareness and reflective practice are closely linked to the ongoing development of therapists.

Whilst these issues are seen within CP training programmes, perhaps it is within the training of other professionals that there seems to be a more explicit discussion of personal development. Thus, the literature within Family Therapy training was considered, namely the person of the therapist (Aponte, 1992, p. 269).

1.5 The person of the therapist

Aponte (1992) discussed person of the therapist training for Family Therapists. This was relevant given the potentially personally impactful nature of CP training and the role of CPs as therapists in addition to many other roles. Within Family Therapy training, Aponte (1994) described therapy as a “personal encounter in a professional frame” (p. 1) and, therefore, advocated that to “fathom the therapy relationship” (p. 2) one must understand both the personal and professional aspects of this. He proposed a training paradigm where therapists:

1. Develop the capacity to assess their personal emotions and reactions within the therapeutic transaction.
2. Learn how, in the light of their experience, to interpret what these reactions tell them about clients.

3. Learn to forge interventions out of their model of therapy plus an understanding of client needs.

He acknowledged some ethical issues in relation to training therapists in this way and differentiated between training being therapy and therapeutic (Aponte, 1994, p. 2). He suggested that in this training model the aim was for trainees to resolve personal issues. The reasoning for this was to improve their performance as therapists and, by doing so, this was therapeutic rather than therapy for trainees. Although Aponte (1994) promoted the importance of the personal in training, as a therapist there is little acknowledgment of trainee choice. He suggested asking trainees to sign a consent form. However, it is improbable that they could be fully aware of the changes that may occur and whether these will be construed as positive or negative. Further, the changes that happen for that trainee may depend on how much they chose to engage with the process, which Aponte (1994) did not touch on. Clearly there was the potential for this approach to training to be a contentious debate, with some advocating this more personal stance and others advocating a more professional focus to PPD.

Simon (2006) proposed placing the therapist worldview as central in the training of Family Therapists. He suggested that for therapists to be maximally effective their model of working needs to match their underlying personal worldview. He did not provide evidence for this hypothesis. However, he suggested that congruence between the therapist worldview and model worldview:

“turns a model into an instrument for deep and authentic self-expression on the part of the therapist, that which is therapeutic in the model and that which is therapeutic in the therapist are mutually activated and enhanced, with the result that the therapist becomes maximally effective.” (p. 336)

Although Simon (2006) acknowledged that this model does not take into account the importance of the client worldview, he did not consider this to be an important problem with his model. This seemed a relevant consideration particularly as Simon does not provide evidence for the therapist’s worldview being more important than the client’s.

The mutual influence of therapist and client in Family Therapy was considered further by Mason (2012), who stated that therapists should ask questions of themselves not just of others. For example, they should examine if the patterns in their family of origin or culture might be abiding or constraining their clinical work. Mason (2002) highlighted the use of the self in two ways: the direct expression of self (e.g. sharing an aspect of one’s history), and the indirect utilisation of self (e.g. using a connection with oneself as a theme without stating personal ownership).

Although these authors focused on Family Therapy, the writings seemed to suggest that the training of
therapists should include both personal and professional development. This allowed for the mutual influence of therapist and client to be acknowledged and managed appropriately.

Further to the literature in Family Therapy, Gale and Schröder (2014) completed a meta-synthesis of qualitative studies about experiences of self-practice in Cognitive Behavioural Therapy (CBT) training. This referred to therapists’ use of CBT strategies on themselves. Although this meta-synthesis included some overlapping articles, these covered different aspects of the analysis and was therefore deemed appropriate (Finfgeld, 2003). Gale and Schröder (2014) concluded that self-practice enabled increased empathy of therapists for clients, understanding of the benefits and difficulties of engaging in therapy and increased confidence in their competence. This differed slightly from the Family Therapy perspectives (e.g. Aponte, 1992, 1994), as it did not suggest a focus in training on personal development. However, this does suggest the benefit of shared experience with clients and reflection on the experience of therapy.

Perspectives on the issue of the personal self of the therapist are also presented in the psychodynamic literature. The thinking around this can be seen in literature on therapeutic or treatment boundaries. Within psychodynamic literature the treatment boundary is seen as “providing the built-in structure to contain and process communications” (Bridges, 1999, p. 293). Bridges (1999) posits that boundary negotiations “illuminate patients’ most painful transferential issues” (p. 292). Yet she goes on to capture the differing perspectives on these negotiations within the psychodynamic field:

“The conflict and controversy in the field are manifested in the heat generated by differing case formulations and the resulting technical interventions. Some practitioners favor reliance on the traditional methods of protecting the treatment frame, avoiding even the appearance of boundary crossings and acknowledging the implicit authority of the therapist. Other theorists favour an uncharted treatment approach of mutual discovery between therapist and patient. This path allows for novel outcomes that may be enormously valuable but may not resemble conventional treatment boundaries. Passionately held contradictory positions espoused by senior clinicians make formulating psychodynamic boundary interventions a conceptual and clinical minefield for therapists. Clinicians who deviate from traditional practice risk censure from those who consider they have entered a danger zone of boundary fluidity. Other theorists dismiss traditional interventions as exclusively limit-setting techniques that diminish mutuality and empathic dialogue. An integrated approach, one that honors traditional parameters and yet encourages an openness to creative, uncharted outcomes within ethical frames, is hard to find.” (p. 292)
It would seem that for some bringing the personal self into the therapeutic frame could be damaging as this would be crossing a boundary (e.g. Epstein, 1994). Therefore, this is avoided through rigid personal-professional boundaries. Yet, in recent psychodynamic literature there has been a suggestion of the value of mutual discovery and empathic dialogue (e.g. Coale, 1998). This would suggest a need for the therapist to draw on their personal self in order to engage with these processes.

Bridges (1999) goes on to highlight that psychodynamic relational therapists “value a greater mutuality and humanness in the treatment relationship” (p. 293). She writes about the “relational experience” of therapy which “allows the individual to experience and develop new sense of the self and expand and deepen affective competence” (p. 294). Such a relational experience where there is humanness may be thought to require the therapist to show something of their personal self, even whilst maintaining appropriate and useful therapeutic boundaries.

It seems that there are conflicting opinions regarding the personal-professional boundary within the psychodynamic literature. Traditional psychodynamic perspectives, which perhaps underlie modern psychological perspectives, purport that a rigid boundary between the personal and professional self is necessary. However, more recent literature has proposed a shift towards a humanness, which implies aspects of the personal self being shown within the therapeutic frame.

In Section 1.5 the issue of personal and professional development was considered, particularly in relation to personal development within the training of other therapeutically active professionals. This Introduction now considered, more explicitly, personal and professional development within CP training.

1.6 Definitions of Personal and Professional Development

1.6.1 Definitions: Personal development

A number of definitions have been proposed in relation to personal development each considering the self. For example, Gillmer and Marckus (2003) defined personal development in CP training as that:

“part of the training that is dedicated to developing in trainees a capability to reflect critically and systematically on the work-self interface. This process is directed towards fostered self-awareness and resilience.” (p. 20)

Mearns (1997) conceptualised personal development as the processes of increasing self-awareness and self-knowledge. He proposed four ways in which clinicians can develop personally:

1. Self-structure (e.g. introjected beliefs, personal identity, and degree of self-acceptance).
2. Self in relation, which pertains to our understanding of how we relate to those around us.
3. Self as therapist, including the ability to monitor the reflexive relationship between personal and professional experiences.

4. Self as learner, including a willingness to critically appraise and take responsibility for one’s own learning.

According to Mearns (1997), personal development in any or all of these areas is crucial for becoming and continuing to be reflective and reflexive. The development of the self as therapist (Mearns, 1997, p. 36) highlighted the boundary between personal and professional contexts; that is, the impact of clinical work on the individual and the impact of personal life experiences on clinical work. The reflective-practitioner model focused on what individual clinicians bring to the therapeutic encounter; however, conversely the therapeutic work may also impact on the clinician. The reflexive relationship between personal and professional contexts may be particularly pertinent in the personal and professional development aspects of training, where trainees are learning to negotiate the boundary between their personal and professional lives.

Hughes (2009) stressed the importance of personal development in CP because developing personally helps clinicians contribute to their profession. A number of advantages were cited including that: it contributes to self-awareness which can decrease risk of harm to others; it gives resilience in dealing with problems and dilemmas enabling clinicians to take care of themselves; and finally that clinicians should practice what they preach.

Having considered personal development within the context of CP training, professional development was considered.

1.6.2 Definitions: Professional development

Elman, Illfelder-Kaye and Robiner (2005) of the Professional Development Working Group defined professional development in professional psychology as:

"the developmental process of acquiring, expanding, refining and sustaining knowledge, proficiency skill, and qualifications for competent professional functioning that result in professionalism. It comprises both (a) the internal tasks of clarifying professional objective; crystallising professional identity; increasing self-awareness and confidence; and sharpening reasoning, thinking, reflecting and judgement and (b) the social/contextual dimension of enhancing interpersonal aspects of professional functioning and broadening professional autonomy." (p. 368.)

As can be seen within this quote, Elman et al. (2005) proposed two key elements of professional development and professionalism. The former highlighted the importance of clinicians interacting within any encounter; by its very nature this suggests a personal or self-element, given this is about
how people communicate. The latter of these is difficult to define and open to differing opinions as to its meaning. However, they did provide examples such as critical thinking and conceptualising problems from multiple perspectives. Elman et al.’s (2005) suggestions were useful in conceptualising professional development; however, this understanding does not originate from research and is based on the American CP system.

1.7 Models of Personal and Professional Development

It was interesting to note that given the difficulty of even disentangling the personal within definitions of the professional, in much of the literature personal and professional development are written about separately. Therefore, within this section these have been separated into models of 1) personal development 2) professional development and 3) personal-professional development (PPD) in CP training. However, this does not necessarily fit with what the models say, as the models of personal development often refer to their importance in relation to professional development. Thus, within this review there were some ongoing reflections on this categorisation.

1.7.1 Models of Personal development

Hughes (2009) proposed an integrated model of personal development which included 4 realms in which personal development can occur:

- Self known and unknown and self-identity (including aspects of difference and diversity)
- Self in relation to others: seen and unseen
- Self in community
- Self in role at work

She highlighted that these realms are relevant to the variety of roles taken by CPs (e.g. team working, consultancy and research) which require individuals to work in partnership with others. Hughes (2009) based her model on Mearns’ (1997) conceptualisation of personal development. Whilst there is no evidence given for the model, her focus on personal development may be useful in understanding the personal aspect of PPD. In Hughes’ (2009) model, the development of self-identity is seen as integral to personal development. The concept of identity is also applied to the professional domain and will be explored in Section 1.9.

Building on Hughes’ (2009) initial conceptualisation, Youngson and Hughes (2009) hypothesised that personal development begins with clues, which when they arise (for example, via learning, reading or personal therapy) hint at an issue which may require internal exploration. This internal reflection may involve a consideration of the meaning of the clue, and this in turn, may result in an increased awareness or understanding. If this is not achieved, further reflection may be required and the process of increasing awareness may continue. Whilst there were useful aspects to this model, there was no
empirical evidence to support these processes. Further, the model lacks specificity, for example, there is no explanation about how these clues are detected other than a felt sense.

Having considered models of personal development, models of professional development were considered.

1.7.2 Models of professional development

No detailed models of professional development within CP domains were found, apart from a brief model in *The Clinical Psychologist* (a magazine publication of the American Psychological Association). In this article Slavich (2006) proposed that for optimal advancement in the profession it is important that experiences in research, teaching and clinical work should be congruent with a target image of how the trainee wanted to be. No evidence is provided for this model other than the personal experiences of the author. However, this seemed to reflect some of the arguments from Simon (2006). The congruence Slavich (2006) discussed could be between personal beliefs (or therapist worldview, as discussed by Simon) and professional experiences.

More detailed models of professional development were found within the Psychotherapy professions. For example, Friedman and Kaslow (1986) proposed six stages of the supervision process which link to the development of professional identity in Psychotherapists. This was a normative model which they say does not cover “problem students” (Friedman & Kaslow, 1986, p. 31); for example, students who they define have problems with authority. This was a curious position, and one that may be open to subjective interpretation regarding what constitutes a problem. Further, this did not seem to recognise variation within students and the individual experiences they may have, even if they are not identified as “problematic”. Furthermore, these stages seemed to be linked to the authors’ experiences rather than having a research basis. Thus, given this is not a model developed within CP, it will not be explored further. However, their presentation of a move from dependence to greater autonomy and independence during training may be relevant and link with additional literature (e.g. Rønnestad & Skovholt, 2003). This literature may enable a better understanding of professional development and so this model was further explored.

Rønnestad and Skovholt (2003) proposed six phases of professional development amongst Psychotherapists and Counsellors based on a 15 year study of almost 5000 therapists. This included the beginning student phase, the advanced student phase and the novice professional phase. Although professional development amongst Counsellors would be expected to be different to that of CPs (owing to the greater variety of roles a Clinical Psychologist may take), this phase model is useful, given that training courses in CP differentiate between the beginning (year 1), middle (year 2) and final (year 3) phases of training and post qualification. Rønnestad and Skovholt (2003) described the move from lay helper to the role of professional as taxing and intensely challenging. In the advanced
student phase therapists are expected to function at a “basic professional level” (p. 14) and, therefore, practitioners may be overly cautious in their work. The novice professional phase encompassed the first years after graduation where therapists often express feelings of being on their own, with this being a time for reflection on their training experiences (e.g. seeking to confirm the validity of training). This study did not refer to the identity of the therapist but it would seem that passing through these phases of development could be associated with changes in professional identity, for example from a student identity to a professional one.

Models that seek to combine personal and professional development in CP training were now considered.

1.7.3 Models of Personal-Professional Development during Clinical Psychology training

Sheikh, Milne and MacGregor (2007) proposed an integrated model of PPD for CP training. They identified that reflection is central to PPD, drawing on Kolb’s (1984) experiential learning model but add a focus on the learning context of CP training. They highlighted that the key functions of PPD are enhanced self-awareness, resilience building and heightened reflection ability (drawing on the work of Gillmer and Marckus, 2003). They then considered methods of PPD, which are embedded within relationship and support systems. This model appeared to include all valid components of PPD and was well thought out, though it tended to focus on content of PPD (e.g. learning priorities) rather than the process. They highlighted that processes of PPD require trainee engagement, which can depend on the individual’s personality and attitudes. However there is little comment on personal experiences of PPD during training.

Personal therapy has been proposed as a potential method for promoting PPD for psychological therapists (e.g. Lavendar, 2003 and Orlinsky, Norcross, Ronnestad and Wiseman, 2005). Macran and Shapiro (1998) in their literature review found reported benefits of personal therapy for various types of psychological therapists, including Psychotherapists, Counselling Psychologists and Clinical Psychologists. These benefits included increased therapist empathy and warmth (non-specific therapeutic factors) and improved maintenance of therapist wellbeing. They also highlighted the value attached to personal therapy by therapists. However, there was no clear evidence that personal therapy increased therapist effectiveness. They also noted significant methodological flaws in the research, for example, selection bias.

Wigg (2009) in her more recent review of literature from 1998-2009, also concluded there is a lack of empirical evidence that clients benefit from therapists’ personal therapy. However, there are now more studies suggesting this potential outcome (e.g. Macran, Stiles & Smith, 1999; Grimmer & Tribe,
Yet, Wigg highlighted that the literature does not provide a comprehensive model to explain the benefits of personal therapy for therapists.

Despite the evidence for the benefits of personal therapy for psychological therapists, it is not a mandatory aspect of CP doctoral training in the UK. This differs from other UK based psychological therapist trainings, such as that of Counselling Psychology. This is perhaps owing to some of the dilemmas around making personal therapy a mandatory aspect of training. For example Sherman (2000) examined the experiences of facilitators of mandatory personal therapy to CP trainees in the USA. This study highlighted issues in terms of: readiness for change; motivation to engage with therapy and the ethical dilemma of providing therapy without a presenting problem. Further to these, there may be concerns around training courses becoming personally involved in the lives of their trainees. Elman and Forrest (2004), in their interviews with training course directors, highlighted potential issues in recommending personal therapy to trainees. There was a conflict for course leaders in balancing confidentiality and course accountability for assessment of trainees. However, interestingly course directors who were more actively involved in the process of trainees’ accessing therapy had fewer concerns about this conflict.

There is a dilemma for training courses between the potential benefits of personal therapy for therapist development and the difficulties of mandating therapy. This is perhaps why this remains an area of debate in the field of Clinical Psychology.

Other aspects of training have been investigated in relation to PPD, including supervision (Milne, 1989; Scaife, 2009), reflective practice/personal development groups (e.g. Knight, Sperlinger & Maltby, 2010; Wigg, 2009) and mentor relationships (e.g. Clark, Harden & Johnson, 2000). These tended to focus on methods for promoting PPD rather than how trainees make meaning or engage with this development.

### 1.7.4 Reflections of the separation of personal and professional development

As can be seen within the PPD literature, there was often a division between a therapist’s personal and professional development. Although a link may be suggested, models still explicitly conceptualised them as separate processes. Yet, as discussed here, authors often from other professional contexts (e.g. Aponte, 1994, Simon, 2006), have discussed the importance of the person of the therapist (i.e. the personal) and its relevance for professional roles. Thus, there is a dilemma in the conceptualisation of personal and professional development as separate processes, and alongside this, models and our understanding of PPD often overlap and interact.
1.8 PPD during Clinical Psychology Training

1.8.1 Implementation of PPD during Clinical Psychology Training

PPD in CP training has been viewed as an important component within the curriculum. Gillmer and Marckus (2003) identified that 35% of courses fulfilled the criteria for a good course regarding PPD, in that PPD was clearly defined, with a systematic opportunity to develop professional self-awareness. This might have included a clearly demarcated program within the curriculum and with diverse and imaginative assessment processes. Further, competency was developed in understanding the interactions between self, others and work. There was a view that PPD was a core competency within which trainees could cultivate a reflective attitude in a personal assimilation of theory and practice.

Whilst Gillmer and Marckus (2003) raised relevant issues in the setting of PPD in the training curriculum it is uncertain whether the categorisation of courses into good and bad is helpful. Although PPD is not currently classified as a core competency, trainees on these courses may be encouraged to develop in ways which is not defined as PPD. Course philosophy may be important in the way PPD is viewed within the curriculum, however, this paper did not record this positioning, making it difficult to consider the influence of differing philosophical perspectives on the value placed on PPD.

1.8.2 Experiences of PPD during Clinical Psychology Training

Having considered the literature on what CP courses may offer in relation to PPD, it is helpful to turn to the perspective of the trainee, i.e. the recipients of PPD. Miller’s (2009) service-evaluation project of the Leeds CP doctoral programme explored the personal development of CP trainees during clinical placement supervision. He utilised the critical incident technique (Flannagan, 1954, cited in Miller, 2009) where trainees were asked in a questionnaire about a critical incident or experience which led to personal development and how this was managed in supervision. This technique has some flaws in that it assumes personal development is step-wise (prompted by a so called critical incident) when it is possible that some aspects of personal development occur gradually over time. However, using this technique Miller identified some key themes around personal development. The precipitating event was often experienced as involving uncomfortable thoughts and feelings. Having said this, this would be expected given the methodology. In terms of the role of supervision, discussion and space to reflect were highlighted as central themes. Personal development outcomes included facilitating new understanding in relation to personal emotions, the self and others, and gaining in confidence. The conclusions of this project were limited given the sample size, yet these outcomes could be seen as important in terms of both personal and professional development.

In relation to experiences of specific PPD training methods, Keville et al. (2013) discussed how trainees managed the experience of Problem Based Learning (PBL) in CP training. This method of
experiential learning brings personal experience into the professional context and Keville et al. (2013) argued that this allows for reflection and, thus, improves clinical practice. They discussed their observations wherein trainees alternate between emotionally connecting and disconnecting as a way of managing potentially difficult experiences. It seemed possible that trainees may manage the experience of training as a whole, and navigating the personal-professional boundary across the training experience, in a similar way. This has important implications for reflective practice and personal development, which would require some connection with the training experience and clinical work as part of this.

Several authors have raised the concept of identity in relation to PPD and proposed that trainees can experience changes in their identities (e.g. Gillmer & Marckus, 2004, Elman et al., 2005, Youngson & Hughes, 2009). Therefore, this review will now focus on the personal and professional identities of trainee CPs.

1.9 Identity and PPD

1.9.1 The language of ‘self’ in the social sciences

Leary and Tangney (2011a) identified several ways in which the social sciences commonly use the word self. In this research the self was understood as the experiencing subject, that is, the psychological process that is responsible for self-awareness and self-knowledge. In the literature many words are used to refer to the self (e.g. identity, self concept, sense of self, personhood) and here these terms were considered interchangeable.

1.9.2 The development of identity

There have been many theories which account for the way a person's identity develops. It is outside the realm of this review to consider all literature related to identity, however, substantial books are available of the topic (e.g. Leary and Tangney, 2011b). This Introduction attempted to cover some pertinent points in the literature regarding the development of identity.

1.9.3 Stage models of identity

Outside of training to be a Clinical Psychologist there were several theories and accounts of how a person's identity or sense of self is formed and maintained. Earlier identity theories tended to involve stages of development and suggest that identity is fixed and tangible. For example, Erikson's (1968) psychosocial development theory stated that throughout each person's lifetime, they experience different crises/conflicts. Each of the conflicts arises at a certain point in life and must be successfully resolved for progression to the next stage. Marcia (1966) suggested that one's sense of identity is determined largely by the choices and commitments made regarding certain personal and social traits.
However, it is notable that these theories have been criticised for lacking clarity and explanation for the progression through the stages (Miller, 2002). These approaches have also received criticism for their sole focus on macro rather than micro level processes (Pasupathi & Hoyt, 2009). Indeed, there is a focus on identity as a construct, rather than a process that might be contextually driven, involving fluidity within the stability of the construct itself.

### 1.9.4 Alternative understandings of identity

Social constructionism has provided an alternative perspective on identity to that of the earlier stage theories. Gergen (2009) argued that individuals or bounded entities are social constructs which emerge from relationships and the larger social context. Further, Bruner (1990) highlighted that the self is also situated within cultural and historical contexts. From these perspectives the formation of identity is understood through a person’s social interactions, the context in which they occur, and the current and historical narratives available to them (Elliot, 2005).

The social constructionist approach is consistent with a Narrative understanding of identity. Narrative theories, for example Kirkman (2002), posited that there is no such thing as the fixed and unchangeable single self, suggesting identity may be better understood as a process rather than a construct. De Fina, Schiffrin and Bamberg (2006) highlighted four aspects of the social constructionist perspective of identity. They stated that identity is a process that:

1. Takes place in concrete and specific interactional occasions
2. Yields constellations of identities instead of individual monolithic constructs
3. Does not simply emanate from the individual, but results from processes of negotiation that are eminently social
4. Entails discursive work (Zimmerman and Wieder, 1970)

Narrative theories of identity development have focused on events that occur in a person’s life that are interpreted and evaluated (Bruner, 2004). Kirkman (2002) suggested that it is the making sense of these experiences which reflects and constructs the individual’s identity. In this way identity is seen as the stories that are told by the person about themselves. Riessman (2002) suggested that constructing a narrative about one’s life allows for continuity over time and serves to represent past and future selves. This begins in childhood as personally meaningful events are interpreted and told as stories to the self and others. This then continues throughout the life course as a way of representing the self (Kirkman, 2002). In line with social constructionist perspectives, Narrative theories have also seen the self as culturally defined and dependent on the ideas of the particular society in which the individual lives (Atkins, 2004).
1.9.5 Group identity

Another aspect of identity research has related to processes of categorisation and membership definition (e.g. Antaki and Widdicombe, 1998). This links to Foucoults's (1984) ideas that identity is a process embedded in social practices, which frame the ways individuals and groups present themselves to others. This Introduction did not cover this aspect of identity. However, it is important to recognise that identity can be seen both at an individual and group level. The group level has relevance for understanding membership of a profession such as CP.

In recent times there has been a move towards an anti-essentialist vision of the self. This rejects the idea that there are natural identity categories, for example, studies on gender identity highlight that people can represent themselves in ways that are different to those that their personal characteristics would suggest (Barrett, 1999). This suggested that a more flexible understanding of what is required to be member of the CP professional could be more useful.

1.9.6 Identity and PPD

Given that the term identity has been used within the area of PPD, it seemed that the concept of identity has relevance for the personal and professional development of trainee CPs. Several models and definitions of PPD refer to changes in personal and professional identity (e.g. Gillmer & Marckus, 2003, Elman et al., 2005, Youngson & Hughes, 2009).

Cheshire (2000) explored the professional socialisation of CP trainees, using a longitudinal design interviewing participants at consecutive stages of their career (Assistant Psychologist, year 1, 2 and 3 Trainee CP and post qualification). Cheshire (2000) took the position of professional socialisation being akin to the development of professional identity. Cheshire conceptualised professional socialisation in line with Jacox’s (1973) definition:

“process by which a person acquires the knowledge, skills and sense of occupational identity that are characteristic of a member of that profession. It involves the internalisation of the values and norms of the group into the person’s own behaviour and self-conception” (Jacox, 1973, p. 6)

She highlighted the work of Bucher & Stelling (1977) who discussed how the training programme influences professional identity, commitment and career choices. There was a developmental trajectory highlighted within the process of training, thus, Cheshire (2000) made some important findings regarding professional socialisation, including that this process begins before training. She also drew conclusions regarding experiences of different stages of training (e.g. anxiety and uncertainty in year 1, a greater belief in oneself as a psychologist in year 2 and an increased confidence and consolidation of learning in year 3). Transition to qualified status was characterised by a
welcoming of autonomy but also stress.

Considering this developmental process further, wherein a member develops a professional identity by being socialised into the profession, Cheshire (2000) then focused on factors which aid or interfere with this socialisation (e.g. role conflict, role ambiguity, supervisory relationships and the interdeterminacy of professional knowledge). However, she offered some critique from trainees’ reports, for example stating that “individuals become well-versed in the rhetoric of the profession, the majority retain some scepticism about aspects of this discourse” (p. xi). This suggested that there can be a more open and fluid understanding of professional identity in CP. An acceptance of differing perspectives and epistemologies is more in line with a social constructionist conception of identity, which does not focus on a fixed identity or fixed membership and categorisation.

Schoenhotz-Read (2009) conducted a narrative study of the professional development of midlife women training to be CPs in the USA. She considered the role of gender as a focus of her study and found that the 12 women interviewed experienced changes in their personal and professional lives and identities. The attention which is drawn to the link between an aspect of personal identity (e.g. gender) and professional identity, suggested that professional identity cannot be considered in isolation.

Further to these studies, several personal accounts (e.g. Baker, 2002) discussing some of the challenges faced by trainees in developing professional identity and negotiating the training experience, have been published in Clinical Psychology Forum.

The studies and articles above considered the relationship between training to be Clinical Psychologist and the identity of trainees. Whilst the main focus was on development of professional identity, little consideration is made of the importance of personal development, despite it often being referred to. Yet the literature reviewed earlier (Sections 1.5-1.7) has highlighted the importance of personal development on becoming reflective practitioners and, therefore, competent CPs in therapeutic contexts.

Thus, in relation to identity and personal and professional identities Nel (2006), a practicing Clinical Psychologist, explored Family Therapy trainee perspectives on their training. Nel also found that the process of family therapy training provoked a re-evaluation of established personal, professional and relational identitites. He also discussed the fluidity of trainees’ identities during training, framing training as a developmental process. As Interpretative Phenomelogical Analysis was used the findings are not considered generalisable to CP training. However, they are relevant to this study as there is a focus on developing identity during a taxing training process which involves personal and professional aspects. The use of the concepts of stability and fluidity within this context was suggestive that training destabilised earlier identities, allowing for new identities to emerge. However, there is limited
discussion of the possibility that previous identities may remain central within the process.

Nel's (2006) study highlighted that relational, personal and professional identities are relevant in the training of Family Therapists, yet there is no similar research with this pluralistic understanding of identity regarding CP training. Valon (2012) explored personal and professional identity change of trainee CPs within PBL. This research goes some way to linking the personal and professional aspects of CP training and identity but is focused on one method of PPD.

1.10 Conclusions and Rationale

Several authors suggested that CP trainees experience a change in identity during training. This is often briefly referred to in the PPD literature but not explored further. Some studies have explored identity in the context of training. However, these have tended to focus on professional identity development. Yet models of reflective practice tell us that personal development is vitally important in the development of reflective practitioners and is, therefore, relevant when considering identity during training.

Much of the research on personal and professional development of CPs is focused on content of development (e.g. models of PPD, implementation, arguments regarding what should be included) but less so on the process of PPD. This research will, therefore, focus on the process of PPD. In particular it will aim to develop a deeper understanding of the process of changes in both personal and professional identity through PPD. This research will have implications for the process of PPD and how this is approached on CP training programmes.

1.11 Research questions

The main research question was:

- How do newly qualified Clinical Psychologists experience their personal and professional identities during doctoral training?

This was supplemented with a subsidiary question of:

- How do they experience the boundary between their personal and professional development?

1.12 Literature search and review strategy

This Introduction aimed to review literature related to identity and personal and professional development during training to be a Clinical Psychologist. As part of this, relevant literature on reflective practice was also reviewed. Relevant literature from sources other than those directly related to CP (e.g. from Family Therapy, Counselling Psychology, Psychotherapy) were included where appropriate or where there was limited research in the CP domain.
Articles relevant to this review were identified through systematic searching of the following key psychology, social science and medical databases: Web of Science™ databases (including Web of Science™ Core Collection, BIOSIS Citation Index, Current Contents Connect®, Data Citation Index, Derwent Innovations Index, MEDLINE®, SciELO Citation Index, Zoological Record®), NHS Evidence for PsycINFO, PubMed and Google Scholar.

Several search terms were combined to ensure relevant articles were identified. For example: personal development; professional development; personal-professional development; identity; self; Clinical Psychology; psychologist; psychotherapist; training and trainee. The abstracts of studies were reviewed for direct relevance to this research. If found to be relevant, the remainder of paper was reviewed for relevant findings and any limitations or strengths.
2. Methodology

2.1 A qualitative approach

This study used a qualitative design as the aim was to provide an account of newly qualified CPs experiences of their personal and professional identities during doctoral training. Qualitative methodologies can facilitate in-depth study of personal experiences (Barker, Pistrang & Elliot, 2002) such as CP training; therefore, this was deemed an appropriate methodology.

2.2 Interpretative Phenomenological Analysis

This research utilised Interpretative Phenomenological Analysis (IPA) (Smith, 1996, Smith, Flowers and Larkin, 2009), a qualitative research approach. It is committed to the “examination of how people make sense of their major life experiences” (Smith et al. 2009, p. 1), such as CP training. In particular there is a focus on engaging with individuals’ reflections of what happened to them. IPA has been informed by concepts from three areas of philosophy of knowledge: phenomenology, hermeneutics and ideography. Smith et al. (2009) provided a fuller exploration of these; however, they will be briefly described here in relation to IPA.

Phenomenology is a “philosophical approach to the study of experience” (Smith et al., 2009, p. 11). This has tended to focus on the experience of being human and how humans experience their world. A key point in phenomenology is the “view of the person as embedded and immersed in world of objects and relationships, language and culture, projects and concerns”. This highlighted the person’s experience within their context of their lived world. This places the person in relationship to the world around them, rather than as in isolation. Drawing on the theory of phenomenology, IPA enables researchers to examine individuals’ experiences of their lived world. In particular there is a focus on experiences which are of particular significance to the person, in the case of this research CP training.

Hermeneutics is the “theory of interpretation” (Smith et al., 2009, p. 27). An important aspect of this theory is the hermeneutic circle, which is that to “understand any given part, you look to the whole; to understand the whole, you look to the parts.” This is part of the theoretical underpinning of the iterative process of IPA: where there is movement back and forth through a range of ways of thinking about the data. That is “our entry into the meaning of the text can be made at a number of levels, all of which relate to each other, and many of which will offer different perspectives on the part-whole coherence of the text” (Smith et al. 2009, pg 28). IPA involves a “double hermeneutic” (Smith and Osborn, 2003, p. 3). In the context of this study this refers to the process of the researcher making
sense of the participant, who is making sense of their experiences of personal and professional identities during CP training. Therefore, the researcher can only access the participant’s experiences through their reports of it and also “through their own experientially informed lens” (Smith et al. 2009, p. 36). The participants meaning making is considered to be first order and the researcher’s sense making is second order (Smith et al., 2009).

Idiography is concerned with the particular as opposed to the nomothetic, which focuses on making claims at a group level and aiming to establish the general laws of human behaviour (Smith et al., 2009). IPA is an idiographic approach in that, firstly, there is a focus on detail and depth of analysis; and secondly, on experiences of a particular phenomena from the perspective of particular people in a particular context. Idiography does not eschew generalisations but locates them in the particular and, therefore, develops them more cautiously. Thus, the findings and conclusions of this study were generalised cautiously. IPA is considered to have an “idiographic sensibility” (Smith et al. 2009, p. 37) in that there is a focus on particular instances of lived experience. In the case of this study this refers to participants personal experiences of CP training.

2.3 Consideration of alternative methodologies

Given the potentially developmental process inherent in CP training, a Narrative analytical approach (Crossley, 2000) was considered as an alternative to IPA. Narrative methodologies are concerned with the process and structure of storytelling, with careful analysis of the function of that narrative within a particular context and how that evolves over time (Smith et al., 2009). However, Narrative analysis is more interested in the content and structure of stories that individuals tell rather the meaning making about a subjective experience. An IPA approach seemed to fit more closely with the aims of this study, where the meaning making around the subjective experience of CP training was being explored. Furthermore, I was particularly drawn to the meaning making participants made, perhaps given my personal experience of making meaning from my own CP training.

Grounded theory (Glaser and Strauss, 1967) was also considered as an alternative methodology. The aim of Grounded Theory is to construct theoretical explanations for psychological phenomena. As this was a novel research area and it was important to remain open to a range of experiences, it did not seem helpful to try to fit participants’ experiences into existing categories or theoretical literature (Dey, 1999). Furthermore, Smith et al. (2009) recommended that in IPA sufficient analysis should be completed so that group-level themes emerge and analysis goes beyond simple description. This allows both an openness to a full range of experiences and the potential for developing a theoretical understanding of the data.
2.4 Researcher’s relationship to this research and epistemological stance

Elliott, Fischer and Rennie (1999) highlighted the importance of acknowledging one’s position as a researcher and being self-reflexive, in order to ensure validity of the findings of the study. Given that at the time of completing this research I am a trainee Clinical Psychologist investigating experiences of CP training, this is considered peer research. Therefore, my epistemological position and personal experiences will have influenced the interpretations I made within the IPA. Measures were taken to be self-reflexive and bracket my experiences (see Section 2.10). However, as Smith et al. (2009, p. 25) highlight, bracketing can only be “partially achieved” owing to the fore-conception the researcher brings to the interview process. Therefore, it is important that I state my position as a researcher.

As a trainee Clinical Psychologist undergoing training I have experienced changes in myself on both personal and professional levels, which is what drew me to researching PPD during training. Owing to my experiences, I view my personal and professional identities as closely linked, which sparked my interest in the relationship between these. Experiences during CP training have been personally meaningful and impactful on my personal relationships. Conversely, my personal experiences have influenced me professionally.

In this research I took a social constructionist stance, that knowledge is both culturally and historically specific; that meaning is constructed between people; and that language is the mechanism through which we make sense of life (Burr, 2003; Lock and Strong, 2010). This philosophy is in line with my own personal epistemology.

2.5 Participants

2.5.1 Recruitment

Purposive sampling utilises closely defined groups for whom the research question will be significant (Robson, 1993; Smith & Osborn, 2008). In this study participants were those who had graduated from CP doctoral training in 2011 or 2012. Owing to the focus of this study on reflective practice I recruited from a programme which utilised experiential learning in the form of PBL. To ensure homogeneity of experiences, in line with IPA methodology (Smith et al., 2009) I only recruited from one university in England.

In order to identify potential participants, I gained permission from the identified Programme to contact previous trainee CPs. I provided the course with copies of documentation that participants would receive to inform their written consent (Appendix 4).

My e-mail to potential participants was then forwarded to thirty potential participants (Appendix 2). This e-mail briefly described the aims of the study and highlighted what taking part would involve. An
in-depth information sheet (Appendix 3) was forwarded to the seven people who expressed interest in taking part. Once a potential participant decided to take part, an interview was arranged in a location of their choice. All of the seven people who expressed an interest in taking part went on to participate in this study.

### 2.5.2 Inclusion and exclusion criteria

Owing to the minimum requirements for gaining a place on CP training in the UK, all participants had at least an undergraduate degree. Indicators of social difference (e.g. gender, race, religion, class, culture, ethnicity, sexuality and spirituality) were not used as criteria for inclusion or exclusion from this study.

### 2.5.3 The sample

In order to fulfill recommendations for doctoral level IPA studies (Smith et al. 2009), seven participants were recruited. To preserve confidentiality participants' names were replaced with aliases and other participant characteristics were presented at the aggregate level.

### 2.5.4 Participant aliases

**Table 1: Allocated pseudonyms**

<table>
<thead>
<tr>
<th>Participant Number</th>
<th>Pseudonym</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Tilly</td>
</tr>
<tr>
<td>2</td>
<td>James</td>
</tr>
<tr>
<td>3</td>
<td>Jane</td>
</tr>
<tr>
<td>4</td>
<td>Nicole</td>
</tr>
<tr>
<td>5</td>
<td>Ben</td>
</tr>
<tr>
<td>6</td>
<td>William</td>
</tr>
<tr>
<td>7</td>
<td>Lizzy</td>
</tr>
</tbody>
</table>

### 2.5.5 Participant characteristics

3 men and 4 women were interviewed. Their ages ranged from late 20s to late 30s. They were of a diverse ethnic and national background. All qualified from a doctoral course in Clinical Psychology approximately one or two years before the interview.
2.6 Ethical considerations

Ethical approval for this study was granted by the University of Hertfordshire Ethics Committee (School of Psychology), registration protocol number: LMS/PG/UH/00084 (Appendix 1). This research was compliant with the BPS Code of Conduct, Ethical Principles and Guidelines (2009).

2.6.1 Informed consent

Participants were provided with an information sheet (Appendix 3) prior to and at the beginning of the interview. This detailed the aims of the study, advantages and risks of taking part, what was required of them and how confidentiality would be preserved. Participants were invited to ask any questions they might have prior to and at the beginning of the interview. Their right to withdraw from the study at any time without penalty or having to give a reason was emphasised. If they wished to participate they were then asked to sign the written consent form (Appendix 4).

2.6.2 Confidentiality

Information on confidentiality and its limits was given to participants verbally and in writing prior to the interview (Appendix 3). Personal information (including participant’s ages, gender, occupation and contact details) were kept securely and participants given unique anonymised pseudonyms. Identifying information was kept separately and securely from the audio recordings, transcripts and analysis. All these items were stored securely according to the University of Hertfordshire’s Guide to Good Practice in Research (2013). In the confidentiality agreement it was highlighted that audio recordings would be kept for up to five years after my research was submitted for examination (until approximately June 2019), after which time they would be destroyed.

Participants were informed within their confidentiality and informed consent forms that transcription services were going to be used to transcribe their interviews. A signed non-disclosure and confidentiality agreement was obtained from the two services used prior to giving them the recordings (Appendix 6a and 6b). All names and identifiable information was removed from the transcripts prior to being shown to my supervisors for the purposes of triangulation. Participants were informed of this and gave their consent to the anonymised transcripts being shared with the research supervisors.

2.6.3 Potential distress

It was possible that participants may have had an emotional response to what was discussed during interviews. Some research participants have described the process of reflecting on their experiences as therapeutic (Birch & Miller, 2000; Colbourne & Sque, 2005; Murray, 2003; Nel, 2006). However it was possible that participants may experience distress if reflecting on difficult experiences during training. These responses were managed during the interview by the researcher, who was a trainee
Clinical Psychologist and, therefore, had skills in managing emotional distress. Participants were advised that they could end the interview at any time and remove their data from the study during or after the interview. The last two questions of the interview schedule gave participants an opportunity to reflect on the interview and they were offered the opportunity to debrief once the interview had finished. Suggested sources of support after the interview were shared and the contact information of the researcher's primary supervisor, who was a Clinical Psychologist, provided.

2.7 Data collection

2.7.1 Development of the interview schedule and skills

The initial semi-structured interview schedule was developed in collaboration with the researcher's supervisors and drawing on the literature review and specialist IPA guidance (Smith et al., 2009). The literature largely viewed personal and professional identity as separate but linked constructs. Therefore, questions related to either personal or professional identity or their relationship with each other. The schedule focused on these constructs in relation to the research questions.

A pilot interview was conducted with my supervisor in order to test the schedule and obtain feedback regarding the interview process. McNair, Taft and Hegarty (2008) reported that inexperienced qualitative researchers can use inflexible question sequences in their early interviews. They highlighted the need for reflexivity in conducting semi-structured interviews. The piloting process was very useful in reflecting on my skills as an interviewer and my style of questioning. The feedback from my supervisor was taken forward into my subsequent interviews. No amendments were made to the schedule at the piloting stage. The pilot interview was not included in the research analysis.

In the initial interviews it seemed that participants had different understandings of what personal and professional identity meant for them. Therefore, two additional questions regarding definitions of these constructs (Appendix 5) was added to the beginning of the schedule for the 5 remaining participants. The subsequent 10 questions remained unchanged.

2.7.2 Interviews

Participants were offered the choice of where to be interviewed. Three were interviewed in their home, three at a university location and one at her place of work. The interviews lasted between 38 and 82 minutes.

During the interviews the interview schedule was used flexibly, in line with guidance from Smith and Osborn (2008). This encouraged participants to provide detailed descriptive accounts and enabled exploration of other areas of interest which arose.

At the interview participants were asked whether they would like a copy of the write-up of this
research. All seven participants expressed interest in this. Therefore, I will make contact once the research process is complete and send them a copy of the write-up if they still wish. I will also inform all the participants of any subsequent publication and send them copies of this if they wish me to. It is also my intention to send participants an email thanking them for their participation once the research is complete.

2.8 Data analysis

The data was analysed using Interpretative Phenomenological Analysis (Smith and Osborn, 2003; 2008; Smith et al.; 2009). The analysis was informed by guidelines for ensuring quality in qualitative research (Elliot et al., 2009 and Yardley, 2000, 2008).

2.8.1 Analysis with larger samples

Smith et al. (2009) suggested that larger datasets can inhibit processes which ensure successful analysis (e.g. time, reflection, dialogue). They asserted that this was “especially amongst less experienced qualitative researchers” (p. 52), as in this study. They highlighted that the analysis may not be as detailed in larger samples and so recommend that “the emphasis may shift more to assessing what were the key emergent themes for the whole group” (Smith et al., 2009, p.106).

The total duration of the seven interviews was 6 hours and 58 minutes, which was considered to constitute a larger sample, as identified by Smith et al. (2009). Therefore, an attempt was made to make the analysis more manageable whilst ensuring an in-depth analysis of the data. Smith & Osborn (2008) suggested that researchers can use themes from one case to guide the subsequent analysis. This idiographic approach (see Section 2.2) focuses initially on a single case. The findings of other cases are then compared to this. The aim was to move towards “general categorisation or claims” (Smith & Osborne, 2003, p.66). Drawing on these recommendations, I analysed two transcripts in depth, rather than one, then utilised the themes from these to guide the analysis of the 5 other transcripts. Therefore, to ensure a successful and thorough analysis 2 hours of data from interviews 1 (Tilly) and 2 (James) was analysed in a case-by-case approach. The data from the remaining 5 participants was guided by themes emerging from these two interviews whilst continuing to be mindful of convergences and divergences (Smith and Osborn, 2003).

2.8.2 Individual case analysis

I listened to the interview audio-recordings and read the transcripts for the first two interviews (Tilly and James) several times. Whilst doing so initial notes and reactions were made alongside the transcription (Appendix 7 and 8 for the first interview transcription and sample analysis). Anything which seemed interesting or significant was recorded, including descriptions, metaphors, language used and contradictions. Following this the transcripts and notes were analysed at a deeper level,
looking for the underlying meaning of what the participant said. Emerging themes were recorded alongside the transcript which required a higher level of abstraction whilst remaining grounded in the text (Smith and Osborn, 2008). In line with the phenomenological underpinning of IPA (Smith et al., 2009), where possible the words and phrases of participants were used as labels for the emerging themes.

Following this process, superordinate themes were created by merging and clustering emerging themes, based on the underlying shared meaning on these themes. An example of the entire analytic process for one interview (Tilly) was included in Appendix 7 and 8.

2.8.3 Group level analysis

The themes found in the individual case analysis of Tilly and James was used to orient the analyses of the remaining participants. This involved reading the remaining interview transcripts and identifying both convergences and divergences in terms of themes, as well as remaining open to new themes. Once completed, the themes were collapsed and a master list of themes for the group was created (Appendix 9). A useful method for enhancing validity of the findings was to consider the frequency with which a theme was common across cases (Smith et al. 2009) so this was reported in Appendix 9.

2.9 Ensuring quality and validity of research

Elliot et al. (1999) provided specific guidelines for ensuring standards of quality and validity in qualitative research: owning one’s perspective, situating the sample; grounding in examples; providing credibility checks; coherence; accomplishing general versus specific research tasks; and resonating with readers. These were applied in this study to ensure quality and validity of the study’s findings. These were revisited in the discussion (Section 4.9).

Smith and Osborn (2003) suggested that in order to establish credibility and transferability in IPA studies, it is necessary to triangulate the analyses. This enables the generation of findings which are meaningful to its readers. Yardley (2008) highlighted that within this, convergences in perspectives can be an indication of the validity of the research findings.

In this study triangulation occurred through convergences of themes across the sample and the use of supervision by the researcher. Supervision was used through the analytic process to discuss emerging themes and coherence of the analysis. The two interviews that were analysed in depth were reviewed by the supervisors to look for convergences and divergences in interpretations. Both supervisors checked the Results section to ensure coherence and that these were rooted in the original text.

I kept a reflective journal through the process of planning the research, interviewing, analysing data and writing up. I used this journal to consider my experiences of the research, including personal
reflections and potential biases, as recommended by Smith et al. (2009). They suggested that a reflective journal enables in-depth thinking, which enables a deeper understanding of the data.
3. Results

This section presents the findings of an Interpretative Phenomenological Analysis (IPA) of newly qualified CPs’ experiences of their personal and professional identities during CP doctoral training in the UK.

3.1 Summary of themes

Three superordinate themes emerged from the analysis of the seven interviews. Within these, eight subordinate themes were also identified. Please see Table 2 for an overview of these themes.

Table 2: Superordinate and corresponding subordinate themes

<table>
<thead>
<tr>
<th>Superordinate theme</th>
<th>Subordinate themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enhanced awareness of self and others</td>
<td>• Budding to blooming: Evolving awareness of self</td>
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<td>• Personal and professional selves: One doesn’t go without the other</td>
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<td>• Losing naivety vs. gaining wisdom</td>
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<td>Developing acceptance of self</td>
<td>• I should be someone better vs. feeling okay about who I am</td>
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<td>• Being valued by others to valuing myself</td>
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<td>Taking risks and managing uncertainty</td>
<td>• Comfort with not knowing vs. the safety of certainty</td>
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<td>• Opening to connection</td>
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The double hermeneutic of IPA must be acknowledged as in this process the researcher has tried to make sense of participants’ experiences, who are in turn making sense of their own experiences (see section 2.2. Owing to this, these Results represent one possible construction of the experiences of the participants. However, measures were taken to ensure a thorough analysis of the data and ensure rigour (Section 2.8). Also, through presenting a methodological and rigorous account of the analyses it is hoped that the reader will be able to make their own credibility checks (Elliot et al., 1999).
Yardley (2000, 2008) developed principles for assessing the quality of qualitative research and in particular, outlined that sensitivity to context was of paramount importance. This will be demonstrated within this Results section by using numerous verbatim extracts from transcripts in order to support the findings of the analysis. The use of multiple quotes from participants will also be used to ensure participants' voices are placed at the centre of the analysis, and to allow the reader to check the interpretations that have been made.¹

This following section focused on the themes in Table 2 and aimed to represent convergences and divergences in these themes, both within and across participants. It will not be possible to include all aspects of the participants' experiences; however, Appendix 9 provides an overview of the themes across the seven participants. Furthermore, the reoccurrence of these themes across many of the participants' account this provides evidence for their inclusion as themes (Smith et al., 2009).

¹ It should be noted that the quotes in the following section have been edited to highlight key points, with efforts and checks having been made to retain the participants’ original meaning. Furthermore, in order to preserve confidentiality, names have been changed and identifying information has not been included.
3.2 Superordinate theme: Enhanced awareness of self and others

This theme referred to a process of developing an increased awareness of both oneself and of other people during the course of CP training. This involved developing a greater understanding of: who they are as a person and why they are that way; what they stand for and believe in; what roles they take in relationships and in groups; and similarities and differences between themselves and others. For example, James spoke about becoming more aware of “who you are as a person and how you respond to certain people and certain situations”. These processes are further explored in the subordinate theme Budding to blooming: Evolving awareness of self.

The process of enhancing self-awareness seemed to occur simultaneously both personally and professionally, highlighting a link between personal and professional identities. This is seen in the subordinate theme of Personal and Professional Selves: One doesn’t go without the other.

As part of the process of increased awareness of the self and others, there was a conflict between gaining wisdom and losing naivety (subordinate theme Losing naivety and gaining wisdom). Participants often spoke of valuing the knowledge and awareness they had gained. However, there were dilemmas in holding this new found knowledge and awareness. For example, participants spoke about the dilemma of sharing ones psychological knowledge within personal relationships (Jane) and of not being able to let things “brush over you” as might have been done before (Tilly).

3.2.1 Subordinate theme: Budding to blooming: Evolving awareness of self

This subordinate theme referred to the process before, during and after training of becoming more aware of oneself. For some participants, it seemed that they were less sure of who they were before training. Tilly described how this influenced her experiences during training:

“Before starting training, and I don’t know if I really, knew who I was, I think my self was a bit, all over the place really, which maybe echoes how my training experience went, actually, how did I view myself?”

Tilly

Nicole highlighted some aspects of this process of growing self-awareness, using the metaphor of a growing plant, which captures both a growth during training but also an opening up of what was already there. This process appeared akin to an evolution where the stable core of the person is still there, yet there have been changes:

“Because it’s fully formed but I suppose it was just green, kind of the buds and shoots of what I’ve grown to become. But it’s hard to look back now, it’s all fully flowered and grown, but it was just the tiny beginnings.”
Nicole talks about being fully formed but is perhaps referring to there still being potential for development. Lizzy also spoke about reflecting on herself and a growth in her, which again conjured the idea of building on the self that was already there. She identified that this is linked to experiences during training:

“I’m a lot more analytic about myself, a lot more self-reflective than I was prior to training. In training, you do a lot of work on yourself and I grew a lot in that time, a quite intense growth. I think that comes just from the amount of work we have to do, from the pressure that we’re under, and from hearing people’s stories all the time.”

Lizzy

It seemed that for participants this process of growing and evolving during training was about developing awareness of oneself and this giving rise to further personal and professional changes. It was common for participants to describe feeling as if they were the same person, even though they believed they had changed in some way:

“I think I’m the same person but I’m completely different in terms of, because of things that happened on the course and having therapy and just time, I guess.”

Nicole

Interestingly, in this quote Nicole highlighted that training, as well as personal therapy and time, influenced the changes in her, suggesting that it is not possible to identify one singular cause. Nicole further highlighted that training did not change who she was, however it enabled her to “push forward”:

“So my professional identity is definitely always been slightly on the more radical side of being a psychologist, [...] a more rebellious side [...]. I think it helped me, really helped me push forward kind of who I thought I was.”

Nicole

Her phrase “push forward” perhaps suggested she was able to continually develop and gain further insights into her professional identity. For James, reflective practice played a key role in this process of becoming more aware of one’s personal and professional selves during training:
“I think it was part of a lot of mirrors going on. I think for training and particularly within cohort dynamics, you’re constantly reflective of who you are as a person and how you respond to certain people and certain situations. So you’ve got, there really isn’t any choice but to become more aware of who you are as a person.”

James

James’ mention of “mirrors” during training brought to mind the idea of identity being constructed in relation to others. Similarly, Jane also spoke about reflecting on the roles and positions she would take in relation to her cohort:

“Ok how do I behave in my cohort? Why do I take this role? Do I challenge this role? Am I challenging my role? And all this kind of thing we don’t really do it I think, but it does, it does influence us, and we took a role because of some reason.”

Jane

The reflection that both James and Jane spoke about seemed to highlight the enhanced self-awareness that can come from reflecting on oneself in a group context.

Furthermore, all participants spoke in some way about learning about themselves within their relationships with others. Both Ben and James spoke about how you could learn from both those you did and did not get on with:

“I then had a few (supervisors) I really got on well with and kind of learned a lot from but just, sometimes you learn, you learn from people who don’t particularly want to be like […]. Because I don’t think you fully appreciate everything until you work for someone that doesn’t quite fit you.”

Ben

“Developing a fairly close friendship with somebody else in the cohort who is somebody who cuts to the chase quite quickly and can give quite honest, and sometimes experienced as abrasive, feedback. And that being somebody else who I’ve learnt a lot about myself from.”

James

This is an interesting idea that relational experiences, which might be considered challenging in some way, can allow for learning and development. In particular, it seemed that interactions with others provide opportunities for self-awareness wherein an alternative view of the self is reflected back through the other. James also spoke about the pressure or “intensity” of training experience leading to the “real person” coming out, specifically Problem Based Learning; a form of experiential learning utilised by his training course:
“There was a lot of pressure within PBL. And then people are more likely to show their true colours within that context. You can’t keep a false face up for that long; that means there will be a point where that face breaks and the real person comes out.”

James

There was an interesting idea here that an intense experience can lead to showing a different side of oneself and others, with these more authentic interactions leading to increased awareness of the self and others.

Jane spoke about the value of this relational process, particularly with those whom where differences exist. Although not seen in this quote, it seemed that she too was expressing the self-awareness that can come from looking at differences between the self and others:

“People have different cultures as well which is always super interesting, already think or assume you may understand each other but then, as you discover each other you see much more different you are, and how rich that is.”

Jane

James went on to speak of how this self-awareness gained through others allows for more meaningful relationships with others:

“It helps building the personal relationships because I get to know how you think about therapy and how you think as a person and being able to own the bits that you feel really competent at and also things that you feel are the relative weakness and you can’t really relate to somebody’s who’s perfect 100% of the time.”

James

The idea that one cannot be “perfect” seemed to link to a letting go of a need for the self and others to be faultless, which linked with the next superordinate theme of Developing self-acceptance (Section 3.3). However, James seemed to gain both awareness and acceptance of his strengths and weaknesses.

Lizzy spoke about the importance of self-awareness and reflection in order to be effective in therapeutic work:

“I think to be an effective therapist, you have to do that because you have to learn about what you’re feeling when you’re with somebody else and is that to do with you or them.”

Lizzy

For Lizzy, there seemed to be an underlying idea that therapy is a relational pursuit and that in order to be effective there needs to be a distinction between what the client and therapist brings to the
room. Nicole seemed to think about this on a different level, in that an awareness of the rationale and motivations behind the way a clinician works is necessary:

“And I think sometimes you can get into a bit of a habit of just doing stuff and not really knowing, well why am I doing this and do I agree with why I’m doing it.”

Nicole

For many participants, it seemed the process of reflecting on oneself and developing self-awareness continued post qualification. For example, Jane spoke about the process of “go(ing) back…to my core”:

“Step back and, like with training, ’cause it was very intensive and you kind of lose track of your life, [...] but the end of training and the reflective bits that I was doing, helped me to go back slowly to my core person.”

Jane

This almost suggested that training could be destabilising in some way, yet the reflective process as part of training was seen as a way of getting back to her core self. This brings to mind the image of something being disassembled and then reassembled in order to gain a deeper understanding. Tilly too spoke of the importance of sitting back and reflecting on her personal to gain a deeper understanding of herself and she wants from life, with this process continuing post qualification:

“I can really sit back and think about what I want from life and, what’s right what’s wrong and, where am I going, so, that’s probably taken two years, here’s the post-qualifying year as well.”

Tilly

She went on to speak about how this process had given her sense of empowerment and feeling more comfortable to take her life in the direction she wishes to take:

“Hang on a minute, who am I? What do I want from life? Regardless of anyone around me and that’s been quite empowering I think just, feeling comfortable with being able to do that.”

Tilly

William also highlighted that his journey of self-reflection continued post-qualification, but was more uncertain about where this would lead him:

“How I would answer these questions again in another year? Because I think even in these six months I’ve been on a big old journey, changing, changing professionally.”

William
This theme highlighted a process described by participants of becoming more aware of themselves during training and this continuing post-qualification. A key part of this process appeared to be reflecting on oneself, both internally and within one’s relationships with others.

3.2.2 Subordinate theme: Personal and professional selves: one doesn’t go without the other

This theme referred to participants’ descriptions of the relationship between and within their personal and professional identities. For some, there was an overlap between these aspects of themselves whereas for others they saw their personal and professional identities as the same thing. The overall idea was one of not being able to separate out one’s personal and professional selves, summed up by Tilly:

“I guess they go- one doesn’t go without the other does it?”

Tilly

James employed the metaphor of a rail track to describe how he understood his personal and professional identities:

“I think this is where I got tied up mentally. Is because it was, it can be really hard to see them as separate. And so I think probably the image coming to mind is seeing them as two sides of the same railroad track so where one goes, the other one goes as well. There might be slight differences between it and slight distance but broadly speaking they’re following the same stretch.”

James

It seemed for James that his understanding of these aspects of himself were inseparable, yet he allowed for differences at times. In addition, there seemed to be an idea that movement or development in one area led to change in the other. Tilly pondered how these two aspects of herself interacted, however, it seemed this was a reflexive rather than linear process:

“I wonder if that had gone in, what order they'd gone in […] you change professionally which has an impact on your personally, or is it the other way around?”

Tilly

Ben spoke about his belief that the personal and professional could be kept separate and the struggle when he found it difficult to find a balance between the two:
“I think I always had a view that my personal and professional life are very separate [...]. I think it surprises me that I couldn’t kind of maintain the balance particularly in the last two years, [...] that kind of affects, I guess, me.”

Ben

Ben suggested that the impact of his professional experiences on his personal life was not expected and therefore surprising. It seemed that despite Ben’s attempts to separate out the personal and professional, this was not possible for him. Yet he also spoke a need for balance between the two, evoking an idea of ying and yang with these lives being both connected and separate. This struggle of separating out the personal from the professional into individual constructs could account for why many of the participants questioned the design of the research interview:

“I find it really hard to see them as separate at times. I’m thinking back to the start of the interview, I probably think about it now was going with the legal response rather than the felt response. So the felt response is that they’re inseparable.”

James

In the following quotes, we see Nicole describing her experience of the questions about personal and professional identities, and clearly highlighting some difficulties with conceptualising personal and professional identities as separate constructs (shown in italics):

“The questions don’t sit well with me, which is why I think I found it a bit difficult to talk about it because I’ve been trying to almost kind of understand a different language like, just like if you...it’s like you’re speaking French and I have to translate. So it’s like you said the questions and I had to try and translate it in my head into how I view the world.”

Nicole

As the researcher, I also struggled with the mismatch between my questions and Nicole’s constructions during the course of the interview, as seen in this exert from my reflective diary:

“I doubted myself. Did I ask my questions in the wrong way? It felt messy – trying to find a way of meeting in the middle. Yet Nicole was saying things that other participants have also said – personal and professional identities are not separate. Was it more about language? The idea of a restricted identity did not fit with her. This left me stuck, yet I agree with her! Different ways of describing a similar experience?”

Natasha
It seemed that Nicole was naming the distance between her and the interviewer, which it seemed had influenced the content and process of the interview. Nicole went on to speak about the dilemma drawing on her professional training in her personal life:

“I just am a psychologist, because I was before the course and I still am now, and I just got this lovely title that makes me qualified [...]. So, say, my partner has difficulties in a relationship with someone at work and he says to me, “What do you think?” so I’m not allowed to talk to him [...] I don’t know which bit of me is the psychologist and which bit of me is not.”

Nicole

For Nicole, there seemed to be a dilemma for her and those around her as to how she should respond to requests for advice / support in her personal life. Given Nicole’s belief that the personal and professional are intertwined, it appears such situations are particularly difficult to navigate. Conversely, Jane spoke about the positive aspects of bringing her personal self into her work and how her personal and professional selves are so closely linked. In particular, she speaks of them almost being in a symbiotic relationship, in that one cannot evolve without the other:

“I like doing painting and art so I always bring, the things I do outside inside, [...] it’s a bit mixed, but, I, I always saw, psychology and why I choose psychology for me is very linked to who I am, in my head so, it doesn’t, it makes sense that it’s the same [...] as I evolve in personal life I evolve in my professional and vice versa.”

Jane

In addition, she spoke of her professional life being a choice that fit with her sense of self and personal life, furthering this idea of there being no separation between the two. William also spoke about showing his personal self in the professional context and his dilemmas around this:

“Trying to find a balance between trying to be who, I am, you know if there, if there is a core of you [...] knowing that you can, I guess, be, be good at your job and be able to talk to people and be able to communicate properly and, be boundaried [...] and still be able to be you, and you don’t have to be completely dull and lifeless.”

William

It seemed a central process for William was understanding how he could be professional and still bring personal aspects of himself into his work. This is something that was important for him to be able to do, to be boundaried and congruous with his values as a person and also as a professional.

Lizzy spoke about the value she places in bringing her personal self into her professional work, specifically in terms of her therapist “style”. Her use of the phrase “couldn’t pretend to be anything but
“Some of my clients, particular clients, who thanked me in different way [...]. I felt it was me that they were thanking, not a clinical psychologist, my style of being a clinical psychologist. [...] I always knew that I had to be present in the room as the therapist. I couldn’t pretend to be anything but me.”

Lizzy

Lizzy also spoke about still being herself even though she may appear different in different contexts. This may suggest something of the self is carried into all contexts, but is also viewed and constructed relationally, resulting in different aspects of the self being accessible at different times. This links with the later subordinate theme of Comparing myself to others (Section 3.3.3):

“I think about it as a relational concept, personal identity, because my identity is different when I’m with you, when I’m with family, when I’m with work colleagues, and different environments, and even though I may be different in each place with each person, with each group of people, those are all still me.”

Lizzy

For William and Jane, it seemed that training facilitated the process of bringing together different aspects of themselves:

“There was two worlds became much, much closer by the end, which I thought was really, really good because I guess in the third year you pick your placements [...] that were much, much more aligned with where I wanted to be.”

William

“There was maybe a bit more splitting? So I had my job, I’m very serious, and then I had my friends and we were having fun, but I never mixed [...]. I think with the training, it helped me to bring those two together.”

Jane

It seemed finding a way of aligning their personal and professional selves was something that held value for them and may link with the later themes around self-acceptance and finding one’s voice.

This theme described some of the experiences of participant’s personal and professional identities, and their understanding of these. Participants construed their personal and the professional identities
in multiple ways, but it seemed they were largely viewed as closely interlinked and were not understood as separate constructs.

3.2.3 Subordinate theme: Losing naivety and gaining wisdom

This theme referred to participants’ simultaneous experiences of developing knowledge and awareness whilst losing their “naivety” (Tilly).

Participants often spoke about the more practical aspects about gaining knowledge as part of their training, with an emphasis upon translating academic knowledge into clinical practice. For example, Jane spoke about carrying with her the voices of those who had influenced her way of thinking:

“It’s more like about their thinking style, so if I have a case or I’m thinking about some kind of research or reading an article, that, I, I will be reading it with my automatic identity, the self, and then I will step back and re-read it and then I will have their voices (of the training course team).”

Jane

For Nicole, training enabled her to consider importance ethical issues related to her practice:

“That fundamental right to question things like, you know, is psychology actually a good thing? [...] do I actually want to be a psychologist, enabled me to think about that and to continue thinking about that when I qualified. Am I doing good? Am I doing harm? Why am I doing what I’m doing? Is it okay? Is it moral?”

Nicole

Her words, such as “good thing”, “harm” and “moral”, highlighted what an important decision making process this was for Nicole. It seemed that asking these questions was part of process of moving from naively practicing and implementing psychological knowledge, to a place of constructive criticism and the inherent wisdom therein. This may be in line with a developmental process of moving from dependency (where such issues are left to those in authority to consider with the individual perhaps in a naïve position), to a position of autonomy where she considers these important issues for herself.

Interestingly, as demonstrated by these quotes, participants often spoke about developing an ability to think differently, take a reflective stance or being able to think critically about issues, rather than possessing concrete knowledge. Jane spoke about how her experiences have influenced her in the professional context, giving her more confidence in her opinions and skills:

“I have this impulse and this intuition - maybe it’d be a good idea - maybe sit down before going and shouting everywhere and, make a proper things and that, build arguments stronger,
and I learned a lot with the training about how to build a good argument as well, based on theories, based on practice, you know what I mean, much more stronger than before.”

Jane

Jane’s seemed to be describing herself drawing on a knowledge base to inform her decision making process, specifically how she will approach a situation. The concepts of impulse and intuition seemed to be more related to her personal stance before training, which has been influenced by the knowledge she has gained during training. This again suggests a developmental aspect to knowledge acquisition and application for trainees.

It seemed that the combination of participants’ newly acquired knowledge and way of thinking critically/reflectively enabled them to adopt alternative perspectives in their personal and professional lives. For example:

“Can be no way of, of being there being one way of seeing the world no way in which you can take for granted one person’s opinion as being right or factual or, any sort of truth, and I, really took all of that on, quite a lot, in my personal life as well and, tried to, in a way kind of hold onto things a lot more loosely, like and, and challenge all of my, own kind of underlying assumptions about the world.”

William

It seems that William developed the capacity to maintain multiple perspectives in his personal and professional lives, as well as the uncertainty such a stance brings. This new found awareness could create dilemmas of not being able to leave it behind, for example within personal relationships:

“Let’s say you have a friend of yours who’s doing something that she doesn’t want to keep doing, talking to some boy, whatever it is, that’s just an example, but you can see what the personal, what the kind of ulterior kind of gain is for her, and I guess it gets in the way sometimes of being just supportive. I guess I don’t even know what supportive is anymore because it might be supportive to point it out.”

Lizzy

This linked to Nicole’s description of the dilemma of being able to respond spontaneously and in a human way in one’s personal life, given one’s professional experiences (see Section 3.2.2). However, for Lizzy the struggle seems to reside in how to respond in the situation more than whether it is the personal or professional self doing the responding. Tilly described this dilemma as a loss of “naivety”:

“You sort of lose that naivety of life, you can’t look at the situation in the naive way and just, let it brush over your head, and I, I think I tried to think that I can but actually you can’t and that,
can impact on, how you view other people, the relationships that you have, perhaps expecting people, to, have the same way of thinking as you, have that ability to, be analytical in how you think about things and, be emotionally intelligent.”

Tilly

This loss of naivety was perhaps difficult for Tilly as it made it difficult to disconnect from her experiences, namely to “brush over” them and view them from an alternative and perhaps deeper perspective. It addition, the expectation of others to be “emotionally intelligent” seems to have led to a further loss of feeling disconnected from others. Although not included in her quote, in her interview she spoke about her experience of the loss of naivety as being like a “burden”. She used the metaphor of a superpower to further express the challenges of this experience:

“I don't know it's like a superpower you've been given, I'm not saying I have a superpower but, it is a bit like you've been given a superpower, that actually can be quite dangerous and you're not quite sure where to go with it.”

Tilly

This quote may demonstrate how this new found awareness, or superpower, can create a feeling of uncertainty and the use of the word dangerous, suggested that it perhaps even created a feeling of anxiety. When these two quotes are considered together, it seems that Tilly may feel as if she is in a different position in relation to others and furthers this idea of an inverse relationship between naivety and disconnection from others. However, participants also highlighted the potential value this lost naivety or gained wisdom could have; for example, Tilly described how she would not want to reverse this:

“I mean it's like asking a, hundred year old woman, what you, what you knew then, and you know and I've had lots of conversations with people recently about, if you had the choice to going back to being eighteen again would you? And, and it's always, I would if I knew what I know now.”

Tilly

Her use of the phrase “I would if I knew what I know now” highlighted the value she placed on the knowledge and perhaps the wisdom she had gained despite their costs. I wrote about this in my reflective diary:

“I felt such hope from Tilly’s comment about the 100 year old woman – it seemed like even if things feel really unstable during training (like they do now for me!), it is worth it.”

Natasha
This theme related to the simultaneous processes of losing naivety and gaining wisdom. Gaining wisdom often related to developing academic knowledge which could be put into clinical practice. It also included being able to think critically and acknowledge multiple perspectives. However this self-development came with challenges in their personal lives, where a loss of naivety could perhaps create an experience of disconnection from others.
3.3 Superordinate Theme: Developing acceptance of self

This theme related to the process of developing an acceptance of oneself, both personally and professionally. This self-acceptance linked to the previous theme, as developing a better awareness of oneself and an understanding of why you are that way, enabled the process of self-acceptance.

The development of self-acceptance appears to have been a challenging process in the context of training, wherein trainees were expected to simultaneously learn and develop, thus creating a need to strive towards becoming better. This led to potential conflicts between self-development and self-acceptance. This is explored in the subordinate theme I should be someone better vs. feeling ok about who I am.

As part of this process of developing acceptance of self, there appeared to be a transition from having a need for others to recognise and reflect back one’s value towards valuing oneself (subordinate theme Being valued by others to valuing myself). Participants also spoke about comparing themselves to others, with the aim of becoming more like the other. Yet over time they were able to accept themselves for their differences and similarities to others. This is further explored in the subordinate theme Comparing myself to others. These themes suggest that participants’ relationships with others (personally and professionally) played a key role in the development of their acceptance of themselves.

3.3.1 Subordinate Theme: I should be someone better vs. feeling okay about who I am

This subordinate theme related to a dilemma between the requirement for trainees to constantly develop and learn (e.g. developing clinical competencies, completing academic requirements), and the process of accepting oneself. There seemed to be a dynamic bi-directional process at play between these two positions during training, with the majority of participants ultimately moving towards a position of self-acceptance.

For Tilly, the need to “be someone better” was often linked with feelings of anxiety:

“I don't know if I saw myself as a professional. I [...] didn’t see myself as very confident. I guess [I was] very anxious about, who I was as a professional, always thinking that [...] I should be someone better”

Tilly

Tilly’s use of the word “should” seemed to highlight the perceived pressure inherent within this process, whilst the phrase “always thinking” suggested the recurrent nature of this process. This evoked a sense of intensity to the experience. The use of “should” brings to mind the idea of training being exposing in a variety of ways (e.g. of trainee’s inadequacies), which may have led to participants’
developing a belief that they should be different in some way. A potential consequence of this belief appeared to be a personal loss of confidence during training:

“I’m not sure what it was but I know that I lost confidence kind of through the process of training in my personal life and I’m not sure I fully understand.”

Ben

The repetition of “I’m not sure” in Ben’s account evokes a sense of uncertainty about his sense of self in his personal life, seemingly triggered by the process of clinical training. Furthermore, for some, before training the idea of being a professional was one that did not fit with how they saw themselves:

“As an assistant […] I think any attempts I did make towards being professional, almost felt like playing at the role; it didn’t feel like I was ever really in that role, and taking it particularly seriously.”

William

William’s suggestion that he was “playing at the role” almost evokes a sense of disconnect between his personal and professional selves. This phrase also evokes an idea that William believes he did not have a professional self at that time, or that his professional identity was not ‘good enough’. Yet, it also seemed as though William did not want to become professional or develop his identity in this domain, and so the disconnection may have been a functional way to maintain his sense of a personal self.

Participants detailed a number of ways in which they managed the potentially difficult emotions arising from the dilemma between personal and professional development versus self-acceptance. Tilly described having sought reassurance from others (e.g. supervisors) about how to be and what was acceptable:

“I was definitely like working within my competence; I would always be sort of seeking reassurance from my supervisor.”

Tilly

Furthermore, Tilly appeared confident in the fact she is working within her limits, suggesting self-acceptance, yet she also wants external validation of this from others.

It was common for participants to speak about how they should be, for example, in order to be professional. These should be aspects were often gained through observation of others, but came to be internal expectations of self:

“Just small things like instead of wearing kind of, flowery shirts to work – […] I would go for much more kind of plain, business-like […]. My, first supervisor was really square, […] very
professional and that helped as well because, it, it sort of gave me a mark of where, you could be, but then at the same time a mark of where perhaps I didn’t want to be. He was so humourless and so lifeless and, in supervision he wouldn’t, you know, get into the emotional; he would never let that barrier down.”

William

In this quote, William highlighted an aspect of the dilemma for him, wherein he felt in order to be professional, something of the personal self must be covered up. This may have been linked with a sense that his personal self was not allowed to be shown in the professional context. This sense was enhanced by the perception of the supervisor’s stance of not letting an “emotional […] barrier down”. Yet William spoke of not wanting to model his supervisor, and so there may have been an internal desire to show more of the personal in the professional setting, or for there to be no separation at all.

This idea of the personal self needing to be put aside in order to be professional, was expanded upon by Jane, who spoke about how striving to be better could lead to the de-prioritising of self-care within training:

“…cause I suffered from it, ‘cause I have always forget about it and that [taught] me a lot about self-care, so then in my personal life now […] I’m running everywhere sometimes […] and I’m like ok, remember, and then you know, take it slowly and manage things differently and prioritise differently.”

Jane

Words such as “suffering” and “forget” highlighted a potential need experienced by Jane for self-care in the professional context, but also evoked a perhaps functionary disconnect between the professional and personal in order to manage such suffering. Alongside this was a strong awareness of the importance of self-care in managing the suffering. This had implications for the personal and professional lives of participants as struggles or “suffering” in one area may affect the other. This was further discussed in Section 3.2.2.

For most participants, there seemed to be a developmental process towards acceptance and confidence in oneself occurring over the course of training:

“I’d like to say it was called kind of faker syndrome […] even like kind of six months they’re still waiting for someone to say actually your off the course […] but I did quickly move on through that […] I hope this doesn’t come across as cocky but I did feel relatively confident when it came to a year and a half in.”

Ben
Ben’s use of “faker” and “false” evoked the idea of acting into a professional role put forward by William earlier. The word “syndrome” also suggested it was almost a universal condition of disbelief in attaining a place on training, creating the idea of a shared trainee identity around not feeling good enough. This doubt may still exist for Ben due to his disclaimer about being “cocky”, but he was able to acknowledge his increase in confidence following the first half of training. This developmental process of gaining confidence and self-acceptance was often reflected across the course of the participants’ research interviews. As the interview progressed, participants would speak about these initial feelings of needing to be better and then moving more towards a theme of developing confidence and acceptance of themselves. This process seemed to be on going and continued after training:

“The training experiences played a massive role in starting that process; [...] post-training is when I found I could actually, work best. I wouldn’t say if you took a snapshot of me, if we say, I don’t know, 5-6 years ago, and me now - fundamentally I think I am the same person, [...] maybe it’s about me becoming more self-assured in who I am.”

Tilly

Tilly draws on the idea that she was “fundamentally [...] the same person”, evoking a sense of stability in her core self; and whilst not explicitly stated in this quote, it was suggestive that alongside this, ran an uncertain process with regards to training to be a Clinical Psychologist, which is further discussed in Section 3.4.1.

For James, developing confidence and self-acceptance during training seemed to be reflective of a comfort in oneself, wherein recognition and acceptance of his strengths and weaknesses occurred:

“The second half of training probably feeling more comfortable in my own skin as a professional [...] being valued by the team and being valued by supervisors and that building up and up and up and sort of having a spiral [...]. And I think ultimately recognising my value and not being big headed about it [...] but recognising that, you know, I’m a unique person. I have my own individual strengths and weaknesses that I can bring to any team I go to.”

James

There was an acknowledgment by James that he was a “unique” individual and with this he could recognise “my [his] value”. Such words seem fundamental to a sense, and acceptance, of self. The developmental process of this for James seemed evident in the phrase “building up and up and up”. This process did not appear to be a lone journey; participants spoke about others playing a part in the development of self-confidence:
“I think she sort of reinforced that you know, people are people and that’s what people need, and sort of instilling that confidence in me […], just seeing, sort of the positives in someone”

Tilly

Here Tilly emphasised the value of highlighting a sense of being *good enough*, and the value of this validation and acceptance of being good enough as coming from someone else. Conversely, Jane spoke of critically comparing her view of being a psychologist with how others practiced, which suggests perhaps an insecurity about her professional identity and comparisons with others as being her way of reinforcing her sense of self. However, through these comparisons she began to gradually accept that there were different ways of being a psychologist, which suggests a new acceptance of herself for who she was in the professional context. Alongside this, there appears to be an acceptance of the difference and uniqueness she brought to the professional context:

“Before I had high expectations sometimes of maybe other psychologists because of my view of what psychologist is and now I understand a lot that psychologist is not one thing and being a psychologist is millions things […] ‘cause we’re all different […] and that’s ok.”

Jane

Lizzy stressed the value she placed on her training and professional identity, with her seemingly being proud of her professional identity:

“I feel […] my professional identity […] is very protected, as in it’s something I worked really hard to achieve, and I’ve done it and I’m now qualified and no one can take it away from me […]. The thing is, it’s strange because obviously I gained the title of ‘Doctor’. That to me, blows my mind, because I struggled to use that title because it feels almost embarrassing, not embarrassing because I’m very proud of it, but it just feels strange.”

Lizzy

Lizzy's description of *working hard* speaks to the developmental aspect to self-acceptance put forward by other participants, as well speaking of the pride she takes in her professional role. However, she also commented that title of "Doctor" felt "strange". It was difficult to ascertain from Lizzy's comments why this title felt strange. Perhaps it was because she had been continually working towards this goal and comparatively evaluating herself against those who had achieved this. Therefore it was perhaps difficult to recognise that she has reached her goal, and that she was now in the position of those to which she aspired. The switch from “almost embarrassing” to “not embarrassing because I’m very proud of it” suggested a conflicting experience to the title; perhaps similar to the experience evoked by Ben’s “faker syndrome” described earlier of an achievement not fitting with how they see themselves.
Nicole spoke about the dilemma in this theme in a slightly different way. She seemed to feel restricted, almost pliable and under the will of external expectations (e.g. by needing to meet competencies and academic expectations within training), which could sometimes mean she felt she had to act in ways that she did not agree with:

“I think it's automatically restrictive because it's NHS-funded […] so […] they have to do things a certain way […] I still think it’s trying to put people into a box. I find it hard to know how you would train psychologists and how […] to meet a certain standard without some sort of criteria […]. Somebody is deciding what makes a good psychologist and who we should send out.”

Nicole

It seemed this was a different experience for Nicole as, in other parts of the research interview, she felt she was accepting and aware of herself before training. As the quote above suggested, training required her to be different and incongruent to her self-perceived personal and professional selves. Further to this, it appears that Nicole may have experienced training as invalidating of her sense of self, yet her description gives the sense her self-acceptance was not shaken by the experience.

Overall, it seemed participants felt more comfortable in themselves by the end of training. Both William and Tilly spoke about feeling happier in themselves:

“I think I became a lot happier during training than I had been before, hugely happier, and a lot more kind of easy going […] yeah, and just feeling happier, happier in myself as well, and, doing something that I wanted to be doing.”

William

“Well there’s just something about me being, a happy psychologist.”

Tilly

Overall this theme represented participants’ experiences during training of the dynamic processes at play between needing to learn, develop and also finding self-acceptance. For most, there seemed to be a process of moving towards an acceptance of oneself as training progressed, with this process continuing post-qualification.

3.2.2 Subordinate theme: Being valued by others to valuing myself

This theme highlighted the move from a focus of seeking validation by others to valuing oneself. As part of this, there seemed to be a move from an external to internal locus of self-worth and value. This links to the overarching superordinate theme of Developing Self-Acceptance as recognising one’s own value could be considered an aspect of self-acceptance.
Although at first glance there appears to be little difference between the current and previous theme, interpretation of the data suggested that there was a subtle but meaningful distinction between these two aspects of the process of accepting oneself. The theme *I should be someone better vs. feeling okay about myself* identified a process of self-acceptance. Whereas this theme speaks to a dynamic between acknowledging and appreciating your own value in personal and professionals contexts versus gaining value through what others say or think of you.

Lizzy spoke about looking to be valued by and gain approval from her supervisors during training. She also spoke of being able to see the development in and value of her own views post-training, yet also suggested that her perspective on these views had changed. This suggests that both her views, and her perspectives on said views, were part of a developmental process:

“*I wanted to please my supervisors. I wanted to be good at what I was doing without thinking too much in the way that I would be thinking now, about what are my views as well. Now my views are a lot more valuable and I could call them clinically relevant, my views now, whereas before I wouldn’t have thought of them in that way.*”

Lizzy

Furthermore, it seemed that Lizzy was referring to a move towards autonomy and away from needing the guidance of others, as indicated by her “*thinking [...] what are my views*. It seemed experiences of feeling valued by others enabled Lizzy to value herself:

“*I felt probably for the first time in my life I had a group of people that actually listen to what I said. It was very validating [...] I felt like that gave me strength in my personal life, to do other things, to be a certain way, and I value myself a little bit more.*”

Lizzy

Lizzy’s use of the phrase “gave me strength” suggested she had acquired strength through her validation from and interactions with others in a professional context, but she saw this having an impact in her personal life. It may be that this strength enabled the move towards autonomy, as suggested in the previous quote. Others also spoke about how validation from others enabled a developing value in oneself:

“*Feeling like what I had to say, was sort of respected and listened to, which felt so nice it felt so positive [...] then certainly as training went on [...] I felt much more valued at work [...] I found a voice and found a way of being [...] I was a valuable asset [...] rather than just a burden.*”

William
William spoke about finding his “voice” and “way of being” which suggested a move towards autonomy, rather than the dependence suggested by his description of himself as a “burden”. William’s use of multiple positive words and phrases (e.g. respected, listened to, nice, positive, valuable asset) perhaps highlighted the positive experience of growing autonomy. In addition, he spoke of increasingly being valued by others as training progressed. This may have been representative of William’s potentially increasing competence, or perhaps William’s increasing self-value giving rise to increased competence and being more open to and acknowledge the value placed upon him by others.

It seemed that valuing oneself could enable individuals to “stand up for” themselves in their professional lives:

“I just won’t do it. I took a job where in my interview [...] I said [...] “I’m not going to do CBT.” And I got my job [...]. So I kind of, the course gave me an ability to kind of stand up for myself in some ways and a belief that you know what, it’s okay that I can do that.”

Nicole

The use of the phrase “I just won’t do it” suggested a determination in Nicole’s approach rooted in her self-belief. It seemed that owing to the value she felt in herself she was able to be assertive and congruent to her values. It also seemed that her experiences during training had given her the “ability”, confidence or perhaps skills to take an autonomous and contrary position to others, without any concerns about not being valued by others. This was something I took note of in my reflective diary:

“I admire Nicole for standing up for what she believes in. I wonder if I could do this? What gives her the strength to this? Perhaps conviction in her beliefs and in herself. But it also seems that it is something she has learnt to do – a skill. Can anyone learn this?”

Natasha

However, Ben highlighted that sometimes working in the NHS could present dilemmas between what an individual clinician may value and what is expected by the service. He discussed seeing himself as an “emotional therapist” and the dilemmas this could present in the workplace:

“I think with clients, it works really well [...] I think in an NHS environment, obviously which is a lot more focused on targets, on goal orientation, on evidence basis, I think it does and it doesn’t fit. [...] I think particularly for managerial roles [...] having an emotional identity feels very different. [...] I think the key part, of the emotional identity, is that when you connect with someone - be that professional or a client - I think it just works. But I guess maybe as I get
higher up or in different roles in terms of commissioners and things so I wonder how it would be done.”

Ben

Interestingly, Ben doubts that being “emotional” will be acceptable in management roles. This is similar to William’s thoughts (see Section 3.3.1), which suggested a need to cover up one’s personal side in order to be seen as professional. This dilemma between what one might value in oneself and the expectations and values of others was present for four of the participants. For example, William spoke about how difficult it can be to find “space” for yourself:

“You know IAPT becoming so completely prevalent and then, thinking I’m, oh well I’ll be safe with child work and then CYP-IAPT becoming so ridiculously prevalent and thinking Christ there’s no room for me there’s no space for me and becoming really, quite panicky almost, about the idea of finishing, finishing training and hating that feeling so much that.”

William

This again linked with William’s earlier suggestion that one needed to cover up one’s personal self in order to be seen as professional. Here it seemed that William had value in himself and what he stood for, however there was limited “space” for this to be valued in the NHS context. There is also a sense of his views and identity being overwhelmed or overridden by the values of others and the systems around him, again speaking to William feeling his identity was not acceptable in the professional context at times.

For some trainees, bringing the personal self into professional contexts was less of a dilemma and more of a valued interactive process. Lizzy spoke of a link between feeling valued by others in her personal and professional lives in an earlier quote in this section. Whereas James spoke about a link between valuing himself in his personal and his professional lives, in that development in one domain directly impacted upon the other:

“So seeing more value in myself as a person I think would directly impact on my value as a professional and vice versa.”

James

Overall this theme captured participants’ experiences of valuing and acknowledging aspects of themselves and their overall identity. This was often thought of as an interactive process between being valued by others and valuing themselves:
“It’s often another virtuous cycle going on but the more you use your voice, the more you feel confident in it. But yeah, also the value attached to it; so being able to value my own voice and it having inherent value and it being able to be valued by others.”

James

3.3.3 Subordinate theme: Comparing myself to others

Participants often spoke about comparing themselves to others, particularly as a way of evaluating oneself. However, similarly to the previous themes there seemed to be a process of movement towards taking a more self-accepting stance, of appreciating oneself and one’s value, with less evaluative comparison to others.

Several participants spoke about the impact of defining labels (e.g. trainee) in the process of comparison to others (e.g. to qualified CPs and other professionals). For some, the trainee label led to assumptions by themselves and others:

“You’re labelled as a trainee clinical psychologist or a clinical psychologist and people make assumptions based on that label.”

James

This was shared by Tilly, who described worries about how others viewed her in the trainee role versus qualified professionals:

“What do the team members think of me as a trainee, do they think that I’m not the skilled person, they actually want the, the qualified clinical psychologist.”

Tilly

There is an interesting idea here that trainee’s maybe lack skills and it is skills that others value in a Clinical Psychologist. For some, the trainee label was experienced as restrictive and not allowing the whole self to be seen, as demonstrated by the use of the phrase “everything […] seen within that prism” by James:

“I was labelled as an anxious trainee from that point onwards and if it felt like everything was seen within that prism. So if I was having difficulty it was because I was [an] anxious trainee.”

James

I had struggled with the labels given to trainees and wrote about this in my reflective diary after interviewing James:

“I hate being called “the trainee”, I want to fight against it. I’m not just a trainee, I’m so many things. The idea of a prism is very powerful, many experiences narrowed down into one beam?
There are multiple aspects of me, is this what James is saying? See the whole of me, not just the white light.”

Natasha

Some spoke about how professional labels changed as their careers progressed, as well as their position in comparison to others. These different labels and positions came with different internal and external expectations, which were sometimes difficult to adjust to:

“It took me a long time, to think of myself as, a psychologist in the team, and, and found it really much easier to slip into the role of the assistant, [...] hide a little bit, and it, just gradually sort of actually no, you’re not in that role anymore [...] thinking about myself actually that I do have to take responsibility for things.”

William

It seems that it was easier, or perhaps, safer for William to occupy the previously held position of an assistant, rather than confront the responsibility and uncertainty represented by a new position and label within the team. For James, his position within the team resulted in him interacting in different ways with those in different positions around him:

“So I felt good enough with peers but in terms of more powerful positions, I just didn’t feel good enough to be interpersonal with them. And if there was any incompetence there, I think they would see through it [...] it was a safer place to be.”

James

Furthermore, James appeared to feel safer as well as more sure and accepting of himself when with peers, with his sense of self being threatened by interacting with those in power. This speaks to the evaluative process of training, in which Trainees are regularly evaluated by those in higher positions than them.

It seemed that there was also an idea that it would be a risk to show his personal self to those in authority, as shown by the use of the phrase “a safer place to be”. This seemed to link with William’s comments in the previous two subordinate themes, where he spoke about the need to hide one’s personal side in order to be thought of as professional and there being little space for the personal self in the NHS context.

Lizzy also spoke about an awareness of hierarchy and how this could make her feel in a subordinate position. The joke of a Psychiatrist highlighted how attention can be drawn to hierarchies and this can increase evaluative comparisons between professionals:
“I saw myself as very subordinate to others. As an assistant psychologist [...] I remember once going to an MDT and having a psychiatrist referred to us assistants as being cheap as chips. He was joking, but he was also being frank.”

Lizzy

It seemed that Lizzy initially located the feelings of being subordinate internally (seen in the phrase “I saw myself”) but then almost immediately referred to others making her feeling this way and therefore locating the feeling externally. For Tilly, the process of comparison was used to further her self-development. She spoke of comparing herself to clinical supervisors and attempting to emulate them, yet she noted this could lead to feelings of being “lost” in terms of her sense of self:

“I would always try and, see what my supervisor was like and emulate that [...] which, in one hand is trying out different styles, but, I think you can get lost as a person in all of that and not really know who you are.”

Tilly

Conversely Ben spoke about comparing himself to those in his cohort to work out how one should be in terms of their personal lives:

“I put a lot of pressure on myself to kind of match where other people were personally. I remember thinking of my relationship, you know, seeing other people kind of getting married or having kids and I wonder if that is where I should be.”

Ben

For Tilly, there seemed to be a move over the course of training and beyond from constantly comparing oneself to others, to self-acceptance and appreciation:

“Feeling more confident, and self-assured in myself as just a person, to, be that person professionally, and definitely, recently thinking about me, personally and just that sort of, real sort of reflective, kind of, who am I? Rather than always seeing the self in this context of other people.”

Tilly

In addition, Tilly hints at her identity being more unitary and internally located rather than being dependent upon and seen through the context of the other.

This theme captured participants’ reports of comparing themselves to others as a way of evaluating, further developing and accepting themselves. In particular, Trainees spoke of the internal and external expectations resulting from their professional labels and position in relation to others in teams.
3.4 Superordinate theme: Taking risks and managing uncertainty

This theme referred to the process of becoming more comfortable with uncertainty during CP training (subordinate theme *Comfort with not knowing vs. the safety of certainty*). It seemed participants initially sought out certainty, for example in understanding who they are and how they are supposed to be. The move away from this could feel destabilising, for example Jane spoke about feeling she had “lost” herself. However, participants ultimately valued taking a more uncertain and flexible position both in their clinical work and their view of themselves.

By being able to feel more comfortable with uncertainty, participants were more able to take risks, for example being vulnerable and open, within their personal and professional relationships. It seemed these risks enabled a deeper connection with others, which was very much valued by participants. This is explored in subordinate theme *Opening to connection*.

3.4.1 Subordinate theme: Comfort with not knowing vs. the safety of certainty

This theme referred to participants’ experiences of becoming more comfortable with uncertainty during clinical training, whilst recognising the safety that certainty can provide. Tilly spoke about her expectation that training would provide certainty:

“Then you get on the course, and you think wow everything, that’s done now, then actually you start and then suddenly, things change I think, and it becomes incredibly scary again.”

Tilly

It seems that Tilly believed that gaining a place on training was the goal or the end of her journey, with the attainment of this goal providing the sense of certainty. Similarly James spoke of the uncertainty commencing training brought, in which he described how a friend’s comment that he had already changed during the first week of clinical training created anxiety for him:

“My god what’s going to happen?” […] Am I going to turn into this zombified clinical psychologist but being able to in the back of my head sort of preparing me for knowing that change was going to happen. But also the uncertainty that brought in terms of how I viewed myself, but it’s the opposite that happened into becoming more uncertain view of a person.”

James

His comment that he may turn in a “zombified clinical psychologist” suggested a fear that he might lose himself in some way during the process of training. Despite the uncertainty this creates, he spoke about being prepared to accept the change in his identity as well as a less fixed, more flexible view of himself. Jane also spoke about training as a potentially destabilising experience:
“At the beginning I was a certain person that I thought I was, then you kind of explored it, and everything was, smashed, you kind of lose yourself, [...] and then it came back together, [...] I kind of got back to the person I was but in a stronger way.”

Jane

Jane seemed to refer to an exploration and developing awareness of her identity as part of training (as explored in Section 3.2.1), with her use of the phrase “lose yourself” suggesting that this process made her feel less certain in who she was. It seems that occupying this uncertain position in relation to herself was destabilising and distressing during training, exemplified by the use of the word “smashed”. Yet she then spoke about getting “back to the person [...] in a stronger way”, which is suggestive of being more sure or certain within herself. This may link to the theme of self-awareness (Section 3.2.1).

William also spoke about him experiencing aspects of clinical training as destabilising, but in relation to the academic teaching:

“I don’t know vulnerable is probably the wrong word but, certainly in the first year the teaching felt so philosophical, so deconstructionist about everything, never teaching you anything to say ‘ok well this is something you can take away, this is an actual fact that you can keep’, so it meant that everything could be challenged, everything could be debated about and everything could be argued about.”

William

William’s repeated use of and stress on the word so perhaps suggested a feeling that this new position was very different to his previous way of seeing things. As with Tilly and James at the start of this section, it may be that William experienced the start of training as uncertain. The idea of a fact that “you can keep” suggested that he was perhaps looking for something stable during this time of uncertainty, when “everything could be debated”.

Rather than seeking certainty through facts, James seemed to seek containment from his supervisor. In this instance he spoke about the uncertainty owing to difficulties in the team, which increased his seeking out of this containment:

“And in terms of me and my supervisor, we never really got a good working relationship. We just didn’t click. And something, that because of all that uncertainty going on, I think there was a need, that I probably wasn’t articulating or acknowledging, which was for some containment from the supervisor. And because she was relatively new, often if there was something tricky
it would be, I need to take it to my own supervision or I need to ask my supervisor, which I didn’t find containing at all.”

James

It seemed that perhaps containment came from both the supervisor’s confidence but also a “good working relationship” between trainee and supervisor. In addition, it seemed that James experienced the supervisor’s attempt to create certainty by seeking advice from her own supervision as creating further uncertainty. In another of James’ supervisory relationships, this containment seemed to be provided, even in the context of difficulties in the team. In particular, it seemed the provision of a space to express and acknowledge one’s emotions perhaps enabled a feeling of containment:

“So she would start the session by saying, “How are you?” And if you said okay, “No really, how are you?” And having a 5-10 minute chat about how you were at that point. [...] I think [...] that was needed to really push home the point, you know, how you are at this point is going to influence what you talk about supervision and how you make sense of what's going on. And there was still a lot going on in that team.”

James

Tilly spoke about how it felt to sit with uncertainty, in which she took a position in her clinical work of “not having to know everything”:

“I think my training experience sort of really allowed me to [...] be confident with that idea of, not having to know everything [...] I’m a lot better in not having to know everything, and, which I think is a good place to be.”

Tilly

This seemed to suggest a comfort and confidence for Tilly in adopting an uncertain position, yet she also spoke about how this position could feel risky in some way (which is further explored in Section 3.4.2):

“Build their confidence up to be able to take those risks, and it’s ok if it doesn’t work out, 'cause life doesn’t always work out.”

Tilly

Her suggestion is that perhaps being confident to take the risks of taking an uncertain position is a useful skill. Yet Ben spoke about how within clinical work one is exposed to the “struggles in life” and this has led him to be more uncertain and “cautious” in his personal life:
“Just realising how little you know and how difficult it is to kind of support people and just all the struggles in life, I think made me a lot more cautious in my personal life.”

Ben

This cautiousness was perhaps a way of protecting himself or others from the “struggles” he has seen in his clinical work. This is perhaps owing to awareness of the uncertainty in life, similar to Tilly’s comment that “life doesn’t always work out”. This may also link to the earlier theme that highlighted the reflexive relationship between participant’s personal and professional lives (Section 3.2.2).

In contrast to taking a cautious approach to manage uncertainty, Tilly initially attempted to gain certainty through bedding her understanding of her experiences in research and academic learning:

“Actually trying to find, all the answers immediately sort of, take you nowhere and sort of stops that creativity [...] someone at the ***** course must have brought him up (referring to Mason’s (1993) concept of safe uncertainty) and I think that was something that I found really, quite freeing.”

Tilly

She seemed to suggest that it is in not searching for answers and tolerating uncertainty that one is able to be creative. In addition, it appears that Tilly obtained a sense of safety through accepting and sitting with uncertainty. I had also reflected on the concept of safe uncertainty during my training and, therefore, felt a connection with Tilly when she spoke of this. I wrote about this in my reflective diary:

“I couldn’t believe it when Tilly talked about safe uncertainty and Barry Mason. The idea that I don’t have to know everything has felt so new to me too, so different to how I saw things before. Though it doesn’t feel that safe to me yet, I wonder if I will get to that place one day? Seems to be a process of going back and forth between accepting uncertainty and looking for some certainty again. Maybe Tilly is at a different place in relation to this idea.”

Natasha

Similarly to Tilly’s sitting with uncertainty, Ben spoke about a move in his clinical work from a structured approach to a more emotional one. It seemed the structured approach was comfortable for Ben, but that occupying multiple positions was of more value:

“I think before the course, I was a lot more structured and organised about my thinking. [...] I think all Psychologists kind of have that ability to sit emotionally with clients. [...] But [...] I thought I could structure my thinking quite quickly and I think that led me to do a lot kind of
CBT stuff. It was only when I did a systemic-type work role before the course that I actually started thinking we needed something more than just being quite structured.”

Ben

Ben also spoke about taking a more uncertain position as a supervisor:

“Where I supervise other people, I kind of go in with nothing. I go in with a very much more reflective approach which I think has a positive influence. I guess the negative influence is, I think whilst before I would probably give people what I think they need, I think now I hopefully would reflect it more back on them which isn’t always what people kind of want.”

Ben

He highlighted a dilemma between his supervisees desire for certainty but the need for a reflective approach. This is an interesting reflection post qualification from Ben when considered in the context of the rest of this theme, as it suggests there may be a developmental process from yearning certainty to sitting with and valuing uncertainty. William shared Ben’s belief and confidence in adopting an uncertain position and how this allowed him to not “hold onto ideas with the same kind of force” and be more “free”:

“I think by being more confident I had to hold onto things less tightly, because I didn't need to hold onto ideas, with the same kind of force. I could be more confident in myself letting things kind of come and go and, being a bit more free I think.”

William

It seemed that for most of the participants, part of training involved a developmental process of responding to and tolerating uncertainty, including in their clinical work and within themselves personally.

3.4.2 Subordinate theme: Opening to connection

This theme referred to some participant’s reports of opening themselves to connection with others, during the course of training and post-qualification.

Tilly spoke about initially separating herself and disconnecting from those around her during training:

“I viewed myself a bit of a, as a bit of a lone ranger, as a bit of somebody who, didn’t really want or need lots of other people around me, was just looking out for myself. When looking back at that was quite sad to think about how I was.”

Tilly
Her reflection that this was “quite sad” suggested that she now views things differently, however she also commented:

“It was easier to push them away emotionally, to protect myself I guess.”

Tilly

Yet Tilly also spoke about a process of learning to trust people again, perhaps where she would take the risk of connecting:

“I think I was sort of being on a journey of allowing myself to trust people again.”

Tilly

James spoke about his belief in the need in his professional life to connect with others. He referred to his earlier comments on relating to those at his level of the hierarchy (see Section 3.3). It seemed he came to acknowledge the need to connect on a personal level with those in “positions of power” (James):

“And across the placements just realising, you know, you are working as part of a team. You can’t be isolated. You can’t keep yourself to yourself or keep yourself to the peer level because that’s not going to work particularly.”

James

Similarly to Tilly, James identified that a mechanism that can be protective (in his case focusing on the needs of others and blocking out his own needs), could also leave you feeling “isolated”:

“But what I learnt throughout it was actually, it is protective but it also blocks contact with other people and can make you quite isolated.”

James

It seemed that for both Tilly and James fully connecting with others contained an element of risk. However there seemed to be value in taking this risk as through making connections with others one could feel less isolated.

Nicole spoke about her personal therapy during training. She linked becoming connected with her emotions and the ability to connect with people in her life. This perhaps suggested a need for reflection on oneself in order to connect with others:

“So before the course, I was a lot more closed as a person. What was I like before I had therapy? I wasn’t connected to my emotions [...], I was disconnected from people in my life.”

Nicole
She also spoke about how significant relationships could enable “depth” or connection in other relationships, which was perhaps the result of her feeling “encouraged” or validated:

“I made, you know, some amazingly close relationships that enabled me to develop better, deeper relationships with people. [...] I had some, you know, some really lovely people that just really encouraged how I thought.”

Nicole

In addition, it felt as if Nicole was able to increasingly grow and accept herself through her connections with others. Similarly, William described the benefits of conversations with his cohort, which enabled him and others to be vulnerable:

“Quite emotional, conversations, and right from the beginning, which I thought was so important because of the work that we do. Everything was on the kind of quite emotional plain and we were able then to know where each other was, emotionally, what people could kind of take where people’s buttons were, and, almost kind of be equally vulnerable with each other.”

William

It seemed that something of these conversations enabled a connection with others, which perhaps provided a safety later in training, to be “vulnerable with each other”. This again highlighted the value that can be gained from taking risks within relationships and this enabling a deeper connection. His reference to “people’s buttons” suggested an awareness of each other’s experiences which allowed them to support one another.

Tilly spoke about an active process of seeking out a supervisor whom she felt she could connect with and trust. However, her comment that he may say she did not do this completely, suggested an awareness within her that although this was a change for her, she did not fully “let him in”, perhaps because of the risk inherent in doing so:

“There was something about my supervisor I guess that, I chose him for the fact that I knew I could trust him, so I guess I did let him in, as much as, he probably would say I didn’t let him in completely.”

Tilly

The letting in she refers to is perhaps suggestive of the dilemma of showing her full personal self within a professional context, which links to William and Ben’s comments in Section 3.3.2.

Jane spoke about how her response to arguments in personal and professional contexts. Her comment that she needed to be “careful” in the professional context, as there is a risk associated with being oneself or perhaps showing one’s personal self in the professional context:
“At home I never had that much problem with managing arguments, I find it easier than at work, at home I think I’m, I was fully being myself so, that doesn’t matter, and you feel accepted, whereas at work you have this pressure of always proving who you are or you know, be a bit more careful, I would say, and you don’t feel as accepted.”

Jane

It seemed for Jane that fully being herself in the professional context would run the risk of her being rejected by her colleagues. Yet Jane also spoke about the opportunities created by having arguments with other members of her cohort during training:

“We had like a lot of arguments, and the arguments really like, I know it’s horrible but it really helped, to build up and bring friendships.”

Jane

Jane’s link between these arguments and “building friendships” suggested that being open about how one is feeling may lead to a deeper connection. This may be considered a risk given her previous comment about being “careful”. In addition, it may be that the peer relationships in her cohort were a safer place to try out fully being herself, due to potential power dynamics inherent in clinical placements.

This theme explored participants’ experiences of connecting personally with others during CP training. For some, it seemed connecting with others presented a risk in being vulnerable within these relationships. This theme perhaps linked to the previous one regarding managing uncertainty as in taking these risks and showing the personal self in the professional context, there was an element of the unknown regarding what might happen next. However, participants also spoke of the benefits of taking these risks in gaining deeper connections with others.
4. Discussion

This discussion reflects on the results of this research study within a framework of psychological theory. It draws on clinically based literature where relevant, although it is acknowledged that these are derived from clinical issues and samples. This literature often related to how people manage their experiences and as this study explored how CPs managed doctoral training this was appropriate. This discussion reflects on the research questions and how the findings of this study relate to these. The main research question was:

- How do newly qualified Clinical Psychologists experience their personal and professional identities during doctoral training?

This was supplemented with a subsidiary question of:

- How do they experience the boundary between their personal and professional development?

The Discussion then provides a critique of the methodology of this study; highlights implications of this research including clinical implications; and finally suggests potential directions for future research.

4.1 Summary of results

The results of this study were viewed within the context of CP doctoral training, which aims to train individuals to engage within that professional role. This training includes academic teaching, clinical placements and the undertaking of research. Trainees are then assessed in line with certain competencies (BPS, 2014) as part of this process.

The results suggested a process of increasing awareness of oneself acquired during the course of training and beyond. This awareness was of both personal and professional selves and, perhaps, involved developing a more flexible view of oneself. Self-reflection seemed to be central within this developing awareness process. Participants stressed the links and overlap between their personal and professional identities, however, there were differences in how these constructs were seen to relate. They also described dilemmas of when it would be acceptable to show their personal selves in the professional context.

The awareness participants spoke of, also included a process of developing knowledge and skills. This area of development had implications for participants both professionally and personally. For example, within the professional context they were able to put academic knowledge into clinical
practice. Yet, personally, this knowledge could have different implications, such as feelings of disconnection from people who had not been through a similar experience.

Another theme, which ran through participants’ accounts, was that of managing the uncertain process of training, tolerating that uncertainty and seeing the creativity that could come from taking an uncertain position. As part of responding to uncertainty, participants spoke about taking risks within their personal and professional relationships. These risks could have uncertain outcomes, yet these risks were seen as valuable as they enabled deeper connection with others.

A process of developing self-acceptance during and post training was seen, both personally and professionally, within participants’ accounts. As part of this process there was a move from looking to others to externally recognise one’s value to internally valuing oneself. Yet within this, recognising one’s own value could be enabled by being valued and validated by others. Alongside this came a process of developing autonomy whilst maintaining relatedness to others. However, developing self-acceptance and a sense of autonomy presented a challenge in the context of training, where trainees were expected to learn and develop. This led to participants striving to become better. As part of this, participants compared themselves to others, with the aim of becoming more like the other. An outcome of these processes seemed to be a conflict between self-development and self-acceptance.

4.2 Responding to the research questions

In response to the research questions, within these results there was a strong message of an inextricable link between one’s personal and professional identities and their personal and professional development. It seemed that participants started from a position of being themselves, and during training negotiated the dilemmas of learning a professional role. In order to do this they would often look to others for how to negotiate this process. Yet this process could create challenges, as bringing one’s personal self into the professional arena was not always seen as acceptable, unless within the context of professional development. If participants were able to show personal aspects of themselves this could make them feel vulnerable and, therefore, these processes held an element of uncertainty. However, where participants were able to show their personal selves and others validated this, this allowed for developing self-acceptance.

In light of this understanding, this discussion now goes on to conceptualise the results, within psychological theory, in the following sections:

- The personal self in the professional context
- Understanding oneself through relationships
- Autonomy and relatedness: Being yourself whilst maintaining connection to others
- Connecting personally in the uncertain context of professional training
• Self-development and self-acceptance

4.3 The personal self in the professional context

Perhaps the aspect of the results which most immediately answered the research questions, were participants’ experiences of the connection between their personal and professional identities. This is highlighted in the subordinate theme Personal and professional selves: One doesn’t go without the other (Section 3.2.2) for example, James’ description of his personal and professional identities as “two sides of the same railroad track”.

Within the Introduction the literature regarding the underlying conceptualisation of PPD during clinical training emphasised delineation between personal and professional identities. Yet within the results of this study, it was clear that participants’ experiences of their personal and professional identities did not match with this literature. This was demonstrated by Nicole and James questioning the interview schedule (which was derived from the literature base), where personal and professional identities were asked about as separate constructs (Section 3.2.2). This conflict can perhaps be understood from a social constructionist standpoint (see Berger and Luckmann, 1991). The separation of personal and professional within the profession of CP may be linked to a focus on the scientist-practitioner model (Raimy, 1950), as discussed in Section 1.3. This model places emphasis on a technique within therapy, which has been shown to be important in the effectiveness of psychological therapy (Goldreid and Davilla, 2005). However, this model does not stress the importance of the person who is becoming a therapist during CP training. It seemed that the separation of the personal and professional in CP training may be a socially constructed separation, in line with a scientist practitioner model and a product of cultural and historical context (e.g. the focus on evidence-based practice in the NHS).

Models of PPD during CP training (e.g. Sheikh et al., 2007) view this differently and have acknowledged the personal aspects of professional development. Yet the results of this study highlighted a continuing dilemma for those undertaking training in connecting personally with their professional roles. It seemed possible that there is mismatch between models of PPD and the acknowledgement of the personal self in CP training. As discussed in Section 1.3, a reflective practitioner model would stress the importance of self-reflection and, therefore, may not conceptualise the personal and professional aspects of CPs so dichotomously. Therefore, in order to train reflective practitioners (BPS, 2014) it seemed this dilemma must be responded to during training.

It seemed that, for some, there was a dilemma of bringing their personal selves into the professional context. For example, William’s concerns that showing personal aspects of himself (as represented by his “flowery shirts”, Section 3.3.1) may not be acceptable in a professional context. James spoke about
worries about being “interpersonal” with those in authority, which again highlighted this dilemma of bringing the personal self into the professional context, particularly in hierarchical relationships (Section 3.3.3).

There was a theme of trying to think how, and whether, to bring the personal into the professional context. This could be conceptualised as connecting personally with one’s professional roles. Yet at other times participants attempted to keep their personal selves separate from their professional life, which could be seen as a way of protecting oneself by disconnecting. For example, William spoke about “playing at the role” and Ben about a “faker syndrome” (Section 3.3.1), both of which suggested a disconnection between their personal and professional selves. Ben spoke about trying to separate the personal and professional yet being unable to do this and this being “surprising” to him (Section 3.2.2). This further suggested the undeniable link between the personal and professional aspects of oneself.

Yet this was not a one-way process of bringing one’s personal selves into the professional context. Participants’ professional experiences influenced their personal lives and experience of themselves. For example, Tilly spoke about feeling “more self-assured in who I am” and William about being “happier in myself”, suggesting change beyond the professional context. Lizzy spoke about the validation provided by her training experience which “gave me strength in my personal life...I value myself a little bit more”. James also spoke about the transference of seeing value in himself between the two contexts: “seeing more value in myself as a person would directly impact on my value as a professional and vice versa”. The use of the phrase “vice versa” highlighted the bi-directional relationship between the personal and professional. It was perhaps seeing value in herself which enabled Nicole to develop an “ability to stand up for herself” during training and take this forward personally. It seems professional experiences influenced participants beliefs about themselves personally.

Participants often spoke about the impact of training on their personal relationships. This could potentially be a positive experience but also presented challenges. For example, Tilly spoke about feeling she had gained a “superpower”, which represented an increased awareness of herself and others but which led to a sense of disconnection from those around her. Yet, conversely Nicole spoke about how training enabled connection to others in her personal life and her to have “deeper relationships with people”. Ben spoke about how “being exposed to the struggles of life” in his clinical work made him “more cautious” in his personal life, suggesting a personal struggle with his professional experiences. It seemed that training had a significant impact on personal relationships but this was often a mixed experience.
These accounts of the personal impact of professional experiences suggested a bi-directional relationship between the personal and professional, where people bring personal experiences into the professional context, however, they are also influenced personally by their professional experiences.

The idea of the personal in the professional context is an interesting one when considering literature regarding socialisation to the profession of CP. Cheshire (2000), as discussed in the Introduction (Section 1.9.6), highlighted that through socialisation trainees internalise values and norms of the profession. However, trainees retain some scepticism about the rhetoric of the profession. This scepticism is perhaps reflective of their personal stance and an aspect of the personal self, which trainees in the current study attempted to bring into their professional work.

There was a developmental process inherent in acknowledging the personal self in the professional context, as highlighted by William’s comment that the “two worlds became much closer”. This was perhaps indicative of a flexibility in how participants saw themselves, for example Jane spoke about holding a more flexible view of what a psychologist could be, suggesting an element of the personal being expressed in the professional context.

The concept of psychological flexibility, resides at the heart of Acceptance and Commitment Therapy (ACT; Hayes, Strosahl & Wilson, 1999) therapy. Alongside flexibility, ACT discusses a ‘conceptualised self’, which contains conceptualised literal content about the self, in terms of fixed attributes of that person (self-as-content). It is proposed that the person then tries to live up to their own or others views of themselves:

“healthy human life required continuous and flexible verbal self-knowledge” (p. 184)

ACT focuses on distinguishing oneself from conceptualised content of self-knowledge (e.g. thoughts about being good and bad) to one based more on context (self-as-context). Though there may be an ever changing content of one’s thoughts and feelings, there is the constant perspective of one’s self which perceives those. It is a mindful position where the self is understood as both stable and fluid/contextual. For example, this is highlighted in Tilly’s quote “5-6 years ago, and me now, fundamentally I think I am the same person [...] maybe it’s about me becoming more self-assured in who I am” (Section 3.3.1). This is in line with the hypothesis that individuals bring a stable personal self to the training experience but through professional training are able to have a different view of this self. Alongside such flexibility is likely to be cognitive defusion (Hayes et al., 1999) wherein one is able to distinguish oneself from the language based content of that self-knowledge.

William spoke about there not being “one way of seeing the world”, in both his personal professional lives (as described in Section 3.2.3 Losing Naivety vs. gaining wisdom). It seemed that part of the wisdom that was gained was having flexibility in his personal position, which was in line with a move
from a conceptual to contextual self. Lizzy spoke about a desire to respond spontaneously in her personal relationships without considering whether this was from a personal or professional perspective (Section 3.2.2). This again seemed linked to developing a contextual self, which is stable but able to respond in a human way in the moment.

It seemed that in order to connect personally with one's professional work and develop a contextual self, it was necessary to reflect on oneself. Tilly suggested that training prompted and enabled reflection on who she was personally and professionally. James spoke about there being "lots of mirrors going on" during training, Jane about reflecting on her roles in her cohort and Nicole about reflecting on her professional role.

Though participants spoke about the link between their personal and professional selves, there was also acknowledgement of the importance of boundaries in their professional work. For example, William spoke about the challenge of being congruous to himself whilst being boundaried in his work. It seemed there was a difference between connecting personally with one's professional role and crossing professional and ethical boundaries (e.g. Kitson & Sperlinger, 2007).

4.4 Understanding oneself through relationships

Both superordinate themes of Developing self-acceptance (Section 3.3) and Enhancing awareness of self (Section 3.2) included an element of seeing or understanding oneself in relation to others. Participants seemed to be negotiating the process of training, and understanding themselves within this professional context, by comparing themselves to others and looking for others to value and validate their achievements. Compassion Focused Therapy (Gilbert, 2009) ideas could be usefully applied here, which highlight the evolutionary necessity to see oneself in relation to others in one's social group.

Compassion Focused Therapy (CFT) is rooted in an evolutionary, functional analysis of basic motivational systems (e.g. to live in groups, form hierarchy's and ranks, seek out sexual partners and care for kin) and different functional emotional systems (e.g. to respond to threat, seek out resources and states of contentment/safeness). In many themes in this study (Being valued by others to valuing myself; Comparing self to others; Becoming open to connection) the interpersonal aspects of PPD were presented. This resonated with the motivational system for interpersonal functioning, as discussed by Gilbert (2014). Within this system most central processes that regulate emotion and sense of self, are those linked to roles such as status, sense of belonging, affiliation and caring. The comparisons to others seen in this study (e.g. to supervisors and other trainee CPs) could be understood within this motivational system. Through comparing oneself to others, participants were able to ascertain their own status and level of achievement. A focus on achievement was seen in the theme I should be someone better vs. feeling ok about myself. Owing to the need to achieve as part of this motivational system, Jane even spoke about how she de-prioritised her own self-care (Section 3.3.1).
This motivational system may explain why acknowledgement of one’s achievements (qualifying as a Clinical Psychologist) was a source of pride as it was for Lizzy. Yet, conversely, at times it seemed that, for some, recognition of their achievement did not fit with how they saw themselves (e.g. Lizzy feeling somewhat embarrassed about being called Doctor and Ben’s description of experiencing “faker syndrome” when accepted onto training). Understood within a CFT model, this may be because they hold certain beliefs about their status or place in the hierarchy within their social group (e.g. in relation to peers and qualified CPs) and this achievement does not fit with these beliefs.

From an evolutionary perspective, understanding oneself relationally is perhaps what allows humans to live in groups (Gilbert, 2014), or in the case of this study, perhaps operate within a training cohort or multi-disciplinary team. In order to live in a group and seek out a sense of connectedness, one must monitor oneself for what others might want from them. For example by comparing oneself to others (linked to subordinate theme Comparing myself to others) and looking for other members of the group to value you (linked to the subordinate theme Being valued by others to valuing myself).

Gilbert’s (2009) model would be in line with theories of self-esteem (e.g. Cooley, 1902/1964) where one’s self-worth originates from comparisons with others. This is in line with the striving, achievement focused aspect of the theme I should be someone better vs. feeling ok about myself. Yet Neff (2006) highlighted that though self-esteem can produce positive feelings at times of achievement, at times of failure it can lead individuals to become self-critical. For example this was shown in the way participants spoke when they believed they did not act in the expected way (e.g. William “playing at a role”).

Another theoretical understanding of the processes by which participants compared themselves to others is Relational Frame Theory (RFT; Hayes, Barnes-Holmes and Roche, 2001). RFT suggests that human behaviour is governed largely through networks of mutual relations called relational frames. Humans think relationally and are able to relate objects, thoughts, feelings, actions, to other objects, thoughts, feelings and actions. This allows people to learn without requiring direct experience, for example by being told something verbally by another person. Through this verbal exchange people are able to create a relational frame between previous knowledge and this new knowledge.

Two examples of types of relational frames are comparative and evaluative frames (Hayes & Smith, 2005). These are where people understand something by comparing it to something else (e.g. using words such as better than, bigger than, prettier than). It seemed that participants within this research often understood their experiences in comparison to those around them, that is, within these comparative frames. However, according to an ACT (Hayes, Strosahl & Wilson, 1999) perspective these language-based comparisons can present difficulties and can restrict how experiences are seen. For example, participants spoke about the comparisons that were made based on the language-based
labels they had been given (e.g. trainee). These labels were often attached to comparisons to others, for example Tilly's comment that "they want the skilled psychologist". James spoke about being seen through the prism of the label "anxious trainee" and how this stopped others seeing his complete self. Thus, this complete self, perhaps, referred to other personal aspects of himself, rather than this one aspect as viewed by another within a professional context.

Hayes and Smith (2005) identified that humans are problem-solving creatures. Understandably, when negative evaluations of oneself in comparison to others arise, we respond to this problem by striving to be better. This was evident in the theme I should be better vs. feeling ok about myself (Section 3.3.1). Yet this striving can cause difficulties, for example, when Jane spoke about not attending to her own self care. It may be that this process of striving to be better was influenced by the evaluative nature of training, which is focused on a need to develop certain competencies (BPS, 2014). For Nicole this seemed to go one step further: she felt that training seemed to require her to act in ways which were incongruent with how she was before training. Regardless, the results of this study suggested that, not only did participants develop competencies, but also an acceptance of themselves; they placed great value on both of these aspects.

Continuing to consider the theme of seeing oneself relationally, the importance of participants’ roles, in terms of how they viewed themselves, became apparent. Interpersonal Psychotherapy (IPT, Klerman, Weissman, Rounsaville & Chevron, 1984) discusses the roles one has in one’s social system as being “indelibly woven into the sense of self” (p. 120) and the attached status is important for patterns of interpersonal behaviour.

Given the understanding that one’s role is important in one’s sense of self, IPT proposes that role transitions (in the context of this study from Assistant Psychologist, to Trainee Clinical Psychologist, to Clinical Psychologist) are understandably taxing times. This was seen within the results of this study, for example, William spoke about struggling with the new responsibility of being qualified; Ben spoke about feeling like a “faker” when starting training; and William about feeling like he was playing a “role” as a professional. Klerman et al (1984) suggested that impairment in social functioning can occur if there are demands for rapid adaption to new or strange roles. They proposed four difficulties, which potentially co-occur with role transitions:

1. Loss of familiar social supports and attachments
2. Management of accompanying emotions
3. Demands for a repertoire of new social skills
4. Diminished self esteem
These difficulties may be apparent for trainee CPs, for example, it is likely there will be changes in their social network associated with new roles of trainee or qualified psychologist. Interestingly, the idea of diminished self-esteem at times of role transition was seen in the reports of Ben and Tilly when they stated they lost confidence at the beginning of training (Section 3.3.1). An aspect of this may also be linked to the demands for a “new repertoire of new skills” (p. 120) during training, which may lead to a feeling of inadequacy, which can be seen in the theme I should be someone better vs. feeling ok about myself.

The theme discussed in this section of understanding oneself through relationships is in line with Narrative and Social Constructionist views on identity, as discussed in Section 1.9.4. Gergen (2009) proposes that individuals or bounded entities are social constructs which emerge from relationships and the larger social context. This is supported by the results of this study where participants’ identities were understood within their personal and professional relationships and the context of CP training.

4.5 Autonomy and relatedness: Being yourself whilst maintaining connection to others

Exploring the experience of PPD further, it seemed that there was a theme within the results of understanding oneself in relation to others. Yet the sense of self-acceptance and self-awareness noted in participants’ accounts (Sections 3.2 and 3.3), often seemed linked to developing a sense of autonomy and value in their own voice. For example, rather than looking to others to know how to be (which appeared to be a more dependent position), participants were able to take a more autonomous position of seeing the value in themselves. For example, Lizzy questioned about “thinking […] what are my views?” (Section 3.3.2), which both suggested she valued her views (perhaps linked to self-acceptance) but, also, that she was able to consider what her views were (indicating self-awareness).

This autonomy seemed to be enabled through containing relationships. For example, James spoke about the importance of feeling valued by his supervisors, which enabled him to feel “comfortable in [his] own skin” and value himself (Section 3.3.1). By valuing themselves it seemed that participants were able to take more autonomous positions (e.g. William saying he “found a voice” and “way of being” in Section 3.3.1).

Yet alongside this developing autonomy there was also connectedness with others, as seen in the theme Opening to connection (Section 3.4.2). There seemed to be some similarities between the process of developing autonomy during training and developmental processes during adolescence. Therefore, theories related to developing autonomy during adolescence were drawn on to further understand the results.
Ryan (1995) reported in his review that there was a positive relationship between perceptions of autonomy in adolescence and the perceived quality of relatedness in attachment relationships. Supportive relationships were found to facilitate rather than inhibit autonomy, and, as seen in this current study there was both autonomy and connectedness. Baltes and Silverberg (1994) suggested that a developmental task of adolescence was the negotiation of one’s sense of self as a competent individual whilst feeling a connection with significant others. Perhaps this was seen in the superordinate theme *Taking risks and managing uncertainty* (Section 3.4) where there was a level of developing autonomy and taking risks within relationships, and thus still being open to connection with others.

Although clearly the participants in this study were not adolescents, there appeared to be some similar developmental processes within training to be a Clinical Psychologist. For example, trainees must find a balance between developing competencies and autonomy, whilst maintaining relationships, and seeking support from others. Drawing on clinical practice, these processes can also be seen in the negotiation of the therapeutic alliance, as conceptualised by Safran and Muran (2000). They hypothesised that through ruptures in the therapeutic alliance, the therapist empathises with the client’s experience of the rupture, which shows that “relatedness is possible in the very face of separateness” (p. 102). In therapy as the client comes to accept this separateness there is less dependence on the therapist whilst still maintaining relatedness, as is seen in adolescence within one’s relationships. It may be that processes of negotiating relationships at times of transition (adolescence or therapy) may also be seen in the process of negotiating CP training. This would suggest that a central task of trainers is to enable a sense of autonomy whilst providing supportive and containing stable relationships.

Safran and Muran (2000) also discussed Luborsky’s (1984) Core Conflictual Relationship Theme (CCRT) method as way of conceptualising the therapeutic relationship. This method proposes that dysfunctional relationship patterns have three components: an underlying wish (e.g. a desire for nurturance); the response of the other (including the expected response and the actual response) and the response of the self to others’ responses. They differentiated between the underlying wish as a ‘need’ and the response of the self to this need as ‘neediness’. Although it was not thought that participants were engaging in dysfunctional relationship patterns, an aspect of this model may be useful in conceptualising their experiences. It may be that some of their needs or underlying wishes may remain constant during training (e.g. for guidance, support, containment). However, their responses to this may change, for example, this wish may initially manifest as a dependency on supervisors but move towards an autonomous position where relatedness continues.
Considering this autonomy further, Rønnestad and Skovholt (2003), as discussed in Section 1.7.2, investigated the experiences of professional development of counsellors and therapists. They found counsellors experienced a growing autonomy during training, similarly to the processes found in the CPs in this study. CP training is a significantly different training process, yet there seemed to be similarities, perhaps because of the therapeutic role of CPs. In Rønnestad and Skovholt’s study, during the beginning student phase, students’ anxiety was calmed by positive feedback from supervisors and they often looked to emulate supervisors. This was similar to this study’s themes of *Being valued by others vs. valuing myself* and *Comparing self to others*. In the advanced student phase counsellors experienced more autonomy, but showed little risk taking or spontaneity in their work. This was perhaps reflective of not showing personal self in their professional work, as was seen in the results of this study. For example, William’s concerns regarding the acceptability of showing his personal self within the professional context (Section 3.3.1). In Rønnestad and Skovholt’s proposed novice professional phase, counsellors felt more free and at ease in their work, perhaps suggesting a comfort in bringing their personal selves into their work. This was also seen in this study, as discussed in Section 4.3 of this Discussion.

Although participants spoke about becoming more autonomous in their professional roles (which seemed analogous to bringing their personal self in), both Ben and William highlighted that this was not always welcomed in the NHS context (Section 3.2.2). Therefore, there can be challenges in maintaining one’s autonomy and voice within the professional context.

### 4.6 Connecting personally in the uncertain context of professional training

The processes discussed so far in this discussion centre on acknowledging the personal in the professional context and negotiating the process of CP training. In order to acknowledge the personal self in a professional context it is understandable if one connects with vulnerability, making the process of training an uncertain one. This could include taking risks and connecting personally with others, which can be an uncertain process within itself.

Tilly conceptualised the process of managing the uncertainties of training within the writings of Mason (1993) on *safe uncertainty* (Section 3.4.1). Mason proposed that a task of therapy is to help clients to move towards a position of safe uncertainty, where they feel secure despite the uncertainties in life. As discussed, training can be seen as a very uncertain and destabilising process, for example, in terms of fears about how one might potentially change (James, Section 3.4.1), feeling like you could lose yourself (Jane, Section 3.4.1), the surprising impact of professional work on one personally (Ben, Section 3.3.2), or the challenges academic teaching can present to previous ways of seeing oneself and others (William, Section 3.4.1). Tilly even spoke about how a new found awareness of herself and
others (Section 3.2.1), can in fact create feelings of uncertainty owing to the newness of this self-knowledge. This seemed to be a professional process linked to personal development.

Despite these challenges in the uncertain process of training, participants also spoke about feeling more comfortable with taking uncertain positions e.g. Ben taking a less structured approach and more reflective approach in his clinical work and as a clinical supervisor post qualification (Section 3.4.1). There were suggestions that this position could enable more creativity and meaning making (Section 3.4.1). This is perhaps indicative of a move towards a position of safe uncertainty. This can be understood in relation to the concept of the zone of proximal development (Vygotsky, 1978). Vygotsky suggested that in order to learn effectively, people need to develop from their current position (a perhaps uncertain process) but to do so require support from more capable peers (who could be seen as providing safety). This is in line with the work of Keville et al. (2013) on Problem Based Learning, who highlighted the importance of assessment within a safe context. They stressed the value of a nurturing environment in facilitating the learning of CP trainees. However, it must be noted that an awareness of the uncertainty in life, could also influence participants in their personal lives (e.g. Ben being “more cautious” in his personal life, Section 3.2.2).

For some, taking risks during training was within relationships and involved the dilemma of connecting with others. Interestingly, this also seemed to be related to showing one’s personal self in the professional context, particularly in relation to hierarchical relationships. This can be understood within Mason’s concept of relational risk taking (2005), where risks are taken within an interpersonal relationship to open new avenues within that relationship. It seemed that a sense of safety to take these risks could potentially come from the supervisory relationship, for example, Tilly spoke about seeking a supervisor with whom she felt safe to be open about her experiences (Section 3.4.1). Conversely, some described supervisory relationships that they did not experience as containing, for example, because of the supervisor’s own anxiety (James in Section 3.3.1). It seemed that feeling contained could enable participants to connect with others despite the relational risk (Mason, 2005). Yet when these relational risks had been taken effectively, value was seen in the outcome in terms of allowing more openness in future within the relationships. For example, William spoke about having “emotional conversations” early on in training and this enabling people to be vulnerable with each other later in training. However, it must be noted that for others it was deemed too risky to show the whole personal self as in the professional context as “you don’t feel as accepted” (Jane in Section 3.4.2).

Considering the theme of connecting within relationships one can draw on the work of Keville et al. (2013). They explored experiences of connection and disconnection in Problem Based Learning. They proposed that connecting and disconnecting was a strategy for managing experiences within this form of experiential learning. This can be perhaps be understood as alternating between connecting and
disconnecting on a personal level with a professional exercise and colleagues. It seemed that perhaps similar processes occurred within the process of clinical training, as a way of managing the experience. For example, Tilly and James spoke about the protection that disconnecting from others can provide.

4.7 Self-development and self-acceptance

Throughout the process of training, there appeared to be a process of developing self-acceptance, as seen in the superordinate theme Budding to blooming: Enhancing awareness of self. This was highlighted by James’ description of feeling “comfortable in my own skin” (Section 3.3.1). This self-acceptance appeared to emanate from validation by others. For example, James spoke about others valuing him professionally and this enabling him to value himself personally (Section 3.3.2).

Although some relationships could enable self-acceptance, some participants spoke about seeking reassurance from others as a way of managing the potentially difficult dilemma between personal and professional development versus self-acceptance. For example, Tilly spoke about seeking reassurance from her supervisors (Section 3.3.1). Wells (2013) in his book on cognitive therapy for anxiety disorders highlighted that reassurance seeking (which he considered a type of safety behaviour) can actually enhance exposure to danger-related information and strengthen negative beliefs, thus maintaining anxiety about a certain situation. Interestingly, it seemed participants reached a similar conclusion and Tilly identified that, in emulating supervisors, one could “lose” themselves. It seemed that there was a subtle but important difference between supervisors who provided reassurance through advising trainees how to be and what to do and those who enhanced self-acceptance through validation of their supervisee’s own ideas.

There appeared to be a link between self-acceptance and the dilemma of bringing the personal into the professional context. Through developing self-acceptance participants spoke about finding their voice, which can perhaps be seen as acknowledging one’s personal self in the professional context. For example, William stated “[I] felt much more valued at work […] I found a voice and found a way of being” (Section 3.3.2), which perhaps suggested bringing something of his personal identity into his work and an acceptance in his way of being.

This developmental process of self-acceptance appeared to span before, during and post-training. For example, Ben spoke about initially feeling like a “faker” on training but feeling “relatively confident” by the second year of training (Section 3.3.1). Third wave cognitive and behavioural therapies (e.g. Acceptance and Commitment Therapy, Dialectical Behaviour Therapy) often have a focus on developing self-acceptance as part of helping those in distress. Linehan (1994) proposed that acceptance and change are the polarities of psychotherapy. That is, within therapy clients are expected to make changes and develop an acceptance of themselves. Within this study, a similar process appeared to occur in participants’ experiences of CP training, as suggested in the subordinate theme I
should be someone better (a requirement for change) vs. feeling ok about myself (developing self-acceptance). Given this overlap with Linehan’s work, the theoretical underpinnings of this approach will be briefly explored.

Linehan (1994) stated that the balance between acceptance and change comes from her study of meditation and Eastern spirituality. She proposed that “therapeutic change can only occur in the context of acceptance of what is, however, acceptance of what is, is itself change” (p. 99). In light of participants’ experiences this was perhaps applicable to clinical training, where there was a need to change – learning and training; perhaps this change was better enabled through self-acceptance. Yet Ben and Tilly’s comments that they initially lost confidence on training (Section 3.3.1), perhaps suggested training, at times, may focus more on the need for change rather than on self-acceptance. Perhaps an element of the developmental process of training is finding a synthesis between self-acceptance and change, as would be the focus of Dialectical Behavior Therapy (Linehan, 1994).

Considering acceptance further, Cordova (2001) described psychological acceptance as allowing, tolerating, embracing, experiencing or making contact with, private experiences which previously evoked escape and avoidance. The acceptance seen in the experience of trainees may also involve a level of psychological acceptance where they were able to embrace and connect with aspects of themselves which may have been previously difficult to tolerate. For example, James spoke about valuing both his weaknesses and his strengths and that he was a “unique person” (Section 3.2.2). This was perhaps acknowledgement of his complex personal self within the professional context. This also links with an acceptance of different aspects of himself, in line with a contextual self, discussed in Section 4.4 of this discussion.

4.8 Summary of theoretical conceptualisation of results

This Discussion highlighted an understanding of the results of this study (the experience of PPD) in light of psychological theory. In particular there has been a focus on the personal self that is brought to training and how this is influenced by the process of training to be a Clinical Psychologist. This was understood from a social constructionist standpoint and drawing on models of reflective practice. It seemed that part of this process of bringing the personal into the professional context, was understanding oneself through relationships. This was understood drawing on theory, including theory underling the therapies: CFT, IPT and ACT. Yet alongside this relational understanding of oneself there was both growing autonomy and deeper personal connection with others. This is understood within theories of adolescence, the therapeutic alliance, and of managing uncertainty and risk within relationships. Finally this discussion considered the theme in this research of simultaneous self-development and self-acceptance, in light of the work by Linehan (1994) on the dialectic of acceptance and change.
4.9 Critique of the methodology of this study

Elliot et al. (1999) proposed seven standards for quality of qualitative research. These standards were drawn upon to critique the methodology and results of this study:

1. **Owning one’s perspective.**

This refers to the researcher owning one’s perspective of the research topic, including their theoretical orientation and personal anticipations. In order to do this, as the researcher, I have attempted to recognise my values, interests and assumptions and the role these played in my understanding of the results. I engaged in self-reflexivity through keeping a reflective journal and through conversations with my research supervisors. A declaration where I am open about my theoretical and personal perspectives is included in Section 2.3 of the Methodology. By doing this I aimed to help the reader to comprehend my understanding and consider alternatives. I will now further expand on my own perspective in order to highlight the reflexive relationship between myself and this research.

When first considering this research area I was drawn to investigate the boundary between trainees’ personal and professional lives. This perhaps stemmed from my own struggles in trying to create a boundary between these for myself. I was particularly intrigued by relationships during training, which are framed as professional (e.g. with other trainees), yet for me, colleagues became friends and confidants. Yet, I attempted to maintain a boundary between different aspects of myself, perhaps because this was what I thought was expected of me. Therefore, in approaching this research I anticipated that my participants would attempt to separate their personal and professional lives and selves. Yet, participants spoke about these aspects of themselves as closely intertwined. This close relationship was something many participants valued. This mirrored my own journey of allowing fluidity into the boundary between personal and professional aspects of myself.

The fluidity of the boundary between personal and professional is a theme which I have considered throughout the duration of this research and there were multiple perspectives on this from participants. Supervision and my relationship with my primary supervisor has played a key role in my understanding of this boundary. The creation of an open reflective space by my supervisor enabled fluidity in my thinking and allowed for a focus on personal aspects of myself. The permission to bring my personal experiences and struggles into supervision has been a freeing experience. I have been able to consider multiple perspectives and embrace new ideas. As the reflexive relationship between personal and professional is acknowledged, so it must be that the personal cannot be ignored within the professional domain of supervision. This stance has allowed me to fully explore and acknowledge my relationship with this research, which has enabled me to fully engage with the research process and better represent the experiences of my participants. This personal focus has subsequently become intertwined within this research, as my research journey has joined with my personal journey.
I was drawn to working with my primary supervisor owing to her stance in relation to the training of Clinical Psychologists and how this fitted with my own experience of training. My supervisor values the personal perspective in training and views the personal context as central to the training experience and professional role. Her view is that through allowing people to be themselves, even within the professional training context, they are enabled to develop more fully and gain a fuller awareness of themselves. This was a view that fitted with me, though prior to this research I would have struggled to articulate this fully. Training has been a personal experience for me and I believe there has been a paradoxical process of me flourishing into who I have always been. My supervisor’s stance has made me consider alternative ways of thinking about the training experience, for example I have been able to move away from the current literature, which is often categorising of personal and professional, towards being open to the varied experiences of my participants.

As a trainee I have valued opportunities for personal professional development offered by my course (e.g. Problem Based Learning tasks, reflective practice groups). These opportunities have enabled me to make changes both personally and professionally. For example, I was greatly influenced by teaching on the value of relational risk taking (Mason, 1999) which I have applied in both my personal relationships and in my clinical practice. This idea has subsequently featured in this thesis and I was intrigued to find a theme around risk taking in my analysis of the interviews.

These experiences have led me to believe in the value of both personal and professional development as aspects of CP training. There has been a reflexive relationship between my own perspectives and the themes in the research. I now value a degree of separation between my personal and professional lives, but also bring personal aspects of myself into my practice. This is shown in my clinical work where I greatly value the human connection I have with my clients.

In light of this study being peer research, owning my perspective as the researcher was of particular importance, as I may have had similar experiences to the participants. Our potentially shared experiences would have understandably influenced my interpretations of the data; however, through self-reflexivity I was able to remain open to multiple perspectives. Furthermore Platt (1981) highlighted that a strength of peer research is that it can reduce power differences. Mercer (2007) stated that shared experiences can help foster stronger rapport and a deeper shared frame of reference. When asked about the influence of my peer status, participants spoke of a shared knowledge base, which enabled a deeper shared understanding of their experience.

2. Situating the sample

As part of situating the sample, it would be expected that the diversity of participants would be acknowledged. However owing to the small population from which I recruited participants, in line with the homogeneity of sample expected in IPA studies, exploring issues of diversity may
inadvertently have revealed the identity of participants. Therefore, diversity of the sample was not explored apart from basic descriptive data (e.g. age range and gender). This may impact on the generalisability of the study.

2. **Grounding in examples**

Elliot et al. (1999) highlighted the importance of grounding the results in examples from the data. This was achieved through use of verbatim quotes in the Results section. However, it must be acknowledged that this was only one possible representation of the results.

3. **Providing credibility checks**

The analysis in this study followed the rigorous and transparent IPA procedure (Smith et al., 2009) in order to ensure validity of the results. Elliot et al. (1999) proposed that triangulation through checking the credibility of emerging themes with individuals who have had experiences of the phenomena under investigation, can be particularly useful. Both of my supervisors who were involved in triangulation of the data, have experienced PPD in the context of CP training and are now qualified CPs. Given the interpretative element of IPA, the findings of this study relate to my interpretations of participants interpretations of their experiences. Therefore, my interpretations of the data remained central to the overall findings of this study. Owing to Smith et al.’s (2009) concerns regarding seeking participants validation of the themes owing to the inherent double hermeneutic in IPA, their feedback was not sought.

4. **Coherence**

Elliot et al. (1999) proposed the importance of achieving coherence and integration whilst preserving nuances of the data. Coherence in this study was achieved through attempting to ensure themes hung together into a coherent narrative whilst preserving the nuances of the accounts through thorough representation of divergences and convergences in the Results. In addition, the two research supervisors were consulted to ensure the account given here was both coherent and rooted in the data. Yardley (2000) proposed that coherence can be achieved by ensuring that the research adheres to the underlying theoretical and epistemological assumptions of the implemented approach. This was ensured through acknowledging these aspects of IPA within the Methodology.

5. **Accomplishing general versus specific research tasks**

Owing to this being a qualitative study employing IPA, one must be cautious in the generalisability of the findings here. However, although the aim of IPA is not to make nomothetic conclusions, Smith et al. (2009) highlighted that generalisations can be made cautiously (See Section 3.1). The presence of common themes between participants (Appendix 9) suggested that the findings could be cautiously generalised. However, the focus of this research was on CP training programs, which utilise
experiential learning. Therefore, it is likely that the findings here are more relevant to similar programmes and perhaps with similar underlying philosophies.

6. Resonating with readers

Elliot et al. (1999) highlighted that the reader needs to be able to judge the research as accurately representing the subject matter or clarifying their understanding. It has been attempted to achieve this by capturing participants’ experiences through a rich, transparent and contextualised account by using their words. This has included, where possible, the language of participants, for example in the names of themes, in order to represent their experiences.

4.10 Clinical Implications and Recommendations

This section considers the implications of this study’s findings. In particular there is a focus on their clinical relevance in terms of how these will benefit both the profession of Clinical Psychology and the clients CPs work with.

An overarching theme of the findings was the centrality of the person who becomes a Clinical Psychologist. It seemed that trainees bring themselves to the training context and then negotiate this process of taking on a professional role. This perspective suggested a need for the personal self to be central in the professional training of CPs. This may be a contentious issue given the current separation of the personal and professional in the literature, yet models of reflective practice highlight the need for self-awareness in order to be a more effective therapist and perhaps build better therapeutic alliances (see Section 1.3). This will directly influence the quality of therapy that clients receive.

In balance with a focus on a personal self in training, there is a need to help trainees find the balance between reflecting on their personal selves and maintaining professional boundaries with their clients. This is something which could be considered in the training process, as both the ability to self-reflect and maintain boundaries is important for therapeutic work.

An overarching theme within the findings of this study was the balance between self-development and self-acceptance. It seemed at times that, for participants, the focus was much more on developing and becoming different than on accepting themselves as they were. Training necessarily focuses on self-development, but it seemed there could potentially be explicit exploration of personal aspects of trainees during training, which could then applied and utilised in their work.

It seemed that a natural aspect of being human is to compare oneself to others in order to ascertain one’s own value, as was seen in this study. However, participants spoke about the importance of personal validation, rather than in comparison to others. Training necessarily has an evaluative aspect; however it may be useful to provide other opportunities for validation, which are not linked to
evaluative comparisons to others. This could involve explicitly seeing both the potential within trainees but also validating their current stage of development, irrespective of those around them.

The dilemmas around maintaining autonomy and one's personal voice in the professional context, in particular in NHS contexts, highlighted another area for training programmes to consider. It seemed that training enabled participants to have a voice and develop a level of self-value. Yet how is this maintained post-qualification, where their professional roles may not allow this? This has important clinical implications as a role of CPs may be seen to provide alternative conceptualisations of emotional distress (e.g. formulation as an alternative to the medical model (Johnstone & Dallos, 2013). Further, CPs often work in multi disciplinary teams often led by other professions. If clinicians are not able to promote their voice and perspectives within their professional context this may have implications for the clients their team engage with.

There were some interesting parallels between the processes during CP training and those that happen within psychological therapy (e.g. learning to manage uncertainty, finding a balance between acceptance and change). In light of research on the value of experiential learning (Kolb, 1984), it seemed that these experiences during training may increase CPs awareness of some of the experiences of those they work with clinically, though there are significant differences between therapy and therapeutic training. Therefore, perhaps training programmes could usefully help trainees to think about the similarities between their experiences of training and the experiences of their clients engaging in psychological therapy. A personal focus could facilitate this.

4.11 Future research directions

Here some potential future research direction are proposed, which may aid the further understanding of the mechanisms and dynamics at play in the PPD of CP trainees.

1. Given the developmental processes highlighted in this study, longitudinal study of personal and professional development during clinical training and post qualification would enable further understanding of the processes here.

2. This study has highlighted that PPD and experiences of oneself during CP training were influenced by the context in which trainees find themselves (e.g. professional hierarchies, professional contexts in the NHS). Furthermore, personal and professional identities were understood within relationships. These ideas of identity as relational and viewed within a cultural and historical context are in line with Narrative theory. Therefore, a follow-up study could perhaps focus on context and relational aspects of PPD during clinical training, also considering the wider societal context.

3. The dilemma of bringing the personal into a clinician's therapeutic work whilst maintaining professional boundaries was raised in this study. Given the changing nature of the role of CPs,
it would be useful to explore how these processes occur in other aspects of work e.g. leadership and management roles. Is it possible to be personal within these types of professional roles? Can personal development enhance the learning process and development of these professional roles?
5. References


Hughes, J. (2009). What is personal development and why is it important? In J. Hughes & S. Youngson (Eds.), *Personal development and clinical psychology* (pp. 24-45). Chichester, England: Blackwell.


Schoenholz-Read, J. (2009). Becoming a clinical psychologist: Midlife women’s narratives of professional identity development (Doctoral Dissertation). Fielding Graduate University, Santa Barbara, United States


6. Appendices

Appendix 1: Ethical approval memorandum

UNIVERSITY OF HERTFORDSHIRE

HEALTH AND HUMAN SCIENCES

MEMORANDUM

TO Natasha Woodward

CC Dr Saskia Keville

FROM Dr Richard Southern, Health and Human Sciences, ECDA Chairman

DATE 10 July 2013

Protocol number: LMS/PG/UH/00084

Title of study: How do newly qualified Clinical Psychologists construe the transformation of their personal and professional identities during doctoral training?

Your application for ethical approval has been accepted and approved by the ECDA for your school.

This approval is valid:

From: 10 July 2013

To: 1 June 2014

Please note:

Approval applies specifically to the research study/methodology and timings as detailed in your Form EC1. Should you amend any aspect of your research, or wish to apply for an extension to your study, you will need your supervisor’s approval and must complete and submit form EC2. In cases where the amendments to the original study are deemed to be substantial, a new Form EC1 may need to be completed prior to the study being undertaken.
Appendix 2: Email sent to potential participants via course administrator (sent 16/7/2013)

Dear all,

My name is Natasha Woodward and I am a Trainee Clinical Psychologist at the University of Hertfordshire. For my major research project I am conducting research into changes in personal and professional identities during Clinical Psychology training.

Several authors (e.g. Gillmer and Marckus, 2004, Youngson and Hughes, 2009) have discussed potential changes to personal and professional identities during Clinical Psychology training. However little is known about how this transformation is experienced by trainees. Changes in identity are linked to personal and professional development during training and may have implications for the development of reflective practitioners (Schön, 1983).

WHAT IS INVOLVED?

If you consent to being involved you will be asked to take part in an audio recorded interview that will take place either at the University or your home. The interview should take approximately 1½ hours and will involve me asking you about your experiences of changing professional and personal identity during training and beyond.

FURTHER INFORMATION

If you are interested in taking part in this research or have any questions please contact me. Alternatively you can contact the primary project supervisor via the contact details provided below:
A QUALITATIVE STUDY OF HOW NEWLY QUALIFIED CLINICAL PSYCHOLOGISTS CONSTRUE THE TRANSFORMATION OF THEIR PERSONAL AND PROFESSIONAL IDENTITY DURING DOCTORAL TRAINING

AIMS OF THE STUDY

My name is Natasha Woodward and I am a third year Trainee Clinical Psychologist at the University of Hertfordshire. I am contacting you because I am interested in your experiences of changing personal and professional identities during your Doctoral Clinical Psychology training. Several authors (e.g. Gillmer and Marckus, 2004, Youngson and Hughes, 2009) have discussed potential changes to personal and professional identities during Clinical Psychology training. However little is known about how this transformation is experienced by trainees. Changes in identity are linked to personal and professional development during training and may have implications for the development of reflective practitioners (Schön, 1983). I hope that you might be willing to take part in my research which aims to further understand identity changes during doctoral training and the implications this may have for personal and professional development.

WHAT ARE THE BENEFITS OF TAKING PART?

It is hoped that this study can be used to:

(1) voice participants experiences of personal and professional identity change during Clinical Psychology training;

(2) aid an understanding of the processes by which identity changes during Clinical Psychology doctoral training occur;

(3) aid an understanding of the relationship between changes in personal and professional identities during training;

(4) aid curriculum organisers' understanding of the relationship between changes in identity during training and personal and professional development;

(5) aid curriculum organisers’ understanding of ways to improve training in Personal and Professional Development;
WHAT ARE THE RISKS OF TAKING PART?

To the best of my knowledge there are no risks involved in this study.

WHAT IS INVOLVED?

If you consent to being involved in this research you will be asked to take part in an audio recorded interview that will take place either at the University or your home. The interview should take approximately 1 ½ hours and will involve me asking you about your experiences of changing professional and personal identity during training and beyond. I will ask every person similar questions, however, the aim is to hear about your individual thoughts, feelings and experiences.

CONFIDENTIALITY

If you choose to be interviewed for this study all information you provide will be kept confidential from the course team, trainees and other participants who take part in this study, in compliance with the Data Protection Act 1998. An audio recording of your interview will be given a code (e.g. Interview A) and stored on a password protected and encrypted USB drive and backed up on a password protected and secure computer. I will pay a transcription service to transcribe my interviews, which involves typing up the interview verbatim. I will gain a signed non-disclosure / confidentiality agreement from the service prior to giving them my recordings. Further to this, all names and identifiable information will be removed from the transcripts by the researcher and kept securely and separately from the transcripts. The researcher’s supervisors will therefore be kept blind as to the identity of participants when reviewing transcripts.

I will look for themes within the transcripts of yours and others’ interviews. The results will be reported in a thesis for the purpose of gaining a qualification in Clinical Psychology. The thesis will be held at the University of Hertfordshire Learning Resource Centre and will be accessible to interested parties. A summary of the main research findings may be published in written work or articles that the researcher and / or her project supervisors write, as well as for the purpose of teaching / conference presentations. Information emanating from the study will only be made public in an unattributable format or at the aggregate level in order to ensure that no participant is identifiable.

HOW LONG WILL MY PERSONAL INFORMATION BE KEPT?

Your personal information and recordings will be kept for up to five years after the research is submitted for examination (until approximately June 2019). The information will be stored securely according to the University of Hertfordshire’s ‘Good Practice in Research’ guidelines.

WHO HAS REVIEWED THIS STUDY?
This study has been approved by the University of Hertfordshire’s School of Psychology Ethics Committee (protocol number: LMS/PG/UH/00084). The research design has also been formally peer-reviewed by the study’s supervisors - Dr Saskia Kerville and Dr Louise Margaret Conlan, as well as research staff from the University of Hertfordshire’s Doctoral Clinical Psychology training programme.

FURTHER INFORMATION

Thank you for taking the time to read this information. If you are interested in taking part in this research please contact me. Alternatively, if you have any questions please contact me or the primary project supervisor via the contact details provided below:
Appendix 4: Participant Consent Form

A QUALITATIVE STUDY OF HOW NEWLY QUALIFIED CLINICAL PSYCHOLOGISTS CONSTRUE THE TRANSFORMATION OF THEIR PERSONAL AND PROFESSIONAL IDENTITY DURING DOCTORAL TRAINING

Informed Consent Form - Date: 21 / 5 / 2013

Name of principal researcher: NATASHA WOODWARD, TRAINEE CLINICAL PSYCHOLOGIST

Contact details of principal researcher: e-mail: 
tel: 
post: c/o Doctorate in Clinical Psychology, 
College Lane Campus, Hatfield, AL10 9AB

Psychology Ethics Committee protocol no: LMS/PG/UH/00084

Participant identification code: ________ (to be completed by the researcher)

To be completed by participant (please initial each box):

<table>
<thead>
<tr>
<th>Participant</th>
</tr>
</thead>
<tbody>
<tr>
<td>I confirm that I have read and understand the participant information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.</td>
</tr>
<tr>
<td>I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason. If I withdraw from the study, the data that I have submitted will also be withdrawn at my request.</td>
</tr>
<tr>
<td>I agree to my interview with the researcher being audio recorded.</td>
</tr>
<tr>
<td>I understand that a professional transcription service will be used to listen to a recording of my interview and transcribe the words that the researcher and I say. My recording will be given a code (e.g. Interview A) to make sure that it remains confidential. The service will also sign a document agreeing to keep my interview private.</td>
</tr>
<tr>
<td>I understand that parts of my interview may be looked at by members of staff (i.e. the supervision team) and members of a research peer support group from the University of Hertfordshire. Anonymised sections of the interview may also be looked at by the two examiners of my dissertation. All of these people are required to keep my interview information private and confidential.</td>
</tr>
<tr>
<td>I agree that the researcher can contact me to talk about my interview and the study. I am aware that I can ask the researcher not to contact me anymore.</td>
</tr>
<tr>
<td>I agree that quotes from my interview may be used in any written work or articles that the researcher and / or her project supervisors write as well as for the purpose of teaching / conference presentations, as long as my name is not used. I understand that the researcher will do her upmost to make sure that no one will be able to tell who I am from the quotes, but in rare instances someone close to me might be able to identify me.</td>
</tr>
</tbody>
</table>
I understand that the transcriptions of the interview and my personal details will be kept in a secure place. They will stay there for 5 years after the researcher submits the study for examination. After 5 years, the researcher will destroy the information.

I agree to take part in the above study.

__________________________   __________         _____________________________
Name of Participant   Date   Signature

__________________________   _____________________________
E-mail address   Telephone number

NATASHA WOODWARD   __________
Name of Researcher   Date   Signature
A QUALITATIVE STUDY OF HOW NEWLY QUALIFIED CLINICAL PSYCHOLOGISTS CONSTRUE THE
TRANSFORMATION OF THEIR PERSONAL AND PROFESSIONAL IDENTITY DURING DOCTORAL TRAINING

Personal and Professional Identity
1. What do you understand by the term 'professional identity'?
2. What do you understand by the term 'personal identity'?

Professional and personal identity changes during training
3. Prior to training, in what ways did you view yourself as a professional? (Prompt: how did your colleagues/manager view (or describe) you?)
4. In what ways have your training experiences influenced your professional identity? (Prompt: clinical, research, academic learning and evaluation)
5. Prior to training, in what ways did you view yourself within your personal life? (Prompt: how did others (e.g. family/ friends) view you?)
6. Do you feel that your training experiences have influenced your personal identity? If so, in what ways have your training experiences influenced your personal identity? (Prompt: clinical, research, academic learning and evaluation)
7. Did any relationships influence the changes in your personal and professional identity? If so what were these relationships and how did they influence the changes in how you saw yourself? (Prompt: cohort, course team, supervisor relationships, family and friends)
8. In relation to your personal and professional lives, how did development in one area influence the other during training?
Reflection on changes in identity

9. Looking back over your training experience, in what ways have these personal and professional changes, impacted upon your current professional work?

(Prompts: how you work in a team, how you work therapeutically)

10. Looking back over your training experience, in what ways have these personal and professional changes, impacted upon your personal life?

(Prompts: how you see yourself outside of work, how you see yourself in your personal relationships)

Experience of this interview

11. What has it been like to talk about your experiences of identity change during training?

12. What was it like being interviewed by a future peer who is currently engaging in Clinical Psychology training?

(Prompts: feelings/emotions/thoughts)
TRANSCRIPTION AGREEMENT

Doctorate in Clinical Psychology

University of Hertfordshire

Transcription confidentiality / non-disclosure agreement

This non-disclosure agreement is in reference to the following parties:

NATASHA WOODWARD (‘the discloser’)

And

Transcriber for Dictate2us Ltd (‘the recipient’)

The recipient agrees to not divulge any information to a third party with regards to the transcription of audio recordings, as recorded by the discloser.

The information shared will therefore remain confidential.

The recipient also agrees to destroy the transcripts when payment has been made in full by the discloser.

The recipient agrees to return and or destroy any copies of the recordings they were able to access provided by the discloser.

Signed:

Daryl Leigh, CEO

Dictate2us

Date: 7th October 2013
TRANSCRIPTION AGREEMENT

Doctorate in Clinical Psychology

University of Hertfordshire

Transcription confidentiality / non-disclosure agreement

This non-disclosure agreement is in reference to the following parties:

NATASHA WOODWARD ('the discloser')

And

REBECCA ADLINGTON ('the recipient')

The recipient agrees to not divulge any information to a third party with regards to the transcription of audio recordings, as recorded by the discloser.

The information shared will therefore remain confidential.

The recipient also agrees to destroy the transcripts as soon as they have been provided to the discloser.

The recipient agrees to return and or destroy any copies of the recordings they were able to access provided by the discloser.

Signed: [Signature]

Date: 6th October 2013
### Transcribed interview

**Useful quotes:**

**Metaphors:**

---

**Question 1:** NATASHA: Ok, the first part we're thinking about professional and personal identity change during training, so the actual process of training (TILLY: Right). So the first question is, prior to training, in what ways did you view yourself as a professional, so how did you see yourself in your professional life?

TILLY: Right, prior to training (sighs) erm, I guess I was working as, assistant psychologist for a few years, I don't know if I saw myself as a professional (said with slight laugh) I guess I was, didn’t see myself as very confident I guess very anxious about, who I was as a professional I guess, always thinking that, erm, I should be someone **better I guess**, and that training was always in front of you (NATASHA: Mm) thinking that, you need to **get on that training course and they’re gonna tell you exactly what to do**, so I guess prior to the training, guess I didn’t really see myself as a professional (said with slight laugh) kind of, format, if that makes sense

NATASHA: Did, so did it feel like the transition into training would be transition in being a professional?

TILLY: Yeah, or the start of that I think that was always (NATASHA: Ok) the goal that you were aiming at and that, **that was where you needed to get**, erm, (small pause) so yeah, I guess that was how I viewed it really

NATASHA: Ok, so maybe not as a professional but how do you think you viewed yourself at work, what, what were you like at work?

TILLY: (starts talking before R finishes) Mm, erm, I guess I was very conscientious, **trying to please anyone**. (laughs) (NATASHA: Mm) do everything I needed to do, erm, I think I said earlier I didn’t feel confident I guess I, I wasn’t unconfident, at work, erm, really enjoyed the work that I did, erm, (breathes in and sighs) mm how did I view myself at work? Trying to remember back to where I was

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### Initial impressions and interpretations

- **(including descriptive comments, comments on use of language and conceptual /interpretative comments).**
- **Links with theory:**

**Emerging themes**

Tilly appears unsure of her professional identity and what meaning this had for her in the position as an assistant psychologist. What is it about the assistant position that does not allow her to consider herself as a professional?

The idea of seeing herself as a professional suggests that being a professional is a perspective rather than an inherent trait? This would suggest that professional identity is related to how you view yourself or how others view you. Therefore reassurance of her professional identity can come from other people’s perspectives of her.

It seemed Tilly believed that training would make her “better” as she would know “exactly what to do” to be better. Is this about being good enough to be considered a professional?

Use of the words “should be better” is suggestive of Tilly feeling in some way inadequate and therefore feeling a need to be different to how she currently is.

Training is being viewed as a goal and an end point. Is this linked to searching for certainty, which she hoped would be provided on training. When she has this certainty will she then be a professional and “someone better”?

It is interesting how keen she is to talk about being “conscientious, trying to please”. Does this reflect some of the anxiety in needing to prove herself?

Trying to please others may also be linked to her comment about her needing to be “better”. Do others decide when she is “better”? The multiple uses of filler sounds (e.g. “um” and “erm”) suggest it may be difficult for Tilly to articulate her professional identity at this time.
(NATASHA: Mmhmm) (small pause) mm, (small pause) I don’t know, it’s a tough question, it’s a long time ago, (R gives a small laugh) erm

NATASHA: If it helps, how, how do you think other people would have described you (TILLY: Mmhmm) at work, what do you think their impression of you would have been?

TILLY: Mmhmm, (small pause) I guess I, I, I remember being someone who, would always get on with things and wasn’t, well I don’t think I was, I think I, **was definitely like working within my competence I would always be sort of seeking reassurance** I think from my supervisor I wouldn’t be going off doing stuff on my own but I think, I think my supervisor was seeing someone as trusted and (NATASHA: Mm) knowledgeable and able to do the job, erm, I think that’s the way it was, but I suppose, it’s funny thinking about, and you’ll probably talk about that later when you actually do get on the training, (NATASHA: Mm) when you look back **maybe I was more confident beforehand than I was actually when I got onto the training** (said with a laugh) course (NATASHA: Right) more confident than you think you are, erm, maybe, yeah (laughs)

NATASHA: So you say kind of, (inhalts) something about training was taking away that feeling of confidence I’d say (a glass can be heard being put down)

TILLY: Mm, that something about the training was taking ...

NATASHA: Well it sounds like something, it sounds like your confidence almost went away a bit when you got on training, rather than...

TILLY: Yeah I think so, yeah, in, in a strange way your, I think it’s, I, I don’t know if it’s similar for other people but when you’re, applying to get on the course it’s all you’re kind of looking to it’s like your life things there (R laughs) and, **then you get on the course, and you think wow everything, that’s done now, then actually you start and then suddenly, things change** I think, (NATASHA: Mm) and erm, yeah it becomes incredibly scary again (laughs) so yeah I think that was definitely part of what happened with me (NATASHA: Ok) mm

NATASHA: So almost like a bit like going backwards? TILLY: Yeah

<table>
<thead>
<tr>
<th>Tilly links this with the experience being a long time ago, but it may also be because she did not see herself as a professional at that time.</th>
<th>identity</th>
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<tbody>
<tr>
<td>Is her seeking of reassurance linked to her belief that she “should be someone better”? Is she “always seeking reassurance” because she views herself as not good enough as a professional?</td>
<td>seeking reassurance of professional identity</td>
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<tr>
<td>At this time in her career she was seeking reassurance but also reflects she was competent in some way. Tilly seems to move between conscious incompetence and conscious competence i.e she is very aware of what she does and doesn’t know. This links with a dilemma of needing to be better but also being ok with who she is.</td>
<td>Training as exposing</td>
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<td>What was lost that means she was more confident beforehand than she was actually when she got onto the training? It seems training may have been exposing, leading to a decrease in her confidence, but also validating, as it gave her reassurance that she was a professional.</td>
<td>Comfort with not knowing vs. the safety of certainty</td>
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NATASHA: Rather than going...

TILLY: Yeah definitely, (NATASHA: Ok) yeah, which I guess a part of me sees as a good thing ‘cause I, I guess I would worry, if I was there thinking I knew it all beginning of training (NATASHA: Mm) kinda, guess now from being supervisor, and seeing trainees I’ve had who have been very confident, they’re actually the ones I’d worry about the most, (NATASHA: Right) I think you need to, need to have a perception of who you are as a clinician that you’re not qualified and that you, still have a lot to learn (NATASHA: Mm) if that makes sense.

The phrase “part of me” suggests that Tilly has multiple feelings about starting training, seeing it both as scary but also valuable to be in the position of not knowing. I wonder if this could be about being open to development. By taking to position of someone not qualified and with a “lot to learn”, this allowed her to develop and learn.

The stage in her career is an important part of professional identity to Tilly. This links with being an assistant and not seeing self as a professional.

<table>
<thead>
<tr>
<th>Question 2: NATASHA: Yeah it does, mm, ok, erm, so going onto what obviously comes next (TILLY: Mm) in, in what ways have your trainee experiences influenced your professional identity? (Tilly: Oh that’s big) and that can be any aspect of training or anything</th>
<th>Comfort with not knowing vs. the safety of certainty</th>
</tr>
</thead>
<tbody>
<tr>
<td>TILLY: In what ways have your professional, your training experiences influenced your professional identity? (sighs) mm, (sighs) I guess it was a long process I think, it would depend what part of my training I’m thinking about, (NATASHA: Ok) erm, so yeah, mm, and I guess thinking about where I trained I think, erm, the *** course sort of has formed part of my professional identity, (NATASHA: Ok) erm compared to perhaps people I know, who’ve qualified from other courses, think it’s had an impact on me being more curious and, pragmatic in the way that I work (said questioningly), so I sort of see myself as quite a pragmatic kind of professional and, not over complicating situations just trying to see how perhaps, I as a psychologist can be a part of a system that will help someone, (NATASHA: Right) and I think my training experience sort of really allowed me to have those kind of thoughts and (NATASHA: Mm) to be confident with that idea of, not having to know everything, so that’s something which I (NATASHA: Right) held onto from my experience of the training, erm, and I guess that in my third year, that was probably where that was able to develop and it felt like when you got to the third year, my confidence sort of came back a little bit, (NATASHA: Mm) and I felt like actually oh ok I can actually go off and, have some skills in being able to do that, (NATASHA: Mm) erm, I guess when I was at, erm when I was a trainee, I would</td>
<td>A change in myself that is difficult to articulate</td>
</tr>
<tr>
<td>The interjection of “oh that’s big” suggests something overwhelming has happened that she may not be able to fully articulate.</td>
<td>Putting academic ideas into clinical practice</td>
</tr>
<tr>
<td>Idea of a professional identity forming over time and influenced by training experiences (e.g. course philosophy). Course philosophy influenced sort of practitioner she became and she values in her practice (e.g. being pragmatic and curious). Comparing self to others in terms of what she values and who she is. Does this help create certainty as highlights what she ‘is’ in comparison to what they ‘are’?</td>
<td>Who am I compared to others: Identity as relational</td>
</tr>
<tr>
<td>It feels ok to Tilly not to know all the answers. This is different to being an assistant where focus on working “within competence”. This is a shift in position to working with safe uncertainty (Mason, 1993).</td>
<td>Comfort with not knowing vs. the safety of certainty</td>
</tr>
<tr>
<td>As well as being comfortable with not knowing, Tilly is also conscious of her competence and skills. There is a dilemma in valuing her skills whilst valuing a not knowing stance.</td>
<td>Comfort with not knowing vs. the safety of certainty</td>
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</table>
always have thoughts about, don’t know when you started a new placement and stuff, how, erm, what do the team members think of me as a trainee, (NATASHA: Mm) do they think that I’m not the skilled person, they actually want the, the qualified clinical psychologist erm, so I, I remember always having those kinds of thoughts, that erm, I wasn’t the right person and again a bit like when I was an assistant, (NATASHA: Mm) looking to actually qualify, looking to that thing so erm, yeah I think I was constantly looking, and looking forward, to qualifying, and having almost that confidence come back and feeling (NATASHA: Mm) that, whether it’s taking away that word ‘trainee’, and just being clinical psychologist in itself (said with slight laugh) was like (NATASHA: Mm) making me feel, I can do this job, so I think there was something about that for me, but erm, yeah, sort of has, was waiting to impact on who I was when I actually qualified (NATASHA: Yeah) I don’t know if that answers your question though NATASHA: No it does (TILLY laughs) I’m really interested in what you were saying about, the **** course (TILLY: Mm) teaching you not, the need to know the answer, (TILLY: Mm) could you say a bit more about that? TILLY: Erm, (sighs) I, I think it was on the **** course it must have been them who introduced sort of Barry Mason’s idea safe uncertainty, and that idea of you don’t have to know everything and actually trying to find, all the answers immediately sort of, take you nowhere and sort of stops that creativity, so I think that’s the thing that, I’ve (gives small laugh) I’m trying to think who must have taught us that someone at the ***** course must have brought him up, and I think that was something that I found really, erm, quite freeing, because it didn’t, and I remember when I first started like doing assessments and stuff, I’d think I have to find out everything (NATASHA: Mm) about this person’s life, I must know it all and I must go to supervision and be able to tell them everything that I know, and what that means, but then actual fact, (small pause) that doesn’t happen in real life, (NATASHA: Mm) and actually you’re probably finding out stuff that’s not relevant and, so I think there was something about that, and, I guess thinking about erm, meaning making as well and how, it’s not just about all this information you’re trying to find it’s why’s this person there, at this point in

A focus on what other people think of her and how they see her. Here the language used to describe and label Tilly is of importance. She attaches meaning to the trainee label (e.g. “not skilled”). This has implications for her professional identity as she is constrained in some way and only compared to other trainees. This does not allow her to “just be” a clinical psychologist or perhaps just be herself, instead she is always in comparison to others.

Letting go of striving to find the answers somehow allows for more creativity. This also allows her to be more comfortable and at ease in her practice. I wonder if it lets her connect more with her clients and meet them where they are rather than striving to find the answers. It seems she is expressing a freedom in letting go of the old constraints of “working within her competency” as she mentioned earlier.

It seems she has given herself permission not to know all the answers but it was a risk to do so. Paradoxically taking this risk added to her confidence and enhanced the meaning making she was able to do in her practice.

Who am I compared to others: Identity as relational

Enhanced creativity and meaning making from taking an uncertain position

Comfort with not knowing vs. the safety of certainty
time, (NATASHA: Mm) talking to you so, I think those are ideas that, I definitely took from my training and, are things that I talk to about with my colleagues in my practice here so, yeah there's something about the philosophy of **** that, allowed you, not to know (NATASHA: Mm) which erm, I think is scary but once you're given the confidence to know that you're allowed to do that, (NATASHA: Mm) erm, it's been a massive impact on who I am now so NATASHA: Yeah, it's an interesting idea isn't it having a confidence, in not having the answer TILLY: Yeah, yeah absolutely, NATASHA: Which is... TILLY: Which I think is weird 'cause, you know you'd think that you're meant to know everything aren't you (NATASHA: Mm) and you're meant to have all the answers, but erm, but you know and that's something I think I, I'm still, it's not something that always comes naturally to me, (NATASHA: Mm) but I'm a lot better in not having to know everything, and, which I think is a good place to be (laughs) yeah that's, that's probably the main thing that I've, (NATASHA: Ok) that's impacted on me NATASHA: So that sounds like it kinda maybe came from being at university (TILLY: Mm) and the more academic learning? Do you think or TILLY: (a cup is placed down) err so I think definitely those ideas were, in the academic (NATASHA: Mm) side of the course, if I think about my placements, (small pause) it, yeah, erm, I guess in a lot of my placements, so the clinical side of things, those weren't necessarily the ideas that were, to begin with, weren't matching up, (NATASHA: Mm) erm, so I remember my first adult mental health placement, it was very CBT based, and I, I really struggled with it, (NATASHA: Mm) and I really struggled thinking that, so actually yeah there was a, it wasn't congruent with what (NATASHA: Mm) I was being taught, but I think by then, by my third year placement, erm, those ideas were welcomed and, (NATASHA: Mm) I was allowed to sort of put them into practice I guess and, yeah, and then as I said earlier that was when I saw my confidence grow so NATASHA: Something about congruence TILLY: Mm
NATASHA: Helped your confidence
TILLY: Definitely, yeah, yeah, (NATASHA: Mm) yeah, yeah
NATASHA: How, so how do you think, do you think there was a difference in how you were, from that first year (TILLY: Mmhmm) to the third year where there was more congruence do you think...
TILLY: Mmhmm
NATASHA: ...that changed you?
TILLY: Erm, mm, (small pause) so actually me as a person rather than, the situation?
NATASHA: (speaking over TILLY) yeah so in, in the placement who you were, (TILLY: Yeah) given that there was a different
TILLY: (speaking over NATASHA) erm, yeah, erm, I’d say I was a lot happier, more relaxed, in my third year, erm, in the first year, I (sighs) for a number of reasons I really struggled with my adult mental health placement, erm, (pause) err I was very happy when I left, which was, which was a hard experience (NATASHA: Mm) when it’s your first placement as well ’cause you think my goodness I’m rubbish at this I shouldn’t be doing it (said with a laugh), but erm, looking back you can sort of pull things apart I think when you look back and, and see that, probably just wasn’t suited to, to me as a person, I think (NATASHA: Mm) and I think the philosophies of ***** are quite suited to me and the ideas of curiosity are so I think that, maybe I’m more naturally ok with whereas, (NATASHA: Mm) some of my cohort probably, people who want to, (NATASHA: Mm) have a structure and know more about getting all the facts and stuff, but erm, so yeah, erm, definitely a lot happier in my third year, err, and I suppose I can’t, definitely say that was just to do with the congruence and stuff (NATASHA: Mm, yeah) and me as a person and things going on, but erm, yeah there was definite difference for me, so yeah
NATASHA: Mm, so in terms of, looking between that first and the third year do you think (TILLY: Mmhmm) there was a change in how you were, as a professional at work, were you (TILLY: Mmhmm) really quite different or ...
TILLY: (sighs) mm, was I different as a professional? (small pause)
NATASHA: And how you saw yourself?
TILLY: Mm, (pause) yeah, mm, I think erm, in my first year

The phrase “I shouldn’t be doing this” suggests something about not having the ability or competence to meet what is required of her professionally.

“Looking back” allows Tilly to reflect on and make sense of her experience. She refers to pulling things apart but is it also bringing together aspects of herself? Difficulties perhaps arose when she was expected to be a different ‘self’ at work than in our personal lives. It seems in her adult mental health placement she was expected to work in a way which did not fit with her.

I should be someone better vs. feeling ok about myself
Looking back you can sort of pull things apart
Personal and professional selves: One doesn’t go without the other
I guess, and whether it’s just the same for everyone that you’re incredibly anxious, (laughs) (NATASHA: Mm) and you don’t think you know anything and you’re not really sure what’s going on, erm, and that’s going to have an impact and I guess I’d very much saw myself as that, (NATASHA: Mm) saw myself as a first year trainee, and as I said earlier a bit like that, that, that trainee word was a thing that always sort of, (NATASHA: Mm) erm, impact on me, (NATASHA: Mm) and I wondered whether also that, trainee idea, not thinking you know anything, erm, had an impact on, maybe how honest I was in supervision (NATASHA: Mm) with my supervisor and, I perhaps wasn’t so open in saying, “I don’t know what I’m doing”, (NATASHA: Mm) so, I think by the time I got to my third year, erm I actually went back to a previous supervisor I’d had as an assistant, possibly for the reason that I wanted to have an experience where I felt safe and, (NATASHA: Mm) with someone I trusted, to, be able to explore that a bit more, so, whether their ideas of, erm me as a professional and being able to, actually be honest about (NATASHA: Mm) what was happening, in my third year, therefore allowed me to sort of, (NATASHA: Mm) develop the skills that I think, came about if that makes sense? NATASHA: Yeah so it, sounds a bit like almost being a bit more comfortable, (TILLY: Mhmhm, definitely) with yourself TILLY: Yeah, definitely, yeah feeling ok about, about who I am rather than trying to be someone else, you know, there’s almost a sense actually that, I wondered whether I would always try and, see what my supervisor was like and emulate that, erm, and whether other trainees do that I don’t know (NATASHA: Mm) almost as a, ok which, in one hand is trying out different styles, (NATASHA: Mm) but, I think you can get lost as a person in all of that (NATASHA: Mm) and not really know who you are, and what you’re doing, erm, so yeah I think definitely in the third year, I had, I was just more able to be me, and because I was being me I was more comfortable, more relaxed and happy I suppose (NATASHA: Yeah) that all sort of led to each other NATASHA: Ok TILLY: Mm NATASHA: Ok, was there anything else about that you

Tilly’s anxiety seems to be related to her position and status as a trainee, which is in comparison to others around her. She also expresses anxiety that she does not know anything, which is different to when she was an assistant and described herself as “knowledgeable”. Something about the training experience makes her feel deskilled and therefore she loses confidence. This perception of herself impacted on her professional relationships. For example she could not be honest about not knowing as she would be exposed as not good enough, perhaps in line with her belief that she should better. This also seems linked to the theme of looking for the answers, and in turn for certainty. Tilly actually sought out a relationship where she would feel “safe” to experiment and develop with different ways of doing things. Is this about being safe to be vulnerable and admit she does not know what she is doing?

An idea of self-acceptance in feeling ok about who she is. This is different to earlier expressions of needing to be someone better. Tilly talks about different versions of herself being tried out and experimenting with who she is as a professional. However this can feel destabilising and like she is “lost as a person”. This seems to be reflective of a search for who she is and who she wants to be. However it seems it is also important to acknowledge and incorporate who she was already.

Who am compared to others: Identity as relational Training as exposing I should be someone better vs. feeling ok about who I am Needing safety to be uncertain Trying out different styles but getting lost as a person
were thinking of
TILLY: Not that comes to mind
NATASHA: Do you think anything you did research wise
influenced you (a cup is placed down)
professionally?
TILLY: Erm, (sighs)
NATASHA: Or were they quite separate?
TILLY: Yeah, erm, so my research was looking at, the
experiences of, people (phrase removed for anonymity),
erm, (small pause) and looking at that sense of meaning
making, so a bit like (NATASHA: Mm) what I was talking
about earlier, erm I guess that was a very personal topic to
me, and erm, professionally I, I, I guess that just reinforced
the ideas I’d had about sort of, erm, people’s, own ability
to make sense of their world, meaning of problems or
referrals and, (NATASHA: Mm) sort of taking a wider
stance on that I think, whether that was already in my
mind and that’s why I did the research (said with a very
slight laugh) but erm, that definitely has sort of, led into
me as a professional, and stayed with me I guess, it’s a bit
like, (NATASHA: Mm) just carries it around me I guess, so
erm, yeah, that, that I, that is something that has impacted
(said with a laugh) on my professional life yeah
NATASHA: an influence but quite different to the other
part of ...
TILLY: mm, yeah definitely, yeah

| Question 3: NATASHA: Ok, erm the third one, prior to
training so but similar with personal life, so prior to
training, (TILLY: Mm) in what ways did you view
yourself within your personal life so (TILLY: Mm) in
your relationships and how people would view you?
TILLY: Mm (pause) prior to training (sighs) erm well, I
think I’d had quite a lot of turmoil in my life a couple of
years before starting training, and I don’t know if I really,
knew who I was, erm, I think my self was a bit, all over the
place really, erm, which maybe echoes how my training
experience went, actually, erm, how did I view myself?
(sighs) mm, (small pause) sorry I have to think about this
NATASHA: No that’s fine, take as long as you need
TILLY: Erm, (pause) I guess I, and this might sound a bit
strange, I viewed myself a bit of a, as a bit of a lone ranger,
as a bit of somebody who, (pause) didn’t really want or
need lots of other people around me, was just looking out
| Tilly's research drew on her personal experiences
so there is a link between her personal beliefs and
the stance she took in her research. There is
something she “carries it around” with her in all
aspects of her life. Her professional identity is built
on who she already was and what she valued. This
may be linked with what she talks about later
about her experiences echoing in her training.

| Personal and professional
selves: One doesn’t go
without the other
Budding to blooming:
Evolving awareness
of self
Personal
echoing in the professional
Pushing away vs. risking
connecting |
for myself, erm, (pause) sh- when looking back at that was quite sad to think about how I was then and a bit, not, not that I think outwardly I was a very sociable person, erm, absolutely fine you know, everything was alright, but, yeah inside a felt a bit like, and I remember actually one of the art therapists here, like we were doing something and he asked me to draw a picture, I think I drew a sea and I drew myself in a little boat, and, it felt a bit like that that, and, that’s where I wanted to be, on my own out at sea and everyone just leaving me alone, and that’s what it was like for me really and, I remember actually one of the art therapists here, like we were doing something and he asked me to draw a picture, I think I drew a sea and I drew myself in a little boat, and, it felt a bit like that that, and, that’s where I wanted to be, on my own out at sea and everyone just leaving me alone, and that’s what it was like for me really and, I think I struggled a bit coming into this cohort where everyone had to be, (NATASHA: Mm) erm, together and, yeah like, I think I would very much see myself as sitting on the outside of that, not unhappy just, not wanting that, erm, so yeah sort of think I, was a bit like that at that time (laughs) erm relationship wise I guess, I geographically I guess and I was here and erm commuting up to ****, so not only was I seeing myself in the outskirts (NATASHA: Mm) I was physically taking myself away, (NATASHA: Mm) erm, and all my closest friends were down here, (NATASHA: Mm) and it was very much that, that’s my life, so I was quite, segregating things out, (NATASHA: Right) and then not throwing myself 100% into the training I think I was, sitting on the edge (laugh) err I think I described it when I was at training as sort of like I felt like was a bit on, on a tight rope, and I was sort of half way along the tight rope and was wobbling a bit, but it was alright I knew where I was going, (NATASHA: Mm) and I was ok, and I didn’t, no one could really get to me and I was alright so, yeah, if that makes any sense (said with a laugh)

NATASHA: No it does, you said that kind of echoes how you were on the training, (TILLY: Mm) in what way does it echo do you think?

TILLY: Erm, what did I mean? Erm, well I think we were talking earlier a bit about sort of, feeling relaxed and trusting (NATASHA: Mm) in other people, erm, and whether I, to begin with in the first year, and, trying to think what happened in the second year (said as a whisper), in my second year as well, almost not willingly wanting people to help me, support me, sort of a head down mentality, head down, keep going and you’ll get through this (said with a laugh) almost, erm, whereas, I myself”). However there is some sadness as protecting herself means being cut-off and alone. Does she feel she has missed out on some experience or emotional connection?

It seems she saw disconnecting as way of coping and looking after herself. She was disconnecting from others both physically/geographically and psychologically. There was a belief that if she disconnected she would be safe. If she did connect and trust others there was a risk she would be “let down”, which perhaps refers to being hurt in some way. However there seems to be a requirement of the course that you have to be “together” in order to engage with the process and her cohort.

This theme of pushing people away links with Keville et al. (2013), who discussed how disconnection could be a way of connecting.

It seems Tilly separated parts of her life as a way of coping, which is a way of disconnecting or not fully connecting. This means she feels she did not engage fully with the process of training. The “tight rope” is possibly referring to feeling unsure about how she coping with the process, but if there was a destination and some certainty she felt ok. Is this linked to earlier search for answers?

Head down mentality sounds similar to idea of being "out at sea" and a “lone ranger” as she is coping on her own. Letting go of this requires her
think I was sort of being on a journey of allowing myself to trust people again, which, probably came, probably came via both, some of the academic stuff, at uni, academically the staff at uni, and the supervision I had in my third year, so, (NATASHA: Mm) erm, (small pause) yeah
NATASHA: Do you think that was, the same in your personal life like letting people in again? (TILLY: Mm) do you think that was a process?
TILLY: Yeah I think (sighs) yeah I think there was, I think there was so, if I think about my relationships with my family I think I was very much pushed them away, and I think a lot of this was possibly, in my own body rather than physically or, e- emotionally letting people in, I think, I just didn’t want that, (NATASHA: Mm) it was easier to push them away than to, erm, yeah well it was easier to push them away emotionally, to protect myself I guess, and I guess, through the training, yeah that definitely got easier, found it easier to be around my family, erm, also I had a partner when I was at uni, who yeah I think, well I guess the re- only recently the partner who I was with at uni we split up and it’s sort of looking back on that actually (NATASHA: Mm) and whether, whether I was really letting him in I’m not sure, and, but I guess, in one sense when I was in ****, my head was really in **** but whether I was, when I was in ***** (NATASHA: Mm) was it the other way round so it’s, so I don’t know, a protection from both ends I’m not sure, (laughs) (NATASHA: Mm) erm, yeah
NATASHA: What do you think, I, I, you don’t have to answer this...
TILLY: No, no it’s fine
NATASHA: ...but what do you think you were protecting yourself from?
TILLY: Yeah erm, (pause) erm, just being incredibly vulnerable and, being hurt again I guess, erm, (small pause, mm, (pause) yes, I, I, yeah just, being in a position where I, where I felt like, your life’s just completely fallen around you (NATASHA: Mm) and you, have to fight really hard to get it back and I think there was a part of me that felt like I, didn’t have the strength to do that again, (NATASHA: Mm) so I think I was just keeping myself at a safe distance and, erm, not allowing that to happen,(NATASHA: Mm) mm
to trust people again, which she struggled with after her experiences prior to the course.

Idea of a “journey” linked to a developmental process. Also that this process is a difficult one and she had to reassure herself that she can get through. The only way she knew how to do this was to disconnect, a strategy which seems to come from her experiences prior to training.

Link between what was happening outside professional life (e.g. pushing away her family) and pushing people away of the course. In both area of her life this was a way of protecting herself. Her patterns of interacting were carried with her into her professional life. There is an idea about the need to protect herself from being hurt or some of her past experiences repeating and having to cope with this.

It seems that training becomes part of what is happening for her already and may have happened anyway (e.g. trusting people again). Training is just a small part of the story.

She is segregating parts of her life but not being fully engaged with either which is similar to earlier when she talked not being fully 100% engaged with training as she does not connect with others.

There is an idea that with distance comes safety. If people are not close to you then you cannot be vulnerable and cannot be hurt. If she is hurt again there is a belief that it will require some internal resources to cope with this. She does not consider the strength that be drawn from others.
NATASHA: So, do you think those process of, maybe letting people in on the course, (TILLY: Mhmhm) and your personal life do you think they were linked, or do you think they were quite separate processes, going on?

TILLY: Erm, (sighs) (pause) mm, (pause) (sighs) I don’t know if I ever really let (sighs) people in on the course (said with a laugh, R laughs) I think academic, I think mm, ok there’s almost three strands there’s, my personal relationships, there was the, cohort, (NATASHA: Mm) and, then there was kind of also the course team, (NATASHA: Mm) and that was four ok there was kind of, and then there is kind of the clinic placements, cohort wise I think I let maybe two people in but I was really someone who didn’t want to gel with my cohort, (laughs) I was, I was, and I’m sure that came across, not that I’m not still in contact with people, nothing like that but erm, there was something about that cohort that I, really struggled with, (laughs) (NATASHA: Mm) and found it very hard to let people in, and I was actually very defensive and, “I don’t want you to come into my life,” (said with a slight laugh) (NATASHA: Right) “go away”, erm, whereas I guess the, erm, my supervisor for my research was somebody who, maybe forced me to (laughs) let me in but no I knew that the research I was doing it was, had to (NATASHA: Mm) engage with him on that, and, but there was something about my supervisor I guess that, I chose him for the fact that I knew I could trust him, (NATASHA: Mm) erm, so I guess I, I did let him in, as much as, he probably would say I didn’t let him in completely (R laughs) but erm yeah (gives small laugh) there were elements of discussions we would have, erm, I think I’ve lost track of the question now

NATASHA: No that’s ok (both give small laugh) I suppose I’m wondering...

TILLY: They’re not linked, is what the...

NATASHA: They’re not linked they’re quite separate

TILLY: Yeah

NATASHA: Yeah that’s fair enough

TILLY: Not linked in a sense but I guess there’s, there is a transformation when you do clinical training, (NATASHA: Mm) things happen to your brain (said with a laugh) your identity, your sense of self, and they cannot not be

The word ‘something’ was stressed perhaps because it was difficult to articulate what it was about people she was with that made it difficult for her to connect. It may be that she was “defensive” as a way of keeping something for herself. Use of the pronouns I and me (e.g. “I don’t”, “I don’t”, “my life”) suggests she is possessive of the knowledge she has about her life. Is it that if they do not have the knowledge, they can’t get close and hurt her?

Tilly stresses the importance of relationships however these are mediated by her openness to the influence of these. She actively sought out this supervisor perhaps as a reparative relationship as it allowed her to trust again. This links with attachment theory and the concept of earned secure-attachment (Pearson, Cohn, Cowan, Pape Cowan, 1994).

This relationship allows Tilly to connect in a safe way and experiment with doing something different. Interesting that she comments he would not think she let him in suggesting there are different ideas about what it means to “let someone in”.

It seems changes in her have a wider impact than her professional self. She suggests this is

Pushing away vs. risking connecting

Needing safety to be uncertain

Personal and professional
impacted, impacting on the rest of your life. (NATASHA: Right) and I think that’s become clearer post qualifying for me, (NATASHA: Really) yeah (NATASHA: Ok) definitely, looking back

NATASHA: (speaking over TILLY) How do you think it, what do you think that’s about? How do you make sense of it?

TILLY: (speaking before Natasha finishes) Erm, (sighs) I think there’s something about clinical training, that, you don’t realise it’s happening, to your brain (said with a laugh) or something, erm, at, somebody’s put it a-amazingly nicely said erm, you sort of lose that naivety of life, (NATASHA: Mm) erm you can’t look at the situation in the naive way and just, let it brush over your head, (NATASHA: Right) and I, I think I tried to think that I can but actually you can’t and that, can impact on, how you view (there is a bang in the background) other people , erm, (NATASHA: Mm) the relationships that you have, perhaps expecting people, to, have the same way of thinking as you, (NATASHA: Mm) have that ability to, be analytical in how you think about things and, be emotionally intelligent, (NATASHA: Mm) erm, and I guess I often find myself in my personal life, some people I know I just, take a step back and almost just completely switch off because, it’s too much effort to try and get into that conversation and, (NATASHA: Mm) make yourself understood, it’s a bit like this boat that I drew, (NATASHA: Mm) it’s a bit out at sea sometimes. (NATASHA: yeah) a bit feeling on your own and a bit, erm, yeah, err yeah just you can feel a bit. I don’t know it’s like a super power you’ve been given, I, I’m not saying I have a super power but, it is a bit like you’ve been given a super power, that actually can be quite dangerous and you’re not quite sure where to go with it. (NATASHA: Mm) yeah, so

NATASHA: There’s something about it’s a super power you can’t give back as well isn’t it?

TILLY: Yeah, yeah it’s, you can’t get rid of it, yeah, yeah

NATASHA: (Speaking over TILLY) it’s like when you say that naivety’s there isn’t it, naivety, that naivety’s gone. TILLY: Definitely, yeah, and I try and think, but I often have these (said with a laugh) thoughts in my head going what did I, ok when I was an assistant, how did I used to think? What would I want to know? What didn’t I know?

unavoidable change and unavoidable transference of the change between contexts.

“Transformation” is a strong word suggestive of a significant shift. Something happens “in your brain: suggests a physical and visible change. She then lists other ways of thinking about the same change. Is this because it is difficult to find the language to fully express the change?

Becoming clearer post qualifying, is this looking back being able to take a different perspective? Something about her is irrevocably changed. I wonder if it is how she sees the world, always seeing things as a psychologist lens? Her perspective and way of experiencing the world has changed.

The idea of losing her naivety seems linked to the idea of Pandora’s box, an irrevocable change even if she would sometimes like to change back.

“Taking a step back”, is this her separating herself from others as a way of coping with the new experience.

“Superpower” reference seems to have many levels. It may refer to the isolation which may be associated with seeing things differently to other people in her life. This is also in some ways self-imposed as she copes with this new experience by disconnecting. It also seems to refer to a feeling of being out of control because she does not have a choice about when or where her “superpower” is activated. I wonder if this is why she feels it could be “dangerous”. It seems the transformation she made for her professional development has impacted in her personal relationships.

Again Tilly reflects on herself at different stages in
Err really struggle to think, how things were, (NATASHA: Mm) and as you said you can’t give it back (NATASHA: Mm) it’s gone now and, a- you’ve got it now and you can’t get rid of it, and sometimes that’s just feels like a really heavy burden, and, sometimes I just wish you could just, often just wish I could disappear for a while, for a couple of days, (NATASHA: Right) and just have none of that, switch off and, be gone (laughs)

NATASHA: So in a way that wanting to be, away’s still there (TILLY: Mm) but it’s almost more difficult (TILLY: Mmhm) now

TILLY: Yeah, yeah, I think so

NATASHA: Anonymity’s gone

TILLY: Yeah, and that all sounds really negative the way I’ve described it and I don’t always mean it as a negative thing, it’s sometimes just quite tiring, (laughs) (NATASHA: Mm) erm, yeah, and erm, but then I, I guess you just, yeah, I do find it hard to remember what life was like, I find myself looking at people going what, how is it that you think and (NATASHA: Mm) yeah, what, or thinking what has changed, why, wh- what is different in my thinking and, yeah, it- it sort of, it does, it’s something I think about a lot at the moment and, haven’t quite worked it out but, (NATASHA: Mm) something’s happened (laughs)

(NATASHA: Mm) so yeah

NATASHA: Mm, so, just thinking about that question, kind of summing up (TILLY: Mm) so it feels like, the things that happened, in the two areas of your life were quite separate, (TILLY: Yeah) but then there’s some overall, (TILLY: Mm) change that’s then impacted on you

TILLY: Definitely, yeah, think so

NATASHA: Makes sense

TILLY: Which I think is, the main, driver of that I think is, the training that we do and, yeah, the career that we have, chosen, ‘cause it’s not really a career, (gives a small laugh) well it is but it’s kind of more than that isn’t it, it’s a, it, it takes you on as a person, (NATASHA: Mm) well it has me anyway maybe others are different but, but it really has, sort of massively, impacted on me as a person, in a good way (gives a small laugh) (NATASHA: Yeah) but also in a, tiring way, (laughs) maybe tiring is the wrong word, just a, (sighs) don’t know, I guess it’s thinking about, the erm, who you were before, and who you are now, and what

her career but this is difficult because the changes in her subsequently change how she views herself in the past.

Tilly seems sad to have lost this naivety. This is interesting, as it seems unusual to desire naivety in Western culture.

As the change is irrevocable Tilly always carries it with her and cannot switch it off. It then becomes a burden to carry in all aspects of her life (personal and professional). She wants to deal with this by ‘being gone’ which sounds again like disconnecting from those around her.

Tilly is aware she has changed in some way but it seems it is difficult to articulate in what way. The change is complex and there is something that needs to be “worked out” which is an ongoing process during and after training.

“The career takes you on as a person” sound like it absorbs her and impacts on her personally. She was not able to separate different aspects of herself.

Training doesn’t happen separately from the rest of her life so its impact is mediated and influenced by her relationships and experiences in her personal life. There is a reflexive relationship between her personal and professional selves: One doesn’t go without the other.
your life looked like before, (NATASHA: Mm) I suppose it’s about context, and actually, the life that you had before didn’t necessarily grow with you, erm, (NATASHA: Mm) and I think that’s possibly what happened with me, in, in my relationship with my boyfriend is, he was still the wonderful loving man that he was when I met him, but I’d grown in a different direction to him, (NATASHA: Mm) and that had erm, we weren’t yeah, we were in different places, and, that wasn’t yeah, that’s, had an impact on us splitting up I guess, so, it’s interesting, yeah it’s interesting to sort of look back and analyse what happened, and, yeah, mm

NATASHA: So it sounds like almost, you weren’t so aware of that during training?

TILLY: (sounds like she has a cup/glass over her mouth) mm, I think so, (cup/glass placed down)

NATASHA: But now it’s kind of

TILLY: Yeah, I think so

NATASHA: Reflecting on it

TILLY: Yeah, definitely, *maybe it’s about safety when you’re in training, a bit like I said before, how, you just wanna get through it*, (laughs) (NATASHA: Mm) and like, *when you’re an assistant you just think, right when I get on training that’s it, then you realise, no it’s not it, you still gotta do the training, then you’re on the training and suddenly, the same thing’s happening you just need to get through training and then it’s fine*, (laughs) so maybe it’s, since I’ve been qualified I can be more, self assured about who I am as a person, (NATASHA: Mm) not having to try and fit in and be other things I can just be me, and I think, then being me, I can really sit back and think about what I want from life and, (NATASHA: Mm) *what’s right what’s wrong and, where am I going*, so, that’s probably taken two years, so (laughs) there’s the post-qualifying year as well (laughs) yeah

NATASHA: So that, it sounds like, during training and before training there’s all this striving (TILLY: Mm, mm) and, (small pause) say if I’m wrong (TILLY: Yeah) but kind of, you have to, there’s, the, training gives you skills to think about things (TILLY: Mm) but during that, (TILLY: Mm) there isn’t really, time to do that in a way

TILLY: Definitely, yeah

NATASHA: So...

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<th>personal and professional experiences.</th>
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<tr>
<td>Something has changed in Tilly, which has not happened to those around her, leading to a metaphorical distance between them. However it may be that this distance is more related to her disconnecting as a way of coping with the change rather than risking sharing her experience with others.</td>
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<td>Pushing away vs. risking connecting</td>
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<th>Looking back you can sort of pull things apart</th>
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<td>Tilly seems to be referring to how her perception of her experiences change with hindsight. The process of change and reflection continues after training, but is linked to those training experiences.</td>
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<td>There is safety of not reflecting, maybe on who you are and what’s important to you, during training. What makes it easier to reflect once she is qualified? Is it that during training she was not open to reflecting on what was happening for her? The course is viewed as something to survive and get through, but this leaves less space for being her ‘real’ self.</td>
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<td>Once qualified feels more confident in her identity. She seems to be talking about having space once she is qualified to think about who she is. This space seems to be created by “not having to try and fit in”. So rather than comparing herself to others and basing her self-worth on this, so is more comfortable with who she is.</td>
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| TILLY: Yeah you’re almost, and then when you qualify, think I was really lucky to come to my dream job, with a great team, and it’s just given me a chance to, relax and, be happier and just, yeah be **happy in my own skin and, that’s alright**, (NATASHA: Mm) and, I think it’s that space I think, without evaluation, without, having to tick the next competency off and all that stuff it’s just like who are you as a person who are you as a, practitioner, and I think that’s been, (NATASHA: Mm) so lovely over the last couple of years just thinking about, all of that stuff and, (NATASHA: Mm) not having to worry (laughs) and I think I’ve been really well supported in my job here, (NATASHA: Mm) and the sense that they’re allowed me not to just, I didn’t just have to come straight in and know all of that, (NATASHA: Mm) that’s something that they helped me develop so, think I’ve been really lucky to have that experience, (NATASHA: Mm) erm, so yeah (gives a little laugh) who knows what I’ll say in 5 years (laughs) NATASHA: Yeah (laughs) | Tilly seems to be talking about self-acceptance which she now has post qualification. However it seems during training the expectations on her somehow preventing this self-acceptance. Being free of these expectations which relate to need to be “better” (e.g. meeting certain competencies) has allowed her to think about who she is. The expectations prevented her from being who she is and that's being free of those expectations which relate to need to be “better” (e.g. meeting certain competencies) has allowed her to think about who she is. | I should be someone better vs. feeling ok about who I am |
| Question 4: NATASHA: Ok, erm, so you’ve talked a little bit about this but, I think we kind of did this together but (TILLY: That’s ok) do you feel like your training experiences have influenced your personal identity (TILLY: Mm) to how you see yourself as a person? TILLY: (cup/glass is put down) Erm NATASHA: I think we’ve done that quite a bit (TILLY: Yeah) but is there anything you’d add to that? TILLY: (Inhales and sighs) mm, (pause) (sighs) I guess it’s just had a, quite profound effect on, erm, (sighs) reinforcing my personal identity (NATASHA: Mm) me, being able to work out what that is, (NATASHA: Yeah) working out who I am, erm, and I think, has, has the training? Erm, (sighs) training experiences, I guess I’d say it’s more, the training experiences, played a massive role in starting that process, (NATASHA: Mm) but as I sort of said I think it was that post-training, (NATASHA: yeah) is when I found I could actually, work best I felt, (NATASHA: Mm) erm, ‘cause I wouldn’t, I wouldn’t say **if you took a snap shot of me if we say I don’t know, 5-6 years ago, and me now, (NATASHA: Mm)** fundamentally I think I am the same person, (NATASHA: Mm) the same values, same beliefs, but there’s just something that, and maybe it’s | She refers to possibly having a different perspective in 5 years. Will she be looking back like she is doing now? This links to an earlier theme of seeing things different when looking back. | Looking back you can sort of pull things apart |

**Question 4:** NATASHA: Ok, erm, so you’ve talked a little bit about this but, I think we kind of did this together but (TILLY: That’s ok) do you feel like your training experiences have influenced your personal identity (TILLY: Mm) to how you see yourself as a person? TILLY: (cup/glass is put down) Erm NATASHA: I think we’ve done that quite a bit (TILLY: Yeah) but is there anything you’d add to that? TILLY: (Inhales and sighs) mm, (pause) (sighs) I guess it’s just had a, quite profound effect on, erm, (sighs) reinforcing my personal identity (NATASHA: Mm) me, being able to work out what that is, (NATASHA: Yeah) working out who I am, erm, and I think, has, has the training? Erm, (sighs) training experiences, I guess I’d say it’s more, the training experiences, played a massive role in starting that process, (NATASHA: Mm) but as I sort of said I think it was that post-training, (NATASHA: yeah) is when I found I could actually, work best I felt, (NATASHA: Mm) erm, ‘cause I wouldn’t, I wouldn’t say **if you took a snap shot of me if we say I don’t know, 5-6 years ago, and me now, (NATASHA: Mm)** fundamentally I think I am the same person, (NATASHA: Mm) the same values, same beliefs, but there’s just something that, and maybe it’s Training as the start of a process which includes both her personal and professionals selves. This continues after training and is not contained within the training. However Tilly does not feel this is a change in who she is but training is a process which helps her to make sense of (“working out”) who she is. She is more aware and comfortable with of who she is. There is something stable in herself which was there before the course and is still there. A process of thinking about who she wants to be of | Tilly seems to be talking about self-acceptance which she now has post qualification. However it seems during training the expectations on her somehow preventing this self-acceptance. Being free of these expectations which relate to need to be “better” (e.g. meeting certain competencies) has allowed her to think about who she is. | I should be someone better vs. feeling ok about who I am |

**Budding to blooming:**

**Evolving awareness of self**
about me becoming more self-assured in who I am
(NATASHA: Mm) as a person, bit like the supervisor not trying to be like somebody else sort of to please them, I'm now happier thinking about who it is I want to be, and whether that's just the training experience I don't know, it's, it's hard to, think of the bigger context of my life but, erm, yeah the training was definitely a big part in it, I'd love to see what would happen if I'd took the three year training course away, (NATASHA: Mm) and I hadn't have done it, who I'd be now, (laughs) (NATASHA: Mm) that would be an interesting kind of, snapshot of, what changed
NATASHA: Is your feeling that you'd be very different or, do you think, some of that would have happened (TILLY: Yeah) anyway?
TILLY: It's really hard to know isn't it, (NATASHA: Mm) erm, (sighs) oh yeah, I mean it's like asking a, hundred year old woman, what you, what you knew then, (R laughs) and (TILLY gives small laugh) erm, you know and I've had lots of conversations with people recently about, if you had the choice to going back to being eighteen again would you? And, (said with small laugh) and it's always, I would if I knew what I know now, so whether other people go on this journey, that I've been on, (NATASHA: Mm) with or without training, I couldn't say but, I think the training definitely, has an impact, emotionally on you and, as I said earlier about the way you view the world, (NATASHA: Mm) that's the thing that it changes, erm, so yeah I think that's the main thing that's had an impact on NATASHA: Yeah
TILLY: Yeah just wh- what lens you're looking through and, (NATASHA: Mm) what you're seeing, hearing, (NATASHA: Mm) all that stuff

**Question 5:** NATASHA: Mm, ok, erm, did any relationships influence the changes in your personal and professional identity? So if so, what were these relationships and how did they influence the changes you saw in yourself?
TILLY: And does that mean, throughout my life or particularly during
NATASHA: That's during training...
TILLY: During training
NATASHA: ... but it can be personal relationship or

which training played one part for her. However others experiences in her life have also influence how she views herself. It is difficult to say what caused this as it is difficult separate experiences in this way.

Change in her which she would not undo and this change being seen as valuable. This is different to earlier when she talks about sometimes wanting to give it back.

She uses a metaphor which seems to be saying that she would not want to lose what she has gained from her experiences. This suggests she values what she now has, even maybe that lack of naivety she spoke about earlier. It also seems she is referring to a gain in wisdom which is often associated with older age.

Some developmental processes happen anyway but training can play a part in her seeing the world differently. Is this referring to the loss of naivety in how she interacts with the world?

Losing naivety vs. gaining wisdom
professional relationships or your cohort or (TILLY: Mmhmm) or, like the four sections you did (said with a slight laugh)

TILLY: Right ok (laughs) (sighs) I’d like, see my gut feeling there is to say that my cohort didn’t have an impact (laughs) sounds like I really dislike my cohort it’s not that, erm, but obviously they had, (NATASHA: Mm) there was something about my cohort that did **impact, erm, and have an impact on me as a, my personal and professional kind of, erm identities**, what that was, I’m not sure, erm, (pause) (inhales and sighs) (pause) I think there was some, I, I, I know that something **I thought about a lot when I was training in my cohort was, looking, at how other people were coping**, (NATASHA: Mm) and finding myself becoming quite, annoyed at hysteria, (laughs) if that, oh, in, in a sense that, I found myself getting quite annoyed with, how, **training is hard, I admit that, training is a difficult experience**, erm, placements are difficult you have essays to do you have your thesis to write, but I often found that things were so blown out of proportion, that **I felt people had lost track of the world, and the important things**, (NATASHA: Mm) and I found myself sort of always having those thoughts and, I guess, **looking back** I feel like, perhaps I was very critical of my cohort, for that, ‘cause they’re just human beings living an experience, but erm, (small pause) yeah has it influenced me now? (inhales) maybe it’s just impacted that, even more in me, (exhales) and **highlighted how other things are important in life**, (NATASHA: Mm) and it’s not whether you’re got the top mark in the essay or, not that we ever got marks, but, things like that were just never, the key things to me, and I found that quite hard, (NATASHA: Mm) erm, I guess aside from my cohort, (laughs) erm, guess every single supervisor I had would have had an impact whether that be good or bad (said with a laugh) erm, and I was, you know I think you’ll always remember all of your supervisors that you had, erm, my third year supervisor, (name 1), was on my training and, before and still now a massive impact on my life, erm, both personally and professionally, erm, she’s a very, **gutsy woman**, who, goes out there, does it, gets on with life, and I think, she, and whether it’s just, natural to her, but she can just **instil confidence in someone like that**, and I think that’s had a

Tilly repeatedly uses the word “impact” although the question was phrased as “influence”. This is suggestive of something strong and forceful or perhaps a collision. This may be referring to a sudden or unexpected feeling of being exposed.

Tilly compares herself to others in terms of how they were coping, but feels annoyed they were coping in a different way (“hysteria”). She suggests that they did not have perspective and were not able to see what she could see, that is that other things were more important that training.

Tilly acknowledges the challenges of training but still feels there needs to be perspective on this.

Looking back gives her a different perspective on how she was and saw things.

Her experience of losing her partner highlighted to her how important life outside of training is. However this stance allows her to separate her personal and professional lives in some way and not connect with those in her cohort.

Tilly seems to have a lot of respect for being “gutsy”. This seems to be describing someone who takes risks in their personal and professional lives.

Who am I compared to others: Identity as relational

Looking back you can sort of pull things apart

Pushing away vs. risking connecting

Being gutsy: Taking risks personally
massive impact on me now, and the way that I am with my trainees, and, I do that erm, it’s not about picking people apart, but then there’s actually if you can build someone’s confidence up, (NATASHA: Mm) and help make them see that they’re alright, that’s when you can start to help people to learn things and to (NATASHA: Mm) sort of move forward so, she had a massive impact on me
NATASHA: Do you think she’s changed how you see yourself or...
TILLY: (gives a little laugh) erm, (small pause) think she definitely had a, helping hand in helping me feel, like I was, good enough as a person, I don’t think I’ve ever been the one that, you know so I think I’d always laugh, I was, I got 60.5 in my undergraduates so I only just got a 2:1, so I only just got on, (NATASHA: Mm) there was always that kind of narrative, and that was fine with me I was ok with that but I think she sort of reinforced that you know, people are people and that’s what people need, (NATASHA: Mm) erm, and sort of instilling that confidence in me as a, alright academic, (laughs) but somebody who can do the job just as good as someone who got firsts, and that kind of, (NATASHA: Mm) that’s a bit of a strange example but yeah, just seeing, sort of the, positives in someone, so yeah, I think she, she did have an impact, there, erm, mm
NATASHA: What about erm, personal relationships did anyone (TILLY: Mm) in your life at that time, impact on the way you saw yourself?
TILLY: In my life at that time? (pause) mm, (sighs) (pause) I feel bad for not thinking of anyone who did, erm, (pause) not at that time, (NATASHA: Mm) I guess, no, erm, I guess it, huh, don’t know if I’d answer the question but it was, somebody who, passed away two years prior to my training I guess someone who had a massive impact on my personal and professional identities, (NATASHA: Right) erm, and as much as he wasn’t there, (small laugh) he was kind of there, (NATASHA: Mm) erm, make-challenging me I guess in my own mind about who I was as a person, (NATASHA: Mm) erm, that doesn’t quite fit with your question (laughs)
NATASHA: No but it’s still relevant isn’t it (TILLY: Mm) because it’s part of (TILLY: Yeah) what was there during training

Is this something Tilly struggled with after the death of her partner, when she would distance herself as a way of coping? For her to be "gutsy", would that mean trusting people again?
Learning from a mentor. Different in some way to simply copying supervisors (as discussed earlier).
It appears Tilly feels inspired by this supervisor.
Tilly seems to be view of herself as only “just” good enough and compares herself to others academically. She seems to need validation from an external source to see herself as good enough.
Tilly’s relationship with her supervisor seems to enable Tilly to accept herself in some way, without focusing on her academic achievement.

Tilly talks about carrying other people with her on her difficult journeys, whether her mentor or her partner who died. There is an idea here that others can impact on us even when absent, as we still carry them with us in some way.

Who am I compared to others: Identity as relational
Seeking reassurance of professional identity
I should be someone better vs. feeling ok about who I am
Carrying people with me
| TILLY: Yeah s-, I guess it would help to have context, erm, so, two years before training, (sentence removed for anonymity), erm, and obviously, then going into, clinical training we’re meant to be **seen as, a health professional who’s meant to** (NATASHA: Mm) be able to deal with mental health issues, was something that was incredibly, difficult for me, and there was a sense that may- maybe actually this, probably would have helped earlier, erm, that people were looking at me or that as someone well, (phrase deleted for anonymity) **how can you look after your clients kind of thing.** (NATASHA: Mm) whether that, and I don’t think anyone has said that to me or, (laughs) (NATASHA: Mm) or even, erm, inferred that but that was definitely something that, held in my head, and, maybe it’s interesting that I specialise in learning disabilities, **so actually I still keep away from mental health, (NATASHA: Mm)** oh well, I work with people with mental health difficulties but, erm, that something I step back from, erm, because of the impact that that can have on your identity, (NATASHA: Mm) erm, yeah and **how you think people are viewing you,** erm, and whether that goes back to sort of my relationship with my cohort as well, keeping back from them, ‘cause as much as, it’s **not a competitive environment** I guess I did have, thoughts about well **what is it they’re thinking about me?** Or, erm, (NATASHA: Mm) **do they think I’m a bad person?** Do, dunno do they have their own fantasy about what happened? Which I, I, I found (NATASHA: Mm) out that they you know there was, oh (phrase deleted for anonymity) (NATASHA: Mm) and you know it was just like, (NATASHA: Mm) stories that had developed, which, I hadn’t been a part of (said with a slight laugh), erm, yeah and it just, **I think they knew that that’s why I kept myself away, keep my life a little bit more private, (NATASHA: Mm)** (phrases deleted for anonymity) (NATASHA: Mm) but there was a **sort of gutsy part of (name 2) that, would stay with me, you know, what did I saying was always erm, worst things have happened to nicer people, (NATASHA: Right) and I guess that echoes what I was talking about earlier with the cohort, that actually there’s more important things in life than, (NATASHA: Mm) **this,** and, erm, yeah (small laugh) it’s probably the most unhelpful phrase (gives a small laugh) that you could ever |
| Losing her partner before training made her reflect on her role as a psychologist working with people with similar difficulties to him. Is this like the earlier idea about personal experiences echoing during training? She seems to be carrying with her the experiences prior to training and reflecting on these given the context she was now in. There is almost an element on frustration that what she now knows might have helped her or her partner in earlier circumstances. Does she feel she should have done something differently? **Distancing herself from working in adult mental health as this is linked to a difficult experience in her personal life. This is a similar process to her distancing herself from others as a ‘lone ranger’ as a way of keeping herself safe. She reports this was not a competitive environment, however she often compares herself to others to ascertain how they see her. Others perspectives and evaluation of have become very important.** |
| Her way of coping with others curiosity seems to be being even more private and distance herself. She carries something of her partner with her and transfers this into what she values during training. Being ‘gutsy’ is again seen very positively in partner and supervisor. |
| **Personal echoing in the professional** I should be someone better vs. feeling ok about who I am **Pushing away vs. risking connecting Who am compared to others: Identity as relational** |
| **Pushing away vs. risking connecting Carrying people with me Being gutsy: Taking risks personally and professionally** |
say to anyone, (laughs) you know there’s something melancholic about what he, how he would say that and, yeah I still say it to myself now (NATASHA: Mm) when I’m getting stressed just go, oh, come one (said as a whisper) (both give laugh) get over it, so yeah, I think that, that did have an impact, on me, and erm, was something that I, would talk about with my, well my third year supervisor, she would, she knew me at the time, and with my, thesis supervisor, erm obviously ’cause that was the content (said with a laugh) (NATASHA: Mm) of the thesis, yeah we had some interesting conversations I think about that, (NATASHA: Mm) which was helpful, and whether I would have had the opportunity to have those conversations, if I hadn’t have done the training course, (NATASHA: Mm) it’s interesting to think that possibly I wouldn’t have done so, yeah, I think that’s definitely had a big impact, (NATASHA: Mm) mm (NATASHA: that makes sense) mm, so yeah NATASHA: I think it’s, (sighs) interesting as well what you were saying about, being gutsy, (TILLY: Mm) and, (name 2) being gutsy and then, (TILLY: Yeah) your supervisor being gutsy (TILLY: Yeah) and those being people ... TILLY: Yeah that’s true, that I connect with (both laugh) NATASHA: ...connect with and, (TILLY: Yeah) maybe it sounds like, you want to, be that with your trainees as well (TILLY: Mm) ... TILLY: Yeah, take risks NATASHA: Yeah and be... TILLY: Build their confidence up to be able to take those risks, (NATASHA: Mm) and it’s ok if it doesn’t work out, (NATASHA: Mm) cause life doesn’t always work out, (NATASHA: Mm) and I think I very much went through an experience where, my life couldn’t have been more shit, (gives a little laugh) (NATASHA: Mm) but I got back in it quite quickly, and then I got on with life and, erm, I think a phrase that we use in our family is, talk about the fisherman’s wives, (laughs) NATASHA: Mm, I don’t know that one TILLY: It’s a Scot. I think they’re in Scotland or Yorkshire. I can’t remember, it could be both, and they’re always known as these really stoical people, (NATASHA: Right) who work long hours with their husbands out getting fish (NATASHA: Mm) they’re there, bringing them all in, and I think that’s an image that my mum would always, portray Tilly is quite harsh on herself which suggests she should be coping in a different way or doing something differently. Opportunity for conversations provided by training. What was it about training that allowed for these conversations? The relationship with supervisor? Yet earlier she spoke about having her “head down” during training and there being no space for reflection because just had to get through. Did she make a choice to not reflect during training as a way of coping? Was not reflecting a way of keeping others at a distance? Confidence to take risks, but what are those risks? Is it connecting with others, even though you might be vulnerable and get hurt? She tells a story of resilience which suggests taking those risks is worth it. Metaphor of fishermen which is again a link to the sea again where she earlier spoke about being ‘out at sea’. There is a focus on being stoical which also links with earlier when she says need to get on
to me about you know being a quite stoical person, erm, and I guess I really struggled (said with a slight laugh) sometimes with thing like reflective groups (NATASHA: Mm) at uni, 'cause it felt like, I think I always used to say it felt like you go there and we would moan and we would talk about all these awful things and someone would cry and run out the room, and I used to say "oh why can’t we have" erm, oh what was the word I used, I can’t remember, what was it? Erm, a resilience group, (laughs) change it around and, (NATASHA: Mm) you know 'cause I think, we need to be resilient people and, (NATASHA: Mm) it, it’s not all about, a- it is about reflecting on us, but I, I found a lot, I find a lot of psychologists when they’re reflecting, can be, feels to me, can be quite self indulgent, (NATASHA: Mm) and actually, it’s important for the client relationship but it’s not always, you don’t always have to be talking about your own life, and how (NATASHA: Mm) you’re feeling, 'cause there’s a person in the room that needs the help more than you (said with a laugh) if you need that much help, go somewhere else (laughs) if you need that much help, go somewhere else (laughs) so I feel the training courses should focus more on resilience and, (NATASHA: Mm) that kind of stuff, but erm, yeah so, that wasn’t, didn’t fit well (NATASHA: Mm) with who I was at the time, (NATASHA: Mm) and I just didn’t want to sit in a room with sixteen other people, talking about all of that stuff, (NATASHA: Mm) so I actually stopped going to them in the end, I couldn’t handle that, (NATASHA: Mm) that space, erm, yeah (laughs)

NATASHA: And just a- yeah I’m just wondering if that almost, taught you something you didn’t want to be?
TILLY: Yeah, might have been yeah
NATASHA: This isn’t for me
TILLY: Yeah, definitely
NATASHA: I wanna do this differently
TILLY: Mm, it’s not who I want to be with it and keep her head down. There appears to be a narrative from her family which she brings into her response to training. This sometimes caused her difficulties as her perspective on useful ways to cope conflicted with some of the course requirements (e.g. reflective groups).

Tilly seems to be talking about having the strength to take risks but also feeling weak when exploring emotions and wishing for resilience training. Is this something where different experiences are conflicting (family narrative of getting on with things vs. people she admires who are gutsy and take risks) and this creates a dilemma.

It seems it was difficult for Tilly to connect with the experiences of the rest of her cohort given things happening in own life. In the end she physically removed herself, like earlier when spoke about being geographically separate as well as emotionally.

Question 6: NATASHA: Ok, mm, I think we’ve talked about this a lot all ready (TILLY laughs) (TILLY: Yeah) so let’s get into things before I get (TILLY: Mm) but, in what ways did your professional and personal identities influence each other?
TILLY: Ooh (sighs) my personal and professional identities influence each other
NATASHA: So how things are going at work (TILLY: Yeah)
TILLY: Yeah, (small pause) I guess they go- **one doesn’t go without the other does it?** (NATASHA: Mm) Erm, mm, (pause) (NATASHA: Mm) I g- I think I can always, you can always tell how things are, with me, at home, or at work, (NATASHA: Mm) just looking at each other, erm, (small pause) and I think it’s quite easy sometimes to say “oh, oh I’m really stressed at work”, but actually it’s possibly the other way round (said with a laugh) as well (NATASHA: Mm) erm, and I think, so through my training or prior to training, through my training and now, not only as, have I changed professionally, yes there have been those personal identity that, my personal identity there’s also sort of, had to develop and I wonder if that had gone in, **what order they’d gone in**, (sighs) (pause) yeah ‘cause I’m wondering whether, is it sort of something y- you change professionally which has an impact on your personally, or is it the other way around? (noise can be heard of participant drawing arrows and circle) not sure, I think it’s a bit of both, **maybe it’s discreet moments, so something professionally can happen, that changes you, which then impacts on you personally, (NATASHA: Mm) and equally something might happen in your personal life that’s gonna impact back, into your professional life, that’s probably how it goes, but they’re constantly sort of in motion with each other** (said with a slight laugh), (NATASHA: Mm) erm, so I could think back and think if (name 2) hadn’t have died, I think I could **categorically say**, I wouldn’t be the psychologist that I am now, (NATASHA: Mm) erm, or the person I am now either, erm, (pause) so it’s sort of things like that or equally when I’ve, so recently split up with (name 3)... **a door is heard opening and someone enters the room, says sorry, and leaves again**

TILLY: ...split up with (name 3) I think again, that’s, over the last few weeks I’ve noticed in supervision, talking about other sort of things about (NATASHA: Mm) both professional sort of things and how, maybe it’s sort of just, erm, **cementing**, the things I had before so the ways I was thinking before, and feeling more confident, (NATASHA: Mm) and self assured in myself **as just a person, to, be that person professionally, (NATASHA: Mm) and definitely,**

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<tr>
<th>A strong link between her personal and professional identities and bi-directional relationship (influencing each other). She does not view these as separate parts of herself.</th>
<th>Personal and professional selves: One doesn’t go without the other</th>
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<tr>
<td>It seems there is a reflexive relationship between aspects of her identity rather than a lineal causality.</td>
<td>Personal and professional selves: One doesn’t go without the other</td>
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<td>When she talks about discreet moments, is this her trying to make sense of the process of how aspects of her identity influence each other?</td>
<td>Personal and professional selves: One doesn’t go without the other</td>
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<tr>
<td>There is an idea of constant motion and flow between her personal and professional lives.</td>
<td>Personal and professional selves: One doesn’t go without the other</td>
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<tr>
<td>The type of psychologist she becomes is influenced by personal experience, suggesting these aspects on herself are inseparable, even if it difficult to ascertain how they are linked.</td>
<td>Personal and professional selves: One doesn’t go without the other</td>
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<tr>
<td>Tilly talks here about the process, rather than changing her, instead adding to her confidence in what was already there.</td>
<td>Budding to blooming: Evolving awareness of self</td>
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<tr>
<td>Does saying she is ‘just a person’ refer to being true to who she is, rather than continually comparing</td>
<td>Who am compared to</td>
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recently thinking about me, personally and just that sort of, real sort of reflective, kind of, (small pause) who am I? (each word punctuated) rather than, always seeing the self in this context of other people, so I think (NATASHA: Mm) er, and whether you know (said with a slight laugh) as, sorry I’m rambling now, (NATASHA: No, no) whether the professional side of things, led me, (small pause) to see that I wanted to not be with my boyfriend, (NATASHA: Right) er, so everything’s sort of linking it all together, but it feels like I’m now coming to a point where I’ve feel a lot wholer as a person, erm and I think, I think I even used the words, or people in my research used the words, "you feel like half a person when something like that happens, in your life", and I think I definitely felt, a bit like a half a person during my training, yeah and I, I’m (NATASHA: Mm) nearly full again (laughs) (NATASHA: Right) so yeah, sort of all happen- happening really, mm NATASHA: Ok, ok, was there anything else about that part that you’d like to say that we feel we haven’t said?

TILLY: I don’t think so (NATASHA: No?) (a cup is placed down) I think I’ve rambled at you

NATASHA: No, I don’t (TILLY laughs), very interesting. Erm, I think it was all relevant ok, so the next part’s kind of reflection on those changes, (TILLY: Right) so, kind of thinking how you are now, (TILLY: Yeah) I think we’ve done that a bit as well but ...

TILLY: No that’s ok

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<th>Question 7: NATASHA: ...so looking back over your training experiences, in what ways have these personal and professional changes impacted on how you are now at work?</th>
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</table>
| TILLY: At work, (laughs) NATASHA: So your professional work now TILLY: Yep, so looking back over your training experiences in what ways have these personal and professional changes impacted upon your current professional work? (inhales) massively (laughs) erm, (pause) mm, yeah erm, (pause) (sighs) it’s hard to put things in words sometimes isn’t it (NATASHA: Mm) erm, (pause) in what ways I’m just trying to be a bit more, tangible with this erm, (pause) I don’t know ok, well there’s just something about me being a happy psychologist (said with a laugh) and that sounds very, woolly and, erm, not particularly helpful, but there’s | Difficult to articulate the change in herself but she is very aware of its magnitude. Being ‘a happy psychologist’ is a very positive way of describing the outcome of the changes in her. Also interesting that she uses an emotion word to herself to others? She seems to saying something about being herself rather than trying to please others and changing to try to do this. | others: Identity as relational I should be someone better vs. feeling ok about who I am

A change in myself that is difficult to articulate I should be someone better vs.
something about, almost, having to have gone through experiences where, you change professionally or personally, to get to a place where you can, be useful in your life (said with a laugh), be useful (NATASHA: Right) as a clinical psychologist here, erm, feeling relaxed, being curious, and, not constantly having these sort of, pressures of thinking that are you good enough are you there yet? (NATASHA: Mm) I’m here, (laughs) and, (NATASHA: Mm) I feel like, err, yeah, I, I re- I feel very sort of present in my job, erm, which I think impacts on my job now as well, and (NATASHA: Mm) how I am with clients, how I am as part of a team, and how I work with that team, erm, so yeah I guess there’s something about the experiences of, (pause) things changing? (NATASHA: Mm) I guess it, it feels almost like there’s been phases, and a bit like we’ve put the pre-pre-erm, pre-training training, then I sort of have the, post-qualifying year, (laughs) it’s just, and extension of the training, and now I’m just there it’s, great (laughs) I feel relaxed, I feel happy, and I feel, like I’m alright now and, I’m content, (NATASHA: Mm) erm, yeah (sighs) but I guess you have to sort of go through all of this there’s a real sense that you have to have these experiences you have to have learnt from them, in order to get to a place like that, (NATASHA: Mm) otherwise you’re back at the, naive end, (NATASHA: Mm) where you’re not seeing any of that, so, as much as I’ve, it’s difficult, sort of, losing that naïveté, I wouldn’t want to be there, (NATASHA: Mm) erm, yeah, so something about that I think
NATASHA: So very much, a necessary process then?
TILLY: Mm think so, definitely, yeah, almost feels like you know, talking about it (said with a laugh) feels like I’ve been through a bit of a, washing machine, (NATASHA: Mm) come out the other end (said with a laugh) and erm yeah and I’m nicely folded on the side (both laugh) and you know that’s alright but, yeah I’m a firm believer that people need to go through things to be able to, deal with things. (NATASHA: Mm) erm, yeah and I guess I worry about people who haven’t, especially in our line of work, (NATASHA: Mm) so yeah, mm
NATASHA: How do you think that process has changed how you are with clients, what do you think is the difference?
TILLY: Mm (sighs) yeah, (small pause) I think I’m, well I describe the impact on her work suggesting the shift is not one in skills, but in her emotionally as a professional.

Describing her own description as “wooly” again seems to be referring to some change that is difficult to describe.

The idea of being useful in your life seems to refer to the idea that she is worthwhile. This is in contrast to her early comments that she did not view herself as a professional and therefore not “good enough” which she now feels she is.

The comment ‘are you there yet?’ links to her earlier comments on looking for certainty and an end point in when she had become a professional. However it seems she has now stopped looking for this.

She talks about being “present” in her job which is different to earlier when constantly looking forward (e.g. to training and qualification). Her experiences of change have enabled her approach her life differently and connect more with those around her.

Tilly is very positive and hopeful which is different to some of the difficult times in her life. Yet she would not undo her experience as she feels she has learnt from them. She needed to lose her naivety to get to where she is, although it has at times felt like a “burden”.

There is a process of being ‘shook up’. Is it that the same person comes out but looking different? There is again the theme of something to get through like the stoical Scottish fishermen. Feeling ok about who I am
A change in myself that is difficult to articulate
I should be someone better vs. feeling ok about who I am
Comfort with not knowing vs. the safety of certainty
Pushing away vs. risking connecting
Losing naivety vs. gaining wisdom
Budding to blooming: evolving awareness of self
think I notice when I'm at work I'm, I don't, I don't go in with agendas with clients, (NATASHA: Mm) erm, pretty rubbish, I don't usually read the stuff before I go there I just go there with an open mind, (NATASHA: Mm) to see what it's like being there with them, and I think, I hope that sort of relaxed kind of, erm, persona, allows clients to, feel at ease with me and to, communicate whatever they need to communicate (said with a slight laugh) (NATASHA: Mm) erm, I don't have 'doctor' on my badge, I don't ever introduce myself (said with a laugh) as 'Doctor (Name 4)', erm, I'm just, me, and I, I think erm, that's something that I'm very comfortable with, erm, I'm comfortable with chairing meetings, when things don't go quite to plan, that's something I think I've learnt to feel alright with, erm, I don't think I have these expectations on me that I kind of need to be this perfect person, I'm just happy trying out and see what happens, and if I don't know the answer, I'll go and find it out, (NATASHA: Mm) so I think, hopefully that kind of idea is, helpful one for the clients that I work with, I don't need to be this perfect person (NATASHA: Mm) and realistic as well, erm, especially with the client group I work with, err, it's not, trying to looks at where I think they should be, you know it's about their lives, and I think I, I think erm, that's something I'm very passionate about is thinking about oh what is it you want? (NATASHA: Mm) Why do you think you're here? Did you even know there was a referral? (laughs) (NATASHA: Mm) and that's something we're very passionate about in erm, my department, and erm, yeah, trying to put that in context for them, (NATASHA: Mm) so I think that's, probably, where I've come to NATASHA: That seems really linked to that idea at the beginning of uncertainty (TILLY: Mm) and (TILLY: Definitely) feeling un- feeling comfortable with that when you go in a room and, (TILLY: Definitely) and if it does go wrong... TILLY: Yeah, definitely carry on, (NATASHA: That's life) that's all good with me (small laugh) NATASHA: and then that almost feels linked to what you were saying about, (inhales) that is life, life things happen in life, (TILLY: Mm) and... (a cup is placed down) TILLY: You deal with them NATASHA: ... You've got to deal with it (TILLY laughs)
| Yeah, (TILLY: Yeah) as it comes | TILLY: Yeah, and I think, definitely from the experience of (name 2), I didn’t, you can’t stop that happening, it’s happened and you have to get on (NATASHA: Mm) with life, and then I think when I talked about the training how I was there almost trying to protect myself from all of that, (NATASHA: Mm) erm keeping myself aside from people, and that was that protection kind of thing ‘cause I couldn’t deal with it, again (sighs) erm, but I guess, (small pause) when I come out of training it’s almost like, my reserves have gone up again and I’m actually ok if that happens again, (NATASHA: Mm) I’ll deal with it, (laughs) you know and I, when I split up with (name 2) it was very much, having conversations with my friends that, you will be alright, (NATASHA: Mm) you’ve done worse before with happened and you will be fine and I think there was that, realisation of, oh yeah, yeah I will, and so I think (NATASHA: Mm) that kind of has, w- I don’t think I could’ve done that a few years ago so, (NATASHA: Mm)

| | yeah

| | NATASHA: There's very much a theme of resilience really

| | TILLY: Yeah, absolutely yeah

| | NATASHA: Making a difference

| | NATASHA: Yeah definitely, mm

| | There is a theme of resilience and belief in her ability to cope with whatever comes. She seems to be willing to risk connecting with the experience as she believes she can cope. The idea of her reserves going up sounds like she has gone through a process of repair. She is able to reflect that having been through something so awful and come out the other side has added to her belief in her ability to cope.

Pushing away vs. risking connecting
**Question 8:** NATASHA: Ok, so looking back over your training experience, in what way have these personal and professional changes impacted on your personal life?

TILLY: Ooh, (sighs) humph, well I'm now single (laughs) erm, looking back on your training experience in what ways have these personal and professional changes impacted on your personal life? (pause) mm, well I guess the theme of the last couple of months for me has very much just been about, (small pause) working out who I am as a person, (NATASHA: Mm) erm, without the links to, (small pause) so, err who I was with (name 2), who I was with (name 3), it's just about, hang on a minute, who am I? what do I want from life? (NATASHA: Mm) regardless of anyone around me (said with a laugh) and that's been quite empowering I think just, (NATASHA: Mm) erm, feeling comfortable with being able to do that, hopefully that's something I will continue (said with a laugh), to be able to do but that's definitely something I've been thinking about a lot and I think, those experiences, of the training and, other life experiences, almost led me to a place where I am, able to be like that, (NATASHA: Mm) again I couldn't have been like that, 7 years ago 5 years ago, erm so something has happened, to make me feel comfortable, (NATASHA: Mm) being able to do that and erm, that feel very sort of liberating and exciting and, (NATASHA: Mm) yeah so there's, yeah definitely is erm, it's a new way of looking at life (NATASHA: Mm) I think and, but a way I've always, I think I've always hoped that I look like that at life like that, but it's almost a realisation that, oh you weren't really were you, you were always like, trying to yeah, think about who you are but how do you fit in where now it's like no, who am I? who am I? (NATASHA: Mm)

NATASHA: Without the importance of fitting in?

TILLY: Everything else yeah definitely, and erm, I think that's nice being away from training almost 'cause there's a sense that, you are that cohort, erm, forever I'll be cohort 8 or whatever number I was and erm, and how I was meant to be fitting in with all of these other people, who are all lovely people (small laugh) but now it feels like no I'm just (participant name), (NATASHA: Mm) I'm a clinical psychologist, even down to the fact that, you don't have a

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<th>Who she is without her romantic partners and what she wants? Something about having a separate identity to those around you. Is this linked to only seeing yourself in comparison to others, rather than &quot;just you&quot;?</th>
<th>Budding to blooming: Evolving awareness of self</th>
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<tbody>
<tr>
<td>She talks about “working out” who she is as a person, suggesting a process of continually reflecting on this.</td>
<td>Budding to blooming: Evolving awareness of self</td>
</tr>
<tr>
<td>“Empowering” is a different feeling to her expression earlier of not knowing who she was. Instead she now feels confident in herself and asserting what she wants from life. The locus of control is with her rather than those around her to say she is good enough.</td>
<td>A change in myself that is difficult to articulate</td>
</tr>
<tr>
<td>“Something happened” but this is difficult for Tilly to identity what this process was that allowed her to feel comfortable. It is also difficult for her to identity what changed her (e.g. training and other life experiences intermingled). She uses very positive words used (liberating, exciting) to describe the experience of looking at life differently.</td>
<td>Who am compared to others: Identity as relational</td>
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</tbody>
</table>
supervisor, (NATASHA: Mm) who is res- clinically responsible, and that took a while to, think oh, I’m clinically responsible (NATASHA: Mm) you know, I’d take reports up to my supervisor (R :Yeah) when I first qualified and he was like “no (participant name) I don’t need to read that” it’s like (R laughs) “oh god” (laughs) so it, it’s (R :Right) that I think is part of the development, (NATASHA: Mm) as well, feeling, you can make your own decisions in life and, (NATASHA: Mm) nobody else, actually matters (laughs) so I think that’s something that changes when you qualify, (NATASHA: Mm) which you need to get used to again, (NATASHA: Yeah) ’cause if you think about, as an assistant, ok let’s say I was an assistant for, I don’t know, three or four years, trainee for three years, (NATASHA: Mm) it’s a long time, where somebody else (NATASHA: Mm) is always responsible, so, yeah so it’s been, something I’ve had to get used to but now I feel at the point where that’s, comfortable and, yeah, just sort of empowering really, so, (NATASHA: Mm) yeah

<table>
<thead>
<tr>
<th>Question 9: NATASHA: Ok, ok so I just wan- wanted to finish with thinking about this interview, (TILLY: Mm) so, I really, I was wondering what it’s like to talk about these things? (TILLY: Mm) whether, you have other opportunities to talk about these things? (said with a laugh)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TILLY: I think erm, it’s something actually me and my supervisor here, have had (NATASHA: Mm) quite a few conversations about, erm, yeah and feeling of, difference, around family members (NATASHA: Mm) or, friends, I think that’s something that, we, we will talk about in supervision, which I find really helpful, erm (sighs) but then it’s kind of, oh, oh it’s a bit like the, is it the Masons? The secret, secret handshake, (both laugh) but, you can’t really have these conversations with people, who aren’t in the same situation, (NATASHA: Mm) ’cause doesn’t, I don’t know if it’d make sense, (NATASHA: Right) erm, ’cause maybe it is something that is a bit of a lonely thought sometimes for people, (NATASHA: Mm) so it, it’s been, it’s been nice to talk about it, and I wonder, probably for the next week I’ll be thinking about it, and thinking of loads of other things (said with a laugh) that I would say or, erm,</td>
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<tr>
<td>Being a clinical psychologist is a part of her identity and this has meaning that she is responsible. This feeling of having responsibility is important as it means she is not seen in comparison to others, rather as a responsible individual. Interesting parallel between being clinically responsible and making her own decisions in her personal life, where she makes choices about who she is. The phrase “nobody else matters” highlights again her sense of self separate from those around her. Use of the word empowering again sounds like she feels truly comfortable with who she is.</td>
</tr>
<tr>
<td>Personal and professional selves: One doesn't go without the other</td>
</tr>
<tr>
<td>Who am I compared to others: Identity as relational I should be someone better vs. feeling ok about who I am</td>
</tr>
</tbody>
</table>

| Others with similar experience are able to understand. What is this about? Something difficult to articulate but can refer to with others with similar experience. Metaphor of the Masons suggests something secret and hidden which you cannot understand if you’re not part of and already have some knowledge (e.g. the secret handshake). This is a “bit of a lonely thought” maybe links to when she talked about losing her naivety and feeling different to those around her and disconnected. |
| A change in myself that is difficult to articulate |
| You can’t really have these conversations with people who aren’t in the same situation.
sort of make more links I guess (NATASHA: Mm) so it's probably really helpful to have these conversations 'cause it gets you to think about, (NATASHA: Mm) your life and where you come, but it doesn't give us any answers, (R laughs) but erm, yeah does get you thinking about, and hopefully that's h-, h-, helpful clinically, and to sort of think about where we stand as psychologists. (NATASHA: Mm) erm, (inhales) mm, so yeah it has been, it's been interesting

NATASHA: So when you say, people in the same position, (TILLY: Yeah) do you mean for myself (TILLY: Mmhmm) or do you mean people who've gone through the whole process (TILLY: Ahh) what were you thinking when you said that?

TILLY: Erm, (small pause) I think I meant a general kind of psych o g-ist (NATASHA: Yeah) term, that would go from a trainee onward (small laugh) (NATASHA: I was just) yeah, (NATASHA: Wondering yeah) if people were in the position to have those kind of thoughts, I think, I'm sure the *** trainees would be able to think in that respect, (NATASHA: Mm) I guess I've, my most contact now is with another course which I noticed have a different kind of, (NATASHA: Mm) mindset and, different feeling about people, (NATASHA: Mm) erm which has been odd (gives a small laugh) something to get used to, (NATASHA: Yeah) but I think I'm very lucky with my supervisor here who erm, is equally as, yeah, lets pull this apart, but she's really (laughs) so, so yeah

<table>
<thead>
<tr>
<th>Question 10: NATASHA: Well my final question is kind of one I've asked already but, what was it like being interviewed by a future peer who's currently doing training</th>
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</thead>
<tbody>
<tr>
<td>TILLY: Ok so would it have been different if you were a qualified or</td>
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<tr>
<td>NATASHA: Yeah, or even another profession or</td>
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<tr>
<td>TILLY: So ok so I think it would have been possibly different if you weren't in psychology, (NATASHA: Mm) there's almost a sense that, you can say things 'cause you'll get it, (NATASHA: Mm) erm, and I often find that, you almost, you say things differently depending on who your audience is, (laughs) (NATASHA: Yeah) erm, so I think it would have been very different if it wasn't psychology but I haven't felt there's been an impact with you being a</td>
</tr>
<tr>
<td>Again a reference to the usefulness of a shared experience. Does this help her to articulate something that is difficult to articulate? The use of a shared language and assumptions in how we express something to someone who has a shared experience.</td>
</tr>
<tr>
<td>Who am I compared to others: Identity as relational</td>
</tr>
<tr>
<td>Looking back you can sort of pull things apart</td>
</tr>
<tr>
<td>Comfort with not knowing vs. the safety of certainty</td>
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</table>
trainee (NATASHA: No) I don’t think (NATASHA: Mm) that hasn’t erm, or maybe it’s easier that you’re a trainee, if I was chatting to a, don’t know, ten year (R laughs) twenty year qualified psychologist (NATASHA: Mm) would they really have that kind of, grasp of it all, erm, all yeah, so I think so it’s probably (NATASHA: Mm) been helpful that you’re still a trainee…

NATASHA: I’m just interested, this isn’t on the schedule but, (TILLY: Mmhmm) I was thinking back to when you were saying, about you wonder what you’d say in five years time, (TILLY: Mm) (TILLY gives a small laugh) and, I was thinking for you, (TILLY: Yeah) do you feel this is a good time to be having this interview or do you think, (TILLY: Mmhmm) there were other times when you would have liked to have had this sort of ex, (TILLY: mm) time, what (TILLY: Yeah) do you think this is a particularly relevant time for you, ‘cause I wondering what you’re saying about you’re thinking about these things, (TILLY: Yeah) at the moment or

TILLY: Yeah I think it probably is a relevant time for me, erm, (pause) I think it’s about finding, I think these a-, these kind of conversations can’t be forced on people, (NATASHA: Mm) almost they need to come at a point where someone’s ready to have them.

NATASHA: That’s what I was thinking really

TILLY: Mm, yeah, otherwise you’re kind of forcing someone to think about something that maybe they haven’t really thought about, not that that’s a bad thing (NATASHA: Mm) ‘cause that’s probably what we’re meant to do, as psychologists but erm, so I wouldn’t, it feels like they’re important but it depends who they’re with, when they are, yeah so I think it, (NATASHA: Mm) I think it’s important to think about that

NATASHA: Ok, thank you, do you have anything you’d like to add

TILLY: I don’t think so, I’m sure I will in like a day’s time

Also ‘closeness’ to the experience seems to also be important. This increases the idea that we have something shared.

Tilly stresses the importance of timing for reflecting on experiences (“can’t force it”). Does this link to her saying she did not reflect during training. However she does feel training sets you on a pathway towards being able to do this.

Interesting reflection that as psychologist may ask people to think about difficult experiences, but timing is still important. Similarity between needing to be ready for therapy and ready for training? However is this because it is a risk to reflect?

Reflection and developmental process continues even after our interview.
Appendix 8a: Tilly’s emergent themes as they arose

Themes in red indicate the first occurrence of this theme.

Seeking reassurance of professional identity
I should be someone better vs. feeling ok about who I am
Comfort with not knowing vs. the safety of certainty
I should be someone better vs. feeling ok about who I am
Seeking reassurance of professional identity
I should be someone better vs. feeling ok about who I am
Seeking reassurance of professional identity
Training as exposing
Seeking reassurance of professional identity
Comfort with not knowing vs. the safety of certainty
Comfort with not knowing vs. the safety of certainty
I should be someone better vs. feeling ok about who I am
A change in myself that is difficult to articulate
Putting academic ideas into clinical practice
Who am I compared to others:
Identity as relational
Comfort with not knowing vs. the safety of certainty
Comfort with not knowing vs. the safety of certainty
Who am I compared to others:
Identity as relational
Comfort with not knowing vs. the safety of certainty
Enhanced creativity and meaning making from taking an uncertain position
Comfort with not knowing vs. the safety of certainty
Enhanced creativity and meaning making from taking an uncertain position
Comfort with not knowing vs. the safety of certainty
Putting academic ideas into clinical practice
I should be someone better vs. feeling ok about myself
Looking back you can sort of pull things apart
Personal and professional selves:
One doesn’t go without the other
Who am compared to others:
Identity as relational
Training as exposing
I should be someone better vs. feeling ok about who I am
Needing safety to be uncertain
I should be someone better vs. feeling ok about who I am
Trying out different styles but getting lost as a person
Personal echoing in the professional
Budding to blooming: Evolving awareness of self
Personal echoing in the professional
Pushing away vs. risking connecting
Pushing away vs. risking connecting
Pushing away vs. risking connecting
Comfort with not knowing vs. the safety of certainty
Pushing away vs. risking connecting
Personal echoing in the professional
Pushing away vs. risking connecting
Personal echoing in the professional
Pushing away vs. risking connecting
Budding to blooming: Evolving awareness of self
Who am I compared to others:
Identity as relational
Looking back you can sort of pull things apart
Budding to blooming: Evolving awareness of self
Budding to blooming: Evolving awareness of the self
Personal and professional selves:
One doesn’t go without the other
Losing naivety vs. gaining wisdom
Training as exposing
Who am I compared to others:
Identity as relational
Looking back you can sort of pull things apart
Pushing away vs. risking connecting
Being gutsy: Taking risks personally and professionally
Who am I compared to others:
Identity as relational
Seeking reassurance of professional identity
I should be someone better vs. feeling ok about who I am
Carrying people with me
Personal echoing in the professional
Pushing away vs. risking connecting
Personal and professional selves:
One doesn’t go without the other
Looking back you can sort of pull things apart
Losing naivety vs. gaining wisdom
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Being gutsy: Taking risks personally and professionally
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Identity as relational
Seeking reassurance of professional identity
I should be someone better vs. feeling ok about who I am
Carrying people with me
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Pushing away vs. risking connecting
Who am I compared to others: Identity as relational
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I should be someone better vs. feeling ok about who I am
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Personal and professional selves: One doesn’t go without the other
Personal and professional selves: One doesn’t go without the other
Personal and professional selves: One doesn’t go without the other
Budding to blooming: Evolving awareness of self
Who am I compared to others: Identity as relational
I should be someone better vs. feeling ok about who I am
A change in myself that is difficult to articulate
I should be someone better vs. feeling ok about who I am
A change in myself that is difficult to articulate
I should be someone better vs. feeling ok about who I am
Comfort with not knowing vs. the safety of certainty
Pushing away vs. risking connecting
Losing naivety vs. gaining wisdom
Budding to blooming: Evolving awareness of self
Comfort with not knowing vs. the safety of certainty
I should be someone better vs. feeling ok about who I am
Putting academic ideas into clinical practice
Pushing away vs. risking connecting
Budding to blooming: Evolving awareness of self
Who am I compared to others: Identity as relational
A change in myself that is difficult to articulate
Who am I compared to others: Identity as relational
Budding to blooming: Evolving awareness of self
Who am I compared to others: Identity as relational
Personal and professional selves: One doesn’t go without the other
Who am I compared to others: Identity as relational
A change in myself that is difficult to articulate
You can’t really have these conversations with people who aren’t in the same situation.
Pushing away vs. risking connecting
Looking back you can sort of pull things apart
Comfort with not knowing vs. the safety of certainty
Who am I compared to others: Identity as relational
A change in myself that is difficult to articulate
You can’t really have these conversations with people who aren’t in the same situation.
Pushing away vs. risking connecting
Looking back you can sort of pull things apart
Appendix Bb: Emergent themes for Tilly

Seeking reassurance of professional identity
I should be someone better vs. feeling ok about who I am
Comfort with not knowing vs. the safety of certainty
Training as exposing
A change in myself that is difficult to articulate
Putting academic ideas into clinical practice
Who am I compared to others: Identity as relational
Enhanced creativity and meaning making from taking an uncertain position
Looking back you can sort of pull things apart
Personal and professional selves: One doesn’t go without the other
Needing safety to be uncertain
Trying out different styles but getting lost as a person
Personal echoing in the professional
Budding to blooming: Evolving awareness of self
Pushing away vs. risking connecting
Losing naivety vs. gaining wisdom
Being gutsy: Taking risks personally and professionally
Carrying people with me
You can’t really have these conversations with people who aren’t in the same situation”
### Appendix Bc: Clustering of Tilly’s themes

<table>
<thead>
<tr>
<th>Developing acceptance of self</th>
<th>Enhanced awareness of self</th>
<th>Taking risks and managing uncertainty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking reassurance of professional identity</td>
<td>Budding to blooming: Evolving awareness of self</td>
<td>Comfort with not knowing vs. the safety of certainty</td>
</tr>
<tr>
<td>I should be someone better vs. feeling ok about who I am</td>
<td>Personal and professional selves: One doesn’t go without the other</td>
<td>Enhanced creativity and meaning making from taking an uncertain position</td>
</tr>
<tr>
<td>Training as exposing</td>
<td>Putting academic ideas into clinical practice</td>
<td>Needing safety to be uncertain</td>
</tr>
<tr>
<td>Who am I compared to others: Identity as relational</td>
<td>Looking back you can sort of pull things apart</td>
<td>Pushing away vs. risking connecting</td>
</tr>
<tr>
<td>Trying out different styles but getting lost as a person</td>
<td>Personal echoing in the professional</td>
<td>Being gutsy: Taking risks personally and professionally</td>
</tr>
<tr>
<td>A change in myself that is difficult to articulate</td>
<td>Losing naivety vs. gaining wisdom</td>
<td></td>
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<tr>
<td></td>
<td>Carrying people with me</td>
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<td></td>
<td>You can’t really have these conversations with people who aren’t in the same situation</td>
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</table>
## Appendix 8d: Subordinate themes for Tilly and corresponding quotes

<table>
<thead>
<tr>
<th>Subordinate theme</th>
<th>Page: Line</th>
<th>Quotes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seeking reassurance of professional identity</td>
<td>1: 9-14</td>
<td>I don’t know if I saw myself as a professional [...] didn’t see myself as very confident I guess very anxious about, who I was as a professional I guess, always thinking that, I should be someone better.</td>
</tr>
<tr>
<td></td>
<td>2: 5-7</td>
<td>I was definitely like working within my competence I would always be sort of seeking reassurance I think from my supervisor.</td>
</tr>
<tr>
<td>I should be someone better vs. feeling ok about who I am</td>
<td>6: 18-23</td>
<td>‘Cause you think my goodness I’m rubbish at this I shouldn’t be doing it.</td>
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<tr>
<td></td>
<td>7: 28-29</td>
<td>Yeah feeling ok about, about who I am rather than trying to be someone else.</td>
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<td></td>
<td>15: 39-44</td>
<td>The training experiences, played a massive role in starting that process, but as I sort of said I think it was that post-training, is when I found I could actually, work best [...] I wouldn’t say if you took a snap shot of me if we say I don’t know, 5-6 years ago, and me now, fundamentally I think I am the same person, the same values, same beliefs, but there’s just something that, and maybe it’s about me becoming more self assured in who I am.</td>
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<td></td>
<td>16: 1-5</td>
<td>I think she sort of reinforced that you know, people are people and that’s what people need, and sort of instilling that confidence in me as a, alright academic, (laughs) but somebody who can do the job just as good as someone who got firsts, and that kind of, that’s a bit of a strange example but yeah, just seeing, sort of the, positives in someone.</td>
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<td></td>
<td>18: 21-29</td>
<td>I don’t ever introduce myself as ‘Doctor’, I’m just, me, and I, I think, that’s something that I’m very comfortable with, I’m comfortable with chairing meetings, when things don’t go quite to plan, that’s something I think I’ve learnt to feel alright with, I don’t think I have these expectations on me that I kind of need to be this perfect person, I’m just happy trying out and see what happens</td>
</tr>
<tr>
<td>Training as exposing</td>
<td>2: 15-16</td>
<td>When you look back maybe I was more confident beforehand than I was actually when I got onto the training course.</td>
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<td></td>
<td>42: 1-8</td>
<td>You’re incredibly anxious and you don’t think you know anything and you’re not really sure what’s going on, and that’s going to have an impact and I guess I’d very much saw myself as that, saw myself as a first year trainee, and as I said earlier a bit like that, that, that trainee word was a thing that always sort of, impact on me.</td>
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<tr>
<td>Topic</td>
<td>Time</td>
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</tr>
<tr>
<td>Who am I compared to others: Identity as relational</td>
<td>3: 41-44</td>
<td>What do the team members think of me as a trainee, do they think that I’m not the skilled person, they actually want the, the qualified clinical psychologist.</td>
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<td></td>
<td>17: 16-17</td>
<td>I thought about a lot when I was training in my cohort was, looking, at how other people were coping.</td>
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<td></td>
<td>19: 30-33</td>
<td>’Cause as much as, it’s not a competitive environment I guess I did have, thoughts about well what is it they’re thinking about me? Or, do they think I’m a bad person?</td>
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<tr>
<td></td>
<td>23: 8-14</td>
<td>Feeling more confident, and self assured in myself as just a person, to, be that person professionally, and definitely, recently thinking about me, personally [...] who am I? rather than, always seeing the self in this context of other people.</td>
</tr>
<tr>
<td>Trying out different styles but getting lost as a person</td>
<td>7: 33-36</td>
<td>I wondered whether I would always try and, see what my supervisor was like and emulate that, and whether other trainees do that I don’t know almost as a, ok which, in one hand is trying out different styles, but, I think you can get lost as a person in all of that and not really know who you are.</td>
</tr>
<tr>
<td>A change in myself that is difficult to articulate</td>
<td>24: 5-15</td>
<td>It’s hard to put things in words sometimes isn’t it, in what ways I’m just trying to be a bit more, tangible with this, I don’t know ok, well there’s just something about me being, a happy psychologist and that sounds very, woolly and, not particularly helpful, but there’s something about, almost, having to have gone through experiences where, you change professionally or personally, to get to a place where you can, be useful.</td>
</tr>
<tr>
<td>Budding to blooming: Evolving awareness of self</td>
<td>8: 34-38</td>
<td>I’d had quite a lot of turmoil in my life a couple of years before starting training, and I don’t know if I really, knew who I was, think myself was a but all over the place really, which maybe echoes how my training experience went, actually, how did I view myself?</td>
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<td></td>
<td>14: 31-37</td>
<td>So maybe it’s, since I’ve been qualified I can be more, self assured about who I am as a person, not having to try and fit in and be other things I can just be me, and I think, then being me, I can really sit back and think about what I want from life and, what’s right what’s wrong and, where am I going.</td>
</tr>
<tr>
<td></td>
<td>16: 2-5</td>
<td>I think I am the same person, the same values, same beliefs, but there’s just something that, and maybe it’s about me becoming more self assured in who I am.</td>
</tr>
<tr>
<td></td>
<td>23: 5-12</td>
<td>Maybe it’s sort of just, cementing, the things I had before so the ways I was thinking before, and feeling more confident, and self assured in myself as just a person, to, be that person professionally, and definitely, recently thinking about me, personally and just that sort of, real sort of reflective, kind of, who am I?</td>
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<td></td>
<td>27: 13-18</td>
<td>Hang on a minute, who am I? what do I want from life? regardless of anyone around me and that’s been quite empowering I think just, feeling comfortable with being able to do that.</td>
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<tr>
<td>Time</td>
<td>Description</td>
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<tr>
<td>22:12-19</td>
<td>I guess they go- one doesn’t go without the other does it? Mm, I think I can always, you can always tell how things are, with me, at home, or at work, just looking at each other, and I think it’s quite easy sometimes to say “oh, oh I’m really stressed at work”, but actually it’s possibly the other way round Not only as, have I changed professionally, yes there have been those personal identity that, my personal identity there’s also sort of, had to develop and I wonder if that had gone in, what order they’d gone in, yeah ’cause I’m wondering whether, is it sort of something y- you change professionally which has an impact on your personally, or is it the other way around?</td>
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<tr>
<td>22:22-29</td>
<td>Maybe it’s discreet moments, so something professionally can happen, that changes you, which then impacts on you personally, and equally something might happen in your personal life that’s gonna impact back, into your professional life, that’s probably how it goes, but they’re constantly sort of in motion with each other.</td>
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<tr>
<td>22:35-41</td>
<td>“Looking back you can sort of pull things apart” ’Cause you think my goodness I’m rubbish at this I shouldn’t be doing it, but looking back you can sort of pull things apart I think when you look back and see that probably just wasn’t suited to me as a person.</td>
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</tr>
<tr>
<td>6:18-23</td>
<td>“Personal “echoing” in the professional” Prior to training well, I think I’d had quite a lot of turmoil in my life a couple of years before starting training, and I don’t know if I really, knew who I was, I think my self was a bit, all over the place really, which maybe echoes how my training experience went.</td>
<td></td>
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<tr>
<td>8:32-38</td>
<td>Losing “naivety” vs. gaining wisdom You sort of lose that naivety of life, you can’t look at the situation in the naive way and just, let it brush over your head, and I, I think I tried to think that I can but actually you can’t and that, can impact on, how you view other people the relationships that you have, perhaps expecting people, to, have the same way of thinking as you, have that ability to, be analytical in how you think about things and, be emotionally intelligent. I mean it’s like asking a, hundred year old woman, what you, what you knew then, and you know and I’ve had lots of conversations with people recently about, if you had the choice to going back to being eighteen again would you? And, and it’s always, I would if I knew what I know now.</td>
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<td>12:15-25</td>
<td>Carrying people with me I guess was someone who had a massive impact on my personal and professional identities, and as much as he wasn’t there, he was kind of there, make-challenging me I guess in my own mind about who I was as a person.</td>
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<tr>
<td>16:21-27</td>
<td>“You can’t really have these conversations with people who aren’t in the same situation” It’s a bit like the, is it the Masons? The secret, secret handshake, but, you can’t really have these conversations with people, who aren’t in the same situation, ’cause doesn’t, I don’t know if it’d make sense.</td>
<td></td>
</tr>
<tr>
<td>Putting academic ideas into clinical practice</td>
<td>5: 25-36</td>
<td>I guess in a lot of my placements, so the clinical side of things, those weren’t necessarily the ideas that were, to begin with, weren’t matching up […] but I think by then, by my third year placement, those ideas were welcomed and I was allowed to sort of put them into practice.</td>
</tr>
<tr>
<td>Comfort with not knowing vs. the safety of certainty</td>
<td>2: 30-33</td>
<td>Then you get on the course, and you think wow everything, that’s done now, then actually you start and then suddenly, things change I think, and yeah it becomes incredibly scary again.</td>
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<td></td>
<td>3: 26-34</td>
<td>I think my training experience sort of really allowed me to have those kind of thoughts and to be confident with that idea of, not having to know everything […] I guess that in my third year, that was probably where that was able to develop and it felt like when you got to the third year, my confidence sort of came back a little bit.</td>
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<td></td>
<td>5: 9-16</td>
<td>You’d think that you’re meant to know everything aren’t you and you’re meant to have all the answers, but, but you know and that’s something I think I, I’m still, it’s not something that always comes naturally to me, but I’m a lot better in not having to know everything, and, which I think is a good place to be.</td>
</tr>
<tr>
<td>Enhanced creativity and meaning making from taking an uncertain position</td>
<td>4: 20-26</td>
<td>You don’t have to know everything and actually trying to find, all the answers immediately sort of, take you nowhere and sort of stops that creativity, so I think that’s the thing that, I’ve (gives small laugh) I’m trying to think who must have taught us that someone at the ***** course (referring to Mason (1993) and his concept of safe uncertainty) must have brought him up, and I think that was something that I found really, quite freeing.</td>
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<tr>
<td>Needing safety to be uncertain</td>
<td>11: 29-33</td>
<td>There was something about my supervisor I guess that, I chose him for the fact that I knew I could trust him, so I guess I, I did let him in, as much as, he probably would say I didn’t let him in completely.</td>
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<tr>
<td><strong>Pushing away vs. risking connecting</strong></td>
<td>8: 41-44</td>
<td>I viewed myself a bit of a, as a bit of a lone ranger, as a bit of somebody who, (pause) didn’t really want or need lots of other people around me, was just looking out for myself, when looking back at that was quite sad to think about how I was.</td>
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<td></td>
<td>9: 7-15</td>
<td>I think I drew a sea and I drew myself in a little boat, and, it felt a bit like that that, and, that’s where I wanted to be, on my own out at sea and everyone just leaving me alone, and that’s what it was like for me really and, I think I struggled a bit coming into this cohort where everyone had to be, together and, yeah like, I think I would very much see myself as sitting on the outside of that, not unhappy just, not wanting that.</td>
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<td></td>
<td>9: 41-44</td>
<td>Almost not willingly wanting people to help me, support me, sort of a head down mentality, head down, keep going and you’ll get through this almost, whereas, I think I was sort of being on a journey of allowing myself to trust people again.</td>
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<td></td>
<td>10: 1-2</td>
<td>I think I was very much pushed them away, and I think a lot of this was possibly, in my own body rather than physically or, emotionally letting people in, I think, I just didn’t want that, it was easier to push them away than to, yeah well it was easier to push them away emotionally, to protect myself I guess.</td>
</tr>
<tr>
<td><strong>Being “gutsy”: Taking risks personally and professionally</strong></td>
<td>20: 35-37</td>
<td>Build their confidence up to be able to take those risks, and it’s ok if it doesn’t work out, ‘cause life doesn’t always work out.</td>
</tr>
</tbody>
</table>
## Appendix 9: Master themes for group

<table>
<thead>
<tr>
<th>Superordinate themes</th>
<th>Subordinate themes</th>
<th>Presence of subordinate theme for each participant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tilly</td>
<td>James</td>
</tr>
<tr>
<td>Acceptance of self</td>
<td>I should be someone better vs. feeling OK about who I am</td>
<td>✔️</td>
</tr>
<tr>
<td></td>
<td>Being valued by others to valuing myself</td>
<td>❌</td>
</tr>
<tr>
<td></td>
<td>Comparing myself to others</td>
<td>✔️</td>
</tr>
<tr>
<td>Awareness of self and others</td>
<td>Budding to blooming: Evolving awareness of self</td>
<td>✔️</td>
</tr>
<tr>
<td></td>
<td>Personal and professional selves: One doesn’t go without the other</td>
<td>✔️</td>
</tr>
<tr>
<td></td>
<td>Losing naivety vs. gaining wisdom</td>
<td>✔️</td>
</tr>
<tr>
<td>Taking risks and managing uncertainty</td>
<td>Comfort with not knowing vs. the safety of certainty</td>
<td>✔️</td>
</tr>
<tr>
<td></td>
<td>Opening to connection</td>
<td>✔️</td>
</tr>
</tbody>
</table>
Appendix 10: Excerpt from researcher’s reflective diary

Reflection on meeting with supervisor (8/4/2013)

Areas of interest discussed in meeting:

1. The interaction between the personal and professional context, how do we bring out context into the training experience?
2. How do our working and personal relationships differ?
3. Personal connectedness with training, is there something of ‘you get out what you put in’? This seems similar to therapy in some ways, need to engage with the process for it to ‘touch’ you on a personal level.
4. How do people manage the boundary between their personal and professional lives? Do they connect to or avoid the experience?

How do I relate to these topics? There seem to be many levels in which these topics are relevant to me: my experiences of training which have influenced me on a personal level, my relationships which I experience as having personal and professional aspects to them, my partner working in a similar field and therefore the boundary between personal and professional sometimes feeling very fluid, my personal struggles (e.g. with back pain) during a professional training. It has felt impossible to ignore my personal experiences/emotions during the course of training – this has made me curious how others experience this boundary between their personal and professional lives. Perhaps this was why I was initially interested in impact of training on romantic relationships (previous UH thesis).

How do I focus this topic? It’s so wide and overwhelming. Is there some way to narrow it down whilst allowing for different experiences to come through? Wondering about concept of identity, sometimes mentioned in literature. How do people change during training? Trying to look at what is inside them/how they feel about themselves – what changes here? Is this identity? Perhaps could look at this with the research question: how do newly qualified Clinical Psychologists construe the transformation of their identity during doctoral training? Allows people to talk about personal and professional changes in themselves and how this has felt.

Reflections on a lecture at the University of Hertfordshire: Crisis, identity and change: lessons for coaches from the world on criminology, by Cathy Weston (16/7/14).

Cathy’s lecture on how change happens for people who desist from crime seemed to have resonance for my thesis in terms of ‘change processes’. She asked ‘why do people stop doing harmful behaviour?’
How do people make significant changes in their lives? Could you say that if you change your behaviour there is a change in your identity? In this case, identity as a criminal, in my thesis identity as a Clinical Psychologist. So if I act like a psychologist, am I a psychologist? It feels like it something deeper than this, not sure I’m there yet!

She spoke about how social bonds can lead people to desist from crime, but might this process happen in other life changes – the influence of people around us. Links with concept of identity as relational – our identity is formed through our relationships with others and how they see us. This feels very true for me, who I am is linked to how others see me and how they behave towards me. Identity as negotiable and requiring feedback from others. Not really how this is written about in some literature.

She also spoke about the “entry shock” of going into prison and the idea of transition trauma. Although obviously very different this makes me think of my own transition into training, which did feel like a ‘shock’. The ground shifting beneath my feet, a process of unknowing what I had known before. The idea of ‘psychological survival’ which Cathy spoke about seems a key concept. How do you survive the experience of such major adjustment? However it is difficult to know if others felt the same. In my training cohort, others seemed to struggle with this period of transition, but I need to be able to bracket this experience in my interviews.

Cathy spoke about initial stress then adjustment on entering prison. CP training, which is obviously a very different experience, has felt similar to this in some ways. Some adjustment to a new way of being but also continuing instability, as if the rug could be pulled from underneath me at any time. The idea of trauma challenging ones identity was interesting – instead of a trauma the idea of the stresses and struggles of training leading to identity shifts. Not as extreme as prison but still making you consider yourself. The process of thinking about myself, who I am and how I act. This awareness feels transformative, I cannot get away from it. But it is difficult to articulate – what is different?

Cathy then talked about narrative approaches to responding to crisis, in this case being in prison. The idea of ‘unification of the self’ (from author William James) touched me – unifying where have you been and where you are going. This felt very important for me as I progress through training – linking what has happened in my life with what is happening now. I wonder if this would give some sense of stability, during a time when things feel so unstable. The thread through someone’s life – what is that for me? Could that be what I call my identity? Is this the same for others?