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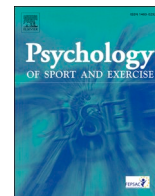
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Trainee clinical, and sport and exercise psychologists' experiences of professional development: A longitudinal study

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ABSTRACT

The aim of this study was to examine longitudinal professional development in distinct types of UK psychologists. We interviewed 9 trainee clinical psychologists (TCPs), and 9 sport and exercise psychologists' (TSEPs) 3 times at a minimum of yearly intervals during their 3-year (TCP) or 2-year (TSEP) training programme. Participants were registered on either the British Psychological Society (BPS) Qualification in Sport and Exercise Psychology (QSEP; Stage 2), or a doctorate in clinical psychology. We applied a reflexive thematic analysis to transcripts based on a counsellor development framework. Our findings indicate that diverse types of trainee psychologists experience similar patterns of development. Participants: (a) were developing their practice consistent with their personality; (b) experienced changes in emotions and presence during training; and (c) internal developmental processes were influenced by external sources (supervisors, and peers). Findings may help us to understand how trainees fuse their personal and professional selves during training.

Although psychologists, counsellors, and therapists influence therapeutic processes and outcomes when helping clients, practitioners differ in their abilities, and vary in their effectiveness (Johns et al., 2019). Among the most consistent findings, for example, skilled practitioners, compared with their less capable peers, possess sound interpersonal capabilities they have cultivated in professional settings (Heinonen & Nissen-Lie, 2020). Specific interpersonal qualities include empathy, verbal and nonverbal communication abilities, and the capacity to form, maintain, and repair therapeutic alliances. These findings reflect that counselling, psychotherapy, and similar helping relationships are co-constructed interpersonal encounters (van Deurzen & Adams, 2016). A key question emerging from these studies is how do trainees develop into effective psychologists, counsellors, and therapists?

To understand how trainees develop, researchers have undertaken much research, from which they have proposed several theories (Simpson-Southward et al., 2017; Worthington Jr, 2006). The work of Rønnestad and Skovholt (2013) exemplifies the research aimed at understanding practitioner development across the lifespan. In developing a counsellor development framework, Rønnestad and Skovholt (2013) undertook 172 interviews with 100 counsellors (from novice to senior professional). From the data, Rønnestad and Skovholt (2013) developed a framework that describes how practitioners, and their professional

activities change with experience. The framework is presented as five phases of practitioner development (the novice student phase, experienced student phase, novice professional phase, experienced professional phase, and senior professional phase) and 12 general themes of professional development (e.g., an intense commitment to learn propels the developmental process, and professional development is a lifelong process). The framework describes how practitioners, and their professional activities change with experience. For example, individuals at the student phases develop from being rigid problem solvers to collaborative facilitators. With experience, practitioners appreciate the working relationship and learn to adapt interventions to suit clients' specific needs. Movement from a reliance on external sources (e.g., supervisors, or advanced peers) for imitation purposes to being selective of influences is another feature of change during the student phases. Becoming selective of influences may be one sign that early career practitioners are trying to optimise their individuation. A central theme from Rønnestad and Skovholt's (2013) study focused on individuation, or a process whereby practitioners gain confidence and learn to meld their personal and professional selves to become authentic individuals who choose how they wish to behave with clients and the contexts in which they want to work.

Researchers have explored how competency matures across a diverse

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range of mental health and well-being-related professionals and disciplines. Examples include school counsellors (Woodcock, 2005), marriage and family counsellors (Bischoff, 1997), psychiatrists (Tucker, 1989), and sport psychologists (McEwan et al., 2019). Several longitudinal qualitative studies have followed sport psychologists across periods lasting 2–6 years (McEwan et al., 2019; Tod & Bond, 2010; Tod et al., 2009, 2011). These studies have typically explored trainees who have become registered or accredited practitioner psychologists in the UK or Australia. Another feature of these studies is that they have drawn upon Rønnestad and Skovholt's (2013) counsellor development framework to guide their investigations. Similar work has examined American mental performance consultants-in-training (Fogaca et al., 2020), although these individuals are not licensed psychologists, and their training contains much less supervised experience and psychology coursework compared to their Australian and British counterparts. Results from these studies parallel findings from the counsellor development study. For example, practitioners experience anxiety about their competence when they initially embark on helping clients but learn to manage their emotions over time. Client interactions, supervision, and personal therapy are primary sources of learning. Considerable development occurs after graduation, as practitioners learn how to adapt the knowledge and skills gained in training to the novel contexts in which they gain employment.

Research on practitioner development has occurred in the US, Europe, and Australia, with much less in the UK. A recent significant landmark in the UK training territory arose in 2009 when the government introduced statutory regulation for practitioner psychologists, under the purview of the Health Care and Professions Council (HCPC). With the passing of statutory regulation, the divisions within the British Psychological Society (BPS) have created or reviewed their educational pathways to ensure graduates, having completed their training, are eligible for HCPC registration. There exists limited research that has explored UK practitioner development since statutory regulation was introduced, and there is scope to advance knowledge by studying professional growth within the recent HCPC-driven context.

Another way to advance knowledge is to examine the professional growth of diverse types of UK practitioner psychologists. Most studies to date, and in particular qualitative investigations, have focused on specific types of practitioners (Bischoff, 1997; McEwan et al., 2019). The culture or zeitgeist associated with a training environment influences practitioner development (Rønnestad & Skovholt, 2013). In the UK, there are distinct types of psychologists, such as clinical, counselling, forensic, educational, occupational, health, and sport and exercise. These groups train and operate in separate contexts, and they may be associated with varying cultures. Although distinct in context and culture, there are similarities among the distinct types of psychologists. For example, clinical, and sport and exercise psychologists share generic professional competences (e.g., the ability to form client relationships, to keep accurate records, confidentially) and draw on similar types of approaches to guide service-delivery, such as cognitive-behavioural theory (CBT). Recently, there has been increasing recognition of mental health within sport and exercise psychology (e.g., Diamond et al., 2022) and there is potential to learn from subdisciplines that focus significantly on mental health (e.g., clinical psychology). Variation between the two subdisciplines exist with respect to training content and employment outcomes, however, differences have steadily faded (Norcross et al., 2020). This means comparing distinct types of practitioner psychologists (e.g., clinical, and sport and exercise) may inform theoretical understanding regarding training, clarify the training processes that influence effectiveness, and yield applications for educators and supervisors.

Across the qualitative studies, researchers have adopted a range of epistemological and ontological stances, diverse guiding theoretical frameworks, different data collection methods (e.g., interviews, and open-ended questionnaires), and varying data analysis procedures. Further, researchers have recruited samples at different time points

along the career lifespan (e.g., early, middle, and later years). The diversity of participants, methods, theories, and procedures may hinder potential comparisons of findings across these studies. One way to advance knowledge is to recruit distinct types of psychologists, at the same stage of training, in the same study so there is consistency in the research methods, theory, and procedure. Such research may permit the comparison of different sub-disciplines and enhance our understanding of the robustness and transferability of knowledge.

Beyond knowledge advancement, research exploring the development of diverse types of UK practitioners may offer impact and benefits for various groups and individuals. The knowledge may assist professional bodies, such as the HCPC and the divisions within the BPS, in reviewing current training pathways and desired educational outcomes. Applicants to psychology qualifications and trainees may appreciate learning the possible developmental themes and journeys ahead of them and help them make informed choices about their career paths. Educators and supervisors may develop their empathy for trainees and practitioners by being reminded about the joys and challenges associated with professional development. Practitioners and trainees may find the breadth and depth of their reflections are enhanced from learning about the growth of their peers.

In summary, research that explores the professional development of different trainee practitioner psychologists, in the UK context, represents a timely and novel way to advance knowledge. The purpose of the current longitudinal study was to examine trainee clinical psychologists' (TCPs), and trainee sport and exercise psychologists' (TSEPs) experiences regarding their professional development during the years of their postgraduate education.

1. Methodology

1.1. Philosophical stance and researcher positioning

The study was situated within a relativist ontology and a social constructionist epistemology (Smith & Sparkes, 2016). Participants shared their interpretations of their development reflective of the current time, place, and context. As researchers, we co-constructed the data through our interactions with the participants. Who we are as knowledge-seekers will influence the knowledge that is shared by the participants, along with the time and context within which the interviews occurred. Each author of this study brought an experiential perspective to interpret and construct findings. The co-authors have each been actively involved in sport and exercise psychology education, training, and service-delivery for over 15 years. Throughout the research process, we acted as critical friends to each other to challenge our interpretations and encourage scrutiny of our analyses. For example, in earlier drafts of the findings the first author tended to focus on differences between the subgroups of participants which meant representing one subgroup as better than the other. Reflexivity of our biases allowed us to be aware of presenting a balanced account of development by focusing on commonalities.

1.2. Participants

Participants in this study were 9 TCPs (7 identified as cisgender female and 2 as cisgender male) and 9 TSEPs (2 identified as cisgender female and 7 as cisgender male) aged 24–29 years of age at the start of the study. Participants were registered on either a doctorate in clinical psychology at a UK university, or the British Psychological Society (BPS) Qualification in Sport and Exercise Psychology (QSEP; Stage 2). All TSEPs held a master's degree in sport and exercise psychology. Three clinical participants held PhDs, three held undergraduate degrees in psychology, and three held master's degrees in applied psychology. Participants' applied experiences varied from individuals who had worked with clients as part of their MSc coursework (TSEPs), to those who had been employed as assistant psychologists (TCPs). Participants

identified as being from the UK or Ireland.

1.3. Training programmes

TCPs were enrolled on a 3-year full-time doctoral programme accredited by the BPS at one of three UK universities where recruitment for this study took place. The doctorate programme in Clinical Psychology has three strands – practice (clinical placements are situated within the National Health Service (NHS), academic, and research – where students complete assignments which are then assessed by university teaching staff (Keville et al., 2018). TCPs spend half of the working week on clinical placements and the remainder attending lectures and seminars and conducting research. Supervision is principally on a one-to-one basis, although some clinical placements may offer group supervision (Buckman & Barker, 2010). Courses may differ in respect to the prominence placed on specific schools of psychology within teaching; however, TCPs are expected to have significant knowledge and experience of service-delivery within at least two evidence-based models (e.g., cognitive-behavioural, systemic).

TSEPs were enrolled on the QSEP – the supervised practice-based training programme provided by the British Psychological Society (BPS) equivalent to doctoral level training (also known as Stage 2). Trainees complete independent supervised experience to develop both research and practice competencies with the support of a privately organised supervisor who is registered as a sport and exercise psychologist with the HCPC. Trainees were engaged in a minimum of 2-years full-time supervised practice. The QSEP is not a course of study within a structured programme, overseen by an institution; it is a professional body award, designed around work-based learning, where trainees generate their own placements. TSEPs are not part of a supporting institution that provides classes and a readymade set of peers at the same stage of training. TSEPs have oversight about what they want to learn and apply in sport and exercise psychology.

1.4. Procedures

After obtaining institutional ethical approval, the first author contacted TSEPs in her professional network by email and outlined the study's purpose, risks, and safeguards and invited them to participate. TCPs were recruited by contacting course leaders at each of three UK universities to ask permission to present an overview of the study to students for recruitment purposes. An overview of the study's benefits, risks, and safeguards was presented to students during a lecture at each university with an invitation to participate. Participants who contacted the first author received participant information and informed consent sheets and an invite to arrange an interview.

Of the 54 interviews (the 18 participants were interviewed three times each), all TCP interviews were conducted by telephone due to geographical access. Nine TSEP interviews were conducted face-to-face in a setting chosen by the participant (e.g., cafe) with the remainder also being telephone interviews. Interviews lasted 43–82 min. Participants' first interview occurred within a month of beginning their training programme. The second round of interviews occurred as closely as possible to the month after trainees had completed their first year of training. The final interviews took place when participants were within one month of completion of their training programme. The final interviews were arranged to accommodate participants, for instance, some sport trainees took longer than the minimum 2-year training period due to work commitments and completion of paperwork. The data of the 18 participants who completed all three interviews is included in this study.

1.5. Interview guide

Each person engaged in a semi-structured, one-to-one interview three times. The interview guides were based on general topics from the professional development literature (e.g., Rønnestad & Skovholt, 2013),

and programme-specific literature (e.g., Eubank & Forshaw, 2018). Topics included current applied experiences, influences on professional development, preferred method of learning, feelings about applied work, measures of effectiveness, and aspirations. The guides were used flexibly to allow interviews to feel conversational and to follow the participant's stories. The same broad topics were discussed in the second and third interviews with the interview questions becoming about change and development. For example, participants were asked how their feelings about applied experiences had changed since the last interview. In their final interviews, participants were asked: "How have you changed since you began training?" The first author revisited everyone's transcript before each subsequent interview as a reminder of the participant's story. The transcript was also returned to the participant, and each subsequent interview involved a discussion about the ongoing process of analysis as part of the member reflections process (Tracy, 2010).

1.6. Data analysis and presentation

The analytical procedure involved concurrent deductive and inductive thematic analysis to move between data analysis and theoretical explanations. This combination of deduction and induction has been termed abductive reasoning (Timmermans & Tavory, 2012). We followed such a procedure because the aims of this study were to understand how two unique groups of trainees developed (inductive) and to use a guiding framework (deductive) for understanding development.

Each year, analysis began with the first author transcribing the interviews verbatim and then repeatedly reading the transcripts whilst listening to the digital recordings of the interviews to ensure transcription accuracy and immersion in the data. During this step, the first author coded excerpts on the transcript where participants discussed change and development (e.g., "I used to feel nervous before I met a client") on broad categories from the counsellor development framework (Rønnestad & Skovholt, 2013). Next, the first author placed the highlighted excerpts of raw data into a matrix containing eight categories (e.g., central task, emotions, influences, role and working style, methods of learning, conceptual ideas applied, measures effectiveness, and motivations). The categories covered broad parameters and served as starting points for organizing the data. Analyzing the data under each category then allowed us to develop raw themes based on the participant's stories and in reference to the guiding framework. The additional category 'motivation' was added during data analysis as it helped to describe participant's journeys. Data that could not be assigned to categories or did not warrant the development a new category were discarded based on their relevance to the research aims.

Deductively categorizing the raw data provided a structure to organize the flow of data (i.e., 54 interviews) and created a visual representation that assisted with the inductive process of identifying themes. As stated, we purposefully referred to an existing theoretical framework in our analysis of the data, because it could provide insight into trainee psychologist's journeys. We developed themes through analysis of the data contained within the broad categories. For example, within the category 'Role and Working Style' we developed a theme around 'Presence'. We compared our themes generated from within the broad categories to the counsellor development framework and back to participants' responses and insights from audience review (described below). We discussed themes, compared, and contrasted them with existing and new data in an alternating cycle of induction and deduction. We developed our analysis from a theoretical starting point but allowed our themes to be grounded in and derived from the participant's stories.

1.7. Research credibility

Based on our non-foundational interpretivist approach we identified credibility criteria to guide the study consistent with our aims and values (e.g., reality is multiple, and knowledge is subjective). We aimed to: (a)

build an understanding of each participant's developmental journey as expressed in the interviews, (b) demonstrate to each participant that we cared about them, (c) uncover and examine the perspectives we brought to the study, (d) capture participants' experiences of their professional development, (e) provide accounts of career development that would advance knowledge, and (f) provide information that is meaningful to trainees and practitioners. Based on these guiding principles, we built rich rigor, credibility, sincerity, resonance, and significant contribution into our research process. To ensure we applied these principles we: (a) created data sets that followed participants throughout their training, (b) built trust and rapport with each participant, (c) immersed ourselves in the participants' professional networks, (d) employed principles of triangulation including analyst triangulation and member reflections, (e) used critical friends to encourage self-reflexivity, (f) presented and discussed our findings within the applied psychology field (audience review), and (g) provided implications for psychologist training and development.

2. Findings

We distilled three major themes and six subthemes from the interview transcripts. The themes demonstrate the common ground both types of trainee psychologists (clinical, and sport and exercise) share in their professional development experiences. By focusing on commonalities, we have developed principle-based themes that speak to the universal aspects of development (e.g., the themes may be generalizable to diverse types of psychologists). Differences in these samples tend to be context-dependent and we present these when they occur. We present data from each sample beneath the themes.

The themes address participants' development in their professional styles and practice, in service-delivery presence and emotional functioning, and in the sources of influence. Each of the themes relates to the process of individuation in which the goal is for individuals to select service-delivery behaviours, theoretical orientations, and helping styles compatible with their personalities, their philosophies, their clients, and work settings.

2.1. Participants' development in their professional styles and practices

In this theme trainees were gaining experience with clients and were trying to find a good fit between the client, themselves, and a theoretical approach. This process of integrating their personal self into a coherent professional self begins with the trainee typically displaying a constrained style of working with little evidence of their personality (e.g., humour or creativity). Trainees are focused on applying theoretical knowledge and demonstrating procedural competence. This focus can produce a tension which means that trainees' natural characteristics are subdued. With practice and reflection, trainees assimilate their personal characteristics into their working style, and they describe feeling relaxed and genuine in service-delivery.

2.1.1. Individuation: *Becoming more who I am*

TCLP1 shared: "At the beginning, I thought a psychologist had to be a certain way ..." Participants wanted to "look the part" (TSEP2) and so followed a "textbook" (TSEP10) style of working with clients. It was difficult to adopt a new identity as a trainee psychologist, as TCLP2 stated: "... I found it challenging to accept that role and responsibility ... to take myself seriously as a therapist [laughs]." Like many of the participants in this study, TCLP2 doubted that he could help clients at the beginning of training. To combat their doubt, trainees typically adopted rigid, externally influenced (e.g., from reading) styles with clients, and suppressed natural behaviour (i.e., being themselves).

As trainees gained applied experience, their service-delivery became less rigid and more internally driven. This change meant that participants were beginning to integrate those external influences, such as theoretical orientations mentioned in books, with their own personal

beliefs about the world and human behaviour. For example, in his second interview TSEP7 stated: "The way I like to be with people and what I have found works [with clients] has also overlapped with my reading into humanistic approaches." Integrating personal characteristics with theoretical and practical aspects of work is a feature of the dynamic ongoing process of individuation.

In particular, the training environment influenced the selection of theoretical aspects of participants' work. For example, based on their qualification, trainees applied different theoretical orientations each year. Initially, it felt like one-way traffic in the individuation process where participants were adjusting themselves to the theoretical orientations they were applying. Participants experienced some tensions between their personal characteristics and the current focus of training (e.g., TCLPs tended to focus on cognitive behavioural therapy in Year 1, and placements with adults). In his first interview, TCLP1 reflected:

I'm quite an appeaser, it doesn't come naturally to me to challenge people or to highlight things that you could get away with not highlighting ... my supervisor suspected that I was shying away from things ... it's also part of your job to say some things that they [clients] might not want to hear, if it's something that you can't get them to touch on that idea themselves. So, from that [supervisor] feedback, from integrating that into my philosophy and approach to my work, it has been part of my job to be frank with them [clients] ...

In this example, TCLP1 recognised adjustments he may need to make in his personal approach as part of his expanding professional philosophy and skillset.

TSEPs' applied similar theoretical orientations as TCLPs, but their training route was independent, which meant that they could choose what approach to apply during training. TSEP2 (interview 2) reflected on the steps to finding a preferred style of practice:

Working with clients can be challenging at the early stages of training, you have to work with a certain paradigm [CBT] and work with what's right for the client ... but once you know how these work then you can start to run with it, and that frees you to focus in on what you're doing with the client and be who you are.

TSEP2 described the challenge of relying on external knowledge at the early phase of training; it was difficult to focus on the client. With accumulated professional experience, trainees could draw on internalised knowledge and act on their own thoughts and in doing so demonstrated individuality in their working style. In Year 3, TCLP1 stated:

My style in sessions with clients has changed over the past year, I think I've become more who I am as a person. ... I've found my own style that sits well with me and is congruent to what I'm like outside of the clinical setting. I feel more comfortable in my psychological role now.

2.1.2. *Becoming client-led*

Having found a suitable theoretical orientation to work through, participants needed fewer attentional resources to self-monitor and could focus on listening to the client. This meant that trainees encouraged their clients to talk by adopting less directive styles, as TSEP6 (interview 3) shared: "... learn how to be quiet and let the athlete tell their story ... I went from feeling uncomfortable at silences to enjoying them ..., when you get to those silences, that's when the good stuff comes out [client story]."

When trainees listened to the client, they engaged in a more client-led style than before. In her third interview, TSEP11 described how her approach to working with clients had changed:

I feel more comfortable with just getting to know the client, so it's not about 'what are their scores like, or can they do this skill now?' It's for me to adapt around the client ... At the start [of training] ... I

was focussing on the theory, or ‘this is anxiety, or what does that mean,’ rather than letting them lead. Now I feel more assured.

This trainee quotation illustrates changes that many participants discussed over the three interviews. Trainees began to feel assured in being themselves in service-delivery and this allowed them to focus less on theory and more on the client.

Our findings suggest that professional development involves movement along the individuation pathway by finding a suitable theoretical orientation to practice. Once trainees begin to align their personalities with a suitable orientation, their style changes to be less directive, and more client-led than earlier in training.

2.2. Changes in service-delivery presence and emotional functioning

In the previous theme, we demonstrated that as part of the individuation process, trainees were trying to develop a personalised way of practising. Learning and practising a model of service-delivery was demanding on trainee’s attention as TSEP1 described: “how do I look, how do I sound ... don’t say something stupid” (Interview 1). In the current theme, we examine trainee’s changing experiences of presence in service-delivery as it relates to individuation and emotional influences. Presence reflected trainees’ developing abilities to be in the moment on multiple levels: physically, cognitively, and emotionally.

2.2.1. Individuation and presence

TSEP10 contrasted the theoretical orientations he applied in service-delivery and how they influenced his emotions and presence. He stated, “I get bored [when using Acceptance and Commitment Therapy], whereas when I’m engaged in an existential approach, it’s about the encounter, the experience, the dialogue and you are there with them [the client]”. When trainees experienced congruency between their personalities and the theoretical orientations, it was easier to be present in client interactions. To demonstrate how emotional involvement, presence and individuation can influence each other, TSEP10 shared a client story:

He [client] came in with a mental skills, technique-driven expectation of what he wanted and there was just no depth to it [sounds disappointed], but then we got into something else [a discussion about his mother having an illness and how this affected his motivation for golf] and I was asking ‘what does that *mean* for you, for this sport, for what you can do, and what are you going to do about it?’ And then it was like [louder, excited] ‘this is real now, we’re talking about real emotion, meaty, fleshy stuff’. It felt *all right*, like this was a good chat to have now it’s about meaning.

When trainees’ practice felt aligned to their personalities, they described being able to stay in the present moment. In the example above, the trainee’s receptivity to the client’s story may have influenced the quality of the encounter.

In another example, during their second interview TSEP4 demonstrated how individuation and cognitive activity (e.g., expectations, perceptions) influenced each other during service-delivery: “I’m working more authentically because the voice in my head isn’t going ‘what a load of shite’ when I’m saying it [working through a particular theoretical orientation in support of a client].” Awareness of internal dialogue about a theoretical orientation was an example of a distractor for trainees early in training. In his first interview, TSEP3 shared that he was “absorbed in my list of questions” and “always thinking about when to ask the miracle question” when he applied a solution-focused orientation. The internal distraction of thinking about theory reduced how present trainees could be with clients.

2.2.2. Emotions and presence

Emotions were another internal distractor, and specifically feelings of anxiety. TCLP5 (interview 1) described the interplay between her

emotions and cognitions: “... when I’m feeling nervous, I’m using a lot of internal self-talk, ‘Stop worrying ... you know your stuff ... stop thinking so much and just listen to where they [client] are going.’” She elaborated that she coached herself with self-talk to “... get the heart rate down, control the adrenaline ... because I start talking too quickly, the accent is too strong, I need to tone down a bit.” Her quotation illustrates many of the participants’ early experiences during training. Trainees’ emotions and internal dialogue interfered with their ability to listen, process, and respond to the client’s story. TCLP5 summarised in interview 3 that early on in training, she got ‘... way more out of it [the encounter] than the client did.’ In this statement, she recognises that her anxiety caused her to talk perhaps more than the client did (being practitioner-led), and to direct clients on issues. Trainees may feel in control when able to act as problem-solvers.

With increased practice, participants described a change from attending to their own moment-to-moment experience to being able to include the experience of the clients. TSEP7 (interview 3) shared: “I worry now that I’m not meeting the needs of my clients, whereas before its more self-involved cause you’re worried about looking stupid or getting it wrong.” When trainees’ anxiety had diminished, they experienced increased attentional capacity to be receptive to the client’s experience. Trainees began to use their own emotional experiences to empathise with the client’s experience, as TCLP4 (interview 2) demonstrated:

Knowing that when you work with very anxious people that’s all they do is structure their days and develop safety behaviours as ways of coping, and that’s what we [trainees] do as well when we are anxious; we do the same thing ... it’s more important to develop a warm, empathic relationship with somebody where they feel comfortable to tell you things, whereas they wouldn’t if you went in there as a regimented person with questions ...

Participants developed an understanding of the influence they had on service-delivery, including using the self as an instrument. As TCLP3 discussed in her second interview:

I remember talking to a client about his relationship with his wife and it was a difficult relationship, and I could feel myself falling into the pattern of their interactions as he described them and acknowledging that. I said: ‘it feels like this is a familiar conversation; it feels like the kind of conversation you would have with your wife.’

By observing her emotions, TCLP3 recognised the process of transference between the client and herself; she made the decision to voice this to the client as she had previously observed her supervisor relaying how he was feeling to a client in therapy. The client reacted positively: “... yeah, he acknowledged that was true ... it was interesting for him to see that.” This example demonstrates the trainee being present, receptive to the person’s experience, and cognitively and emotionally attuned to herself and the client.

In this theme, trainees discussed being inwardly attuned to their own cognitions (e.g., about theory) and emotions (e.g., concern about being helpful). As they progressed, trainees described a change from attending to their own moment-to-moment experience to including the experiences of clients in service-delivery.

2.3. Sources of influence on professional development

In the previous themes, we have focused on trainee’s experiences of internal processes (individuation, presence, emotion). In the current theme, we focus on two external sources of influence (supervisors and peers) on the internal processes. Other than client interactions, and theory and research which are interspersed throughout first two themes, meaningful contact with supervisors and peers was discussed as influential to participant’s development.

2.3.1. Individuation is influenced by supervision

TCLP6 (interview 3) summarised the emotional influence of supervision: "Supervision gives you the confidence to try things out like learning how to be yourself and use yourself in therapy. When emotionally functioning well you take risks in therapy ... I use myself more to reflect to patients what I am feeling" TCLP6 described that she had the confidence to work with complex concepts such as transference because supervision offered her: "... a secure parental base to go off and explore and come back and feel safe ... to talk about how it went."

The notion of supervision providing a nurturing environment where trainees could understand their own personalities was useful for service-delivery, as TCLP1 shared in his second interview:

I think my personality is somewhat unreflective ... so I've found the supervision helps me to do that [reflect] more. ... So, the more aware that you can be of what you're like [personality] in your therapy sessions, ... that prepares you to change it, or accept it as it is, but at least to know what you are like, and to be able to see yourself as other people see you.

Supervision provided a place for reflective observation where trainees deepened their learning about themselves and how they influenced service-delivery. By reflecting on the nurturing relationship with their supervisors, trainees could also parallel the process by cultivating a sense of containment for their own clients. TSEP8 reflected "You need to be able to share the vulnerable parts of yourself in supervision ... that can feel very containing ... just as you want athletes to feel that they can be their true self with you".

Other than one-to-one supervision, observation of supervisors (clinical psychology) in service-delivery assisted trainee development, as TCLP2 explained: "I did a lot of joint working with my supervisor ..., which helped as a way of observing him and seeing how he was as a supervisor and how that didn't really change as a therapist." Observing how seasoned colleagues integrate their personal characteristics when working across roles may assist trainees in their own individuation process. Trainees may reflect on authenticity as a hallmark of an experienced professional and have less of a rigid sense of role (e.g., they do not need to be "a certain way" as TCLP1 shared in the first theme).

Clinical trainees had access to multiple supervisors, often working with them directly in service-delivery. Contrastingly, TSEPs often observed their supervisors indirectly (e.g., verbal reports). For example, TSEP2's supervisor had recounted working with a coach to him: "I noticed how much my supervisor was reflecting on something the coach said. He was ... dwelling on 'what does that mean?' I would never reflect ... on something word-by-word ... It was part of his style and personality." Supervision raised trainees' awareness of what experienced people attended to and often served as behaviour for them to reflect on and consider integrating into their own practice. By year 3, trainees appreciated the importance of integrating the personal and professional, as TCLP7 stated: "... there's something about finding your own voice, finding your own way of being as a therapist, and not just trying to mimic other supervisors, even though you think they've done it well, then it loses its genuineness." This trainee alludes to the change from mimicry of behaviour to translating the learning from their supervisor, for it be experienced as genuine.

2.3.2. Peers relationships

Reflective of their training route, TSEPs did not train in a cohort and typically had access to one supervisor. TSEPs described being proactive in seeking support from peers to supplement supervision: "it's good to see other psychs [psychologists] and trainees, otherwise it's just me and my supervisor ... you often feel quite isolated, you have your supervisor, but they are not going through the same thing as you (TSP7, interview 2)." Trainees described interpersonal support from peers in training as a critical component of their cognitive and emotional changes. TSEP7 explained how peer discussions influenced his thinking:

It's about getting to cognitive dissonance, isn't it? It's about getting to that point where you challenge what you're doing, and you're gonna change your practice as a result of that [peer] discussion. I think it's useful to bounce ideas off people, 'oh I've tried this and what about you,' and one of the most interesting discussions I ever had with people is about their philosophical approach – where they're sitting [philosophically] and what they're doing.

Trainees recognised that peer discussions helped them to understand their developing professional philosophies by debating and comparing ideas. Clinical trainees described multiple opportunities (e.g., role-plays, personal development groups) built into their programmes that encouraged reflective learning with peers.

One of the benefits of peer relationships was the multiple perspectives that people had of each other from within and outside of training. Peers knew various aspects of each other, including personal circumstances, strengths, and weaknesses. TCLP4 shared during her second interview:

I would talk about it [therapy] with friends who were on the course, talk about how difficult it was to ..., reflect on the difficulties of being yourself and the type of work you are doing. I couldn't really care as much and that's not me. I spent a lot of time in training not really feeling like myself.

The ease of peer relationships allowed trainees to express honest emotions about the demands of training. In reflecting on her personal and professional integration, TCLP4 drew on the opportunity that peer relationships provided to explore the difficulties in developing a professional identity.

In this theme, we summarised the influence relationships with supervisors and peers had on trainees' professional development. We focused on supervisors and peers because of the meaning participants derived from these relationships in contributing to the individuation process. Clients, and theory and research are considered in the first two themes as other sources of influence on development. Supervisors modelled the use of "self" in service-delivery by relating to the trainee, and client as a genuine person with integrated personal values and beliefs. Supervisors provided nurturing relationships to allow trainees opportunities for reflective observation. With peers, trainees expressed and discussed different viewpoints more freely than with supervisors. Dialogue with peers contributed to trainees questioning their beliefs and values and how they contributed to their professional philosophies.

3. Discussion

In this study we explored UK trainee clinical, and sport and exercise psychologists' experiences of professional development. Findings indicated that: (a) participants developed their professional styles and practice consistent with their personality; (b) developing a personalised style of practice affected participant's emotions and presence in service-delivery; and (c) external sources (clients, theory and research, supervisors, and peers) influenced internal developmental processes. These findings contribute to knowledge in the following ways.

As a first contribution, the study provides insight into the professional development of diverse types of practitioner psychologists in the HCPC-driven context. To date, researchers have not examined both clinical, and sport and exercise trainee psychologists in the same study. Previous research has found similarities in the learning experiences contributing to service-delivery competence in qualified clinical, counselling, and sport and exercise psychologists (McEwan & Tod, 2015). Participants in McEwan and Tod's (2015) study contained people posttraining (e.g., novice to senior career phases), and who trained prior to statutory regulation in the UK. Further, research on the professional development of trainee sport and exercise psychologists conducted to date has sampled participants from the USA, Australia, and the Netherlands (Fogaca et al., 2018; Hutter et al., 2017; Tod et al., 2009).

The current study contains UK practitioners training in the HCPC context (post-2009). Our findings demonstrate that although trainee practitioner psychologists are trying to meet domain-specific standards and learn in different contexts, there are similar patterns in their development. For example, trainees experienced increased capacity to work in a client-led, less directive manner when they felt congruence between their personality and style of practice.

Comparing people in different training programmes was a means of observing facets of change and development that would be less noticeable if the study contained participants from a single subdiscipline (e.g., discerning the influence of multiple opportunities for interactions with supervisors). We can enhance training experiences by transferring knowledge across subdisciplines. As one example we may consider how we can connect subdisciplines (e.g., clinical, counselling) within psychology through cross-disciplinary supervision. This may allow for the multiple, diverse supervision interactions described by TCLPs to be transferred to TSEPs in the independent route. Engaging with multiple supervisors from within psychology (e.g., counselling) may enhance trainees' development through exposure to different perspectives and contexts. Cross-disciplinary supervision could facilitate some of the practices TCLPs described, such as trainees joint working with clients.

As a second contribution, the current study offers empirical support regarding the relevance of counsellor development research for practitioner psychologists. The evidence from this study demonstrates the potential to elaborate existing frameworks to advance knowledge of variations in professional development. As one example, individuation is discussed in the counsellor development framework (Rønnestad & Skovholt, 2013) at the experienced phase. In contrast, we have identified some hallmarks of the individuation process at earlier phases in our trainee participants. Future research could assess the next phase of trainee's careers with findings from existing research. For example, Rønnestad and Skovholt (2013) identify that after graduation the individuation process intensifies as novice professionals attempt to find coherence between their work role and the self. As TSEPs become independent from their training programmes they may experience a broadening of influences (e.g., life experiences) on their practice (McEwan et al., 2019).

As a third contribution, the current study offers a further insight into the internal world of a person becoming a psychologist. Over the course of their programmes, trainees told us how their thoughts, feelings, and behaviours changed. These changes describe the transition to internally feeling like a psychologist, or in other words the process of developing a professional identity (Tod et al., 2020). In our research, the professional identity process was evidenced when participants (a) experimented with theoretical approaches in service-delivery, (b) reflected on whether there was consistency between the approaches and their personality, (c) sensed how others (e.g., clients) reacted to their service-delivery, (d) talked to others (e.g., peers, supervisors) about all of this, and (e) made adjustments to how their service-delivery was an extension of who they are, and how they are in t/he world.

3.1. Strengths and practical applications

Longitudinal analysis was the most methodologically comprehensive approach to study the development of people over time. Interviewing people over 2–3 years allowed us to understand how people fuse their personal and professional selves. Findings on the individuation process may encourage readers to deliberately engage in examining their own professional philosophy and personal tendencies (e.g., personal qualities, worldviews). Engaging in a deliberate process of individuation can involve exploration of previously unconscious or unknown aspects of the self to be integrated, rather than dismissed or unused in the role as a psychologist.

It is helpful for trainees to think about who can assist them in their individuation process. Involving others can help to identify blind spots and opportunities. If supervision is regarded as a safe learning

environment, trainees and supervisors may discuss, for example, how their practice reflects who they are as people. Messina et al. (2018) found that personal experiences influenced theoretical orientation in psychotherapy trainees. Participants with more negative past experiences and higher motivation for personal development tended to approach practice from a psychodynamic orientation.

Another option can be for trainees to initiate personal growth and professional development groups. Such groups can support trainees in accessing peers from subdisciplines (e.g., counselling) and TSEPs from different programmes (e.g., professional doctorates). Peer support may be particularly pertinent to trainees on independent routes (e.g., Stage 2) to reduce feelings of isolation. Actively seeking out peers and engaging with a variety of people with different ideas about professional practice can support trainees to understand what does and does not work for them, thus contributing to the formation of their individual identity. Tod et al. (2017) contend that knowing who we are *not*, is as useful as knowing who we are.

3.2. Limitations and future directions

Although this study represents progression in investigating empirically the professional development of practitioner psychologists in the UK, there are some limitations to consider. The findings are limited to the subjective experiences of 18 trainees in clinical, and sport and exercise psychology based in the UK. Training for practitioner psychologists in the UK has continued to evolve. For example, the growth in professional doctorates in sport and exercise psychology (Eubank & Forshaw, 2018) could mean variations in professional development experiences to the present study. Future studies could examine findings from the present research with participants on new training routes.

The current study provides insight into the processes that occur as trainees develop and anticipate their first roles as qualified psychologists. While trainee practitioner psychologist's programmes prepare them for service-delivery in different contexts, individuals described similar experiences, including changes in their working styles, emotional functioning, and influence from peers and supervisors. Theoretical elaboration is specifically provided at the early career phase of development. By drawing on counsellor development research, we demonstrate how the guiding principles can contribute to understanding how different types of psychologists mature with time. Findings from this study enhance our understanding of the intersection of the personal and professional in practitioner psychologist development.

Declaration of interests

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Data availability

Data will be made available on request.

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