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PERCEPTIONS AND EXPERIENCES OF EDUCATIONAL PSYCHOLOGISTS: TRAINING WITHIN THE FRAMEWORK OF A SYSTEMIC REFLECTING TEAM MODEL

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A research report submitted to the Department of Psychology in the School of Human and Community Development in partial fulfilment of the requirements for the degree of Master in Education (Educational Psychology) in the Faculty of Humanities, University of the Witwatersrand.

Johannesburg, South Africa March 2017

DECLARATION

I, Jodi Miller hereby declare that this research report is my own work. It is being submitted for the degree of Masters of Education (Educational Psychology) at the University of the Witwatersrand. It has not been submitted for any other degree or examination at this or any other university.

_____

Jodi Miller

_____

Date

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This research is dedicated to my family, who are my world.

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Chapter 1: An Overview and Rationale for the Study

1.1. Introduction

Chapter 1 provides an overview and rationale of the study. This incorporates a discussion on the orientation of the study, the aim of the study and research rationale, clarification of the key concepts relevant to the study, the paradigmatic perspective as well as the research questions.

1.2. Aims of the Study

The study aimed to contribute to research by developing an understanding of the experiences and perceptions of educational psychologists who have worked in a systemic reflecting team within the South African context. This was explored in terms of the educational psychologists' current practice. In addition, the research aimed to ascertain whether this type of training has been perceived as influencing the educational psychologists' way of thinking in terms of the importance of working systemically within the South African context.

1.3. Research Rationale

Currently there is a growing interest around the world in exploring mental health from within a systemic framework (Roberts et al., 2014). Whilst individual mental health remains paramount, the individual is considered to be affected by the many interacting systems which impact on optimal health and development (Swart & Pettipher, 2013). The family system is viewed as being vital to one's well-being (Becvar & Becvar, 2013). Systemic interventions are particularly relevant within the South African context due to various factors which can affect the family unit such as violence, crime, poverty and HIV Aids (Swart & Pettipher, 2013).

Becvar and Becvar (2013) describe the evolution of family therapy. They suggest that the idea of family therapy began to surface in the late 1930's, early 1940's and finally came into being in the 1970's. Postmodern systemic family therapy which has emerged in more recent times (Becvar & Becvar, 2013) is consistent with second order cybernetics which considers the therapist or theorist to be a part of what is being observed.

Family therapy has adopted the systems paradigm which usually provides intervention to the family as a unit (Winek, 2009). Here there is a concern with not only the problem, but the context within which this problem is embedded (Becvar & Becvar, 2013). Family therapists develop an understanding of their clients within context. This gives the therapist a more holistic and complete understanding of the family by considering that individuals exist within multiple interacting systems. Individuals exist in families, families exist within communities and communities exist within cultures (Winek, 2009). The therapist's interest is on how the family functions rather than why a problem exists (Winek, 2009) and the focus is on the family's subjective reality rather than objective truths. This paradigm moves from the notion of 'universe' or universal truths to the notion of 'multiversa' or multiple realities (Winek, 2009).

Postmodern family therapy moves the therapist as 'expert' to the therapist and client having equally important roles in the therapeutic process (Anderson, 2007b). Postmodern family therapy requires the therapist to communicate respect for the family structure by creating room for a collaborative partnership (Anderson, 2007b). Postmodern family therapists understand that the system is doing the best that they can, considering their specific contexts and realities and therapists are expected to share their views of reality which connect with that of the clients (Becvar & Becvar, 2013). This is considered by Bateson to be "the difference that makes a difference" (Bateson, 1972, p. 453). The difference is said to be created through talking about an alternate reality which is neither too small to be noticed nor

too big to unsettle the family system (Becvar & Becvar, 2013) and the family is facilitated in creating change. This should be done through perturbation rather than intervention in a safe and non-threatening environment (Becvar & Becvar, 2013).

There are a variety of approaches which are consistent with postmodern systemic family therapy. They include, Tom Andersen (1987) reflecting team, William O'Hanlon and Michele Weiner-Davis's (1988) Solution-Oriented Therapy, Steve de Shazer's Solution-Focussed Therapy (1982), Michael White and David Epston's Externalization and Reauthoring Lives and Relationships (1990) and Harlene Anderson and Harry Goolishan's Therapeutic Conversations (1992).

The social services organization here on referred to as the organization from which the research participants emanated has been in operation in Johannesburg South Africa since 1949. This organization relies on a systemic worldview when providing psychological intervention to individuals, couples and families. The organization focusses on family therapy which is based on Tom Andersen's (1987) reflecting team as well as relationship counselling. The organization is a leader in community development and empowerment. In addition it provides training for psychology interns aiming to inspire a systemic way of thinking and encourage the interns to consider the context of their clients.

Tom Andersen's (1987) model of family therapy appears to provide a useful model of culturally relevant family therapy that aligns itself to systemic theory and collaboration, which is relevant to the South African context. According to Swartz (2012) therapeutic relationships are strained by deeply entrenched racial divides. The reflecting team and its underlying principles may be able to address this divide and create a space for a more therapeutic environment where healing in various South African contexts is able to occur.

Anderson (2007b) suggests that collaboration has become desirable in attending to the needs of families. Collaboration is pertinent in the South African context where those seeking mental health care are diverse in their values, cultures and overall needs (Asnaani & Hofmann, 2012). Asnaani and Hofmann (2012) propose that a collaborative team is able to work together to provide holistic, meaningful and valuable intervention. Collaboration is said to be empowering and inclusive for the family unit (Swart & Phasha, 2013) which are two imperative aspects of redressing the inequalities of post-Apartheid (South Africa Republic, 1996).

In South Africa legislation and education policies recognise the necessity of school and family partnerships (Swart & Phasha, 2013). School environments where collaboration takes place amongst stakeholders in the child's life such as staff and caregivers is said to offer more effective intervention (Swart & Pasha, 2013). The collaboration between role players is considered essential in helping children to overcome the barriers that they experience (Swart & Pasha, 2013).

The collaborative nature of the reflecting team presents itself as an interesting and worthwhile model to investigate when considering ways of addressing barriers that children are experiencing. Working with the child's family system appears to be imperative in mobilizing change for the child (Swart & Pasha, 2013). In addition using the underlying principles of the reflecting team appears to have potential within the school system.

There is a limited amount of research regarding systemic family therapy in the South African context including that which addresses the reflecting team model as well as that which addresses educational psychologists' perspectives of systemic intervention. The underlying principles related to engaging in systemic therapy and more specifically reflecting team practice seem to align themselves with the contextual needs within South Africa. This

orientation allows for the many interacting systemic problems that occur within this context to be considered. It may therefore be beneficial to explore the perceptions and experiences that educational psychologists who have been trained in systemic family therapy have with regard to systemic family therapy. In addition the extent to which they are transferring and integrating the skills and ideologies learnt during their training into their own practice would assist in developing an understanding of the pragmatics of this approach. This may be able to inform the training of educational psychology students. In addition this form of therapy may be a useful model to implement into school settings which would make therapeutic intervention more accessible to families within South Africa.

Furthermore this research has potential to make a contribution by informing the internship site on the training that they provide to their interns. Contributions may be in the form of the positive feedback presented by the participants as well as in terms of suggestions for further development. Likewise this research has potential to inform the university training of educational psychologists.

1.4. Conceptual Clarification

1.4.1. Systemic framework

The systemic framework considers barriers that are being experienced to be manifestations of one's environment rather than being limited to intrinsic factors (Swart & Pettipher, 2013). This framework considers that individuals are affected by their context and that they are a part of wider interacting systems which causes problems to be relational (Becvar & Becvar, 2013).

1.4.2. Bronfenbrenner's bio-ecological model

Bronfenbrenner's bio-ecological model (1994) considers the multiple dimensions of human development which interact with numerous socially constructed systems to promote or hinder change and growth (Swart & Pettipher, 2013). This model suggests that what happens in one system affects what happens in other systems (Bronfenbrenner, 1979).

1.4.3. Reflecting team

The reflecting team and its process are positioned within the context of systemic family therapy (Becvar & Becvar, 2013). This model is aimed at opening up conversations between families and therapists where families are considered to be experts of their own lives (Brownlee, Vis, & McKeena, 2009). This approach aims to decrease power relations between families and therapists with the aim of empowering families to create change (Epstein, Wiesner, & Epstein, 2007). The reflecting team consists of an interviewer (therapist) who sits face to face with the family who together explore the presenting problem (Brownlee et al., 2009). During this time a team of professionals observe the family and interviewing therapist (Brownlee et al., 2009) whilst hypothesizing and formulating suggestions for the family (Andersen, 1987). Once the initial conversation has taken place, the focus changes to the reflecting team who are observed by the family and the interviewing psychologist. The team discusses their hypotheses (Brownlee et al., 2009). Finally the family is invited to talk about what they thought of the team's reflections (Andersen, 1987) which would inform the direction of future therapy sessions.

1.4.4. Social constructionism

The social constructionist paradigm is central to Tom Andersen's systemic family therapy model. This paradigm acknowledges difference and accepts that one's reality will be subjective, contextual and personally constructed (Phipps & Voster, 2015).

1.4.5. Language

Language is central to the social constructionist paradigm and is essential to the reflecting team process (Andersen, 1987). The way in which language is used during the process is important. It should be positive, mirror the clients' language and draw on the clients' strengths (Brownlee et al., 2009).

1.4.6. Collaboration

Collaboration is the mutual goal setting by client and therapist which involves having the highest regard for the client's viewpoint (George & Wulff, 2007). It is a process by which people connect and create with one another (Anderson, 2007a). George and Wulff, (2007) further describe collaboration as the respectful coming together of people in the pursuit of a common goal. Rather than each person thinking alike each person's contribution to the collaborative process is validated and beneficial in reaching the desired goal (George & Wulff, 2007).

1.4.7. Multivera

Multiversa or multiple perspectives is described by Andersen (1987) as the same problem or phenomena being defined and understood in a number of diverse ways.

1.5. Paradigmatic Perspective

1.5.1. Metatheoretical Paradigm

The researcher engaged in the research through an interpretivist stance. According to Immanuel Kant perceptions are not only created through observation using the senses, but through one's interpretation of what has been experienced (Ormston, Spencer, Barnard, & Snape, 2014). Considering the exploratory nature of the study which focussed on developing an understanding of perceptions, interpretivism as a metatheoretical paradigm was deemed suitable. This research placed emphasis on developing an understanding of the social world placing significant emphasis on both the participants' and the researcher's interpretation and understanding of the phenomena being studied (Ormston et al., 2014). This is indicative of interpritivist qualitative research.

1.5.2. Methodological Paradigm

A qualitative, exploratory, descriptive paradigm was used. This method of enquiry was used in order to develop a rich and in-depth understanding of the participants' viewpoints (Ormston et al., 2014).

1.6. Research Questions

The study explored how being part of a reflecting team has influenced the perceptions, professional viewpoint and current practice of the developing educational psychologists in terms of a systemic worldview. In order to answer this question, the following research questions were explored:

- What are educational psychologists' who were trained in a systemic reflecting teams' perception of working within the framework of systemic intervention?

- What are educational psychologists' experiences of working in a systemic reflecting team when conducting family therapy?
- To what extent are the experiences of working on a systemic reflecting team perceived as having influenced the educational psychologists' current practice?

1.7. Demarcation of the Study

The remaining chapters of the research report include Chapter 2 which is an in-depth write-up of literature and studies related to the enquiry and the findings of the study. Chapter 3 details the research design and methodology used. The research findings are presented in Chapter 4. Finally Chapter 5 presents a discussion of the findings as well as the limitations to the study and possible implications for future research.

Chapter 2: Literature Review

2.1. Introduction

Whilst there have been writings on the enthusiasm entrenched in the implementation of Tom Andersen's (1987) reflecting team, little empirical research appears to have been done regarding praxis. The current literature review attempts to show how important elements of this praxis such as systemic intervention, multiple perspectives, language and dialogue, and collaboration are useful practices for educational psychologists within the context of South Africa.

The literature review will describe the organization's approach to systemic family therapy with a focus on Tom Andersen's (1987) reflecting team. The reflecting team process and the philosophies upon which it is based such as respect, empowerment and collaboration will be discussed within the South African context. Social constructionism (Berger & Luckmann, 1966) will be explored as a paradigm upon which the reflecting team operates.

In addition, the literature review will explore the influence that theories such as the Milan systemic family therapy model (Boscolo, Cecchin, Hoffman & Penn 1986) has had on Tom Andersen's reflecting team as well as the writings of Gregory Bateson (1972) and Humberto Maturana (1974). Furthermore the literature review will explore training with regard to implementing systemic family therapy and the use of reflecting teams in the training of educational psychologists. The possible benefits and challenges of implementing systemic therapy within the school system will also be explored in order to ascertain whether this model of therapy could be a viable form of intervention within the education system.

2.2. The organization's Model of Family Therapy

The organization has been involved in training psychologists in family therapy since the 1980s. It provides therapy to families in order to meet their socio-emotional needs through a systemic framework. The systemic framework moves away from viewing individuals in isolation and changes the focus to relationships and the dynamics thereof (Becvar & Becvar, 2013). The organization has adapted Tom Andersen's (1987) reflecting team approach in its work with families. It works with the narrative in order to facilitate families in making meaning of their life experiences. The organization's philosophy is that one should think of families systemically; ensuring inclusivity, empowerment, diversity and a multi-cultural understanding. One of its goals is training intern psychologists to take systemic practice into the world of work. The organization aims to instil certain systemic underpinnings and values through its training program which enable therapists to practice therapy with values such as inclusivity, empowerment and a good understanding of diversity.

2.3. Postmodern, Systemic Family Therapy

Postmodern family therapy is based upon the notion of second order cybernetics which posits that individuals cannot be viewed as separate from their context and thus need to be viewed and understood from within their system (Becvar & Becvar, 2013). In addition to this, the approach calls for therapists to become integrated into the family system where they are expected to work collaboratively with a family rather than act as the expert. The family is seen as the expert of the content, whilst the therapist is considered to be an expert in the therapeutic process (Anderson, 2007a). Both elements are of equal importance to the therapeutic process. In addition the family's belief system and the way in which it views the world is recognised, valued and used to inform treatment (Gladding, 2007).

2.4. From Individual to System

Systemic therapy moves beyond viewing psychopathology as being intrinsic to the individual to 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; Berg, 2003).

In the past there has been a strong emphasis on the medical model which posits that deficits are intrinsic to the child (Swart & Pettipher, 2013). This model is useful only to a certain degree within the South African context, since there are multiple environmental factors which impact on a child's learning and socio-emotional functioning (Amod, 2013; Swart & Pettipher, 2013). Many of the barriers which children living in South Africa are experiencing are systemic in nature (Prinsloo, 2013). The systemic model of therapy could therefore be beneficial in South Africa. Barriers that children are experiencing are no longer seen as being limited to genetic or intrinsic factors, but must be considered as manifesting from the environment as well (Swart & Pettipher, 2013). Many barriers that children experience within the South African context can be seen as being caused as a result of insufficient functioning of various systems such as the family, education or broader social context (Donald, Lazarus & Moolla, 2014). For this reason when working with children one must consider the child's context and thus the systems which are having an impact on the child's learning and development.

Bronfenbrenner's Bio-Ecological model (Bronfenbrenner & Ceci, 1994) has evolved over some years. It considers the multiple dimensions of human development which interact with various socially constructed systems to promote or hinder change and growth (Swart & Pettipher, 2013). This model suggests that what happens in one system has a causal effect on other systems (Bronfenbrenner, 1979). From a developmental perspective this model suggests

that an individual's growth is strongly reliant upon the interaction of the systems within which the individual functions (Swart & Pettipher, 2013).

According to Gutkin (2012), focussing exclusively on the medical deficit model causes the severe systemic issues impacting on children's development to be ignored. Gutkin (2009) argues that addressing mental health and education pandemics is not possible without the involvement and participation of parents, caregivers and teachers. Individual therapy which is indicative of the medical model may be able to benefit individual children within the therapy setting in terms of their individual psychopathology (Gutkin, 2012). These children however will return to the same dysfunctional systems causing any progress made in therapy to be futile (Gutkin, 2012).

Williams and Greenleaf (2012) suggest that the fact that children experience so many difficulties academically, socially and emotionally calls for an understanding of what factors influence their underdevelopment. They suggest many of the factors which are external from the child as impacting on optimal development (Williams & Greenleaf, 2012). These include poverty, substance abuse, violence, unemployment, lack of resources and poor mental health services (Williams & Greenleaf, 2012). This advocates an intervention model which considers the systemic nature of the challenges which children experience.

Sprenkle (2012), states that there is a large and growing amount of evidence which supports the success of systemic therapy. Systemic interventions have been shown to be effective in a comprehensive range of mental health problems for both adults and children (Amod, 2013; Carr, 2014). Systemic techniques have historically been shown to be effective in environments which present with multiple problems in the context of socio-economic deprivation (Donovan, 2007). A review of the efficacy of "systemic therapy" in the treatment of 47 children and adolescents between the ages of 0 and 17 who were experiencing

externalizing disorders found that 42 of the cases benefitted from systemic therapy in the treatment of substance abuse disorders, conduct disorders, and attention deficit hyperactivity disorder (Sydow, Retzlaff, Beher, Haun, & Schweitzer, 2013). Follow ups for up to 14 years showed results to be stable over time (Sydow et al., 2013). A similar study was conducted to explore the efficacy of systemic therapy on internalizing disorders in children and adolescents which found that systemic therapy was effective in 33 out of the 38 trials (Retzlaff, Sydow, Beher, Haun & Schweitzer 2013). Internalizing disorders included mood disorders, eating disorders and psychological factors in somatic illness (Retzlaff et al., 2013). There was also some evidence of systemic therapy being effective in the treatment of Asperger, anxiety and mixed disorders as well as in instances of child neglect (Retzlaff et al., 2013). Research concludes that systemic family therapy reduces the usage of health services and that family therapy has greater benefit than individual therapy (Crane & Christenson, 2012). This suggests possible long term cost effectiveness of systemic family therapy (Carr, 2014).

2.5. Flexibility, Diversity and the South African Context

Systemic intervention aims to address the mental health needs of those who are not readily amenable to traditionally oriented psychotherapy (Donovan, 2007). The focus is on interpersonal relationships which speaks to traditional indigenous healing in South Africa which believes that ill health is due to relational issues either between the living or the living and the dead (Ivey, 2013).

Systemic practice has developed from an "increasing concern for anti-discriminatory practice: gender, race and giving voice to the client" (Stratton & Lask, 2013, p. 265). Research has shown that the reflecting team is a suitable place to resolve and accommodate difference and it places an emphasis on respect, fairness, equality and justice (Donovan, 2007). This is particularly important for South Africa in redressing the inequalities of the past

Apartheid era. In addition these values encapsulate the term "Ubuntu" describing the traditional African way of life. Somni and Sandlana (2014) conducted a qualitative study in rural, Eastern Cape which explored how 15 families deal with family or relational problems. The study found that principles of Ubuntu such as respect for human beings, dignity and caring for others play a vital role in addressing psychosocial problems (Sonomi & Sandlana, 2014). Kasrim and Oliphant (2014) found that family therapists working within the South African context believe that for family therapy to be successful it needs to allow flexibility in considering the family structure. This is imperative considering the diverse nature of the family system within South Africa. Family therapy allows affirmation of the strength of the family systems rather than isolating individuals in times of stress (Kasrim & Oliphant, 2014).

Andersen emphasised the idea of 'conversations about conversations' (Donovan, 2007) and suggests that this is important in organising reflecting teams because the focus should be on the ability to reflect rather than on the size of the team (Donovan, 2007). This permits creativity and flexibility in the team structure which allows for the reflecting process to be applied in various contexts (Donovan, 2007). Research has shown the reflecting team has been used successfully in multiple situations around the world (Andersen, 1992; Hawley, 2006; Mitchell, Rhodes, Wallis & Wilson, 2014; Rankin; 2007). In South Africa where context varies so greatly and resources are unevenly distributed, where therapy can often occur in unusual or informal settings (Rankin, 2007) the idea that this approach can be adapted and used creatively is promising.

2.6. Working with Children

Gutkin and Conoly (1990) as cited in Meyers, Meyers, Graybill, Proctor and Huddleston (2012) recognize the important role that adults play in a child's context and posit that in order to mobilize change for children; services must involve the systems in which the child is

embedded. Landreth (2012) suggests that because of the significant role that parents play in a child's life they should be included in the therapeutic process. It has been found that filial therapy which focusses on the parent-child relationship has shown multiple positive effects (Landreth & Bratton, 2006). Evidence shows that working with parents is important when working with children (Rustin, 2009). Rustin (2009) suggest that this will have implications for the training of child psychotherapists since they will need to become competent in parent and family work to effect change for the child. Paying attention to the wider context is considered essential in order to be responsive to the implications that on-going social change has on a child's inner world (Meyers et al., 2012).

2.7. Challenges of Working Systemically Within the South African Context

In working systemically within the South African context various challenges have been highlighted by practitioners. Research has shown that male figures of financially constrained families don't readily make themselves available to attend therapy (Kasiram & Oliphant, 2014). In addition they suggest that language differences can be problematic and culturally inappropriate use of language can be disempowering for families (Kasiram & Oliphant, 2007). Generational gaps amongst family members is also seen as problematic, especially within the South African context where the older and younger generations may potentially differ significantly in their world views (Kasiram & Oliphant, 2014). Fraenkel (2005) as cited in Breunlin and Jacobsen (2014) describe additional shortfalls of working systemically which include having to work long hours including weekends, having to put in more effort for the same remuneration as working with individuals and they describe an increased drain in energy. Breunlin and Jacobsen (2014) suggest that the nature of the 21st century family results in difficulty getting everyone together since family time is rare in general. The fast pace of the 21st century where individuals are inundated with activities and obligations has resulted in convening a family together in one room as an intervention in itself (Breulin &

Jacobsen, 2014). Therapists have reported that parents will seek help for their children viewing the problem as intrinsic to the child since viewing problems as systemic in nature goes against the dominant world view (Breulin & Jacobsen, 2014). In addition Rustin (2009) has found that parents avoid being included in therapy when they experience shame and guilt in needing help with their children.

A recent study which aimed to implement a systemic family therapy training program into a developing country yielded positive results, but also highlights significant challenges with regards to implementation (Ariel et al., 2014). The country in which the program took place was similar to South Africa in that it was suffering from economic and social deprivation, rapid social demographic and cultural changes as well as disintegration of family systems (Ariel et al., 2014). The goal of this program was to train first generation family therapists by providing family therapy theoretical orientations and praxis, skills development, personal development and supervised practice (Ariel et al., 2014). The program adhered to the European Family Therapy Association (EFTA) standards (Ariel et al., 2014). Ariel et al. (2014) highlighted certain limitations which were experienced in terms of the countries limited awareness and understanding of the importance of family therapy. Getting families, especially men to take part in family therapy was found to be difficult. It was also found that families would rather keep their troubles silent or consult with religious or spiritual leaders. It was believed that this ambivalence was partly due to Westernized interventions being imposed upon communities who do not necessarily adhere to these worldviews. Other challenges included a lack of support from government and uncertainty and lack of identity of potential family therapists since there was no official place demarcated for such professionals within the health professions council. Ariel et al. (2014) found that in order for systemic family therapy training and implementation to be successful important conditions need to be met. They include genuine buy-in from indigenous communities in which the intervention

will take place, void of impositions from a compassionate extraneous body. The program has a better chance of success if it is carried out in a formal setting such as a university. Local public should be informed about the intervention through communications with political, religious and social leaders as well as teachers and through the media. Trainees should go through a careful selection process and be at least partially responsible for their tuition. Accreditation of trainees should be formalized. It was found that at least a year should be devoted to theoretical training in systemic family therapy before moving to practical training experience in order to develop confident and competent family therapy practitioners. Finally the importance of a local family therapy association to which therapists are accountable was highlighted.

2.8. Tom Andersen's Reflecting Team

2.8.1. Background and efficacy

The reflecting team and its process are positioned within the context of systemic family therapy (Becvar & Becvar, 2013). Research done in the United Kingdom has found that the most common form of teamwork used in family therapy is Tom Andersen's reflecting team process (Willot et al., 2012). Tom Andersen's reflecting team is aimed at opening up conversations between families and therapists where families are seen as experts of their own lives (Brownlee et al., 2009). He posits that the reflecting team opening up communication amongst family members allows new ideas and thoughts about their family system to emerge (Donovan, 2007).

The reflecting team approach aims to decrease the power relations between families and therapists where families are given autonomy and are empowered in creating solutions to their problems through collaboration amongst the family and the members of the reflecting team (Epstein, Wiesner & Epstein, 2007). Willott et al. (2012) suggest that the reflecting

team process “offers an opportunity to deconstruct and question oppressive power relations” (p. 190). Donovan (2007) found that ethical principles such as respect, fairness, equality and justice were enhanced through the reflecting team process. Andersen aimed to create an empowering and inclusive therapeutic process in order to facilitate families in making change (Willot et al., 2012). Research has shown that using reflecting teams has helped families to engage in more positive communication, where they refrained from excluding, belittling and trying to control other family members (Hoger, Temme, Reiter & Steiner (1994) as cited in Willot et al., 2012).

Brownlee et al. (2009) describe the reflecting team process as follows: The reflecting team consists of an interviewer (therapist) who sits face to face with the family. This therapist along with the family will engage in dialogue in which they explore the presenting problem. Whilst this is taking place, a team of professionals will be observing the interactions as well as paying careful attention to the dialogue which is taking place between the family and the therapist (Brownlee et al., 2009). It is during this time that the reflecting team will be hypothesising and formulating suggestions for the family (Andersen, 1987).

The reflecting team will ideally be in an observation room behind a one way mirror where it is not a distraction to the process. If this is not possible the team may sit in the therapy room, although separate from the family and interviewing therapist (Andersen (1987) as cited in Brownlee et al., 2009). This is significant as the distance created between the family and the reflecting team is important for the process of reflecting (Andersen 1987). Clients have reported that the spatial separation has allowed them to hear the various perspectives presented to them (Sells, Smith, Coe, Yoshioka & Robbins, 1994). The reflecting team usually consists of three people but this is not a prerequisite (Andersen, 1987). The team should be a diverse group of professionals who are able to contribute varying perspectives of the presenting problem to the family in therapy.

After the initial dialogue between the family and the therapist has taken place the reflecting team is asked to discuss their hypothesis, the focus then changes to the reflecting team (Brownlee et al., 2009). The lights are switched off in the interview room where the family is sitting and the lights are turned on in the observation room which allows the family to listen critically to what the reflecting team has hypothesised (Brownlee et al., 2009). The conversation aims at offering the family various views of how they are seen as being involved in the problem as well as how they may be a part of the solution. The aim is to free the family from a "stuck" system, to explore alternatives and consider various perspectives (Andersen, 1987). Tom Andersen (1987) believed that families need to be given a choice of alternatives and should be encouraged to decide collaboratively whether any of the options fit for their family. The family is invited back into the session where discussions take place as to how the family felt about the reflecting team's conversation and if there was anything that they found useful (Andersen, 1987). This would inform the future directions of therapy.

Research has shown the efficacy of the reflecting team in terms of providing hope to clients. This was evidenced in terms of clients feeling hopeful through having access to new perspectives, maintaining positive rapport with therapists, being involved in the reflecting process, the identification of strengths by therapists, normalizing difficulties, presenting inspiring possibilities, providing support, highlighting growth and strengthening resolve (Egeli, Brar, Larsen & Yohani, 2014a). It was however found that clients also felt vulnerable during the reflecting team process if they were unsure if they deserved the team's positive feedback, and when hope was provided to the clients without a description of how goals would be achieved (Egeli, Brar, Larsen, & Yohani, 2014b).

Brownlee et al. (2009) found that there are various limitations to the reflecting team process. These include the awareness that reflecting teams are resource rich since multiple members are assigned to particular families which can be problematic when human resources

are limited. They describe how families may feel threatened by being watched by a team of people, who can be perceived as being intrusive and disruptive. In addition they believe that not all reflections made by the team will be useful or functional for the family and those families may want therapy to be more directive than the collaborative, inclusive nature of reflecting team therapy.

2.8.2. Influences on the reflecting team process

The reflecting team developed from a number of influences which included observations of the practice of Milan systemic therapy, the Ackerman institute and the Galveston family institute (Andersen, 1987). The underlying principle which attracted Andersen and his team to these practices was "the genuine respect these teams showed for the integrity of those persons with whom they talked" (Andersen, 1987, p. 1). Andersen was also influenced by Gregory Bateson's "ecology of mind" (1972) and Humberto Maturana's idea of "multiversa" (Andersen, 1987).

The Milan approach to systemic family therapy initiated the use of the one way mirror where a family was observed by a team of professionals (Mitchell et al., 2014). This however was not as inclusive and empowering as Andersen's reflecting team because the Milan team would formulate hypothesis before they observed and listened to the family dialogue (Brownlee et al., 2009; Mitchell et al., 2014). The Milan team also discussed the family separately and fed back their observations to the interviewing therapist who would then communicate this information to the family (Willot et al., 2012). This method had a more dictatorial, exclusive and disempowering feeling to therapy where the therapists were the change agents while Andersen's reflecting team see the family as the change agents (Epstein et al., 2007).

Harry Goolishan had a profound impact on Andersen in that he introduced Andersen to the idea of 'hermeneutics' (Epstein et al., 2007). Goolishan moved Andersen away from the notion of interventionism, pathology, power and oppression towards an understanding that the therapist is not all knowing (Epstein et al., 2007) leaving space for Andersen's values of respect, empowerment and inclusivity. Research on multi-cultural therapy adopts the stance of 'not knowing' to minimize power relations (Rober & De Haene, 2014).

Tom Andersen was intrigued by Bateson and Maturana's writings about the nature of knowledge (Willot et al., 2012). Maturana contributed by suggesting the idea of 'multiversa' which spoke to the idea that people construct their own meaning of the world (Andersen, 1987). Bateson discussed a similar idea which suggests that there are multiple realities, which are constructed according to the individual's experiences of the world. He called this 'an ecology of ideas' (Bateson, 1972). Andersen states that it is important to "share different versions of the same world" (Andersen, 1987, p. 2). The size of the difference is however important because too little difference will go unnoticed, too much difference will create disorganization and chaos in the system but a substantial difference is workable (Andersen, 1987). These ideas are relevant to Andersen's reflecting team because Andersen believed that families construct their own reality. He believed that reality is not static and objective but rather changeable and is subjective (Andersen, 1990). This was a major philosophy upon which Andersen developed his work.

Andersen (1987) often observed the families that he was working with as 'stuck' in a set way of thinking. He would consult with his colleagues who would assist him in seeing the situation differently from how it was seen in the therapy room. This led Andersen to experiment with a reflecting team (Andersen, 1990). This collaborative process unfolded new realities and made new meaning for the "stuck" family (Andersen, 1990). The families were

encouraged to construct their own change which Andersen believed, unlike other models of therapy, encouraged equality and inclusivity.

2.9. Underlying Philosophies of Post-Modern Family Therapy

From the above discussion it is evident that there are certain "pillars" upon which the reflecting team is based. The philosophies central to conducting family therapy are fundamental to this study. Central to this discussion is social constructionism, collaboration, multiple perspectives (multiversa) and hermeneutics.

2.9.1. Social Constructionism

The idea that social factors outside the mind, such as culture and language, and the way in which one positions themself in relation to such social constructs is relevant to the work of reflecting teams (Willot et al., 2012). The social constructionism paradigm is important since this acknowledges difference and accepts that one's reality will be subjective, contextual and personally constructed (Phipps & Voster, 2015). Andersen's social constructionist stance underpinning the nature of the reflecting team intended to challenge "unhelpful power relations" (Willot et al., 2012, p. 184) through encouraging collaboration, inclusion and empowerment by allowing families to listen to the team's reflections directly.

Narrative therapy falls within the social constructionist framework (Phipps & Voster, 2015). Conducting therapy through a narrative stance creates opportunities for people to make meaning of their life and to construct their own meaningful and relevant reality (Andersen, 1987). Using narrative therapy is particularly important within the South African context since research has shown that narratives give rise to the voices of the oppressed which open up inclusive and empowering conversations (Epstein et al., 2007).

An ethnographic study (O'Connor, Davis, Meakes, Pickering & Schuman, 2004) conducted with a group of narrative family therapists using the reflecting team model found a number of positive results. The researchers found that using narrative therapy minimizes presenting problems; the method is respectful and it empowers clients which promotes personal agency and the ability to solve their own problems (O'Connor et al., 2004). Some limitations that were found include the time consuming nature of narrative therapy, it is resource rich and dealing with family violence within this paradigm was challenging (O'Connor et al., 2004). These limitations are important to consider within the South African context considering the overwhelming lack of resources and access to therapeutic services. When dealing with families who are experiencing family violence findings regarding the effectiveness of this model will need to be considered.

2.9.2. Language

Language is central to the social constructionist paradigm and the way that language is used is important for the reflecting team process (Andersen, 1987). The kind of language used when the team reflects should be positive drawing on the client's strengths (Brownlee et al., 2009). Research has shown that this use of language creates a feeling of empowerment within clients and a willingness to hear their areas of both strength and concern (Brownlee et al., 2009).

Willot et al. (2012), report findings that clients engaging in the reflecting team process communicated in a trusting and nurturing manner which focussed less on blaming and belittling. In addition Garven (2011) found that using dialogue which refrains from giving advice, and rather shows curiosity, through questioning and wondering respects the clients' autonomy. Reichelt and Skjerve (2013) describe how meaning is co-created through discussions within therapy and the language that is used by the therapist. They have found

that a careful use of language is required so that the meaning that the family creates is true to them and they state that an incorrect use of language can be harmful to the family's sense of agency and dignity (Reichelt & Skjerve, 2013).

In South Africa there is an additional dimension when considering language in that the people living in South Africa speak many different languages. Kasiram and Oliphant (2014) have found that the culturally incorrect use of language within the therapy process poses a challenge to therapy in that it has the potential to disempower the family. McDowell, Brown, Kabura, Parker, and Alotaiby (2011) suggest the idea of having a "cultural insider" who was found to be able to facilitate cultural innuendos and assist in forming relationships between clients and therapists. The diverse nature of the reflecting team is conducive to this idea. Having a team of people engaging in the therapeutic process might open the possibilities of families being able to communicate in their mother tongue and to be culturally understood. Research has shown that this contributes to one's feelings of being respected, accepted and empowered (Ball, 2011).

2.9.3. Collaboration

Collaboration is the mutual goal setting by client and therapist which involves having the highest regard for the client's viewpoint (George & Wulff, 2007). George and Wulff (2007) further describe collaboration as the respectful coming together of people in the pursuit of a common goal. Rather than each person thinking alike each person's contribution to the collaborative process is validated and beneficial in reaching the desired goal (George & Wulff, 2007). A number of therapists such as Andersen, (1987), Anderson (2007a) and Tuerk, McCart and Henggeler (2012), have found that collaboration in psychosocial intervention is of great value and that outcomes of interventions have been enhanced through collaborative relationships between clients and therapists (Melito & Rintell, 2013).

Collaboration fosters an environment which feels safe and is conducive to making change (Kazantzis & Kellis, 2012). This is desirable in therapy. Research shows that the collaborative environment created by the reflecting team enhances the clients' feelings of respect and being understood as opposed to being pathologized (Brownlee et al., 2009). In addition clients have reported feeling a sense of equality within the therapeutic setting which eliminates the feeling of the traditional hierarchical relationship between the therapist and client (Brownlee et al., 2009).

2.9.4. Multiple Perspectives (Multiversa)

Multiple perspectives or 'muliversa' is defined by Andersen (1987) as the same phenomena or problem being defined and understood in a number of diverse ways. The reflecting team is in a position to offer multiple perspectives on a particular problem based on its perception of the family's narrative as well as on its expertise. Research has shown that clients value being offered multiple perspectives (O'Connor et al., 2004). Sparks, Ariel, Coffey and Tabachnik (2011) found that when team members are respected for their individual attributes, conversations can take place, where different perspectives are heard, without having to strip the individuals of their own voices or perspectives.

2.10. Systemic Family Therapy Supervision and Training

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 training which does not necessarily follow a systemic way of thinking 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 from within a systemic perspective (Becvar & Becvar,

2013; Nel, 2006). Nel (2006) describes this process as Stoltenberg's dependency-autonomy conflict. Some of the interns concerns include feeling overwhelmed and that they lack knowledge which more experienced therapists already have (Nel, 2006). Becvar and Becvar (2013) believe that while confusion and lack of confidence is a part of the process by the end of the interns' training confusion has subsided and confidence has grown. Nel (2006) found that through training in family therapy, interns manage to reskill and to develop autonomy and competence. Constantine, Hage, Kindaichi and Bryant (2007) believe that giving therapists opportunities to engage in internships which challenge them to work outside of the traditional role of psychologist will allow them to develop their ability to reflect on their practice and work with a diverse range of clients.

Andersen (1987) suggests training on the job whereby therapists are trained and supervised using live counselling scenarios. 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 (Frake & Dogra, 2006, Pender & Stinchfield, 2012). Frake and Dogra (2006) suggest that the reflecting team is a suitable means of conducting training since education and the reflecting team have much in common. Both education and training are said to employ active learning and encourage achievable and measurable goals. Training sessions must be relevant and useful to the group receiving it, a variety of teaching methods should be used to achieve outcomes and learners should be facilitated in arriving at their own solutions to problems encountered. In addition, learning should build on what one already knows, training should be enjoyable and an awareness of limitations such as time and resources is important (Frake & Dogra, 2006).

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 which transpire (Falke, Lawson, Pandit & Patrik, 2015). Here the supervisor has direct contact with the supervisee's

session (Falke et al., 2015). Falke et al. (2015) conducted a two year study of live supervision with a supervisor and three doctoral students conducting family therapy. This study found both advantages and disadvantages to this type of supervision. Some of the advantages include an increase in the supervisees' opportunities to adjust and develop their skills, increased opportunities to gain access to various viewpoints, the demonstrating of skilled interventions, chances for instantaneous feedback, more effective support in dealing with countertransference and increased cooperation between colleagues which enables growth (Falke et al., 2015).

The disadvantages of live supervision as described by Falke et al. (2015) include the supervisees' anxiety and vulnerability of being observed, supervisees' often felt under pressure to contribute to discussions and engage in the collaboration process. This was echoed by Meekums, Makaskie, and Kapur (2016) who found that the reflecting team process tends to exacerbate performance pressure which hinders learning. Other challenges highlighted by Falke et al. (2015) include supervisees' finding it difficult to work within the naturally occurring power dynamic which exists between supervisee and supervisor. Difficulties were noted in the logistics of scheduling mutually convenient times for therapy as well as it being costly due to the resource rich nature of this process (Falke et al., 2015). It was found to be difficult to simultaneously manage the development of the supervisees' and the clients' needs. Harrawood, Parmanand and Wilde (2011) found that students found it frustrating to pay attention to the family and the reflecting team simultaneously and they also found that students were anxious about reflecting due to their inexperience.

Becvar and Becvar (2013) describe the benefits of being supervised by a team and learning from their multiple therapeutic perspectives. Nel (2006) found that interns feel that support from supervisors is very important. Morgan and Sprenkle (2007) as cited in Becvar and Becvar (2013) found that interns appreciate a high level of support from their supervisors

during their training. Gardner and Neugebauer (2007) describe a supervisor's perspective on supervision that refers to the supervisor and student relationship as being paramount. In addition they believe that this relationship should be based on trust and respect (Gardner & Neugebauer, 2007).

Andersen (1987) believes that the reflecting team as a mode for supervision is advantageous in that it develops the students' autonomy and makes them feel less vulnerable when conducting therapy. Chang (2010) describes how this process of training allows students to ease comfortably into the counselling role because they are given opportunities to observe and engage their attention on live counselling scenarios. Zevallos and Chong (2007) found that students working on a reflecting team felt less threatened and intimidated by supervision since reflections are part of the team process.

Andersen's (1987) method also appeared to fast track the students' learning in that they are able to learn from the perspectives of a number of experienced professionals and develop an understanding that there is not merely one truth, but rather multiple valid perspectives (Andersen, 1987). Hawley (2006) found that students appreciate seeing counselling in process and that they are able to develop their skills through watching and learning from more experienced counsellors.

Chang (2010) found that students are able to develop their confidence whilst taking part in the reflecting team before becoming the primary counsellor. Hawley (2006) found that students appreciate being able to contribute on a reflecting team where they are able to try out certain hypotheses. Shurts et al. (2006) found that trainee therapists found trying out hypothesis in this format non-threatening and beneficial for their development. In addition Shurts et al. (2006) concluded that trainee therapists appreciated being able to process the session out loud amongst the reflecting team rather than merely introspectively. They also

found that the trainee therapists appreciated the break in the session which allowed them to reflect and catch their breath amidst an often intense family dynamic (Shurts et al., 2006).

Reichelt and Skjerve (2013) discovered that trainee psychologists found the reflecting team process to be more concerned with the family's story as opposed to using the process to develop their skills in family therapy and felt forgotten in the reflecting team process. 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 expressed a desire for supervisors to take on a more directive teaching approach (Reichelt & Skjerve, 2013). Reicht and Skjerve (2013) suggest that supervision includes more direct skills development for trainee therapists.

2.11. Systemic Family Therapy and Schools

Rayburn, Winek and Anderson (2016) found that family therapy provided within the school setting is becoming increasingly the treatment modality of choice. Research has shown that school staff are welcoming of family therapy trained counsellors within the school structure and have a strong belief that they add a great deal of value and a unique service to their institution (Laundy, Nelson & Abucevicz, 2011). Rayburn et al. (2016) have found that family therapists who work within the school environment are able to use their systemic knowledge to engage in interventions which go beyond the individual child. They are able to increase collaboration between the key role players to create a supportive environment for children. In addition they found that providing intervention to families within the school setting resulted in an increase in resources and various types of expertise. Importantly they also found that a knowledge and practice of systemic intervention helped to reduce the vicious cycle effect, in which the child is seen as the problem and the barriers which are being experienced intensify.

It has been found that family conflict places emotional stress on children and this affects their school performance (Laundy et al., 2011). This suggests the importance of family-based intervention since mental health issues often stem from systemic difficulties. Research suggests the school is a sensible place to base family therapy (Vennum & Vennum, 2013). Laundy et al. (2011) state that there is a very small percentage of children who receive mental health care and most of those receive it at school. This suggests that schools would be a useful place to provide mental health care.

Research conducted in America using a sample of 21 therapists trained in marriage and family therapy (MFT) and who have conducted family therapy within school settings has shown a number of positive results (Vennum & Vennum, 2013). Vennum and Vennum (2013) found that conducting family therapy within a school setting allowed for collaboration to take place easily amongst stakeholders. It also created opportunities for a large portion of the population to have access to mental health services that they would otherwise not have access to. In addition it was found that observing children in their problematic environment allowed for immediate and meaningful intervention involving the child and the system in which they are functioning.

This study also addressed certain challenges of working as a family therapist within the school system. These included some family therapist feeling like outsiders, having different priorities to other staff members and having to work within the constraints of the school system (Vennum & Vennum, 2013). Although therapists had set appointments school activities, absenteeism and being able to get the whole family together at a set time was found to contribute to logistical challenges (Vennum & Vennum, 2013). Other challenges included attaining buy-in from various members of the system which resulted in lack of collaboration (Vennum & Vennum, 2013). This study also found that children who were struggling academically didn't want to miss class to see the therapist (Vennum & Vennum, 2013).

Confidentiality was also found to be problematic in that many of the teachers believe that they have the right to privileged information between the child, their family and the therapist. In addition teachers would speak about the children and their problems amongst their colleagues which is not desirable for the therapeutic process (Vennum & Vennum, 2013). Boundaries were found to become blurred in that it was not always clear who the client was when working systemically (Vennum & Vennum, 2013).

This system of therapy could be advantageous to the South African community since there is a large population of people who do not have such support readily available. While this is the case it needs to be considered that the population being studied differs significantly from the South African population and resources available within the American school system differ vastly from those available in South African schools. In addition the dynamics of the South African family system should be considered since these may vary from the dynamics of the population being studied.

2.12. Conclusion

From the above literature review it can be established that systemic family therapy is potentially a useful theoretical and practical stance to undertake when working within the South African context. Principles such as collaboration, empowerment, respect and inclusivity are important underpinnings when addressing inequalities of the Apartheid past.

Tom Andersen's reflecting team, used by the organization is a method employed which appears to be able to incorporate philosophies which are important to the South African context under the paradigm of social constructionism. Training and supporting educational psychology interns in using this method is imperative in being able to extend the use of systemic family therapy within the South African context.

Exploring how interns perceive systemic family therapy and the degree to which they have found training on a reflecting team beneficial could be useful for future training. Exploring the extent to which interns have transferred their skills and attitudes into their work beyond their internship training will provide knowledge about whether the reflecting team approach to systemic family therapy is having a perceived impact beyond that of a particular institution. The chapter which follows will detail the research design and methodology used in order to conduct the research.

Chapter 3: Methodology

3.1. Introduction

This chapter provides a detailed description of the research methodology and design used to conduct the study. This includes a description of the participants and sampling and the research paradigm used. In addition the research procedure is discussed which includes the method of data collection and analysis used. Ethical considerations as well as methods of ensuring rigour are detailed in this chapter.

3.2. Setting, Sampling and Participants

3.2.1. The Organization Setting

The organization is situated in Urban Johannesburg. It has a number of satellite offices within township communities such as Soweto, Alexandra and Diepsloot. The organization provides services to children, couples and families of disadvantaged and previously disadvantaged communities across the greater Johannesburg area. It provides multiple services which are aimed at enhancing family life. The organization services schools around Johannesburg providing counselling, assessments and play therapy. It also offers parenting and support groups, divorce, family and mediation services, marriage preparation and community development. Services reach in excess of 100 000 people a year and community programmes reached over 60 000 people in 2015.

3.2.2. Sampling

The sample that was used was purposive and consisted of nine participants. Creswell (2007) suggests the importance of selecting appropriate participants who will provide credible information for the study. This research aimed to focus specifically on interns who have worked on a reflecting team. A purposive sample was therefore relevant since the participants

matched the characteristics of the group being investigated (Babbie, 2013). This enabled a detailed exploration and understanding of the themes that were being explored (Ritchie, Lewis, Elam, Tennant & Rahim, 2014).

3.2.3. The Participants

Nine participants took part in the study. All the participants were woman and eight of the nine women were white. Eight of the participants (participant A-H) are practicing educational psychologists who have worked in a systemic reflecting team at the organization described above. The participants' years as practicing educational psychologists range from one to five years. The ninth participant (HC) who is the head of counselling at the organization was also interviewed. Table 1 sets out the biographical information of the participants.

Table 1

A Tabulation of Participant Demographics

Participant	Age	Academic Training Institution	Current Work Setting
A	32	University of the Witwatersrand	Private practice/school setting
B	28	University of the Witwatersrand	Private practice/school setting/paediatric brain injury
C	38	University of the Witwatersrand	Private practice/university lecturer
D	42	University of Johannesburg	Private practice within a school setting
E	61	University of Johannesburg	Private practice
F	33	University of the Witwatersrand	Non-government organization
G	56	University of the Witwatersrand	Private practice
H	44	University of Johannesburg	Private practice/school setting

Saturation is the point at which no new insights are likely to emerge from expanding the sample (Ritchie et al., 2014). Guest, Bunce and Johnson (2006) suggest that this type of study is likely to reach saturation after 10-12 interviews however they suggest that it is possible that saturation will be reach sooner as was the case in this study. Nine participants were therefore adequate for this study.

3.3. Methodological Paradigm: Qualitative Research

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 participants' understanding of the world (Ormston et al., 2014). A qualitative, descriptive, exploratory study was conducted. The qualitative research aimed to gain rich, in depth, complex insight (Ormston et al., 2014) into educational psychologists' perceptions and experiences of systemic reflecting team practices. This method allowed for the individuality of each participant to be explored and common themes to emerge (Ormston et al., 2014). Exploratory research which aims to develop insights into an under researched aspect of social life (Hesse-Biber, 2016) was useful for this research since the topic required the researcher to examine a new research area (Babbie, 2013). The descriptive nature of the study allowed for the essence of the participants' responses to be recorded in rich detail (Ormston et al., 2014).

3.4. Research Procedure

Ethical clearance was obtained from the University of the Witwatersrand Human Research Ethics Committee - Non-medical (protocol number: MED/16/002 IH). In order to conduct the study permission was requested from the Director of the organization (Appendix A). Permission was also requested from the Director to gain access to contact details of past interns in order to ascertain if they would like to be a part of the study. The past interns were contacted via email or telephone inviting them to participate in the study. The participants were emailed information regarding the study (Appendix B). A consent form was signed by those people who agreed to participate in the study (Appendix C).

The research was conducted using semi-structured interviews (Appendix E) with the past educational psychology interns who have worked in the reflecting team. Each interview lasted between 30 and 70 minutes. Interviews were done face-to-face at the participants'

place of work in a quiet, private location. Face-to-face interactions were desirable so as to provide an additional source of rich, non-verbal information.

3.5. Instruments and Data Collection

Semi-structured interviews were used (APPENDIX E) to interview the past educational psychology interns as well as the Head of Counselling (APPENDIX F). According to Legard, Keegan and Ward (2003) a key feature of the interview is to focus on the individual's perceptions and experiences of a particular phenomenon. The semi-structured nature of the interview aimed at facilitating a certain amount of structure which allowed the researcher to direct the themes to be explored, whilst there was enough flexibility for the participants to be spontaneous and open in their responses (Legard et al., 2003). Legard et al. (2003) suggests that this type of interview allows for an in-depth, detailed understanding of the area being studied (Legard et al., 2003). Open ended questions were used in the interview schedule. This was important as it allowed the participants to fully express their perceptions and experiences (Turner, 2010) of working within a systemic reflecting team. Turner (2010) suggests that these types of questions are useful as they allow for the participants to contribute as much or as little as they like and leave space for the interviewer to ask probing questions. The questions that were used to explore the educational psychologists' perceptions include questions such as, "What are your thoughts about a systemic approach to intervention?", "What were your experiences of working in a reflecting team?" and "Can you describe aspects of your training in family therapy that have been beneficial to your current practice?" These interviews were recorded (See Appendix D for consent) and transcribed in order for the data to be analysed.

At the start of each interview background information was gathered which included the participant's age, current practice, type of training and the institution at which they were

trained. According to Arthur, Mitchell, Lewis, and McNaughton Nicholls (2014) background information is important in order to develop an understanding of the participants' context and the demographic being studied.

A semi-structured interview with the Head of Counselling, who leads the reflecting team (Appendix F), took place. The aim of this interview was to collect information with regards to the process and theoretical basis upon which the family therapy is conducted within the setting of the organization. Furthermore the goals that the organization has for intern training were explored. This was used to assist in gathering background information about the reflecting team process as well as the organization's vision in training therapists for the world of work. This interview was also used for triangulation purposes which aimed to compare data from various sources (Lewis, Ritchie, Ormston, & Morrell, 2014), in this case that of the educational psychologists and the Head of Counselling.

3.6. Data Analysis

The data was analysed using thematic analysis. This was done using Braun and Clarke's six step method (2006). According to Braun and Clarke (2006) thematic analysis is "a method of identifying, analysing and reporting patterns (themes) within data" (Braun & Clarke, 2006, p. 6). This method of analysis provides a means for describing the data in rich detail (Braun and Clarke, 2006) which aims to identify a set of themes which are able to answer the research question (Spencer, Ritchie, Ormston, O'Connor & Barnard, 2014).

Braun and Clarke (2006) provide a clear six phase process on how to conduct thematic analysis that was used to engage with the data 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). Whilst these steps will be discussed in a particular order it should be noted that thematic analysis rather than occurring in a linear process, involves recursive or circular movements through the process, moving back and forth through the steps as is necessary (Braun & Clarke, 2006).

3.6.1. Becoming Familiar with the Data

Braun and Clarke (2006) describe becoming familiar with the data as the "bedrock for the rest of the analysis (p. 17). The researcher took on the role of interviewer which was the initial stage in becoming familiar with the data. The researcher then listened to the recorded interview noting initial thoughts about the data. Whilst the researcher transcribed the data she became more familiar with it continuing to note any ideas and possible themes which appeared to be emerging. Meaning is said to be made through the act of transcribing data and a deep understanding of the data develops (Braun & Clarke, 2006). Once the full set of interviews were transcribed the researcher read through the entire data set numerous times creating notes of possible themes and making links between the various interviews.

3.6.2. Identifying Codes within the Data

Coding is a way of identifying parts of the data which the analyst finds interesting (Braun & Clarke, 2006). Initial coding ideas were jotted down whilst listening to the interviews as well as whilst transcribing and reading through the interviews. Codes were created by highlighting similar ideas within the transcribed interviews and then tabulated in order to identify potential themes.

3.6.3. Searching for Themes

This involves sorting the list of coded data into potential themes (Braun & Clarke, 2006). This was initially done by grouping various codes together in a mind-map format. This was

done a number of times moving codes from one potential theme to another whilst thinking about the relationship between potential codes and themes (Braun & Clarke, 2006). Each mind-map or set of codes was then given a name which served as a potential theme.

3.6.4. Reviewing Themes

Themes are reviewed to ensure that there is enough data for the theme to be considered, that codes are effectively grouped within an appropriate theme and to decide if themes can be merged or separated into additional themes (Braun & Clarke, 2006). This was done in two stages. First each collated extract was read to ensure that a coherent pattern was being created and that each coded extract had been placed within an appropriate theme (Braun & Clarke, 2006). If the extract did not seem to belong in a particular theme it was moved to another theme. At times a new theme needed to be developed. This resulted in a "thematic map" which represented the overarching themes (Braun & Clarke, 2006). The second stage considers whether the chosen themes are deemed valid in relation to the data set (Braun & Clarke, 2006). This was done by re-reading the data so that the themes could be considered in terms of the entire data set (Braun & Clarke, 2006). Whilst re-reading the data the researcher also paid cognisance to any codes that may be relevant to a particular theme that had been previously missed.

3.6.5. Defining and Naming Themes

This stage required the researcher to consider each theme relative to each other and to ensure that each theme told a story in relation to the research questions (Braun & Clarke, 2006). Here sub-themes were created in order to give structure to the broad themes which had been created (Braun & Clarke, 2006). The researcher worked the sub-themes of each overarching theme into a coherent structure which aimed to tell a story about the collated data which

would ultimately be able to answer the research questions. During this stage each theme as well as the sub-themes was named.

3.6.6. Producing the Report

In order to produce a concise and interesting report verbatim extracts were identified which conveyed the essence of each theme (Braun & Clarke, 2006). The extracts that were chosen aimed to create a compelling argument which would work towards responding to the research questions.

3.7. Ethical Considerations

Respect was demonstrated towards the participants in that participation was voluntary (Babbie, 2013). Even after agreeing to take part in the research, each potential participant was entitled to opt out of the research. Participants were informed that they may withdraw from the study at any time without any consequences. Participants were informed that they were not obliged to answer all of the questions should any of them have been uncomfortable for them in any way. In addition, the researcher considered the issue of harm and gain (Babbie, 2013). Due to the nature of the project the participants were not harmed by the research and there were no direct gains.

The participants have remained anonymous (Babbie, 2013) within the written report. Where direct quotes have been used from the responses, no identifying information has accompanied that quote although complete anonymity could not be guaranteed because of the face to face nature of the interviews. The participants were informed that anonymity would be respected in the handling of all data related to the participants and that the researcher and her supervisor would only have access to such information and data. The participants were ensured of confidentiality (Babbie, 2013) in that the results were processed by the researcher

and her supervisor only and all information has been stored on a password protected computer.

Since interviews needed to be recorded for transcription purposes, permission was requested from the participants (Appendix D) to do so. Participants were informed that the recordings as well as transcripts would be safe guarded on a password protected computer. The relevant stakeholders will receive a detailed summary of the study's findings after the research report has been written.

3.8. Ensuring Rigour of the Study

Credibility, dependability, authenticity, confirmability and transferability (de Vos, Strydom, Fouche, & Delport, 2011) were necessary in order to ensure rigour of the study's research findings.

Credibility of the study was enhanced as participants were selected through purposive sampling and therefore have experienced working in a reflecting team and are knowledgeable about using this process in family therapy. Triangulation was used which aimed to combine multiple perspectives to produce a stronger account of the phenomena rather than reaching a consensus (Barush, Gringeri, & George, 2011). Triangulation of research findings as well as cross referencing was used as a method of maintaining dependability which created a sense of trustworthiness of the findings (Lewis et al., 2014). This was done by associating the information gathered from the different sets of interviews. Application of Braun and Clarke's (2006) six phase thematic content analysis was used to ensure authenticity. This process informed the researcher on how to generate an accurate analysis of the experiences and perceptions expressed by the participants. The process of supervision was also used to discuss the themes.

Recordings as well as verbatim transcripts of the participant interviews were created which were used to enhance confirmability of the research findings which contributed to the reliability of the study (Lewis et al., 2014). Transferability was enhanced by the researcher giving rich detail about the study so that the reader can judge its transferability to other people, places or circumstances (Barush et al., 2011).

Barush et al. (2011) maintain that reflexivity is necessary in order to address possible researcher bias which may influence the research process. In order to apply reflexivity, a reflective diary was kept by the researcher and constant supervision with a registered psychologist (the research supervisor) took place. This was done in order to explore any bias or conflicts which may have occurred during the research process. Since the researcher has a strong belief in systemic practices, these biases needed to be monitored so as not to influence the participant's responses and the researcher's interpretation. The power dynamic was useful to reflect on since the participants are qualified professionals who have offered to give up time for a student study. Participants of the study varied in terms of their demographics which may also have effect the rapport between the researcher and participants. This needed to be monitored as it may have affected the quality and richness of the interview. Reflecting on these aspects which may have the potential to generate bias is crucial for the validity of the study. In order to minimize bias the researcher aimed to communicate with participants in a non-judgemental, accepting, empathetic manner.

3.9. Summary

Chapter 3 detailed the methodology and research design used to conduct the research. This included a description of the sample, research design, research procedure, the instruments used to conduct the study as well as the method of data analysis employed. Chapter 4 will describe the research findings.

Chapter 4: Research Findings

4.1. Introduction

Chapter 4 will outline the main themes and sub-themes that emerged from the data. A summary of these themes is presented in Table 2. The main themes will be explored in detail using data from the semi-structured interviews. Verbatim extracts will be used to substantiate the findings.

4.2. An overview of the Themes and Sub-themes

Through transcribing and interpreting the nine interview scripts three main themes emerged in which various sub-themes occurred. The results which materialized encompass the developing educational psychologists' experiences and perceptions of working on a systemic reflecting team. The themes and sub-themes which are presented in Table 2 form the foundation from which the results will be discussed.

Table 2

A Tabulation of Main Themes and Sub-themes

Main Themes		Sub-themes	
4.3.1.	Perceptions of Systemic Intervention	**4.3.1.1.**	Mobilizing Change
		4.3.1.2.	Challenges
4.3.2.	Systemic Family Therapy Training	**4.3.2.1.**	Theoretical Training
		4.3.2.2.	Practical Training
		4.3.2.3.	Supervision
		4.3.2.4.	Working with a Team
		4.3.2.5.	Being Observed
4.3.3.	Current Practice	**4.3.3.1.**	Working with systems/context
		4.3.3.2.	Reflecting Team
		4.3.3.3.	Holding Role Players in Mind
		4.3.3.4.	Working with Parents

4.3. A Discussion of the Main Themes and Sub-themes

4.3.1. Perceptions of Systemic Intervention

The first main theme that emerged was perceptions of systemic intervention. The results demonstrate that all of the participants believed that systemic intervention is imperative when working with children. This is validated by participant F's response who says that, "any good educational psychologist will consult all the accessible systems before beginning work with a child…to develop a holistic picture of that child…to understand where interventions need to be focussed". She continues to say that for educational psychologists working systemically…"is a given". Whilst participant A stated that systemic intervention is "the only way to go with kids". While this is the case all except one participant recognized significant challenges to working systemically most prominent was that of being able to access the various systems. Participant C simply stated, "you don't always have access to the system…you not going to get the whole family together, they busy, they work, transport…".

4.3.1.1. Mobilizing change

Systemic intervention was perceived as essential to mobilize change when working with children. Some of the participants acknowledged that children are not separate from the systems in which they function. Participant B stated that children "are part of various systems likes schools and families" whilst participant H believes that it is important to consider the context of the family because "children aren't independent of that system". This perception is in line with the organization's aim of instilling certain underpinnings and values of working systemically when training educational psychology interns (Interview - Head of Counselling).

Four of the participants (A, B, C and D) stated explicitly that being able to work systemically with children is imperative in mobilizing change. According to participant A,

“mobilizing any change when working with children is very difficult when the system isn’t shifting”. Participant B stated that when working with children, “one needs to work with more than just the individual to illicit the best results”.

Participant D expressed her beliefs about mobilizing change by stating that, “in order to bring about change one has to work with as many different individuals and systems in which the child operates”. In addition her perception is that “change is only possible when all the role players are actively involved and have taken responsibility”. This participant also recognizes that a challenge that presents in the individual, “is often as a result of factors that are happening in the system”, which she states means that, “the system can’t be ignored when trying to mobilize positive change for a child”. This educational psychologist noticed that she is “not seeing progress” within children of parents who have little to do with their child’s therapy sessions and that her role serves merely as a means of “containment as opposed to creating change”.

Participant C’s perspective of mobilizing change is from a different perspective. She suggests that, “sometimes the client needs to be assisted in working in the system.” in order for change to occur for that child. This differs from the participants above in that this perspective suggests that the child changes for the system, whilst the other participants’ perspectives demonstrate a belief that the system should be adapted to meet the needs of the child.

4.3.1.2. Challenges

All except one of the participants identified challenges regarding working within a systemic framework. The most prominent challenge that emerged was that of being able to access the various systems. Participant C expressed significant challenges specific to the South African context. She mentioned children not living with parents, the expense of getting a whole

family to therapy in terms of transport costs and parents being in inflexible jobs which would not allow them time to attend therapy. In addition she stated that, “often parents of the youth that I see don’t even know that their children are attending therapy and probably wouldn’t support it anyway because they often don’t believe in the Western world methods we use”.

The results that emerged from the interviews demonstrate that educational psychologists who work in private practice find accessing systems more difficult than those who work within the school environment. Participant E who is in private practice imagines that accessing the system would be easier if she were to work in a school. She states that, “one would have to go to the system, like the school which isn’t financially viable”. Participant H who is also in private practice stated that she does go to see teachers but that it tends to “drain her time and resources”. In comparison, those who work within the school setting have found that access to peers, teachers and parents is fairly easy. One of the participants who work within a school setting stated that she enjoyed the benefits of being able to access the school system more easily. She stated that, “you working with the teachers, you have an idea about what is happening in the classroom, making recommendations they are able to give you feedback about how things are going”.

Participant H has had experiences where she has offered support to members of the child’s systems whom she sees as being a risk factor for the child and she has found that they reject this offer. She stated that, “you offer some support and they don’t want to own their issues”. Participant B stated that there is “red tape” which makes accessing the systems a challenge. Participants B and D recognize this “red tape” in terms of clients not wanting other systems to be aware that there are problems. Participant B states that “there are parents who don’t want schools to be aware of what’s going on and they don’t want other systems to be involved”. She continues to say that, “one has to respect their wishes if they don’t want information to be shared”.

Participant B expressed difficulties accessing the family system which is often 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…".

Another prominent challenge highlighted by the participants is that of people buying-in or investing in the process. Participant B stated that, "ultimately it's all about the buy-in…there are people who try and sabotage therapy. Working systemically is only useful if the people within the system are willing to work with you". Participant C recognized that families are content to be a part of the solution; however they find it difficult to acknowledge the role that they have played in creating the problem. She states that, "they want to be part of the solution, but they don't want to…it's hard to recognize that they may be a part of the challenge. People find taking responsibility hard, people find it hard to do that".

Working with the whole family in the room aims to alleviate challenges regarding accessing the system as is the case with the reflecting team although participants highlighted certain challenges regarding buy-in which they experienced whilst working on the reflecting team. Participant D 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". Participant C felt that "for some families it's really scary and that's when they shut down and don't come back". Additionally participant E recognizes the importance of buy-in in terms of needing the whole family's buy-in for therapy to be successful. She considers that whilst some members of the family buy-in to the process others may not which is problematic for the process. She stated that, "sometimes they don't all want to come and honour their commitment". The Head of Counselling made it clear 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.

In family therapy the therapist is considered to be the family's therapist rather than that of an individual. Participant A directly stated that she found therapeutic boundaries challenging and she wondered whose therapist she would be if the family split. This challenge was however nuanced throughout the interviews and revealed itself in instances where the therapist expressed a desire to "treat" parents or teachers rather than the child when noticing where the child's challenges were embedded.

4.3.2. Systemic Therapy Training

Systemic family therapy training was considered by the participants in terms of their theoretical training as well as in terms of their practical training. Much of the systemic training that the interns received was experiences that they encountered during their internship year and occurred whilst working in the reflecting team. Experiences were depicted as both positive and negative by all the participants. The sub-themes which emerged from the interviews include theoretical and practical training, working with a team and being observed.

4.3.2.1. Theoretical training

The analysis of the results demonstrated that most of the participants perceived that there was a lack of theoretical training in terms of systemic family therapy within the context of either their university training or during their internship year. Participants B and E felt that their universities could have introduced more in terms of theoretical training in family therapy. Whilst participant D stated that she "didn't really get any systemic training" participant E felt that she had "insufficient training". Participant F couldn't recall doing family therapy training at university as she states "I don't recall doing anything on family therapy in my M1 year".

The research found that most of the interns desired a more in-depth theoretical understanding of the family therapy approach that they were required to use. Participant B raised concerns around her theoretical understanding of the reflecting team process. She stated that “there wasn’t really any discussion around the theory” and she believes that whilst becoming “bogged down in theory” can become problematic, “it’s important to have the theory there from which to work and draw on”. Participant E stated that “we were given no theoretical framework.” Discussions were “more about the case (family) than the theory behind what we were doing, models of doing it, ways of thinking.”

Participants B, E and F spoke about readings around the theory being valuable for their learning. Participant B stated that she read up about the reflecting team to enhance her understanding whilst the other two participants expressed a desire to have been given a set of readings around the theory. Participant E stated that, “a good set of readings can be so rich and meaningful in one’s learning” whilst participant F stated that, “having a guided set of readings would have been very enriching. The Head of Counselling acknowledges a possible lack of theory being brought into the interns training and whilst she feels that she tries to incorporate the theory into practice she considers this to be a challenge for her.

4.3.2.2. Practical training

All the participants acknowledged the practical nature of their systemic reflecting team training, particularly referring to their internship year. Whilst some participants were content with the practical training, others were left found wanting for more. Participant A describes the value of practical training in her development. Her comments which highlight this point include: “it’s a valuable way of learning”, I learn through doing” and “observing how other people do therapy is very valuable”. Participant D described the reflecting team approach as, “practical” and recalls growth “through practice and self-evaluation and team-evaluation”.

Participant E describes learning, “through supervision and practical experience…doing it”. Participant C describes her practical work as being, “developmental and helping you grow…it helps you develop as a therapist…I think”.

Most of the participants felt that they benefitted from watching other more experienced therapists. Participant E stated that her practical training was “invaluable, training on the job”. She recalls the benefit of learning from being in the therapist position as she states “having the reflective team support, I think for me was very beneficial”.

Some of the team members reported that they would have liked more training and that their exposure to families was limited. Participant B wondered why the families only came every second week as opposed to every week. She felt that, “there was not enough time with the family”. Participant C felt that “it would have been nice to have had more exposure to it” whilst participant F stated that she would, “probably have liked more training”. Participant E would have liked more training in terms of micro-skills. She stated that “it’s the micro-skills in training that I think we need more of”.

4.3.2.3. Supervision

With regards to supervision two of the participants (A and B) spoke positively about their experiences in terms of the supervision space being safe and nurturing. The first of the two participants stated that feedback takes place *“*in a containing and nurturing space”, whilst the other stated that, “the team members are very supportive… it is useful to have a team of people thinking about you”. She did however put in a disclaimer in which she said, “I was very fortunate in that that the team that I was in was very supportive, I did have a couple of colleagues who found it to be a very critical process”. The Head of Counselling reported that the role of the reflective team is to support the therapist in the room.

Participant A referred to the benefit of live supervision. She described how having supervision based on what had been seen taking place live was particularly meaningful for her. She stated that to, “have that feedback in the here and now is more authentic, it’s more natural”.

4.3.2.4. Working with a team

The results portrayed reflect the participants’ positive attitude towards working with a team. Their comments were encompassed by positively nuanced conversations which reflect their appreciation and the value that they found in working with and learning from a team.

Six of the eight participants that were interviewed felt that working with a team was beneficial to their training in systemic therapy. Participants A and D felt that they benefitted from the insights of other professionals. Participant A stated that, “getting insight from a variety of people is very helpful”, whilst participant D stated that, “When working with a team one gets to gain other people’s insights”.

Working with a team highlighted the value of multiple perspectives in terms of the educational psychologists’ learning and development. Participant F enthusiastically highlighted this point by saying that, “I think the fact that you on a team is brilliant for an intern because you learning from people…you get to learn from all these professionals who have done this”. Participant A said that, “you learn from other peoples’ experience…by hearing different ideas and seeing different approaches”. Whilst participant D found it helpful to have access to different ideas and perspectives on the challenges that families experienced. She stated that working on a team is useful to, “see different perspectives on an existing challenge”. The Head of Counselling stated that even though she is one of the more experienced members of the reflecting team she often learns from the multiple perspectives of her team members regardless of the amount of experience they have had.

Additional benefits were also described. Participant D described the team as being able to "help you think and process…and pick up stuff that one may not have picked up on". Whilst participant E stated that working with a team is, "more powerful, I believe than being on your own when you have a family dynamic" and she continued to say that there are, "Multiple minds and multiple perspectives in trying to understand the dynamic of the family". Participants A and F perceived that working with a team enhanced their set of therapeutic skills. Participant A makes this evident in saying, "having a team there, in a way really helped to work on skills" whilst participant F stated that the team isn't watching you to pick you out but rather that, "they helping you, they helping the sessions". In addition participant E regarded working with a team a "privilege".

4.3.2.5. Being observed

Whilst most of the participants valued the learning experiences which emerged from working with a team, a particularly trying and anxiety provoking element of this type of training was that of having to be observed. The Head of Counselling doesn't believe that the team is judgemental and hopes that the interns don't feel judged. However the results show that this wasn't always the perception amongst the participants.

Participant B recalled that "being an intern and very new to the industry there is quite a lot of anxiety". She describes 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…being watched through the one-way mirror by a team can be very anxiety provoking". The Head of Counselling agreed with this. She stated that, "it's quite tough in the beginning and they're (the interns) quite nervous".

Participant B describes how one is meant to be able to block the team out but felt that, "this is a very naïve perspective". She stated that,

> "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".

This participant however acknowledges that, "you do get used to it". Participant C similarly stated, with slightly less intensity than participant B that, "it is anxiety provoking initially, human nature, you so worried about being judged…but after five minutes you are so engrossed in what's going on in the session that you forget about them". Participant E felt that being watched was, "challenging as a novice". Participant F felt that, "being under the spotlight can be extremely daunting and you need to get used to that feeling of being watched". She also stated that, "being watched can be quite scary, particularly when you're an intern…it can be terrifying, and you being watched generally by people who have had years of experience so it can feel like you being judged sometimes, your technique is being observed you completely under the spotlight so it can be very difficult". Participant B raised an additional concern about being observed. She stated that it, "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.

4.3.3. Current 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. Four sub-themes emerged which include systemic and contextual considerations, the reflecting team, holding role players in mind and working with parents.

4.3.3.1. Systemic and contextual considerations

According to three of the participants (F, G and H) working with systems had become central to their work as educational psychologists. Participant F has focussed on working with systems since she found that she was not able to achieve the desired results from working with the individual child. She stated that, "I was sending them [children] back to the same system every week and nothing was changing and it was just too depressing for me, it was too hard". She stated that for an educational psychologist working systemically "is everything, that's how we need to work, my training has taught me to think in terms of the system".

Participant H was concerned about children living in a volatile family environment that are referred for therapy and wondered how, "If psychologists only see the child and not the family how it would actually help the child in the end". This suggests that working beyond the individual is part of the way in which she thinks and works within her current practice. Participant F said that, "you phone all the different people in the child's life hopefully work together to come to the best treatment plan". Participant G indicated that she is working systemically by stating that working within a systemic framework is, "a very good system to use as your foundation when working with children…working with the individual in their setting has become an imprint in my mind". Participant F has learnt to identify strengths within a child's system and she uses this to enhance their psychological well-being. She stated that, "it's important to look at the strength of the family system, what's good about where you've come from".

The Head of Counselling described one of her main aims in training educational psychologists. She states that one of her main aims is for the educational psychology interns to always consider the context in which their client lives. She emphasised this throughout the

interview. Four participants (A, C, D and F) described how their training has encouraged them to consider their clients' context or environment and develop an understanding of the effect that this has on development and psychological functioning. Participant A suggests that when working with children she considers "the bigger picture" whilst Participant F says that training systemically, "really makes you look at the bigger picture and as an educational psychologist that really is what you always doing, I'm always looking outside of the child". She continued to say that her family training taught her "to think holistically". Participant C stated that "clients don't exist in a vacuum, there is so much else to consider when working with them". She also expressed her concern that what happens in a child's environment may be out of her control, but be that as it may she still ensures that she considers the impact of such.

Participant D acknowledges and considers the contextual influences which are associated with living in Johannesburg. She stated that, "Living in Johannesburg is certainly very different from living in other areas on many levels. Education, the pressures, societal, economic factors, all of those need to be considered". All of these statements indicate that the participants have carried through a fundamental principle of their training into their practice.

4.3.3.2. The Reflecting Team

Some of the participants have continued to engage in the use of the reflecting team after their training at the organization. Participant A reportedly volunteers on a reflecting team at present as she values the learning experience. She also works on a multidisciplinary team which she values in terms of her growth and development.

After Participant E's internship, she engaged in family therapy with another past intern in which they worked together to create a reflecting team. This was done because of

the great benefits and value that they felt the reflecting team had for both them as well as for the family structure (Participant E). Participant E stated that,

> "It was really more powerful I believe than being on your own when you have a family dynamic. My partner and I would 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 and it's just that support and also I enjoy the sort of conversational aspect of it, the transparency you are that it's respectful that the clients can hear your conversation with another therapist and it gives them the opportunity to see their lives being spoken about and reflected on it gives them a backdrop it gives them a scenery".

Some of the key aspects here include the value of multiple perspectives or multiple minds in working with family dynamics, support for each other, the conversational aspect of the reflecting team as well as transparency and respect for clients.

Even though participant E engaged in positive and meaningful therapeutic experiences by using the reflecting team in her practice, the logistics required in conducting this type of therapy hindered the practice to such a degree that she believed that it wasn't viable to continue practicing this type of therapy in private practice. Participant E considers the financial implications when using the reflecting team model. She stated that,

"You've got two therapists that the family have to pay for that is for 1 and 1/2 hours. It wasn't sustainable… I can't afford to do this I've got to feed a family. Travel time, and my hourly rate is not being realised either so that's what I mean when I say viability…". Participant E also highlights the difficulty in finding a suitable time slot to gather a whole family together. She stated that she found it difficult to get the whole family together because small children are too tired to come to therapy at night and the parents are working in the day.

The Head of Counselling acknowledges the luxury that they have in being able to offer the reflecting team and she acknowledges the time, resource and financial difficulties 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 is able to continue engaging in systemic interventions. Here she is a permanent member of the reflecting team.

4.3.3.3. Holding role players in mind

Two of the participants found that their training has enabled them to hold multiple role players in the child's life in mind when engaging in individual therapy. Participant A simply stated that when working with individuals she is able, "to hold role players in mind". Participant F expands on this idea by saying that,

> "in family therapy you can't look at one individual so by learning how to not focus on the identified patient you focus on the bigger picture. I think that's helped me in my other therapy because it's important not to do that in individual therapy either. So I think it's helped me to be able to bring in the family without actually having them there".

The Head of Counselling describes one of the organisation's goals when training intern psychologists as that of being able to "hold role players in mind". Whilst she acknowledges 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. She mentions the children's parents, teachers, peers and families. Most of the participants expressed concern that the reflecting team is not a practical way of practicing due to various reasons such as the resource rich

nature of the reflecting team (Participant B, C, D and E), financial (Participant B, E, F, G and H) and time constraints (Participant E and G).

4.3.3.4. Working with Parents

One of the major factors which promote or hinder a child's development is their social support structure which is primarily provided by parents or caregivers. As previously mentioned children are not separate from their system and in order to mobilize change systemic intervention is perceived by the participants as being a prerequisite for working with children.

Some of the participants found that their experiences as an intern training in systemic therapy has prepared them to work with parents, an essential part of a child's therapeutic process. One of the participants values the experience that she gained in working with adults as she stated that, "children coming in have parents with pathology often times and the internship training was pragmatic in terms of working with adult pathology". Another participant described how she has learnt to work with the dynamic between parents and their children. She stated that, "sometimes when you working with the child often there is work that needs to be done with the parent". She conveys how her training prepared her for this dynamic and this type of intervention. A second participant echoed this idea by stating that, "often when children are referred for therapy, I bring the parents into the process, knowing that if I can work with them, it would make such a difference to the child". She continues to say that, "often times parents don't want to come for therapy, they would rather bring their child, but through the process, parent feedback that kind of thing I get to work with parents". A third participant describes how parents come to trust their child's therapist and "bring their own stuff" unknowingly to the child's therapist and thus having had experience in working with parents is important for her.

Two participants have branched out into filial therapy. One of these participants has said that she has realised through her training and experience that relationships are often problematic in one's psychological well-being. She stated that her training was "beneficial because sometimes it really is the relationships that are the problem". The other participant felt that in training, "you are exposed to such a lot of [relationship] dynamics that you have to consider when facing reality; it's not just out the textbook". She now works with families and relationships and has branched out into filial therapy.

Participant F has had many experiences where she perceived the child's problem as being as a result of the family system or parent pathology. She stated that knowing that the children were not the problem and she was unable to access their system was *"depressing"* for her. This particular educational psychologist focusses primarily on family and parent child therapy at present which she believes has enabled her to overcome this challenge.

4.4. Summary

Chapter 4 presented the findings of the study in relation to the themes and sub-themes. Three main themes emerged from the data which were each structured according the sub-themes which materialized. Chapter 5 will provide a discussion of the findings and these will be considered in relation to the existing theory and research.

Chapter 5: Discussion

5.1. Introduction

The following chapter will discuss the results which emerged from the analysis and interpretation of the data collected. This will be done according to the research questions posed and in relation to the three main themes which emerged from the data. The results will be considered in relation to existing theory and research.

5.2. Aim of the Study

The study aimed to contribute to research by developing an understanding of the experiences and perceptions of educational psychologists who have worked in a systemic reflecting team within the South African context. This was explored in terms of the educational psychologists' current practice. In addition, the research aimed to ascertain whether this type of training has been perceived as influencing the educational psychologists' way of thinking in terms of the importance of working systemically within the South African context.

5.3. Summary of the Findings

After conducting an analysis of the findings three main themes emerged from the data. The first theme encompassed the educational psychologists' perceptions of systemic intervention in which two sub-themes emerged. The first being that of mobilizing change when working with children and the second being challenges that the educational psychologists experience when working within a systemic framework. Theme two encompassed systemic family therapy training which elicited five sub-themes. The sub-themes included theoretical and practical training, supervision, working with a team and being observed. The final theme which arose was that of current practice. This theme incorporated how educational psychologists integrate their systemic training into their current practice. The sub-themes that

emerged here include working with systems/context, the reflecting team, holding role players in mind and working with parents.

It was found that the educational psychologists perceived that systemic intervention was necessary in terms of mobilizing change for children and there was a strong perception that if the system isn't changing efforts made with the individual child are futile. In addition it was found that the educational psychologists encountered a number of challenges with regard to engaging in systemic intervention. Some of which include accessing the system, encountering "red-tape" when attempting to access the various systems, buy-in from the various role players, language barriers and boundaries in terms of who the therapist's client is when working within the framework of systemic family intervention.

When exploring the participants' experiences of systemic family therapy training it was found that many of the participants believed that the theoretical training in this regard was minimal both within the university and within the internship site setting. Their experiences of the practical side of their training were far more positive although many of the participants would have liked to have had more experience conducting systemic family therapy during their internship year. Some of the interns found the supervision process to be beneficial and enjoyed that supervision took place in the moment. Some of the participants found the supervision process to be nurturing and supportive although there were insinuations that this was not always the case. The majority of participants benefitted from working with a team and perceived that this dynamic was beneficial for their growth and development. While this was the case most of the participants felt that the observation process was anxiety provoking, some felt scrutinized and some felt that being observed affected their ability to focus on the family when conducting therapy.

It was found that all of the participants benefitted from their systemic family therapy training and have been able to incorporate their experiences into their current practice. Many of the participants reported that they are able to work systemically and consider the child's context when engaging in therapy. Some of the participants continue to engage in reflecting team practice, whilst others suggest that this model of training has taught them to hold role players in mind even though it is not practical, viable or possible to have them in the room. The majority of participants expressed their ability to work with parents and the positive impact that their training has had on this ability.

5.4. Discussion of the Findings

5.4.1. Perceptions of systemic intervention

In addressing the question, "What are educational psychologists' perceptions of working within the framework of systemic intervention"? Two significant sub-themes emerged. Mobilizing change when working with children and the challenges of systemic intervention arose. These sub-themes fell within the overarching main theme, perceptions of systemic intervention.

5.4.1.1. Mobilizing change when working with children

The most prominent sub-theme which emerged was the importance of considering the various social systems to mobilize change when working with children. This is in line with Gutkin (2012) who recognize that in order to mobilize change for children services need to include the systems in which the child is involved. These comments suggest that the participants perceived that working systemically when providing interventions for children is a necessity. This is in line with the call for a more systemic approach to working with children within the South African context as suggested by Swart and Pettipher (2013). This is also promising in

terms of the organization's aim of instilling certain underpinnings and values of working systemically when training intern educational psychologists (Head of Counselling).

If barriers that children are experiencing are seen as extrinsic to the child (Swart & Pettipher, 2013) and as a result of insufficient functioning of the various systems such as the family and school systems (Donald et al., 2014) the notion of working systemically to mobilize change is imperative. Gutkin (2012) suggests that individual therapy is useful but if the child is returning to the same dysfunctional system the work done in individual therapy is futile. The notion that was put forward which suggests that mobilizing change isn't possible if the system isn't changing is in line with Bronfenbrenner's Bio-ecological model (Bronfenbrenner & Ceci, 1994) which considers that one's development is either promoted or hindered by the multiple interacting systems in which they are engaged. This suggests that in order to bring about change, the child cannot be separated from the systems in which they are engaged as is suggested by most of the participants.

Whilst most of the research that considers systemic intervention recommends changing or challenging the system, one of the participants suggested that sometimes children need to be helped to function within the system. This is an interesting idea which suggests changing the child, rather than the system. Whilst this philosophy is not in line with a systemic world view it is important to consider this perception as it demonstrates how deeply entrenched world views are likely to impact knowingly or unknowingly on one's perceptions of systemic intervention. Nel (2006) found that this was common when interns moved from university based training which is focussed on a different worldview to that which is more systemic in nature which may have been the case for this participant.

The participants' positive feelings towards the necessity of working systemically are promising in light of the effectiveness of systemic interventions for both externalizing

disorders (Carr, 2014 and Sydow et al., 2013) and internalizing disorders (Carr, 2014; & Retzlaff et al., 2013). Research has also shown the effectiveness of systemic intervention within the context of deprived communities (Donovan, 2007; Williams & Greenleaf, 2012) such as those common within South Africa.

5.4.1.2. Challenges

All the participants with the exception of one identified challenges regarding working within a systemic framework. The most prominent challenge that emerged was that of being able to access the various systems. This is in line with Breunlin and Jacobsen (2014) who found that the nature of the 21st century family results in difficulty getting the whole family together since family time and getting a whole family together is a challenge in itself. Some of the concerns with being able to access the system were specific to the South African context such as varying worldviews amongst the different generations namely parent and child. This is supported by Kasiram and Oliphant (2014) who found that there are often times a generational gap which is problematic when wanting to involve families in the therapeutic process. They found this particularly problematic within the South African context when worldviews differ significantly between the various generations namely that of parents and children (Kasiram & Oliphant, 2014).

The results that emerged from the interviews demonstrate that educational psychologists who work in private practice found accessing systems more difficult than those who work within the school environment. This finding is interesting to consider in terms of where educational psychologists can mobilize the most effective change. Those who work in private practice expressed financial difficulties as well as time constraints which impacted on their access to the child's various systems such as school and peer groups. Whilst research has found that therapist tend to feel that working systemically is a strain on their time as well

as financial resources (Freunkel in Breunlin & Jacobsen, 2014) it is interesting to note how this differs according to one's work setting within the sample that was studied. This raises questions as to the type of setting in which educational psychologists can be most effective. In comparison, those who work within the school setting have found that access to peers, teachers and parents is fairly easy. In terms of financial viability, it should be noted that within a school system, educational psychologists are likely to be employed and paid monthly rather than per hour which may make the systemic model of intervention more viable for educational psychologists who work within a school setting.

It was found that some parents don't want to be a part of the therapeutic process for various reasons one of which is that they reportedly don't want to acknowledge their own difficulties. This is problematic in light of Bronfonbrenner's (1979) theoretical model of working with children which considers parents as paramount in serving as protective factors for children. One of the participants and her colleagues who work within a school setting have tried to overcome this barrier by developing parent as well as parent-child workshops to address common issues amongst their community. She believes that this may draw parents in without them having to directly acknowledge their difficulties which are impacting on their children. This intervention which is systemic in nature suggests how educational psychologists need to think creatively using systemic underpinnings in order to create change for children. This is in line with the organization's aims and aspirations when training educational psychologists. When the Head of Counselling was asked how she envisaged the training at the organization would prepare interns for the world of work she hoped that the training would help future psychologists to think creatively when working with parents. This demonstrates a positive link between the organizations aims and aspirations in training interns and the outcome of this type of training.

Findings of the study suggest that parents don't always want other systems to be aware that their child or family is experiencing difficulties and there is a reluctance to allow the therapist to work with the various systems. Research has found that often parents feel shame and guilt when their children are experiencing psychological difficulties (Rustin, 2009). This may impact on parents' willingness to engage with the various systems which may be why educational psychologists are experiencing this challenge. In addition according to one of the participants therapeutic intervention in the South African context is not common place amongst traditional, indigenous families. This may be impacting on educational psychologists' access to families and their willingness to involve systems outside of their own community. In addition the idea that educational psychologists often have trouble accessing their client's systems due to a language barrier is consistent with Kasiram and Oliphant (2014) who found that the language and cultural barriers which exist between therapist and families is problematic in providing effective interventions.

Another prominent challenge is that of people buying-in or investing in the process. These challenges seem to bring about a great deal of frustration for educational psychologists. This may have been the case as buy-in is a problem that seems to be perceived as being difficult to combat and appears to have created a certain amount if disillusionment amongst the participants with regards to implementing systemic intervention. The challenge of families buying in to the therapeutic process has been found to be problematic within other developing countries (Ariel et al., 2014). Alleviating the challenges which encompass "buy-in" seems particularly important to take cognisance of if systemic therapy is to be the intervention strategy of choice when working with children in the South African context.

Working with the whole family in the room aims to alleviate challenges regarding accessing the system as is the case with the reflecting team although participants highlighted certain challenges regarding buy-in which they experienced whilst working on the reflecting

team such as the difficulty that some members of the family have knowing that there is a whole team of people watching them from behind a one-way mirror. This is in line with Brownlee et al. (2009) who found that some members of the family feel threatened by having a whole team of people watching them which affects their engagement in the process.

The importance of needing the whole family's buy-in for family therapy to be successful was recognized. It was found that whilst some members of the family buy-in to the process others may not which is problematic for the process. The Head of Counselling made it clear that families are offered the reflecting team service; they are not obliged to receive this model of family therapy. This is aimed at alleviating the above challenges however these challenges do evidently still exist.

One participant directly stated that she found therapeutic boundaries challenging and she wondered whose therapist she would be if the family split. This challenge was however nuanced throughout the interviews. Research conducted by Vennum and Vennum (2013) found that boundaries were often blurred for therapists working systemically in terms of who their client was. This revealed itself on a number of occasions within the interviews in terms of therapists wanting to "treat" parents or teachers rather than the child when noticing where the child's problem was embedded.

The findings suggest that whilst the participants have a positive perception towards systemic family therapy and consider it to be essential when working with children, a number of significant challenges hinder the implementation of such within their work as an educational psychologist. It appears as if some of the challenges associated with working systemically are alleviated when educational psychologists work within a school setting as compared to those who work in private practice.

5.4.2. Systemic Family Therapy Training

Systemic family therapy training was the main theme that emerged when considering research question 2: What are educational psychology interns' experiences of working in a reflecting team when conducting family therapy? The sub-themes which emerged from the interviews include theoretical and practical training, supervision, working with a team and being observed.

5.4.2.1. Theoretical training

Tom Andersen's approach to training is that of a "training on the job" approach which consists of live counselling experiences (Andersen, 1987). In saying this, the research found that most of the interns desired a more in-depth theoretical understanding of the approach that they were required to use and it was felt that the reflecting team discussion was more about the case than techniques to help the developing therapist. This resonates with Reichelt and Skjerve (2013) who discovered that trainee psychologists found the reflecting team process to be more concerned with the family's story as opposed to using the process to develop the trainee's skills in family therapy and felt forgotten in the reflecting team process.

Whilst most of the participants felt that there was a lack of theoretical training it is interesting to note that a distinctive part of Tom Andersen's method (1987) is training interns and developing their counselling skills using what he terms live supervision. This practical approach is part of the theoretical model. None of the past interns appeared to be aware of this. It would be interesting to discover if there would be a shift in a desire to have the theoretical understanding beforehand if this methodology, its benefits and potential short-comings were discussed with the interns as a part of their training.

5.4.2.2. Practical Training

All the participants acknowledged the practical nature of their systemic reflecting team training, particularly referring to their internship year. Whilst some participants were content with the practical training, others were left found wanting for more. Most of the interns felt that they benefitted from watching other more experienced therapists which is supported by research conducted by Andersen, (1987), Chang (2010), Falke et al., (2015) and Hawley, (2006).

Some of the team members reported that they would have liked more training and that their exposure to families was limited. It was also found that participants would have appreciated more opportunities for skills development. Research has shown that, whilst there is an assumption that the reflecting team process creates room for trainee psychologists to develop as therapists some trainee therapists have expressed a desire for supervisors to take on a more directive teaching approach whilst they are novices in the field (Reichelt & Skjerve, 2013). They suggest extending the reflecting process to include skills development for novices (Reichelt & Skjerve, 2013) which was also suggested by one of the participants.

5.4.2.3. Supervision

Much of the literature regarding the reflecting team encompasses creating a supportive and nurturing environment for the family. It is encouraging to discover that the team has a similar effect on the trainee interns which is likely to have a positive effect of their growth and development as educational psychologists. Not all the interns had the same supportive and encouraging experience. It appeared as if the participants' experiences were dependent on their relationship with their team and supervisor. Recent research has shown that supervisees find support from supervisors to be imperative in their growth and development and they appreciate a high level of support from supervisors during their training (Morgan & Sprenkle

in Becvar & Becvar, 2013; Nel, 2006). The dynamic of the supervisee, supervisor relationship is therefore likely to impact on the supervisees training experiences.

Having supervision based on what had been seen taking place live was particularly meaningful to one of the participants. This finding coincides with 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 which creates for a more authentic learning experience.

5.4.2.4. Working with a Team

The results portrayed reflect the participants' positive attitude towards working with a team. Their comments were encompassed by positively nuanced conversations which reflect their appreciation and the value that they found in working with and learning from a team. It was found that most of the participants benefitted from the insights and expertise of the various team members. In addition it was found that the participants as well as the Head of Counselling valued the multiple viewpoints expressed by the various team members. This finding is compatible with one of the main underpinnings of the reflecting team model which suggests that the same phenomena or problem can be defined and understood in a number of different ways and the nature of the reflecting team is in a position to offer multiple perspectives based on their life experience and professional expertise (Andersen, 1987). Research conducted by O'Connor et al. (2004) and Sparks et al. (2011) found that clients value being offered multiple perspectives from the reflecting team. More recent research has found that trainee therapists also value multi-perspective contributions (Falke et al., 2015). This is consistent with findings from this study.

It was found that an additional benefit of working on a team was that the team is able to help you think and process information by talking about the case. This is supported by research conducted by Shurts et al. (2006) who concluded that trainee therapists appreciated

being able to process the session out loud amongst the reflecting team rather than merely introspectively.

5.4.2.5. Being observed

The nature of the reflecting team requires that the therapist working with the family is observed. Whilst most of the participants valued the learning experiences which emerged from working with a team, a particularly trying and anxiety provoking element of this type of training was that of having to be observed. The Head of Counselling acknowledges that the process can be daunting at first but she doesn't believe that the team is judgemental and hopes that the interns don't feel judged. However the results show that this wasn't always the perception amongst the participants. These results are contrary to Andersen (1987) who believes that the reflecting team as a mode for supervision is advantageous in that it allows students to feel less vulnerable when conducting therapy. Some of the research conducted is congruent with Andersen's beliefs (Chang, 2010 and Zevallos & Chong, 2007) however these findings are more in line with Falke et al. (2015) and Meekums et al. (2016) who found that interns experience a significant amount of anxiety when being observed.

The finding which suggests that one feels performance pressure by having so many people watching you is consistent with Meekums et al. (2016) who found that the reflecting team seems to exacerbate performance pressure and hinder learning. This is in line with the findings of the study however an additional dynamic is added in this study which needs to be considered. The study found that being observed extracts from the therapist's ability to be with the client. If the family is not receiving the intern's full attention this dynamic requires further exploration. Since the study found that one's focus is on being watched rather than being with the family the dynamic which exists between the therapist, the family and the team is called into question. Previous research has found difficulty with this dynamic in terms

of supervisors managing both clients' and supervisee's needs (Falke et al., 2015). In addition it has been found that students find it difficult to pay attention to the family and the reflecting team simultaneously (Harrawood et al., 2011). This study found this dynamic to be challenging. The concern here however is how one's ability to be with the family is being compromised by the anxiety experience when being watched by the reflecting team.

Whilst these feelings of anxiety and vulnerability are not the intention of Tom Andersen's theory or the organizations method of training it appears as if some of the interns experienced a significant amount of anxiety during their training on the reflecting team. Although the supervisee/supervisor dynamic is aimed to be one of a collaborative non-threatening nature (Andersen, 1987, Anderson, 2007b, & Tuerk et al., 2012) research has shown that supervisee's find it difficult to work within the naturally occurring power dynamic which exists between supervisee and supervisor (Falke et al., 2015). If this is the case it is likely that being directly observed by a person or a team who are perceived as being more knowledgeable and experienced can lead to varying amounts of anxiety for the trainees as was the case with the participants.

5.4.3. Current Practice

Four subthemes emerged when exploring research Question 3 which looked at the extent to which the experiences of working on a systemic reflecting team were perceived as having influenced the educational psychologists' current practice. The subthemes which emerged included, working with systems or context, the reflecting team, holding role players in mind and working with parents. These were grouped within the main theme, current practice.

5.4.3.1. Systemic and Contextual Considerations

Becvar and Becvar (2013) state that the major goal of training and supervision in family therapy is learning to think systemically. The organization in which the current study was conducted aims to achieve this goal through their training and supervision of interns. It is therefore promising to find that for some of the participants working with systems has become central to their work as educational psychologists. The idea that participants struggle with the idea of having to send the individuals that they work with back into troubled systems and the awareness that often times barriers that children are experiencing are linked to systemic or contextual barriers rather than being intrinsic to the child seems to be linked to reducing the vicious cycle effect described by Rayburn et al. (2016). Many of the participants expressed a desire to modify or work with the system in order to create change for the child within their own work as educational psychologists.

This demonstrates how the participants are engaging with second order cybernetics which is fundamental to postmodern family therapy in terms of understanding individuals from within their system or context (Becvar & Becvar, 2016). Considering the growing amount of evidence supporting the positive long-term effects of systemic therapy for both internalizing and externalizing disorders (Carr, 2014, Crane & Christenson, 2012, Retzlaff et al., 2013; Sydow et al., 2013) the results demonstrating the participants' use of systemic principles within their current practice is encouraging.

For one of the participants learning to identify strengths within a child's system and use this to enhance their psychological well-being seems to coincide with traditional African values which affirm the strength of the family system rather than isolate the individual in times of need (Kasiram & Oliphant, 2014). Educational psychologists working within the South African context who value and understand fundamental principles of the community

which they serve such as the strength of the family system are likely to be able to engage with their clients in a sincere and meaningful way.

The findings of this study indicate that the participants have carried through a fundamental principle of their training which is to consider one's context into their practice. This indicates the importance of sound systemic training in preparing educational psychologists in working with children.

5.4.3.2. The reflecting team

Three of the participants have worked within a reflecting team beyond their internship training regardless of the logistical challenges. This suggests the positive impact of their training and the reflecting team process. Some of the key aspects highlighted by the participants as beneficial when working in a reflecting team include the value of multiple perspectives or multiple minds in working with family dynamics, support for each other, the conversational aspect of the reflecting team as well as transparency and respect for clients.

The benefits of offering clients multiple perspectives is highlighted by O'Connor et al. (2004) who found that clients value being offered multiple perspectives. In addition Sparks et al. (2011) found that when team members are respected for their individual attributes, conversations can take place, where different perspectives are heard, without having to strip the individuals of their own voices or perspectives. This links with one of the participants valuing of the conversational aspect of this type of therapy which she encountered in her training and when using the reflecting team in her own practice. This is important since Andersen (1987) believed that the role of the reflecting team was to open up conversations between families and the therapist. In addition Andersen (1987) emphasised the conversational aspect brought about through the reflecting team rather than the size of the team. This was found to be true since this reflecting team which this participant engaged in in

her own practice was only two people and she felt the powerful impact of the conversational aspect of the reflecting team process. This also suggests the flexible nature of the team structure which coincides with Donovan (2007) who found that creativity and flexibility in the team structure allows for the reflecting process to be applied in various contexts. Rankin (2007) suggests that in South Africa where context varies so greatly and resources are unevenly distributed therapy can often occur in unusual or informal settings. The idea that this approach can be adapted and used creatively is promising when considering the diverse nature and needs of South African communities.

The study suggested that the supportive nature of the reflecting team family therapy model was important. Underlying philosophies pertinent to the reflecting team such us collaboration and respect for clients are likely to create an environment where clients feel understood and supported as suggested by Brownlee et al. (2009), who found that the collaborative environment created by the reflecting team enhances the clients' feelings of respect and being understood as opposed to being pathologized. This is important within the South African context where the consideration and integration of pathology may not be common in one's worldview.

Tom Andersen (1987) believed in transparency and thus introduced the practice of reflecting in front of the family. One of the participants found that this was a positive experience for the family and thus finds this meaningful in her practice. She often uses this approach when working with an individual child, in that she brings parents in so that she can have a conversation with them and the child is given an opportunity to reflect on what has been discussed or vice versa.

The participant who initiated the reflecting team process within her own practice found that even though she was able to engaged in positive and meaningful therapeutic experiences by

using the reflecting team in her practice, the logistical and financial implications required in conducting this type of therapy hindered the practice to such a degree that she wasn't able to continue with it. Research has found a number of logistical and financial implications with the reflecting team model which hinder its implementation. Brownlee et al. (2009) and Falke et al. (2015) found that the reflecting team is costly because of the resource rich nature of the team since multiple members are assigned to particular families which can be problematic when human resources are limited. The above participant explained that her use of the reflecting team became financially unviable since the money paid by the client for the session would need to be split between her and her partner.

The research highlighted the difficulty in finding a suitable time slot to gather a whole family together. This is in line with research conducted by Breunlin and Jacobsen (2014) who suggest that the nature of the 21st century family results in difficulty getting everyone together since family time is rare in general. The research extends this idea further in that it was found getting the whole family together challenging because small children are too tired to come to therapy at night and the parents are working and unavailable during the daytime.

The Head of Counselling acknowledges the luxury that it has in being able to offer the reflecting team and she acknowledges the time, resource and financial difficulties in providing this service. The therapists who are using the reflecting team model either volunteer their time or work for the organization. It may be useful to link the idea of working for an organization such as the one where the participants train to that of working for a school where staff are mostly paid according to a monthly salary rather than by the hour or per client. Here it may be possible that resources can be distributed more effectively without the financial constraints in order to offer a reflecting team therapy experience to families.

5.4.3.3. Holding Role-Players in Mind

Findings suggest that the reflecting team is not financially viable when working in private practice. While this is the case it was found that reflecting team training has resulted in the participants using their training to hold role players in mind when working with individuals.

The Head of Counselling expressed that one of her goals in providing internship training is that of "holding role players in mind". Whilst she acknowledges the difficulties associated with using the reflecting team in practice she hoped that educational psychologists training on the reflecting team will allow them to consider the various role players in a child's life. She mentions the children's parents, teachers, peers and families. Most of the participants expressed concern that the reflecting team is not a practical way of practicing due to various reasons such as the resource rich nature of the reflecting team, financial and time constraints. It is however valuable to understand how and if educational psychologists are able to use their family therapy training in their own practice. It is encouraging to see the effect that this training has had especially since holding role players in mind links directly with considering one's context and the systems within which they function by being able to think beyond the individual in the therapy room. Whilst not all the participants profess to be using the reflecting team as such, the idea of holding role players in mind when conducting therapy and developing interventions is hopeful. This is especially significant in a society such as South Africa which is experiencing significant systemic challenges (Donald et al., 2014; Prinsloo, 2013; & Swart; Pettipher, 2013).

5.4.3.4. Working with parents

One of the major factors which promote or hinder a child's development is their social support structure which is primarily provided by parents or caregivers. As previously mentioned children are not separate from their system and in order to mobilize change

systemic intervention is perceived by the participants as being a prerequisite for working with children. According to Rustin (2009) evidence show that working with parents is important when working with children and that therapists who work with children need to be able to work with parents. Rustin (2009) suggests that this will have implications for the training of child psychotherapists since they will need to become competent in parent and family work to effect change for the child. The organization provides this opportunity for intern educational psychologists.

It therefore appears hopeful that some of the participants found that their experience as an intern training in systemic therapy has prepared them to work with parents, an essential part of a child's therapeutic process. Two of the participants have branched out into filial therapy. One of these participants has realised through her training and experience that relationships are often problematic in one's psychological well-being and her working with filial therapy has allowed her to address some of the relational challenges which are being experienced by her clients. This speaks to traditional indigenous healing in South Africa which believes that ill health is due to relational issues (Ivey, 2013). The other participant who has become involved in filial therapy now works with families and relationships This is encouraging since filial therapy has demonstrated numerous positive effects (Landreth & Bratton, 2006) and relational well-being in central to many South African's worldview.

Another participant has had many experiences where she perceived the child's problem as being as a result of the family system or parent pathology. She stated that knowing that the children were not the problem and being unable to access the system was discouraging for her. This particular educational psychologist focusses primarily on family and parent child therapy at present which she believes has enabled her to overcome this challenge.

Finally, an additional participant has begun to develop parent interventions within the school setting where she works since she believes that involving parents in their children's emotional well-being is vital. She credits this perspective to both her experience and her training at the organization.

5.5. Conclusion

Three questions were posed in this study which explored educational psychologists' perceptions of systemic intervention, their experiences of training within this model and the impact that their experience has had on their current practice. The results showed that the intern educational psychologists who were interviewed had predominantly positive perceptions of systemic therapy and considered it imperative to mobilizing change when working with children. Whilst this was the case, significant challenges were noted with regard to implementation of systemic intervention. Some of these challenges such as accessing the various systems were less problematic for those working within a school system as opposed to those working in private practice.

The intern educational psychologists found that training amongst a team of other therapists was highly beneficial and an advantageous system to help them grow and develop as psychologists. In saying this most of the interns felt vulnerable and anxious when being watched and some felt that this had a negative impact on their ability to be with the family in the therapy room.

Ultimately the interns appeared to perceive their training experience in a positive light and this seems to reflect in their current practice. All the interns appear to consider the child's context when engaging in therapy with them and whilst not always able to access relevant systems, they are able to keep these in mind and consider the various interacting systems. It is important to note that those therapists who work within a school system seem able to access

various systems more easily than those who work in private practice. Whilst 3 of the participants continued with work using a reflecting team after their internship this only seemed viable when volunteering ones time or working within the structure of the organization.

Interesting results emerged in that many of the educational psychologists believe that they are able to keep various role players in mind when conducting therapy. This is relevant since the 'systems' such as the family, peer group or school realistically are not able to come to the therapy room. It is evident that the educational psychologists in practice valued their experiences of working with adults and find it hugely valuable in their current practice, since much of their work is in fact with parents.

Although three separate research questions were asked, there appears to be a link between the three. It appears as if educational psychologists who have trained in systemic family therapy have a generally positive attitude towards systemic intervention, benefitted from systemic training regardless of some of them desiring more intensive or further training in this method and they are incorporating their training into their own practice in one way or another.

The concluding chapter which is to follow will summarise the research study and the findings, highlight the implications of the findings and discuss the limitations of the study as well as recommendations for future research.

Chapter 6: Conclusion

6.1. Introduction

Chapter 6 will conclude the research report by summarizing the research study and the findings thereof. Implications of the findings will be discussed as well as the limitations of the study and recommendations for future research.

6.2. Summary of the Research Study and Findings

A qualitative, descriptive exploratory study was used in order to explore the perceptions and experiences of educational psychologists who have experienced working on a systemic reflecting team. The exploration aimed to focus on the educational psychologists' perceptions of working within the framework of systemic intervention. The educational psychologists' experiences of working in a systemic reflecting team were also explored. In addition, the extent to which working on a systemic reflecting team is perceived as having influenced their current practice was explored.

The research study found that the educational psychologists had positive perceptions of systemic interventions in terms of mobilizing change for children; however they recognized a number of challenges in the implementation of systemic interventions such as buy-in from relevant stakeholders as well as accessing the various systems. Some of the challenges were pertinent to the South African context which included working with people who have varying worldviews with regards to psychological intervention, language barriers, financial constraints and transport difficulties. Those working within the school environment appeared to be less affected by the challenges that were experienced by the educational psychologists in private practice.

Working in a systemic reflecting team was perceived as being positive in terms of being able to learn from other more experienced members of the team as well as having access to multiple ideas and thoughts from the various team members.

Less positive perceptions included the experiences of anxiety that being observed whilst conducting family therapy invoked. The participants also experienced a lack of theoretical understanding in terms of the systemic reflecting team process which they experienced as being problematic. In addition there was evidence that the participants would have liked to have had more practical experiences in working with families.

The participants perceive that their systemic reflecting team training has influenced their current practice in a number of ways. These include the ability to consider the child's context, being able to hold various role players in mind when working with the individual child, the ability to work with parents or to think creatively in terms of including parents in interventions for children. Even though it was found that using the reflecting team model outside of the participants' internship training is challenging, some of the participants still engage in this model either as a volunteer or as a part of their current practice.

6.3. Implications of the Study

Many children living within the South African context experience difficulties which are systemic in nature. It was found that if the system isn't changing individual change is difficult to achieve. The strong belief that the participants have regarding the importance of engaging in systemic intervention to mobilize change when working with children suggests the importance of sound theoretical and practical training in terms of systemic intervention both at universities as well as at internship sites.

It seems important that the training programmes for educational psychologists at South African universities help students to develop an understanding of the theoretical basis and underpinnings of a systemic worldview and effective models of systemic intervention. Whilst university programmes have become more focussed on engaging with a systemic worldview the findings suggest that this can be further enhanced.

The reflecting team was perceived as being a beneficial way of engaging in practical learning with regards to systemic intervention. This was found to be effective in terms of learning from the multiple viewpoints and experiences of the various team members. This implies that the training on a systemic reflecting team is a useful way of providing practical experience to developing educational psychologists. This experience could however be enhanced by incorporating in-depth theoretical training at the internship site since the participants felt that they would have liked a more solid foundation in the theoretical aspects of systemic intervention, more specifically the reflecting team model in this instance.

A number of challenges were found to have an impact on the participants' ability to implement systemic interventions. One of the findings suggests that those participants who work within a school setting are less affected by these challenges. This has implications of a practical nature in terms of where educational psychologists can be most effective and generate the most change. Those in private practice seem to be more isolated and less able to access the various systems whilst those working within the school system have easier access to teachers, peers and parents. Those in private practice also expressed financial constraints when working systemically such as having to travel to and from the various systems such as the child's school. This affected their willingness to access the various systems. This also implies that those educational psychologists situated within an environment where they are able to access the various systems more easily will allow them to use their time and financial resources more effectively.

Buy-in was considered to be problematic in terms of varying worldviews and attitudes towards psychological intervention. This implies the importance of mental health awareness. It may be beneficial for educational psychologists to be trained in developing mental health awareness campaigns in order to improve the various stakeholders' willingness to engage in the therapeutic process.

The findings suggest that working in a systemic reflecting team developed the participants' ability to hold multiple role-players in mind when working with the individual. This implies that even though it is difficult to gather a whole family in the therapy room especially within the South African context where families may be separated for various reasons training on a systemic reflecting team is useful in developing the educational psychologists' ability to consider the child's context.

Even though participants found that replicating the reflecting team in their own practice is challenging, the findings suggest that training on a systemic reflecting team has had a number of positive effects on the educational psychologists' current practice. This implies that it would be beneficial to consider the reflecting team model as a method of training educational psychologist within the context of South Africa.

Many of the difficulties experienced by educational psychologists with regard to working within a systemic framework concern the educational psychologists' ability to access the various systems. Systemic intervention makes the assumption that the various systems can be accessed. This implies the need for systems based research to carefully consider the South African context in order to provide effective systemic intervention where access to the family system is challenging. Some of the contextual issues which need to be considered in terms of systemic intervention include the family's' worldview and willingness to engage in western therapeutic practices. The knowledge of various family compositions

indicative of the South African context such as single parent homes, extended intergenerational homes as well as child-headed homes also needs to be considered in terms of who will be involved in family therapy if the family does not consist of a nuclear family composition. Furthermore theoretical implications on systemic family therapy in terms of socio-economic barriers need to be considered. Families may be experiencing socio-economic barriers which hinder their ability to engage in systemic family interventions such as finances and transport.

The resource rich nature of the reflecting team was found to be problematic in terms of its implementation. Whilst the idea of the reflecting team has shown to be beneficial on a number of levels the model would need to be adapted in terms of providing this type of family therapy within the South African context where both human and physical resources are limited. This suggests modifying this model of intervention in order to suit the needs of the South African context.

6.4. Limitations of the study

Although the sample size was adequate for the study since saturation was reached, transferability of the study poses as a limitation. The sample consisted of participants who all engaged in their reflecting team experience at the same organization and had a very specific experience of systemic intervention based on the reflecting team model. This suggests that the results that emerged regarding systemic intervention may not be generalizable to the larger population in different contexts.

The population being studied was reflective of the general educational psychologist population in terms of the participants all being woman, however all except one of the participants were white woman. In addition, the participants were all trained in two universities in Gauteng which means that the results may not be reflective of the views of

educational psychologists trained at other universities in South Africa. This poses a limitation on the study since the sample is not representative of the general South African population. A sample which was more reflective of the general South African population may have elicited a different set of results.

All the participants engaged in their internship training at the same organization, which suggests that the views expressed by the participants may not be representative of educational psychologists who were trained at alternative internship sites.

Another possible limitation of the research is the subjective nature of qualitative research. Whilst the researcher engaged in reflexivity throughout the research process complete objectivity in this type of research is unattainable (Ormston et al., 2014).

Ritchie et al. (2014) describe validity as the "precision" of the research findings. This may have posed as a limitation to the study in that there was a time delay of varying degrees between the participants' internship year and their account of their experiences. This may have had an effect on their memory and ability to recall their experiences which could have affected the accuracy of the results.

It is possible that the participants were cautious about what they said during the interview due to the nature of their relationship with either the organization or the university at which they studied. On a few occasions the participants sought assurance that they will remain anonymous. This may have influenced the information that was gathered.

6.5. Recommendations for Future Research

Systemic reflecting team research is of interest to educational psychologists in terms of its efficacy within the school system. A pilot study in which a reflecting team is introduced into the school system may provide useful insight into its expediency.

Action research which investigates the reflecting team process in action is likely to be able to develop a rich understanding of in the moment experiences of the reflecting team. Furthermore this can help develop insight into team and supervision dynamics which may be able to contribute to understanding the nature of the anxiety that interns experience when being watched. If this dynamic is better understood, it may be able to be alleviated.

The organization acknowledges the shortfall in their theoretical training regarding the reflecting team process. It may be beneficial to train a group of interns in the theoretical underpinnings of the reflecting team and then conduct similar research to ascertain if having a sound theoretical base influences the current research in any way.

Considering the perceived importance of systemic intervention when working with children, conducting a study which compares perceptions of educational psychologists who have engaged in a systemic based internship with those whose internship focusses on a more individualistic approach may be useful for future training.

The reflecting team model represents one approach to family therapy. Similar studies which engage with educational psychologists who have had experience in other models of family therapy may be able to enrich the findings of this study.

6.6. Conclusion

The final chapter of the research summarized the research study and the findings thereof. The findings highlighted the educational psychologists' positive perceptions towards systemic intervention as well as the challenges experienced regarding the implementation of a systemic model of intervention within the South African context. The educational psychologists recognise and value the contribution that their internship training has had in terms of their current practice. Some less desirable findings also emerged which highlight the anxiety that

some of the educational psychologists experienced when working in a reflecting team. Practical challenges in terms of implementation of the reflecting team model were also noteworthy. Practical as well as theoretical implications of the study were explored. Practical implications were suggested in terms of the nature of the academic and practical training of educational psychologists. The challenges which the educational psychologists faced in terms of being able to access the various systems were explored. This brought about the consideration of where educational psychologists should be placed in order to for easier accessibility to the child's systems. The necessity for mental health awareness was also brought to the fore. In addition the adaptable nature of the reflecting team model implies a potential usefulness in terms of the South African context where environmental factors as well as family dynamics and family structure play a significant role.

Theoretical considerations include how family therapy can be adapted to address the needs and challenges specific to the South African context. This requires a critical understanding of the South African family structure and an understanding and consideration of diverse family structures which go beyond the nuclear family to include single parent, child-headed and intergenerational families and how best to apply family therapy.

In conclusion, educational psychologists perceive working systemically as being crucial to therapeutic work with children. The significant contribution that working systemically with children has on mobilizing change as well as the educational psychologists' perceptions of theoretical and practical training suggests a stronger focus on preparing educational psychology students in this domain. Whilst accessing the various systems proved challenging for educational psychologists, the benefits of systemic intervention should not be foregone due to this challenge. Family therapy is a way of engaging families in a systemic way. The reflecting team model of family therapy is one way of accessing the family system as well as useful in training therapists in terms of thinking systemically. The dynamic and

challenging contextual nature of South African families suggest that a model of family therapy which meets these specific needs would be beneficial. The flexible nature of the reflecting team is likely to be a useful starting point when considering a model adaptable to the South African context.

"Alone we can do so little, together we can do so much" – Helen Keller

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