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Systemic Reflecting Team Training: Perceptions and Experiences of South African Educational Psychologists

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ABSTRACT

There is limited research on the application of systemic family therapy in developing countries. This qualitative study explored the perceptions and experiences of 12 educational psychologists and a family therapy trainer, who have worked within a systemic reflecting team using Tom Andersen's method of training and supervision. The semi-structured interview findings suggested positive perceptions of systemic intervention, despite various challenges experienced in its implementation within the South African context. The educational psychologists identified their reflecting team experiences as being beneficial for both their professional development and current practices. Future research which investigates the reflecting team process in action is recommended.

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Amongst the interacting systemic and contextual factors that impact upon human functioning, the family system is vital to an individual's well-being. Traditional indigenous healing in many African cultures is based on the belief that ill health is due to relational issues (Ivey, 2013). The values of systemic practice encapsulate the African way of life known as "ubuntu" which embraces the notion of the interconnectedness and interdependence that exists between people. Systemic interventions are therefore particularly relevant within countries such as South Africa where the present exploratory study was conducted. In South Africa, contextual factors such as poverty, violence, crime, unemployment, migrant Labor, as well as HIV and AIDS have a significant impact on the family unit (Swart & Phasha, 2013). While the value of systemic practice is acknowledged, there is a paucity of research investigating its application as well as the training of family therapists in developing countries (Quinet, Shelmerdine, Van Dessel, & Unger, 2015). The current study attempts to respond to this gap in the existing literature.

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According to a recent survey, 8% of South African educational psychologists spend their time on family therapy intervention (Health Professions Council of South Africa, 2017, p. 26). Family therapy is mainly rendered at community social service agencies and by private practitioners. The current study aimed to explore educational psychologists' perceptions and experiences of Tom Andersen's (1987, 1990, 1992) reflecting team method of training and supervision. These practitioners underwent this training during their internship year which preceded their professional registration as psychologists. The Head of Counseling Services at the internship training site, who is a family therapy trainer, also participated in the study. The research further explored whether the reflecting team training was perceived as contributing to the educational psychologists' way of thinking in terms of working systemically. The underlying principles related to reflecting team practice appear to align with the contextual needs within South Africa. This orientation allows for the consideration of multiple interacting systemic problems that occur within this context and for collaborative teamwork to take place in a setting where there is often a scarcity of professional skills and expertise. To date there is no known published South African study that has explored the use of the reflecting team method of systemic practice. The findings of the present research can make a potential contribution to family therapy training within diverse community settings.

From individual to system

The medical model which posits that deficits are intrinsic to an individual is only useful to a certain degree, within contexts where multiple environmental factors impact on psycho-social functioning. In contrast, the systemic model of therapy is beneficial as it takes a more culturally relevant stance which views individuals as being a part of a wider interacting system, causing problems to be relational (Becvar & Becvar, 2013). Systemic intervention has developed from an "increasing concern for anti-discriminatory practice: gender, race and giving voice to the client" (Stratton & Lask, 2013, p. 265). This is particularly important for South Africa in redressing the inequalities of the apartheid era where racial segregation and discrimination were rife. Research has shown that the reflecting team is a suitable place to resolve and accommodate differences as this approach accentuates the values of respect, fairness, equality, and justice (Donovan, 2007).

Practitioners highlight the need for flexibility in the application of western theories and models of practice within the multicultural South African context (Kasrim & Oliphant, 2014; Somni & Sandlana, 2014). Nkosi and Daniels (2007) for instance assert that western-oriented families are largely

built on the philosophy of individualism and independence. On the other hand, traditional African families tend to be more interdependent with a larger and more involved extended family system. Grandparents in many instances adopt the role of primary caregivers. These factors need to be considered for successful family therapy practice within this context.

Relevance of systemic training for educational psychologists

Many barriers that children experience can often be related to external factors within the family, the education system or the broader social context. Hence, to mobilize change for children; services must involve the systems in which they are embedded (Gutkin, 2009; Williams & Greenleaf, 2012). Rayburn, Winek, and Anderson (2016) posit that family therapy provided within the school setting is increasingly becoming the treatment modality of choice. Therapists who work within the school environment can increase collaboration between the key role players to create a supportive environment for children. Laundy, Nelson, and Abucewicz (2011) state that most of the small percentage of children who receive mental health care, receive it at school. This suggests that it would be ideal to provide mental health care within the school setting, particularly in under-resourced community settings (Amod, 2018). In South Africa legislation and education policies advocate the need for school and family partnerships (Department of Basic Education, 2014). This has implications for the training of educational psychologists since they need to become competent in family work to effect change for the child.

Systemic family therapy training and supervision

The major goal of training and supervision in family therapy is learning to think systemically (Becvar & Becvar, 2013). Although many South African universities have begun to emphasize systemic theory and practice, research has shown that trainee therapists have felt confused and uncertain when moving from university-based theoretical training programs to practice sites where systemic ways of thinking are the norm (Nel, 2006). While this is the case it has been found that most interns eventually become confident working within a systemic perspective (Becvar & Becvar, 2013). Nel (2006) described this process as Stoltenberg's dependency-autonomy conflict. Some of the interns' concerns included feeling overwhelmed that they lacked the knowledge which more experienced therapists already had. She found that through training in family therapy, interns managed to reskill and to develop autonomy and competence. Giving therapists training that challenges them to work outside of the traditional role of the psychologist

allows them to develop their ability to reflect on their practice and to work with a diverse range of clients (Constantine, Hage, Kindaichi, & Bryant, 2007). It also encourages them to be culturally sensitive and responsive to diverse family dynamics and contexts (D'Aniello, Nguyen, & Piercy, 2016).

Tom Andersen's reflecting team method

Studies in the United Kingdom have found that the most common form of teamwork used in family therapy training is Tom Andersen's reflecting team method (Willott, Hatton, & Oyebode, 2012). Research has shown that the reflecting team method has been used successfully in multiple situations around the world (Andersen, 1992; Hawley, 2006; Mitchell, Rhodes, Wallis, & Wilson, 2014; Rankin, 2007). In countries such as South Africa where the context varies so greatly, resources are unevenly distributed, and where therapy can often occur in unusual or informal settings (Kasrim & Oliphant, 2007), the idea that this approach can be adapted and used creatively requires further exploration.

The reflecting team, whilst a tool for conducting family therapy, has evolved into an integral part of training new therapists and provides an opportunity for live supervision (Pender & Stinchfield, 2012). Andersen (1987) outlines that the purpose of the reflecting team is to generate and offer multiple descriptions of client families. Live supervision is usually conducted by means of a one-way mirror. Following the interview with the family, the trainee therapist and the reflecting team exchange physical positions, allowing the therapist and family to observe the team's reflections. The groups again exchange positions and the therapist encourages the family to respond to the team's reflections (see Andersen, 1987 for specific guidelines for conducting reflecting teams). Using live supervision during family therapy has been found to bridge the gap between the supervisee's report of the session and the actual events that transpire (Falke, Lawson, Pandit, & Patrik, 2015). Research has shown both advantages and disadvantages in relation to the use of the reflecting team method of live supervision.

Andersen (1987) believed that the reflecting team as method of supervision is advantageous in that trainees can learn from the perspectives of several experienced professionals and they develop an understanding that there is not merely one truth, but rather multiple valid perspectives. Other advantages include an increase in the supervisees' opportunities to adjust and develop their skills, chances for instantaneous feedback, as well as more effective support in dealing with countertransference issues (Falke, Lawson, Pandit, & Patrick, 2015). Shurts et al. (2006) found that trainee

therapists appreciated being able to process the session out loud amongst the reflecting team rather than just introspectively.

The drawbacks of live supervision as described by Falke et al. (2015) include the supervisees' anxiety and vulnerability when being observed as well as the pressure that they experience to contribute to discussions and to engage in the collaboration process. Supervisees may also find it difficult to work within the naturally occurring power dynamic which exists between themselves and their supervisors. Contrary to the findings of Zevallos and Chong (2007) which suggested that students working in a reflecting team felt less threatened and intimidated by supervision since reflections are part of the team process,

Meekums, Macaskie, and Kapur (2016) found that the reflecting team process tends to exacerbate performance pressure which can hinder learning. A challenge highlighted in a study conducted by Reichelt and Skjerve (2013) was that trainee psychologists found the reflecting team process to be more concerned with the narrative and dynamics of the family as opposed to a focus on the development of their family therapy skills. Whilst there is an assumption that the reflecting team process in and of itself creates room for trainee psychologists to develop as therapists, some trainee therapists in this study expressed a desire for supervisors to take on a more directive skills training and teaching approach.

Methods

This research was conducted under the epistemological assumptions of interpretivism, which aims to explore the social world through a combination of the researcher's and the participants' understanding of the world (Ormston, Spencer, Barnard, & Snape, 2014). A qualitative, descriptive, exploratory research design was applied to facilitate the collection, analysis and understanding of rich interpretivist data (Hsieh & Shannon, 2005) relating to practitioners' perceptions and experiences of their systemic reflecting team training.

Research setting, sampling and participants

The social services organization at which the study participants were trained is situated in Gauteng, South Africa. The organization has been in operation since 1949 and is in the forefront of providing services to children, couples and families of disadvantaged and previously disadvantaged communities across the greater Johannesburg area. In addition, it provides training for psychology interns, aiming to inspire a systemic way of thinking and encouraging them to consider the context of their clients. The

organization focusses on enhancing family life, using Andersen's (1987, 1990, 1992) reflecting team method.

A purposive sampling procedure was used (Babbie, 2013). The sample constituted 12 educational psychologists who had worked in a reflecting team during their internship year as well as their primary trainer who is a social worker and the Head of Counseling Services at the internship training organization. Two to three interns are trained at the internship site, annually. Fifteen educational psychologists, trained over five years, were invited in writing to participate in the research. The twelve participants who agreed to participate in the study were trained at four of the six educational psychology training universities in South Africa. Seven participants worked both in private practice as well as in schools, four were based solely in private practice, and one worked at a non-government organization. Most them fell in the 28-35-year age group ($n = 7$) and only two participants were between 55 and 62 years of age. The participants' experience as practicing educational psychologists ranged from one to five years.

Data collection and analysis

Individual semi-structured interviews, utilizing open-ended questions, were used to collect the data. The interviews with the educational psychologists explored their experiences of systemic therapy and working in a reflecting team. Participants were also asked to consider the aspects of their training that they applied to their current practices. Lead questions included, "What are your thoughts about a systemic approach to therapy?" and "Please describe some of your experiences of training in this type of therapy." This allowed participants to express their perceptions and experiences, while the researcher could ask probing questions where necessary, whilst maintaining a focus on the research topic. Examples of follow-up probes included: "Can you please tell me more about that" and "Could I ask you to give me an example of what you experienced." Participants were offered opportunities through questioning to focus their responses on both positive and negative experiences and perceptions. The questions that were asked included, "What was particularly beneficial about your training experience?" and "Can you please tell me about any concerns you may have had regarding your training in a reflecting team approach to family therapy."

The purpose of the semi-structured interview that was conducted with the Head of Counseling Services who leads the reflecting team training, was to obtain an understanding of her conceptualization, application and experiences of the reflecting team method. The training organization's goals for intern training as well as its vision in training therapists for the world of work were also explored in the interview. This interview was used for

triangulation purposes which aimed to compare data from various sources (Lewis, Ritchie, Ormston, & Morrell, 2014). Most of the interviews were conducted by the second author, however, the first author conducted four of the interviews with the educational psychologists. The duration of each interview, conducted at a mutually convenient venue, was 60 to 75 minutes. Permission was obtained from the participants to audio-record the interviews.

The data was transcribed verbatim and analyzed using Braun and Clarke's (2006) six-step approach to thematic content analysis. These phases include: (1) Becoming familiar with the data; (2) identifying codes within the data; (3) searching for themes from the codes identified; (4) refining the identified themes; (5) naming the themes; and (6) identifying verbatim extracts from the collected data to convey the essence of each theme (Braun & Clarke, 2006). After independently analyzing the data the researchers discussed the emerging themes and subthemes. The data was then peer reviewed by a family therapist who was not involved in the study. While there were no major disagreements with respect to the identified themes, some initial codes required expansion and further elaboration. These elaborated themes are incorporated into the results presented in this paper.

Ethics

Ethical clearance was obtained from the University's Human Research Ethics Committee - Non-medical (protocol number: MED/16/002 IH). To conduct the study, permission was requested from the Director of the internship training organization. Potential participants which included the Head of Counseling Services from the organization, were invited to participate in the research in a letter which explained the details relating to the study. Those individuals interested in participating in the study were asked to contact the researchers via an email. They completed a participant consent form prior to being interviewed. Anonymity is maintained in reporting the data.

Rigor of the study

Credibility of the study was enhanced as participants were selected through purposive sampling. Triangulation of research findings and the combination of multiple perspectives was used as a method of maintaining dependability and increasing the trustworthiness of the findings (Lewis et al., 2014). Application of Braun and Clarke's (2006) six phase thematic content analysis was used to uphold authenticity. This process guided the

researchers in their attempt to generate accurate reflections of the experiences expressed by the participants. Audio recordings as well as verbatim transcripts of the participant interviews ensured confirmability of the research findings, contributing to its reliability (Lewis et al., 2014). The researchers gave a detailed description of the study so that the reader could judge its transferability to other people, places, or circumstances.

Author reflexivity

A reflective diary was kept by the researchers to be mindful of bias and ensure the authenticity of the data collection process (Barusch, Gringeri, & George, 2011). Since the authors have a strong belief in systemic practice, peer consultation with a qualitative research expert was utilized to monitor potential researcher bias.

Results

The five main themes that emerged in the study are presented below.

Reflecting team training

Most of the participants in the present study desired more in-depth theoretical training in family therapy and in Andersen's (1987, 1990, 1992) reflecting team method, both at university-level as well as in their internships. For instance, Participant B stated that "while becoming bogged down in theory can become problematic, it's important to have the theory and readings to work from and draw upon". Participant E concurred, stating that "team discussions were more about the case (family) than the theory behind what we were doing, models of doing it, ways of thinking." The Head of Counseling Services expressed that she tries to "incorporate the theory into practice" but she acknowledged possible lack of theory in the training of the interns.

Despite their perceived need for more intensive theoretical training, all the participants acknowledged the value of the practical nature of their systemic reflecting team training. They made comments such as "I learn through doing" (participant J), and "it was developmental … I grew personally and as a therapist through practice and self-evaluation and team-evaluation" (participant L). Most of the participants felt that they benefitted from watching other more experienced therapists.

Team collaboration

The results portrayed the participants' favorable attitudes towards working with and learning from a team. They perceived that working with a team enhanced their set of therapeutic skills in working with families. Participants A and D felt that they benefitted from the insights of other professionals, while participant K stated that "when working with a variety of team members one gets to gain other people's insights … see different perspectives on the challenges that families experienced." Participant F enthusiastically highlighted that "the fact that you on a team is brilliant for an intern because you learning from hearing different ideas and seeing different approaches, you get to learn from all these professionals who have done this". Participant E stated that working with a team is "more powerful than being on your own because there are multiple minds and multiple perspectives in trying to understand the dynamic of the family". The Head of Counseling Services stated that even though she is one of the more experienced members of the reflecting team she often learns from the multiple perspectives of the team members regardless of the amount of experience that they have.

Clinical supervision

The Head of Counseling Services reported that the role of the reflecting team is to support the therapist in the room. Eight of the participants experienced the supervision space as being safe and nurturing. Participant H related that "the team members are very supportive … it is useful to have a team of people thinking about you," while participant L stated that "to have that feedback in the here-and-now is more authentic, it's more natural."

Whilst most of the participants valued the learning experiences which emerged from working with a team, being observed was an anxiety provoking element of this type of training. The Head of Counseling Services acknowledged the apprehension that interns may experience, stating that "it's quite tough in the beginning and they're (the interns) quite nervous being watched behind the one-way-mirror." Nevertheless, she believed that the team was supportive and hoped that the interns did not feel judged. However, the findings reflected that this wasn't always the perception amongst the participants. Participant B recalled her experience of being observed as "very anxiety provoking, having this whole team watching you … techniques and the way that you handle the session does obviously get scrutinized … you feel like you being judged sometimes."

Participant H described how "one is meant to be able to block the team out as the interest is in the family dynamics," however she felt that "this is a very naïve perspective." She stated as follows:

> Obviously, you want to put your best foot forward, you want to show that you are capable um, that you can handle these situations so there's a lot of also your own desire to succeed and prove yourself and that perhaps wouldn't be there to the same extent when there are not a whole team of people actually watching you … there is a lot of pressure … you not being entirely with the client.

The above participant however acknowledged that, "you do get used to it." Participant F elaborated on her concern that "being observed and in the spotlight brings a different dynamic to the way that you conduct therapy, because one's focus is on being watched rather than being with the family."

Working systemically: mobilizing change and challenges experienced

Systemic intervention was perceived by the educational psychologists as being essential to mobilize change when working with children. Participant I for instance, expressed the view that it is important to consider the context of the family because "children aren't independent of that system." Participant J stated that "my systemic training and experience has taught me that change is only possible when all the role players are actively involved and have taken responsibility." Participant G was concerned about children who were referred for therapy, living in a volatile family environment. She questioned, "If psychologists only see the child and not the family how would it actually help the child in the end?" Participant K stated that working within a systemic framework is "a good foundation when working with children … working with the individual in their setting has become an imprint in my mind." These perceptions are in line with the organization's aim of instilling certain underpinnings and values of working systemically when training educational psychology interns. This includes the need to always consider the context or environment of the client and the effect that this has on development and psychological functioning (Interview - Head of Family Counseling Services).

Participants recognized that there are significant challenges to working systemically. The most prominent barrier was that of being able to access the various systems. Participant C elaborated by saying "you don't always have access to the system … you not going to get the whole family together, they busy, they have inflexible jobs, transport is an issue … and they often don't believe in the western world methods we use." She explained that in many South African cultures family problems are traditionally handled within the extended family, by indigenous healers or by religious leaders. There is a hesitance in seeking assistance from mental health practitioners. On the other hand, Participant B expressed difficulties in accessing the family system due to a language barrier. She stated that, "Whilst parents often have good intentions, the problem is … well often we don't speak the

same language so parents don't really have an understanding of perhaps of what we are trying to achieve … "

Regarding the reflecting team approach, participants recognized that "people find it difficult enough coming in and sharing just on a one-on-one level, never mind with four people sitting behind a glass window and then having a team discussion" (participant D). Participant C felt that "for some families it's really scary and that's when they shut down and don't come back." Participant E acknowledged the importance of the whole family's "buy-in for therapy to be successful." The Head of Counseling Services described that families are offered the reflecting team service and that they are not obliged to receive this model of family therapy. The challenge of "buy-in" evidently still occurs.

Current systemic practice

All the participants that were interviewed appeared to have benefitted from training in systemic family therapy with regards to their own current practice, regardless of the environment in which they are working at present. Five of the participants described that working with systems has become central to their work as educational psychologists. Some of the participants have continued to engage in the use of the reflecting team method after their internship training. Participant A reportedly volunteers on a reflecting team at present as she values the learning experience as well as the opportunity for "professional growth and development in responding to the needs of a range of contextual challenges that South Africans are experiencing … crime, violence, racial tension, financial pressures … " After Participant E's internship, she engaged in family therapy using a reflecting team approach with two past interns. This was done because of the benefits and value that they felt the reflecting team had for them as therapists as well as for the family. She stated that as follows:

> It is really more powerful I believe than being on your own when you have a family dynamic. The team members support each other in the way forward and working within a space where there are multiple minds and multiple perspectives in trying to understand the dynamic of the family. I enjoy the sort of conversational aspect of it, the transparency you show and that it's respectful that the clients can hear your conversation with another therapist. It gives them the opportunity to see their lives being spoken about and reflect on it, it gives them a backdrop, it gives them a scenery.

Even though participant E engaged in positive and meaningful therapeutic experiences by using the reflecting team in her practice, she noted the challenges in relation to the logistics required in conducting this type of therapy, particularly the financial implications: "You've got three therapists and the family pays for 1 ½ hours, our individual hourly rate is not

realised, long-term this may not be sustainable." Several participants suggested that it is easier to render family therapy using the reflecting team method within a school setting where psychologists are not reliant on hourly payment rates and families tend to avail themselves more readily to address the psychoeducational needs of their children. The Head of Counseling Services acknowledged that the internship training site is "privileged" to be able to offer the reflecting team collaborative approach as she acknowledges the time and resource commitment required in providing this service. The therapists who are using the reflecting team model either volunteer their time or work for the organization. Participant F, who has a strong belief in the systemic framework, has taken on a role as a therapist at the organization where she can continue to engage in systemic interventions. Here she is a permanent member of the reflecting team.

Several participants expressed that their systemic training has enabled them to hold multiple role players in the child's life in mind, even when engaging in individual therapy. Participant A expanded on this idea by saying that:

> In family therapy, you learn how not to focus on the identified patient, you focus on the bigger picture. So, I think it's helped me in my individual therapy, I am able to bring in the family without actually having them there.

The Head of Counseling described one of the organization's goals when training intern psychologists as that of being able to "hold role players in mind," such as the children's parents, teachers, peers, and families. Whilst she acknowledged the difficulties associated with using the reflecting team in private practice she hopes that educational psychologists' training on the reflecting team will allow them to consider the various role players in a child's life.

Discussion

Findings of the present qualitative exploratory study suggest positive perceptions and experiences of educational psychologists who were trained and supervised using Andersen's (1987, 1990, 1992) reflecting team method of systemic intervention. These findings concur with those of Falke et al. (2015) who found that live supervision bridges the gap between the supervisee's report of the session and the actual events which transpire, creating a more authentic learning experience. Participants in the current study described the benefits of working in a reflecting team and learning from the insights and experiences of team members. This finding is consistent with recent research reports that trainee therapists value multi-perspective contributions (Chang, 2010; Falke et al., 2015). Whilst most of the participants valued the learning experiences which emerged from working within

a team, in keeping with the research conducted by Falke et al. (2015) and Meekums et al. (2016), they experienced anxiety when being observed. This is contrary to a supervision process that is meant to be collaborative and non-threatening in nature, as described by Andersen (Andersen, 1987, 2007; Tuerk, McCart, & Henggeler 2012) and by the Head of Counseling Services who participated in the study. Thus, the concern here would be that the supervisee's ability to engage with the family may be compromised due to the anxiety experienced when observed by the reflecting team.

In line with what has been accentuated in the literature (Carr, 2014; Gutkin, 2009; Rayburn et al., 2016), participants in the present study recognized that systemic work is essential to mobilize change for children. Educational psychologists reported that they were incorporating their systemic training into their practices. Some of them expressed the need for more in-depth training during their internship year and greater exposure to systemic work in university training programs. These findings are encouraging, considering the effectiveness of systemic interventions for both externalizing and internalizing disorders in children (Retzlaff, Sydow, Beher, Haun, & Schweitzer, 2013). Research also shows the effectiveness of systemic intervention within the context of deprived and marginalized communities (Donovan, 2007; Williams & Greenleaf, 2012) such as those common within South Africa.

Despite the perceived value of systemic practice, participants described the challenges that they experienced in working systemically, such as time and financial constraints. Some of these challenges were less problematic for those working within a school system as opposed to those who were working in private practice. Consistent with other research findings from developing countries (Ariel et al., 2014; Kasram & Olifant, 2014), participants also expressed concerns relating to the difficulty in accessing systems where worldviews differ significantly between various generations and cultures. These difficulties are compounded in South Africa by complex contextual factors and family dynamics such as absent caregivers, youth-headed families, and parental loss due to HIV and AIDS. Cognizance needs to be taken of these challenges and ways of addressing them if family therapy is to be the intervention strategy of choice when working with children within this context.

Implications of the study

Whilst participants felt that they received insufficient theoretical training, a distinctive part of Andersen's (1987, 1990, 1992) method is training and developing counseling skills using what he termed as live supervision. This practical approach is part of the theoretical model which none of the

participants in the current study were aware of. It would be of interest to determine if there is a shift in trainees' desire to have the theoretical understanding beforehand, if this method of systemic practice and supervision was discussed prior to training, with an explicit focus on its potential benefits and shortcomings.

Working in a systemic reflecting team reportedly fostered the participants' ability to hold multiple role-players in mind when working with an individual. This implies that even though it may be difficult to engage the entire family in the therapy room, especially within the South African context where families may be separated for various reasons, training in a systemic reflecting team is useful in developing the educational psychologist's ability to consider the child's context.

The findings of the present study highlight the potential value of the reflecting team model as an approach to family therapy training in South Africa. However, considering the limited human and physical resources in this country, this model may be less appropriate for ongoing family therapy practice. This needs to be further investigated through practice-based and empirical research.

It is important that South African university training programs continue to assist students in developing an understanding of the theoretical and applied bases and underpinnings of a systemic worldview, while exploring effective models of systemic intervention. Whilst university programs have become more focused on engaging with a systemic way of thinking, the findings of the present study suggest a continued need for pre-service and in-service family therapy training programs.

Limitations of the study and future research directions

While the findings of the research study offer some insight into working systemically and applying the reflecting team method of training and supervision within a multicultural and diverse community context, there are several limitations of the study that need to be acknowledged. Generalization of the results is limited as a purposive sampling procedure was utilized. Moreover, the participants were all trained at four universities in the Gauteng province of South Africa and participants engaged in their family therapy training at the same internship site. This presents a significant limitation in that the views expressed by the participants may not be representative of educational psychologists who were trained at alternative educational sites.

Ritchie, Lewis, Elam, Tennant, and Rahim (2014) describe validity as the "precision" of the research findings. This may have posed as a further limitation in the present study as there was a time delay of varying degrees

between the participants' internship training year and their account of their reflecting team experiences. Their ability to recall their experiences could have affected the accuracy of the results. It is also possible that the participants were cautious about what they said during the interviews due to the nature of their relationship with the internship training site and the universities at which they were trained.

Research which investigates the reflecting team process in action can provide rich understanding of "in the moment" experiences of the reflecting team. This research can also offer insight into team and supervision dynamics. A pilot study which examines the feasibility of using a reflecting team approach within school settings may be considered. An exploration of alternative methods of family therapy training and supervision could enrich the findings of the present study.

Conclusion

The reflecting team method was perceived by participants in this study as a beneficial way of engaging in systemic intervention in a practical learning environment. This method appears to also be useful in training therapists to think systemically, in response to the myriad of challenges experienced by their clients. The flexible nature of the reflecting team method offers a valuable training and supervision approach, which can be adapted and applied to diverse socio-cultural contexts.

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