

An Exploration of How Mothers Who Experience The Journey of Becoming a
Psychotherapist Relate to Their Children During the Process.

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Abstract

Findings are presented for a qualitative IPA study that explored how mothers who experienced the journey of becoming a psychotherapist related to their children during the process. Three trainee therapists in the final years of training were interviewed. They reported being positively impacted by the training and the self-understanding that comes with the experiential learning. The challenges of training as a psychotherapist whilst being a mother were explored. Personal emotional experiences were shared in relation to the concept of “change” and “self-awareness” and how this impacted on family life. All participants attend therapy as part of the training and reported it to be a key part of transformative learning. Fostering critical reflection allows adult learners to tap into their rich life experiences as a basis of growth and life-long learning. Personal therapy and client work offered the opportunity to examine and identify the assumptions and common-sense beliefs that underlie our thoughts and actions.

A heightened sensitivity to issues around babyhood, pregnancy, maternal feelings and parenting were explored in the context of studying psychotherapy as a mother. Additional stressors like the practicalities of managing and juggling family life around the training was explored, however it was also acknowledged that all trainees whether mothers or not have commitments outside the training. The personal growth experienced by the participants was varied, including a more relaxed perspective and greater awareness of self. All participants had a sense that they were moving forward with greater wisdom about themselves which allowed for a freedom to relate to their children in a more open manner. A greater appreciation of the profound impact of words was attributed to the training and this had a positive impact on family relating.

Chapter 1: Introduction

1.1 Introduction

This research study asks the question, “How do mothers who experience the journey of becoming a therapist relate to their children during the process?” This study will explore how being a mother can impact on how a trainee makes sense of the training process.

It aims to demonstrate the transformative aspect of becoming a psychotherapist and how this may impact on the trainee and also the family of the trainee.

A defining condition of being human is our urgent need to understand and order the meaning of our experience, to integrate it with what we know to avoid the threat of chaos (Mezirow, 2000). We make meaning with different dimensions of awareness and understanding and in the process of becoming a therapist, there is potential for great change. Confronted with personal therapy, process group work, experiential learning and client work, the trainee has the opportunity to re-examine belief systems and question previously held assumptions. Interpretations and opinions that may have worked for the trainee prior to the training may not do so anymore. The ethos of therapy training courses is one of self-questioning and self-monitoring and this leads the trainee to the kind of change that can impact on future decisions and ways of relating to self and others.

Transformative learning, especially when it involves subjective reframing, is often an intensely threatening emotional experience (Mezirow, 2000, p.6). An adult who chooses to train as a psychotherapist will find it difficult not to reflect on the validity of their previously held assumptions. This study aims to get a sense of that emotional reflective experience and how it may impact on the trainees’ sense of position in a parental role.

The justification for much of what we know and believe, our values and our feelings, depends on the context-biographical, historical, and cultural-in which they are embedded (Mezirow, 1991). As a way of coping with a world that is changing at an ever-accelerating rate and in a world of no fixed truths, Mezirow provides us with a profound insight. We must, he says, develop the capacity to reflect critically on the lenses we use to filter, engage, and interpret the world. When our old ways of meaning-making no longer suffice, it behoves us to engage with others in reflective discourse, assessing the assumptions and premises that guide our

ways of constructing knowledge and revising those deemed inadequate (Belenky and Stanton, 2000).

The central idea is that we are all active constructors of knowledge who can become responsible for the procedures and assumptions that shape the way we make meaning out of our experiences. Contemporary research identifies the role of parent and therapist as being similar in several ways.

Winnicott, for example conceded that therapists need to maintain an attitude akin to primary preoccupation: “An analyst has to display all the patience and tolerance and reliability of a mother devoted to her infant; has to recognise the patient’s wishes as needs” (Winnicott, 1949/75, p.202). This researcher is curious about “empathic attunement” in both the therapeutic alliance and in the parent–child relationship.

“There is no such thing as a baby”, asserts Winnicott strikingly, as where there is a baby, there is always a caring adult (Winnicott, 1952a). He is pointing out the absolute sociability of human beings; the individual emerges, always incompletely, from a matrix of communality which is also held within the self (Gomez, 1997, p.87). Winnicott’s self becomes a personal self through the protective care of the “good-enough mother”. Through her initial close identification with her baby, which he termed “primary maternal preoccupation”, she fosters an illusion of oneness with her baby which makes him feel secure and even omnipotent (Gomez, 1997, p.87).

At its most basic level, psychotherapy is an interpersonal learning environment similar in many ways to proper parenting. In both we tend to learn best when supported by a nurturing relationship with an empathic other, while being encouraged to confront life’s challenges (Cozolino, 2004, p.31).

It is significant that the process of psychotherapy and of parenting is described by Cozolino as similar in this very basic way. The nurturing learning environments are very important for healthy growth for children and for clients too. It is interesting therefore to contemplate how a parent or specifically for the purpose of this research, a mother may experience training as a therapist.

This research therefore, offers the reader, an insight of how change, and new perspectives may emerge in the training and how they may impact on the person of the therapist and by extension of this, on the family system also. It aims to highlight how therapy training can

enhance family relationships. It may also offer further understanding of the transformative learning process involved in becoming a therapist.

1.2 Research Aims

The specific aims of this research are to:

- Explore the impact of training on female therapists who have children.
- Investigate how the trainee may experience being a parent during the process.
- Identify any changes in the parent –child relationship that may be attributed to the training.

This research aims to explore and examine in depth how mothers who experience the journey of becoming a therapist relate to themselves and their children during the process. This study aims to highlight the transformative reflective experience of critical thinking and how it may impact on the trainee.

1.3 Context of the study

Ideally, training cultivates one's personal and relational qualities, such as emotional maturity, empathic attunement, and the ability to internally manage one's own difficulties during an interpersonal encounter (Fauth, Gates, Vinca, & Boles, 2007). The family home is a place of many daily interpersonal encounters and the trainee therapist may feel challenged or emotional in this sphere during the changing process of becoming a therapist. This study aims to explore the lived experience of trainees who are undergoing changes as part of their training.

1.4 Structure of the study

The study is divided into six Chapters. Chapter two is a Literature Review which explores the literature published on the topic. Chapter three explains the Methodology used for this qualitative study which includes the methods for collecting and analysing of data. Chapter four will present the findings of the data analysis with carefully chosen extracts taken from

the transcribed recordings of the semi-structured interviews. Chapter five presents a discussion in relation to the findings of the research and how they apply to the literature. Chapter six considers recommendations for further research in the area and highlights the limitations of this research.

1.5 Conclusion

The aim of this study is to explore how mothers who experience the journey of becoming a therapist relate to their children during the process. This study aims to explore how being a mother can impact on how a trainee makes sense of the training process. The study will aim to provide a descriptive window into the private perceptions of mothers training as psychotherapists. It aims to demonstrate the transformative aspect of becoming a psychotherapist and how this may impact on the trainee and also the family of the trainee.

Chapter 2: Literature Review

2.1 Introduction

This Chapter will review the very limited literature available in relation to this research topic at this time. There is a significant gap in the literature on the subjective experiences of trainee psychotherapists. It is hypothesised that this particular research study will encourage more research in the wider area of subjective trainee experiences.

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A Review of the Literature is discussed under the following headings:

2.2 Experiences of therapists in training

2.3 Self- Growth in the Private Sphere

2.4 Perceptions of therapists as parents

2.5 The challenge of being a therapist and a parent

2.6 The “lived” experience of the trainee therapist

2.7 Conclusion

2.2 Experiences of Therapists in training

Graduate training in psychotherapy is a challenging and rewarding undertaking. The practice of training and learning psychotherapy skills requires a very personal and professional engagement. Knowing more about student’s experiences in their training process could help evade problems such as incompetence, impairment, burnout, or disillusionment (Orlinsky &

Rønnestad, 2005). Little research has explored the internal reactions that students experience as trainee therapists, even though these early experiences are understood to provide the foundation of subsequent learning. Several authors state that the theory and research on training novice therapists is fairly outdated (Hill & Lent, 2006).

Other authors observe psychotherapy training as an area of renewed interest (Hilsenroth, Defife, Blagys, & Ackerman, 2006). It is evident that while the topic of training has received more attention than any other therapist variable (Beutler et al., 2004), there is a significant gap in the literature exploring the subjective experiences of psychotherapy trainees.

2.3 Self- Growth in the Private Sphere

A recent study by Pascual-Leone, Wolf and O' Connor (2012) was undertaken to explore what students considered to be the personal and professional impact of an experientially based psychotherapy training course on their lives. After completing what was an introductory course, 24 senior undergraduate psychology students provided personal narratives of their experiences, which were then subjected to a grounded theory analysis. Interestingly, the findings revealed that over the semester of training, students perceived multiple changes on both a professional level (i.e. skill acquisition and learning related to the therapeutic process) and on a personal level (i.e., self- growth in a more private sphere). It emerged that an introductory psychotherapy course influenced students' lives in a number of ways that relate to both professional and self-development. By identifying and describing how these changes were generalised, the study has provided some perspective of how students actually begin to change as persons, in the process of becoming psychotherapists.

2.4 Perceptions of psychotherapists as parents

Interestingly, Kohut (1977) thirty seven years ago had the occasion to analyse many adults who, as children of psychotherapists, had been negatively impacted by their parents' tendency to overanalyse and interpret their behaviours. He states that the "pathogenic effect of the parental behaviour lay in the fact that the parent's participation in their children's life, their claim-often correctly made-that they knew more about what their children were thinking, wishing, feeling than the children themselves, tended to interfere with the consolidation of the self of these children" (p.146-147). The unwelcome intrusion in the

child's life in this manner was inappropriate and hindered the child's own self-awareness process. As Kohut points out, these "children became secretive and walled themselves off from being penetrated by the parental insights" (p.147). Consequently, the relationship between therapist and child became more distant. Conversely, other studies appear more positive about the experience of parenting whilst practicing as a therapist.

A tendency to become more open, thoughtful, confident, and patient as a result of a career in psychotherapy cannot help but improve the therapist's parenting skills (Guy, 1987). It seems that psychotherapists believe this to be true of themselves. For example, 71% of those surveyed in one study indicated that they felt that their clinical practice had a positive impact on relationships with their children (Guy, Stark, & Poelstra, 1987). It might be assumed that some home environments are characterised by many of the same qualities that psychotherapists attempt to provide for their clients, such as empathy, genuineness and positive regard. If this is true, certainly the children will benefit from being raised in such an environment (Rogers, 1980). Golden and Farber (1998) in their small study on whether it is indeed good for children to have a therapist as a parent discovered that being a therapist is good for one's children as long as one's professional skills are not applied indiscriminately. Theory and research in conjunction with the results of a small scale study (n=20), suggest that children harbour both positive and negative feelings and dislike their parent's tendency to act like a therapist at home.

Karter (2002) discloses in his book on training as a therapist that his youngest son was unsettled during his father's training. He was in his early teens when his father began his training and the teen-ager needed time to adjust to it. His teenage search for a sense of self was not helped by his perceptions of his father as a "thought police-man". Teenagers are notoriously secretive and the thought of a parent suddenly developing an ability to "see inside their head" can be scary for them. "I remember him saying to me, "dad, when you become a psychotherapist, or whatever it is you're going to become, will you talk all posh and wear a monocle?" Clearly he had interjected a mental picture of a certain Sigmund Freud!"(Karter, 2002, p.35-36).

2.5 The challenge of the dual role of therapist and parent for the family

The challenge of being an authority on matters in relation to emotions, thoughts and behaviour is something that may have an effect on both the parent therapist and the child.

Wallerstein (1981) suggests that therapists may well experience greater anxieties in raising children since, “We of all people have laid open intellectual claim to knowing how best to do it”. He explains how therapists may experience anxiety in the role of parent and relate to their child in an “interpretive fashion” at home. It may be “easier to know how to act when one is comfortably ensconced in the analytic drivers’ seat” (Wallerstein, 1981, p.291). The dual role of parent and therapist appears to pose a challenge.

Interestingly Bermak (1977) suggests that the families of psychotherapists are often “seen as living examples by society of the nature of their practice and proof of their skill as therapists” (Bermak, 1977, p.143). If this is the case, the personal and professional reputation of the therapist depends on the behaviour of the children. An unhealthy attitude like this can only result in pressure being placed on the children to fit into a mould that cannot possibly serve them well. Storr (1979) expresses how the confidential aspect of a therapists’ world can leave children in the dark in relation to what exactly their parent does in a working day. There may be a shroud of mystery that is necessary in the profession. Professional discretion means that the therapist is virtually unable to discuss his (her) work with his family, who often have very little idea of what the work entails and being unable to talk about this in front of the children may increase a parent’s remoteness and make the children feel excluded (Storr, 1979 p.183).

Joan Offerman-Zuckerberg in her article “The Parenting Process: A Psychoanalytic Perspective” (1992), asserts that “The prerequisite to healthy object relations is found in good enough childhood”. She is clear that as analysts, we are all constantly immersed in the stuff of parenting, much as we may think otherwise, and notwithstanding powerful differences between parenthood and psychoanalysis.

We make ourselves available as self-objects, to be taken in, digested and expelled. We are used as reflecting, mirroring agents, affirming and confirming our patients’ identities and self-systems. We are ingested, identified with, spit into good and bad parts, and rebelled against. We are emotional containers and catalysts, struggling to be there reliably, fully, steadfastly, a constant emotional centre to leave from and return to. (Offerman-Zuckerberg, 1992)

Essentially the task of the “good enough mother”, as Winnicott calls her and the good enough therapist is quite similar. Similarly the therapist and the client have both experienced a childhood.

2.6 The “Lived” Experience of the Trainee Therapist

Few studies have attempted to understand the changes experienced by trainees, or identified which aspects of professional training programmes assist them in the process of becoming therapists. There is a scarcity of literature that taps into the “lived” experience of the trainee. A recent study “Baptism of fire”: A qualitative investigation of a trainee counsellor’s experience at the start of training (Folkes-Skinner, Elliott, & Wheeler, 2010), attempted to understand the changes experienced by a trainee as she journeyed through her training programme. The experience of one trainee Margaret was captured through three semi-structured interviews conducted at the beginning, middle and end of her first term of training. The data were subjected to systematic qualitative analysis. The findings interestingly suggested that training is potentially painful because of the emotional demands it places on trainees, particularly at the start of practice. Each interview revealed a different phase of her development and the core categories were: becoming something new (week 3), growth in therapeutic confidence (week 6); surviving “stressful involvement” through group supervision (week 11). The presence of real clients was identified as the main driver of change in this study. Studies show that trainees enjoy researching areas closely related to their own practice experience and interests (Stinckens et al, 2009) and also that they value curiosity and systematic inquiry as common elements of both research and practice.

2.7 Conclusion

As far as this researcher is able to determine, no studies exist that provide a more generalisable descriptive model to represent the range of student experiences. This researcher has chosen to illuminate the lived experiences of mothers training as therapists and their perceptions of how it may have impacted on their training and relationships with their children. For trainees experiencing the upheaval of personal change, it can be important to note the effects if any that it can have on family expectations and realities. Becoming a therapist can be a time of exciting changes and growth and this research explores how this impacts on family relating and how this period is experienced.

Chapter 3: Methodology

3.1 Introduction

The specific aims of this research are to:

- Explore the impact of training on female therapists who have children
- Investigate how the trainee may experience being a parent during the process
- Identify any changes in the parent-child relationship that may be attributed to the training

3.2 Rationale for a Qualitative Approach

Interpretative Phenomenological Analysis (IPA) was chosen as the methodological approach of this research as it is concerned with the individual subjective narratives of the participants. The goal of phenomenological research is to arrive at the essence of the lived experience of a phenomenon (Moustakas, 1994). It was felt that IPA methodology would most accurately reflect the experiences of the mothers who are training as therapists and give them a voice in the research.

Interpretation in IPA is a form of amplification or illumination of meaning, which is cued or sparked by a close engagement with the data, and which requires creativity, reflection and critical awareness for its full development (Smith and Flowers 2009, p.205). This form of inquiry was chosen as it creates and generates a rich base of knowledge and provides an understanding of phenomena when there is little research in an area.

“For us, IPA provides a fascinating and very rich way of engaging with, and understanding, other people’s worlds. Through it, we have learned about the complexity of individual lived experience (Smith and Flowers, 2009, p.206).

Phenomenological inquiry is from the outset an interpretative process. IPA research is concerned with the detailed examination of human lived experience. In IPA research, our attempts to understand other people’s relationship to the world are necessarily *interpretative*, and will focus upon their attempts to make *meanings* out of their activities and to the things happening to them (Smith and Flowers, 2013, p.21). IPA is always interpretative but there are different levels of interpretation. The analysis for this research study developed and

progressed over time (6 weeks) to deeper levels of interpretation. Critically for IPA research, the interpretations must always be grounded in the meeting of researcher and text (Smith and Flowers, 2013, p.36). Making interpretations from the data is complex and the researcher needs the awareness that the participant's meaning-making is first order, while the researcher's sense-making is second order (Smith and Flowers, 2013, p.36). IPA involves a "double hermeneutic" (Smith & Osborn, 2003). The researcher is making sense of the participant, who is making sense of "x".

3.3 Sampling

Sampling must be theoretically consistent with qualitative paradigm in general and with IPA's orientation in particular. This means that they are selected purposively because of what they can offer to the research project in terms of insight into a particular experience (Smith and Flowers, 2009, p.48). In keeping with the aims of this study, three trainee therapists who were mothers coming to the end of their training were interviewed. Originally, the researcher intended to interview "parents" who were training as psychotherapists which would have involved a male-female sample. It was decided however a few weeks into the research to make changes to the original research proposal and to obtain a group which is all female i.e. mothers in training. This decision was given due consideration and it was decided to focus on a homogeneous sample. Conducting a research study exploring how mothers and fathers relate to their children whilst training as therapists would naturally emerge as a comparative study. The perspectives of mothers and fathers are very different and it was decided that homogeneity was the choice for this research study. The sample chosen consists of three female participants. It is suggested that $n=3$ is the default size for an undergraduate or Masters-level IPA study (Smith and Flowers, 2009, p.52). Three is a useful number in that it allows one to conduct a detailed analysis of each case and in effect, to develop three separate case- studies and it also allows for development of emergent themes across the three transcripts.

3.4 Recruitment

The criteria inclusion for this research was straightforwardly - mothers who are in the final year of psychotherapy training. Participants were chosen for recruitment from the same

psychotherapy training college in Dublin because of its high standards of teaching and its emphasis on experiential learning. An information form was sent around to various class groups (Appendix 1) and contact was made within a three week period by the three participants who chose to take part in the study.

3.5 Research criteria for this study

Mothers who are in the final year or reaching final year of psychotherapy training.

All participants of the study are mothers and have completed a minimum of three years psychotherapy training. Two participants are due to finish training within weeks of this research and one participant had one more year to complete. It is not exclusively a homogeneous group as two trainee therapists are training as Humanistic and Integrative Psychotherapists and one participant is training in the Psycho-Analytic tradition. They are all training in the same third level college in Dublin.

All mothers in final years of training as psychotherapists (two are just about to complete training and one is at the end of year 3 with one year remaining).

Participant #1	Participant #2	Participant #3
Interview 25-03-2014	Interview 8-04-2014	Interview 10-04-2014
Final year Humanistic and Integrative BA student	Final year psychoanalysis student	3 rd year BA student
3 children	3 children	2 children
2 boys age 7 years and baby age 10 months. 1 girl age 9	1 boy age 13, 2 girls age 16, and 17	1 son age almost 21, one girl age 15
Married	Married	Married
All children living at home	13 year old at home, 16 year old at boarding school, 17 year on a gap year	All children living at home
28 having first child	27 having first child	27 having first child
4 pregnancies (early stage ectopic pregnancy)	3 pregnancies	2 pregnancies

Table 1: An overview of participants:

3.6 Method of Data Collection

The data was collected about trainee therapist's experiences of being a mother and training as a therapist through in-depth, semi-structured interviews. The interviews each took between 40 and 50 minutes and took place in a private room in the library. The interview questions were explored in detail with my colleagues and supervisor in a research discussion class. A first pilot interview was done to evaluate the clarity of the questions and no changes were made. They were deemed appropriate for this IPA study. Semi-Structured interviews allow flexibility in the interviewing process. It allows for the details of what the interviewee views as important in explaining and understanding events, patterns, and forms of behaviour (Bryman, 2008, p.423).

Initially respondents were asked preliminary questions (Appendix 5) before the taped interview. The researcher conducted the semi-structured interviews (Appendix 3). The title and purpose of the research was explained to the participants as well as their rights to withdraw from the research. A consent form was read and signed by each participant before the interview commenced. A copy of the signed consent form was given to each participant after the interview also and one kept for the researchers file also. Post-interview notes were taken to record the non-verbal aspects of the interview. Reflections on "how" the participants seemed to respond to the questions and also how the researcher felt during the interview and afterwards was deemed important to record in this research.

The interviews were recorded using a voice recorder and the sound files were stored safely to be used for the transcribing and data analysis process at a later stage. The interviews were transcribed and then typed verbatim by the researcher. IPA readily acknowledges that interpretations are affected by the participant's ability to articulate their experiences and the researcher's ability to reflect and analyse (Brocki and Wearden, 2006). It was felt that the honesty of IPA in this respect made it ethically the right choice of methodology to most accurately reflect the experiences of the participants of the research.

The challenge for the novice researcher is to interact with research participants in such a way that they generate rich and complex insights. Producing a good analysis of poor quality data is a far more demanding task for the analyst, although it can be potentially be performed by a skilled and experienced analyst (Braun and Clark, 2006).

3.7 Method of Data analysis

The data was analysed using IPA procedures as explained by Smith and Flowers (2009). Each transcript was read and listened to very carefully and repeatedly in order to gain a true reflection of the essence of the narrative. Each transcript was analysed with manual coding and exploratory comments written in wide margins. The transcripts were analysed individually and then as a group. Each text was explored with a focus on descriptive, linguistic and conceptual comments. Each transcript was analysed until a succession of themes emerged across the data. It was noted that certain themes were more dominant than others across the transcripts. There was overlapping and divergence also. Seven master themes were reduced to three master themes and six sub-ordinate themes within the data were identified as reflecting the true essence of the data. They are represented in Appendix-

IPA requires a combination of phenomenological and hermeneutic insights. Heuristic inquiry derives from phenomenology and seems to attract researchers in the field of counselling and psychotherapy who are interested in exploring the “essence of the person in experience” (Moustakas, 1990, p.39).

Moustakas describes six stages (not implying a linear process, more a series of stages that enable the researcher to locate themselves and to guide the research). The six stages described by Moustakas are shown in the table below. The stages are indicative of the process that may guide the researcher in the research process.

Table A- Represents the six stages enabling the researcher to locate themselves and guide the research (As cited in Etherington, 2004, p.111)

Initial Engagement	When researchers begin to connect with their interest in the topic, and find and connect with participants. They may also begin to engage with the literature
Immersion	Through interviewing, transcribing, listening, analysing, reading, communicating
Incubation	A period when the research is “put on the back burner” for a while, creating space for new understanding to unfold, or emerge through ideas, dreams and images
Illumination	New insights and understandings develop, perhaps through recognizing structures or patterns and themes
Explication	Articulating and making sense of the material
Creative Synthesis	The researcher produces a synthesis that depicts her integration of the data, reflecting personal knowledge, tacit awareness, intuition, and understanding of meanings

Table 2: Researcher Process

“The heuristic process is a way of being informed, a way of knowing. Whatever presents itself in the consciousness of the investigator as perception, sense, intuition or knowledge represents an invitation for further elucidation (Moustakas, 1990, p.10).

3.8 Ethical Considerations

A research proposal was submitted to the Ethics committee in the summer of 2013 and it was approved with no changes recommended. The participants signed a consent form and were assured of confidentiality and anonymity. They were assured that they can withdraw from the research without prejudice. I did feel that one participant was uneasy about being easily identifiable and that the beginning of the interview she appeared almost over- cautious with

her responses. The participants' perceptions of what might happen to the results may have impacted on her responses given in the interview.

3.9 Limitations of this research

Although the sample of three participants may seem small (three participants), this number conforms to the recommended sample size for IPA work (Smith et al, 2009). The sample cannot be viewed as representative of mothers who train as psychotherapists. The aim is to produce an in-depth analysis of the accounts of a small number of participants and any conclusions are specific to that group. Another limitation to the research is the inexperience of the researcher as interviewer. Curiosity and empathy were employed by the researcher at all times which compensated to some degree for the lack of experience in this aspect of the research. The sample was not 100% completely homogenous as one student was studying Psycho-analytic Psychotherapy and two students were of the Humanistic and Integrative tradition but the researcher felt that this was not a concern.

3.10 Conclusion

This qualitative study aims to explore how mothers who are training to be therapists relate to their children during the process. Semi-structured interviews were carried out with four participants using IPA methodology. Ethical considerations were considered in terms of confidentiality, anonymity and handling of audio and transcript materials. The researcher felt that the principle of "sensitivity to context" (Yardley, 2000) was adhered to throughout this research at all times. Initially "sensitivity to context" was demonstrated in showing empathy, putting the participant at ease, recognising interactional difficulties and negotiating the intricacies of the researcher-participant interaction. This "sensitivity to context" continued throughout the analysis process and also in the writing up of the research. The next chapter will give voice to the trainee therapists who participated in this study and care has been taken to accurately convey their experiences as shared in the interviews.

Chapter 4: Findings

4.1 Introduction

Three students of psychotherapy who are mothers were interviewed using semi-structured interviews about their personal and professional experiences of training as therapists. While analysing the data, it emerged that all three participants were challenged in different ways during the training. They all expressed great awareness of change and insight which they attributed to the training. They recalled emotional challenges related to the training and how it impacted on their family life and their sense of being a mother.

During the data analysis three master themes emerged.

- Looking back with emotion-Theme 1
- Stepping back with awareness- Theme 2
- Moving Forward with growth- Theme 3

Each of the master themes and the emergent subordinate themes are explored and studied in detail with reference to data from the transcribed interviews. Throughout this section, quotations are coded to identify the participant and to specify the segment of text from the relevant transcripts as follows:

[P#1.p7.233-241] refers to participant one and the segment of the text is located on page 7 of the transcript at line numbers 233-241.

[RQ] refers to researcher question.

[RC] refers to researcher comment.

The underlying qualities required of the IPA researcher are: open-mindedness; flexibility; patience; empathy; and the willingness to enter into and respond to the participant's world. Investigations beginning from an IPA perspective should follow these principles wherever possible. At the same time, the researcher also needs determination and persistence and curiosity (Smith, Flowers, Larkin, 2009, p.55). Curiosity about IPA as a research methodology and indeed the research topic itself was something that grew and blossomed in the researcher right through the process of doing this research.

Walsh (1996, p.383) states: “Unlike practitioners of quantitative methods, we can learn as much about ourselves when conducting research as we can about the persons with whom we collaborate”.

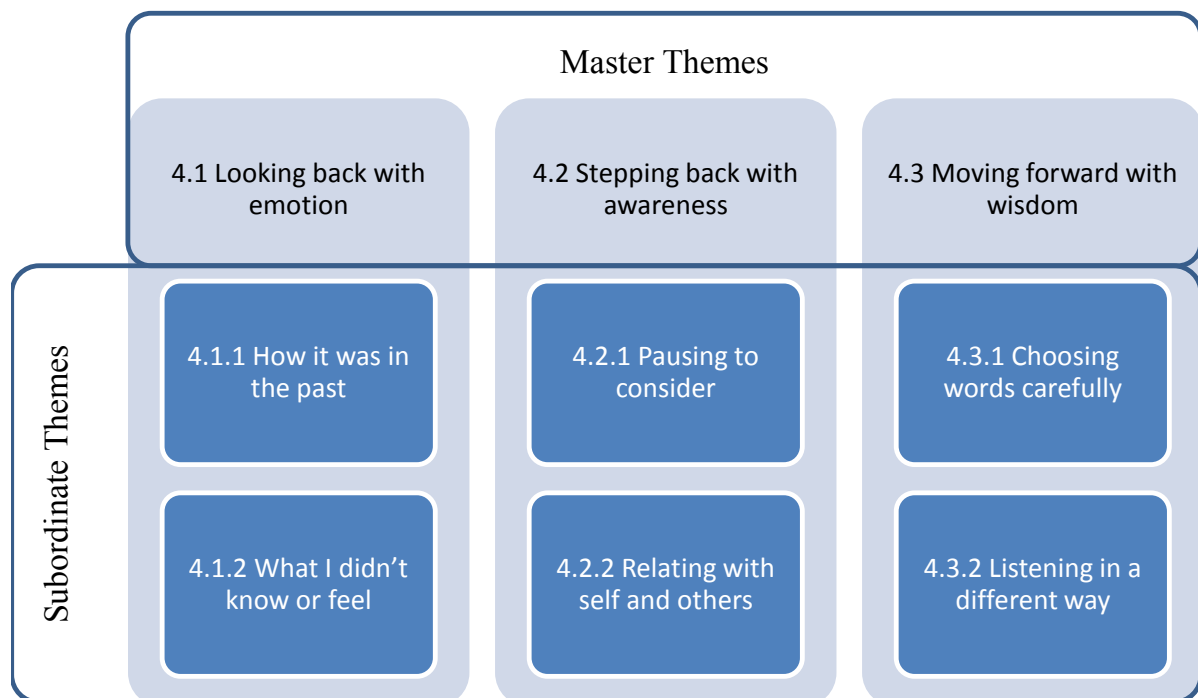


Table 3: Master and Subordinate Themes

4.2 Master theme 1: Looking back with emotion

Given that the nature of psychotherapy and psycho-analysis can be an opportunity for clarifying in so far as one can, the questions that mark one’s life and the choices that have marked its course, it is no surprise that looking back to the past is a master theme emerging from the interviews. All transcripts reflect the emotion of looking back to the past in some way. Interestingly participant 1 chose to train as a psychotherapist as she wanted to do something more meaningful. Participant 2 had an interest in the human aspect of it. Participant 3 had laughed off the idea of returning to study but she had a sense of having a listening ear in her work as a hair dresser and she had worked as a volunteer in a suicide prevention centre in the four years prior to starting her training.

	Participant #3	Participant #2	Participant #1
Its Difficult / First Born		124/160	98,
Wish I Had Known			101-105
What I Did Wrong / Triggered		4-8	106-108
Juggle	214 / 235		126
Self-Doubt / Judgement	311	139	137-138/142
Change	103 / 349		159/177
Listening Differently	49/81		206
Less Inclined In The Past... / I Let It Unfold Now / Pressure	119 / 348	94	234
Looking Back At Son			246
Owning My Own...	336		258
Struggle / Others Perceptions / Fitting In			264/285

Table 4: Interesting Key Words / Emotion at Looking Back

[RQ] And how did you come to the decision to train as a psychotherapist?

[P#1.p2.24-30]

“Yes, well, I was working as a computer trainer so I just had enough of it cause I just got bored of training the same thing over and over and I wanted to do something more meaningful, so that was my aspect to it. But I suppose, whilst being a mother, it was stressful you know to think, well, how will I do it? You know plus, it had been a while since I studied and also what about the kids?”

[P#2.p.28-35]

“Ehm, organically....I fell into it....ha ha ok, life kinda landed me into it. Ehhh, I suppose I was always interested. I am a solicitor ehm and ehm, I was always interested in the human aspect of something, sort of...Life brings some turns and twists, it seemed it should be something I should pursue...”

[P#3.p.3-9]

“I, my career prior to this is that of a hair-dresser-so, I guess I have had , I guess, “The listening ear”, ehm, it has also been that the role of “minder” has been pre-dominant in my life...and...ehm, and ehm...and through the years, it has been mentioned and said to me as something I should think about.”

The three participants reported being emotionally impacted by their training but in a positive way. Aspects of the training were experienced as very challenging. Participant 3 found the examinations “horrendous” as she had admirably returned to study after 30 years. It emerged that she had experienced the trauma of “freezing” at her first State exam as a teenager and this horror was something that she revisited in the process of her training. With support and guidance and self-care teachings, she overcame these fears and was advancing steadily in the programme.

4.2.1 Sub-ordinate theme: How it was in the past

Revisiting feelings from the past was a painful experience for participant 3 in terms of the academic aspect of the training.

[P#3.p.5.138-146]

“Ehm, it had taken me a long time to believe that I would actually be a good therapist. I have doubted it, I think because of the academic side. The academic side made me think Oh, gosh, maybe I can’t do this! I got quite tunnel vision around the academic side of being a therapist. I needed to get all the theory down, I needed to know it! I got very consumed around theory and academics.”

Similarly, Participant 2 was challenged when beginning her Infant Observation aspect of training: It was an essential part of the training that evoked unexpected feelings in her, they are expressed as follows:

[P#2.p5.109-118]

“I couldn’t believe that I was having such a resistance to starting. The idea of going in to observe a baby, ehm, I found that really difficult to get my head around. And you know, it would have taken, that would have ended up in my own therapy because I

didn't know what it was... that I found it really difficult to get my head around that...now (note: breathing), now I think some of it was, (tearful?), I don't know, my own experience of being parented, I can't really say an awful lot about that ehm..., certainly when my own, ehm when my first child was born, I really found that extremely difficult, I mean I had no idea of what to expect, I didn't know anything about babies for a start . I'd never minded babies, never baby-sat really or anything like that, and ehm I found that a complete and utter....? (trailed off) ”

This was a very moving part of the interview for both researcher and participant. It was noticeable that the pace of speech slowed down and the participants' breathing had changed. There was a sense of vulnerability about the participant and it seemed appropriate to stay with the trailing off and the silence and not to probe further. The participant appeared emotional and mildly uncomfortable talking about her resistance to starting her infant observation and what it was bringing up for her. Further on in the interview however, she expressed great joy at the pleasure of the experience of the infant observation after she had the time to settle in to it.

[P#2.p6.145-148]

“I actually think there was something about having a freedom to observe a child that I wouldn't have had with my own children.”

The interview moved into humour once again when the participant shared the “gift” that was offered to her by the mother of the baby being observed. The hour a week of infant observation was well in flow when the mother of the infant said:

[P#2.p6.158-160]

“Jesus like, this is so difficult.”

“Which was really a gift to me, that day when she said that.”

This vignette is discussed further in the next chapter (5.2). The felt sense of the dual aspect of therapist-researcher role is also discussed further in the next chapter (5.5). I was interested in the fact that this participant had asked two things at the end of the interview. She was interested in why I wasn't interviewing fathers as part of this study and also she asked if I had read *Ghosts in the nursery* by Selma Fraiberg. The concept of ghosts in the nursery refers to the relationship between a parent's early, usually conflicted experiences of the parenting they

received during their childhood and their own parenting style (Renk, 2004, p.377). This participant was hopeful that training as a therapist would impact favourably on her parenting and she expressed this twice in the transcript.

[P#2.P.9.230]

[RQ] Do you experience yourself differently?

“Ehm...I would hope that I am more open.”

It was felt that this interview had taken a lot out of the participant despite the laughter throughout. When the participant was asked the final question, whether she had any additional comments or points to add, she answered with a jovial tone which had carried through the script:

[P#2.p.15.354-355]

“Ehm, no, I think it has been comprehensive enough for one day (laughter again).”

The researcher wondered about the laughter and whether it was masking a discomfort in taking part in the interview.

4.2.2 What I didn't know or feel

Participant three felt during her training that she would have liked to have known some of the developmental studies before becoming a mother herself.

[P#3.p.4.101-106]

“One of the big things for me has been around, I wish I had known some of the developmental studies...before I had children. Ehm, I would love to have known a lot of theories ehm before I became a mum”.

In contrast to this, participant one seemed immersed in this aspect of the course naturally as her children were very young and she had a pregnancy and birth during the period of her training. At the time of interview, participant 3 had a daughter aged 9, a son aged 7 and her baby boy was 10 months old.

[RQ] -Were there any advantages to being a mother and studying psychotherapy?

[P#1.p.12.274-279]

“Yes there are definite advantages because there is a lot of things obviously that talk about childhood development. Even in first year, we did developmental psychology and I remember a lot of the people that were not parents were completely lost in it.”

[RQ] What was that like for you?

“For me, it was all theory that was very natural...yes sure I could see that....and yes sure I could see that.”

When asked about the role of motherhood and studying psychoanalytic psychotherapy, participant 2 jumped quickly to a place of “Oh my god”.

[P#2.p1.1-5]

“I never thought really about it, to be honest with you, until I started this course. And then I started thinking, “oh my god”, all the mistakes, all the ...you know stuff I should have done and didn't do....”

There was a giggle and sense of fun to the delivery of the statement. This lay in contrast with participant 1 who expressed how she experienced stress at times in the dual role.

[P#1.11.234-269]

“Ehhmm I think in one way we are all busy, it is a part-time course you know and everybody has something. Other people have a full-time job you know, so I wasn't working but I have children so, the baby was hard, having the baby, you know was hard, finding time to do the assignments, yeah so it was more the time. So! There is one thing anyway, I don't think it held me back but one thing, I could say that sometimes the whole Attachment Stuff and the whole blaming of the mother that had started to annoy me a little bit, because It is on you and the mother is always the bad person.”

[RQ] What kind of feelings was evoked in you by that?

“Sometimes just kind of like you know, you can't be perfect; you can't always be the “good enough” mother. You know, I know you don't have to be perfect but sometimes you do think oh, I'm giving out to my kids now, will they be traumatised, you do have

that kind of sense, or am I harming them? And also, just you know learning that it's always the mother, the mother, you know and that there was some resentment in me "sometimes." I am not saying always but sometimes it was like ok, well you know, mothers are people as-well. It can't be all about the mother you know, it's like all the responsibility is nearly just on the mother and it is not. There are other things in the child's life when he's growing up, and there are siblings, there is you know the father, school you know there's lots of other things that I think that influence the child and development."

[RQ] Yes?

"But the focus is very much in our course, our work; the focus is on the mother....and that was annoying."

This vignette is discussed further in the next chapter (5.2). The participant expresses annoyance at the concept of "good enough mother," a term coined by Winnicott and used extensively in the psychotherapy literature. She had expressed earlier in the transcript that her own personal therapy had helped her to move away from perfectionism and she was therefore more relaxed with her three young children doing less and enjoying them more. This vignette shows frustration at the focus on the mother and the participants' exasperation at the perceived burden of responsibility on a mother's shoulders in the context of psychotherapy.

4.3 Master Theme 2: Stepping back with awareness

This theme emerged as each of the three participants gave different examples of having a clearer understanding of self. This awareness offered a clearer boundary also between self and others. Self- understanding gave way to seeing things in a clearer way and allowing others the space to do the same.

	Participant #1	Participant #2	Participant #3
Stepping back	347/192	123/89	223
clarity	81/99/27/347	192/339	151/158/214
wisdom	192	240	65/214

New way of relating to self	48/215/347	19/262/224/239/240/ 98	332/87/114
New way of relating to children	89/90/180/11	2/16	223/240/235

Table 5: Stepping Back with Awareness and Allowing New Ways of Relating to Self and Others to Emerge

4.3.1 Pausing to consider

It was significant that just at the end of what the researcher felt was a moving interview that when asked if she had anything she would like to add, (it felt like an infamous door knob moment), the interviewee paused and reflected on a sense of conflict in her two roles, that of mother and therapist in training.

[RQ] Ok Before we conclude the interview, I'm wondering if there's something you'd like to add that I haven't asked you about in relation to being a mother and training as a therapist?

[P#1.p.16.355-371]

"I think the only thing is and I'm kind of wondering that in my thesis as well, is maybe the conflict between being "The good enough mother" and being "good enough", yeah for your clients. I don't really feel it now 'because I don't have lots of clients and I'm not fully working but I think you know, actually I did feel it. (Emotive piece).No, it's not true! Because when I actually leave the baby, you know, with a child minder to go to do client work, you know, placement work and stuff like that, I did feel a bit guilty."

[RC] ok...?

"....of leaving him and I said, oh maybe he won't be as attached to me now because I'm leaving him. So there was kind of like a sense of oh! I'm being present for the client and other work but then I'm not being present for him as much so there is that...."

[RQ] Do you mean a kind of "dynamic" or as you said "conflict"?

*“It’s conflict and as you are aware of how important it is, it is even a bigger conflict. I always wondered about that in general about therapists and it’s a very hard conflict because you know how important it is, especially when they are young to be around them. But then, you know you also want to be there for your clients, so.....??
(Shrug of shoulders)”.*

This was the final five minutes of the interview and the participant was expressing her true feelings of guilt when in order to attend her client work as part of her training, it was necessary to leave her baby with a child-minder. Her shrug of shoulders and questioning sense of how do therapists do it? was how the interview came to its end. It was apparent that the use of the word “conflict” was clearly her choice of word to describe this dilemma. There was a real sense that an individual can only be in one place at one time. The shoulder shrug and wide-eyed wonder about how “good enough” really is good enough for our children and clients was left between us unsolved.

4.3.2. Relating with self and others

[P#1.p.16.342-352]

“and actually, I just met two of my friends’ mothers from school and they kind of said; Yes I always have to do things with the kids, |I always have to be active, and I said; “Whoa!” I remember, I used to be like that, and I just saw the difference then! Yes, I know I am not like that any -more! And it’s great, not to be like that! I can just be at home and we can do homework and we just hang around in the house and I do think that they’ll be more relaxed as adults because of that.

[P#3.p11.267-269]

“To be as attuned to myself as much as I’ve been attuned to others, I guess it is quite a big difference”.

[P#3.p13.311-315]

“...the understanding of child development, looking at behavioural patterns, looking at how your children relate to themselves as much as anybody else. I have to say, it’s ehm something that I’m constantly looking at with ...awe”.

[P#1.p.16.342-352]

“and actually, I just met two of my friends’ mothers from school and they kind of said; Yes I always have to do things with the kids, |I always have to be active, and I said; “Whoa!” I remember, I used to be like that, and I just saw the difference then! Yes, I know I am not like that any -more! And it’s great, not to be like that! I can just be at home and we can do homework and we just hang around in the house and I do think that they’ll be more relaxed as adults because of that.”

[RQ] Do you see yourself as having “insights” about yourself personally along the way? Through the work?

[P#2.p.9.216-227]

“Hugely, yeah, It would be impossible not to. Ehm, you know I suppose, I am much more aware of having... you know I always thought I have no interest in kids whatsoever and they are my own words despite the fact that I have three kids you know. I mind them and blah blah blah, but I think it has allowed me to be much more accepting, you know of having “maternal instinct”, if you would call it that, or that I am allowed, I am allowed to have these feelings for my children....hmmm I don’t have to be tough all the time...(laughing).”

Participant 3 showed how she had become more inclined to let her teenagers go just a little bit more. She conveyed a sense of becoming a calmer person. She was stepping back and responding to her children in a different way.

[P#3.p9.221-237]

“(slow) I would imagine that it has, in the sense that my understanding ehm around their behaviours, what teenagers do, I am less likely to react at a very highly emotional level. I can now, sometimes, step back and you know, talk it through with my husband and ehm..? I can let go and see it for what it is, as opposed to worrying about it....(slow), I have to say, it has allowed me, to really, to just be more calm around the different stages and not think that there’s something more...to what’s happening. That it is just a stage, or something that was said, or something that we can look at, also, it’s allowing us to let them go just a little bit more....and I think that

without the course, I probably wouldn't have been as inclined to ...to let them out...let them away."

This piece was the most emotive piece of this interview and I felt a stronger connection with the participant at this point. The sense of being calmer and responding more than reacting was the piece that resonated with me most. Under the theme of relating to self and others, this participant appeared to be letting go of her 21 year old son in a gentle and moving way as he moved towards independence. She attributed her ability to do this as a benefit from engaging in her psychotherapy training. The participant shows a very clear awareness of her own developing process and is allowing her son to have his. She has a gentle way of speaking about her son and indeed her daughter. It was especially moving to hear how aware she is becoming of the letting go process and how best to manage it within her family. There was a strong piece here about autonomy and giving freedom to allow her children to grow.

[P#3.p.10.239-244]

"It allows me to ahem, allow them ... allow my 21 year old to make a decision and nothing more than that, you know, we can be supportive you know, and allow him to make his choices, and then allow him to be responsible for his choices".

Participant 3 describes a camaraderie between colleagues on the training programme. The use of "we" twice in the segment shows this friendship. Also apparent in the transcript is the understanding that each student on the course is meeting a hurdle at a different time and there is a sense that the support offered by peers enhances the experience.

[P#3.p4.91-99]

"For every one of the colleagues in my class it has been different. Ehhm, we are meeting our hurdles at different times, we are emotionally triggered from ehm different material. And, I have to say, I have absolutely loved it. I have absolutely thoroughly loved it... It is hard, and the tears have been shed but I have thoroughly loved it...doing this".

4.4 Moving forward with wisdom

	Participant #1	Participant #2	Participant #3
Moving Forward	373	334/335	207/268
Personal Change	81/99/27/347	98/240	65/158/264/137
Insights	330/347	88/227	214/303

Table 6: Moving Forward with Wisdom

This theme emerged as a movement, as an ongoing process. The participant's offered a sense of moving ahead with knowledge, a sense of wisdom to be shared professionally and also personally within their homes.

[P#1.15. 322-325]

“You know, I think overall, my children benefitted from my training, you know and I am more present to them and more relaxed when I am with them.”

[P#2.14.343-345]

“I don't see this (training) as being, you know, a period of my life that has a beginning and an end. I would see this as a life-long learning”.

[P#3.10.258-260]

“Well, I'm still on the road, but one thing that I can see is that I am learning to own my own views, opinions, words. Whereas, I had been thinking about too many peoples' perceptions of me, or who I should be from my teenage years to my twenties....yeah it was a struggle.”

Under the master theme of Moving Forward with Wisdom, all the transcripts explicitly and implicitly made references to the importance of language and how it is articulated and indeed received. The two sub-ordinate themes illustrate this with extracts from participants.

4.4.1 Choosing words carefully

The Participant who had one more year of training to complete before qualification was aware that was still on the road. She expressed a greater honouring of herself.

[P#3.p.10.258-264]

“Well, I’m still on the road, but one thing that I can see is that I am learning to own my own views, opinions, words. Whereas, I had been thinking about too many people’s perceptions of me, or who I should be from my teenage years to my twenties...yeah, it was a struggle.”

Participant 2, when speaking about her children (who are in their teens) at the beginning of the interview and her sense of being a mother to them, she mentioned that her role as mother wasn’t something she had really thought about prior to starting her course. However, she describes being very conscious of what she’d say to them since starting this course. It is significant that she actually told them about the research and that she opened up the question to them about mothers training as psychotherapists and how relating to children may be impacted or influenced by the process. The response that the teenagers offered was that they experience their mother as “more open”.

P#2.p.13.320-331]

“Well, I am very conscious of words now and the power of words .Actually, one of the chaps that I see in D.I.T. said, you know, “Sticks and stones may break your bones, but words cannot hurt you”. Ash, he actually said that one day and ehm, I just said to him, words cannot hurt you...like. It’s not often that I think it really, but that....is just because I am very conscious of, I mean “words are our tools” ...ehm and “the impact of words is beyond measure.”

Again a serious moment comes back with some humour around words

[RQ] And before you started the training, would you have had that sense of the power of words?

[P#2.p14.332-340]

“I mean, occasionally, you would think, how could he have said that? Or she has said that or whatever? But, I wouldn’t have had, I don’t think I would have had ehm adequate appreciation of the profound impact ofWords.”

[RQ] Yes, there seems to be a profound impact in the work you do around words, and how they are spoken, or not spoken...Do you experience that awareness in a positive sense?

“Yes, sometimes, I experience it as a burden, I mean, I am thinking, oh god, I’d love to just lash out here, but I’d better not! (Laughs).”

4.4.2. Listening in a Different Way

It was evident across the transcripts that there was a sense of having reached a point of no return, a sense of ongoing discovery and development was ahead. Also a sense of owning the learning and acknowledging any insights. This researcher kept in mind that each participant seemed genuinely interested in my topic as research material. Was there something exciting for them also to be part of research?

Participant 1 was delighted when her eight year old daughter demonstrated a capacity to name her own feeling. The sense of pride in seeing her young daughter verbalise accurately how she felt was told in the following vignette.

[P#1.8.178-200]

“Ehm, There was one thing actually again with Emily, and again with a crying fit. It was this year actually, that she read a book, eh, and she didn’t like the ending of the book. And in the beginning, she was just going to bed and she said to me, oh you know, I didn’t like the ending....and again if it was the “old me”, I’d just say, “Just leave it and go to bed”, you know, but I saw she was disturbed, so I said, ok let’s go down and talk about it, so we went downstairs and she started again crying a lot. “I don’t understand why you didn’t like it...” and then I really felt like a therapist, I was kind of you know asking her, letting her cry, I was really using my therapeutic skills, hmm and the amazing thing is....suddenly at the end, she understood why she didn’t like the book...Yes, I didn’t like it. It was too disappointing, I don’t remember exactly, but she did manage to put words into it herself.”

Then she suddenly said to me- “Mam, I forgot that you were a therapist!” (Delight and humour and laughter).

Along with an appreciation of how words are chosen and spoken, the participants reflect on how they have honed their listening skills and how they listen in a different way.

Participant 3 describes herself as always having “the listening ear,” [P#3.p.1.4] but unsurprisingly the skills training has helped her to develop it further.[P#3.p.8.200-210]

“Oh yes, oh absolutely, my listening ear is just one, one aspect.”

[RQ] An important aspect?

“It’s one aspect and it’s the skills....which I still feel that I have to continually work with....and work on. Ehm, what you do, how you interpret, what you miss out on...it’s not just listening and letting it go over you. It’s really listening and...it’s really listening and hearing ehm, key points in what they (Clients) are saying. Whereas before, I may not have attuned to that find that what I am hearing is different, in a conversation is different.”

Similarly, Participant 1 describes comforting her young daughter while she was crying and listening to her in a way that felt new.

[P#1.p.4.76-96]

From a client-work perspective, participant 3 working within the psycho-analytic tradition has an awareness that when she is listening to her clients that she is hearing them in a very specific way. As her role is to hear what they have to say “in an entirely non-judgemental way”, she finds it beneficial with some of them to avoid eye-contact when she is working in a session.

[P#2.p.10.253-273]

“But actually, when I find I am around the D.I.T students, I am around the same age as their mothers and that’s one of the reasons why I don’t...not having eye-contact, I find that hugely beneficial with some of them, particularly the ones, the boys, that they are not under my gaze.... and that they are freer to say whatever it is..... Hmm and I do think...”

[RQ]-So maybe, being older or being a mother yourself has offered you challenges, do you think?

“I suppose, I suppose, I am more conscious of the fact that it would be very easy for them, to push me into the role of their mother.”

[RC]-right

“And that they would expect from me all the prejudices....and good things as well that they’d get from their mother. Whereas, my role is to hear what they have to say in an entirely non-judgemental way. And I am not going to tell you, what you need to do next or anything like that. I’m going to hear you. And I would direct them sometimes about things....as in...you know, what do you think that was about?....or you know it would be very... very, I’m never going to say anything like, what about doing this? Or how about trying that?”

4.5 Conclusion

The choice of research topic often has personal significance for the researcher, whether conscious or unconscious (Devereux, 1967). Indeed, some methodologies, such as heuristic enquiry described by Moustakas (1994), require us to have personal connection with the topic of inquiry which leads to more personal learning and potential change.

Participants in this research were encouraged to speak extensively about their experiences of training as therapists and its impact on their personal life with specific emphasis on how they felt it impacted on relating with their children. The process of Interpretative Phenomenological Analysis from the transcribed recorded interviews elicited three master themes. During the data analysis three main themes emerged.

- Looking back with emotion-Theme 1
- Stepping back with awareness- Theme 2
- Moving Forward with wisdom- Theme 3

In summary, rich data illustrated the emotional experiences of the therapists in training and specifically their sense of personal growth and how it is experienced outside the classroom

and therapy room. It is woven through the transcripts that relating with children feels different in a positive way for the trainees with all the changes that are taking place. This study has provided a descriptive window into the private perceptions of mothers as therapists in training who are also rearing families. The data has also provided some perspective of how students actually begin to change as persons in the process of becoming psychotherapists. The next chapter will discuss and expand on these themes.

Chapter 5 Discussion

“Man is the only being who is subject to his childhood. He is that being whose childhood constantly draws him backwards.”

Paul Ricoeur, 20th century French philosopher

5.1 Introduction

This chapter will expand on the three main themes that emerged from the data analysis in chapter 4. Participants in the research were encouraged to speak extensively about their experiences of training as therapists and its impact on their personal life with specific emphasis on how they felt it impacted on relating with their children. Each emergent theme stands alone as a distinct concept, but they can also be appreciated and understood within the context that they provide each other across the three transcripts. An illustration of these links can be viewed in a diagram in Appendix 6. The three realms represent the three main themes and the sub-ordinate themes can be viewed as impacting also across the three areas. Implicit within the themes is ongoing relating between mothers and their children through the process of becoming therapists.

IPA is a creative process that offers albeit indirectly, a rich insight into the researchers own experience with the phenomenon in question. An essential component of IPA is the interpretative aspect of the work. This chapter aims to discuss and offer some selected interpretations of the most poignant moments in the interviews and indeed how they were experienced by the researcher. It also aims to put the findings from chapter four into a wider context for consideration and reflection. This discussion is structured within the headings of the three master themes as identified and described in chapter 4.

“Any good IPA is written carefully, making claims appropriate to the sample which has been analysed. Interpretations are presented as possible readings and more general claims are offered cautiously” (Smith and Flowers, 2009, p.18).

5.2 Looking Back with Emotion

This theme emerged as all three participants undertaking psychotherapy training described feeling emotionally triggered to varying degrees at different times.

Reflection on previous assumptions and past ways of relating and behaviours brought up many feelings. Transformative learning is seen to be a process in which we become critically reflective of our own assumptions or those of others, arrive at an insight, and justify our new perspective through discourse (Mezirow & Associates, 2000). Participants in this study showed an open-ness to the process of transformative learning as they each engaged in their own therapy or psychoanalysis during the training period.

The three participants of this study having experienced pregnancy and childbirth themselves had a wealth of knowledge and experience to bring to this research. Two participants were at the final weeks of the final year of training and one participant had one year remaining on the programme. These three women had spent a minimum of three years studying psychotherapy. They all had experience working with clients and attending to their own personal therapy. They each showed a keen interest in the research topic and also a generosity and integrity in sharing their individual thoughts and experiences within the interview process.

Stern (1995) has written extensively on what he describes as “The motherhood Castellations”. He asserts that with the birth of a baby, the mother passes into a new and unique psychic organization and this organization is the motherhood castellations. As a psychic organizer, this castellations will determine a new set of actions, tendencies, sensibilities, fantasies, fears and wishes (Stern, 1995, p.171). Becoming a mother and becoming a therapist both involve periods of great change for a woman. Becoming a therapist whilst being a mother can evoke many emotions as expressed in the transcripts.

It was clear that participant #1 was emotionally triggered by a sense that as a mother, she carried a lion’s share of the responsibility for the developmental needs of her baby.

[P#1.p.11.241-246]

“So! There is one thing anyway, I don’t think it held me back but one thing, I could say that sometimes the whole Attachment Stuff” and the whole blaming of the mother, that had started to annoy me a little bit, because it is on you and the mother is always the bad person.”

Interestingly, she didn't feel that some of her peers on the course understood her sense of annoyance at some of the literature.

[P#1.p12.265-267]

“But the focus is very much in our course, in our work: the focus is on the mother...and that was annoying.”

[RQ] Is this something that annoyed you from time to time?

[P#1.p12.268-272]

“Yes from time to time and I remember a few times, I said to people that are not parents and they didn't understand what I am saying, You know, I think they thought she is just silly?”

In the context of this segment of the interview, the choice of the words “our course”, “our work”, and “you know” by the participant created a sense of a shared connection, a sense that I, as researcher of the topic would have a shared experience of this feeling and not find it or the participant “silly”.

In the context of some of the literature and theories, it is most understandable that a mother training as a therapist would find herself provoked or irked by responsibilities to the developmental needs of her baby.

Klein, J. (2005), describes psychotherapy as a developmental process, in the same way as growing up is, and the two have features in common. A difference is that psychotherapy is remedial: it is intended to make people better, to make good some deficiency or disturbance whose roots may go back to the days of childhood (Klein, 2005, p.381). An understanding of childhood disturbances is essential for the work of a therapist and as a mother nurturing small children at the same time, it is evident that some of the psychoanalytical literature and theories can trigger responses. Psychologist John Bowlby was the first Attachment theorist, describing attachment as a “lasting psychological connectedness between human beings”(Bowlby, 1969). Bowlby believed that the earliest bonds formed by children with their caregivers have a tremendous impact that continues through life.

Psychologist Mary Ainsworth expanded greatly upon Bowlby's original work. Her study “strange situation”, revealed the effects of attachment on behaviour. She identified three main

attachment styles, secure, insecure avoidant, and insecure ambivalent. Later research identified the disorganised attachment style.

A secure base was originally perceived as the “care-giver” to whom the child turned to when the child is distressed. Ironically, the secure base may provide a secure or insecure attachment experience depending on circumstances (Holmes, 2001).

Later, it was realised that the secure base can be seen not just as an external figure but also as a representation of security within the individual psyche. The idea of internalizing a secure base is related to what in the psychoanalytic context is referred to as libidinal object constancy. This implies a stable sense of emotional connection and attachment to a particular other even when that person is not physically present (Eagle, 2003).

It is apparent across the transcripts that the participants in training have come across material that may have stimulated thoughts around their own parenting practices and their own sense of being parented. The theme looking back with emotion was palpable in the following extract:

[P#2.p.5.109-121]

“I couldn’t believe that I was having such a resistance to starting. The idea of going in to observe a baby, ehm, I found that really difficult to get my head around...I didn’t know what it was...that I found it really difficult to get my head around that. Now, I think some of it was, I don’t know, my own experience of being parented....”

The implications of secure base extend to adulthood as adults have an internal working model based on their earlier attachment style, which remains relatively stable over time. This model contains information about self and about others organised into schemas that apply to all relationships. If the framework from early experiences is secure, individuals are confident in regulating the ups and downs of emotional life and have high self-esteem. But if the framework is insecure, they will find it difficult to deal with stress and they may lack self-esteem. These people have difficulties in regulating emotions and are vulnerable to various psychopathologies (Gerhardt, 2004).

5.3 Stepping Back with Awareness

This theme emerged as each of the participants gave different examples of having a clearer understanding of self. This awareness offered a clearer boundary also between self and others. Self-understanding gave way to seeing things in a clearer way and allowing others the space to do the same. A clear sense of emotional boundaries was expressed in the vignettes across this theme.

[P#3.p11.267-269]

“To be as attuned to myself as much as I’ve been to others, I guess it is quite a big difference.” [P#3 In relation to self]

[P#3.p9.223-225]

“I am less likely to react at a very highly emotional level. I can now, sometimes step back and you know, talk it through.....” [P#3 In relation to teenage son]

[P#2.p10.262-265]

“I suppose, I suppose, I am more conscious of the fact that it would be very easy for them, to push me into the role of their mother.....and that they would expect from me all the prejudices...and good things as well that they’d get from their mother.” [P#2 In relation to male teenage clients]

Traditional psychodynamic thinking on technique has emphasized the central role of working with “the transference” where the patient or client’s feelings about past relationships, particularly parents are transferred onto the therapist and are therefore brought alive for exploration and interpretation in the present (Freud, 1914).

Learning to work with transference and counter- transference can be a challenge for experienced and novice practitioners. Working with both positive and negative maternal transferences is very often a challenging and crucial aspect of the work.

Indeed when Freud first encountered and described the phenomenon of transference he regarded it as an obstacle to therapy. At this stage in his thinking the main vehicle for psychic cure was free association. When he observed that some patients found this process difficult, or suddenly ground to a halt, he attributed this to the emergence of transference thus

perceiving the analyst as a disapproving figure from the past who would be shocked by their revelations. Freud initially wanted to dispose of these transferences and get on with helping the patient's free associations. But his experiences with patients such as Dora (Freud, 1905), who developed a strong negative transference to Freud and dropped out of therapy, brought home to him the new idea that if one could analyse and transcend transference, the patient would recover. However, by 1907 when Jung first visited Freud in Vienna, his views had changed. Freud asked Jung what he thought of transference; and when Jung replied "It is the alpha and omega in treatment", Freud replied, "You have understood" (Holmes, 2012, p.51).

5.4 Moving Forward with Wisdom

This theme emerged as a movement, as an ongoing process. Each participant offered a sense of moving ahead with extra knowledge and experiential wisdom to be shared professionally and personally within their homes.

[P#1.p15.322-325]

"You know, I think overall, my children benefitted from my training, you know and I am more present to them and more relaxed when I am with them."

[P#3.p10.258-260]

"Well, I'm still on the road, but one thing that I can see is that I am learning to own my own views, opinions, words."

[P#2.p14.343-345]

"I don't see this (training) as being, you know, a period of my life that has a beginning and an end. I would see this as a life-long learning."

Interestingly, two of the participants commented on the value of research when the taped interview was complete and there was a sense of the discovery of new research as an exciting endeavour. This contributed to an overall feeling of moving on from graduate training towards further learning.

In a study to examine trainee practitioner's perceptions of research training, it was revealed that while participants appreciated the value of research, most found it challenging and anxiety-provoking (Moran, 2011). Participants in Moran's study identified a number of ways

in which training approaches could be adapted to enhance motivation to engage with research and enable integration of research and clinical practice. Tania Barnett, a psychotherapist and adult daughter of two therapists herself captures the essence of her own experience in “A therapist in the family”. She offers an honest account of growing up with two therapists and her sense of becoming a therapist herself.

“To undertake a training course is to embark on a process of change, of gaining new and sometimes disturbing insights and awareness from which there is no going back. Then comes a further period of uncertainty when the course with its comradeship and support is over” (Barnett, in Clark, 2002, p.108). The researcher was aware that the participants themselves were coming to the end of their training.

The sense of no going back is in keeping with the flow of the findings of this study. The three themes embedded in the transcripts are looking back with emotion, stepping back with awareness and moving forward with wisdom.

5.5 The Dual Aspect of Therapist-Researcher and also Therapist-Mother

The experience of doing this research gave the researcher a sense of a real dilemma, one of allowing for a total immersion in the work yet also struggling adopting an objective position in the work. Supervision and peer group feedback on the process of the work was invaluable.

It could be argued that as counsellors and therapists we do not need to adopt a *new* role of “researcher” because every encounter with our clients is itself a re-search activity. Indeed, narrative therapists refer to the people who consult them as “co-researchers positioning themselves in those relationships as “not knowing”, in contrast to the “expert” position adopted by some therapists (Freedman and Combs, 1996).

Etherington (2004) acknowledges the similarities but also the differences that exist within the roles of therapists and researchers.

“The main difference is that as therapist my purpose is to assist my clients re-search (into themselves and their lives), and in my role as researcher the positions are reversed: they are there to assist *me* in discovering something about a topic or concept that *I* am curious about. As a counsellor people seek me out: as a researcher I seek *them*. This inevitably influences

the power dynamic although it would be disingenuous to deny that the researcher is nonetheless in a powerful position.” (Etherington, 2004, p.110).

“The time spent with tape recordings and transcriptions is an important part of the immersion phase of heuristic research: noting our feelings and responses can enhance the depth and quality of the research process. At the end of the day, however, it is important to acknowledge that transcripts are social constructions; they are re-tellings and re-creations of stories that have already happened and not a faithful copy of a static world (Lapadat and Lindsay 1999).

“Discard your memory; discard the future tense of your desire; forget them both, both what you knew and what you want, to leave space for a new idea” (Bion, 1990).

The learning for me was echoed in the idea is that the IPA process takes time and that not unlike Bion’s words, it is important not to inhibit the unfolding process itself.

5.6 Summary of the Narratives of the Interviews.

The three trainee participants reported being emotionally impacted by their training in a positive way overall. Aspects of the training were experienced as challenging but ultimately enjoyable and offered great learning and insight.

Participant #1 explored the experience of pregnancy and mothering whilst training as a therapist. Allowing feelings the outlet they need was an important aspect of this transcript. The participant related a story of sitting with her nine year old who was upset when she had reached the ending of a book she had read that did not offer a satisfactory ending.

Interestingly, the young girl after many tears came to the conclusion herself that it was *too disappointing* and that she didn’t like the ending. There was a moment then when the little girl said “Mam, I forgot that you were a therapist!” There was delight and humour in the retelling of this story. This participant raised interesting comments around being a “good enough mother” and also a “good enough” therapist.

Participant#2 had the unique and privileged experience to undertake an infant observation for two years as part of her psychoanalytic training. This brought up initial anxieties and emotions which were shared in the interview. The sense of allowing herself to own her maternal feelings was very poignant in this interview. Also her fear that the mother of the

infant being observed would feel judged by her presence was heartfelt. The boundary around not playing or interacting with the child was a difficult challenge especially as the baby got older and wanted to interact with her observer.

Participant #3 found the academic examinations “horrendous” as she had returned to study after 30 years. It emerged that she had had experienced the trauma of “freezing” at her first State Exam as a young teenager and this horror was something that she revisited as a trainee therapist. Interestingly, this time her study and exam preparation experience was a shared one as her teenage daughter at the time of this interview was preparing for her first State Exam. Both mother and daughter met the challenges of study and exam preparation together this time in a more satisfying parallel process. There was a challenge for this participant as she felt much attuned to her daughter and her daughter didn’t want her mam to change.

5.7 Recommendations

Few studies have attempted to understand the changes experienced by trainees, or identified which aspects of professional training programmes assist them in the process of becoming therapists. There is a scarcity of literature that taps into the “lived” experience of the trainee. There is scope for more IPA research in this area as there is a significant gap in the literature exploring the subjective experiences of trainee therapists.

5.8 Conclusion

This research started out in its proposal as the exploration of parents who train as psychotherapists and their sense of parenting during the process. The decision to focus on mothers was purely to create a more homogenous piece of work rather than a comparative research piece. There is scope for a similar study which would investigate and explore the experience of fathers training as therapists. Cormac Gallagher’s (1986) article “The function of the father in the contemporary family” raises the question of the specific nature of the paternal function. Gallagher explores in this article the fact that in our contemporary production-oriented world, everything has conspired to diminish the place of the father.

Stephen Costello (2009), in his forthright and playful manner offers provoking insights in his book entitled “18 reasons why mothers hate their babies- A philosophy of childhood”. On the

subject of fatherhood, Costello asserts that the fathers' role is actually to stop the mother filling herself up with her child. If the father fails his child, he or she will look to others to "castrate" them, to deprive them, to lay down the law. Every child is looking for a way out of the mothers' desire. Every father must be in his "function" (place or role) as father. Costello perceives that fatherhood is a gift in a way that motherhood isn't as we can never be certain who our fathers are and by contrast we all know who our mothers are.

In conclusion, this particular IPA research, whilst focussed specifically on a mother's experience of training, does not wish to diminish a father's role in any way. Instead it is hoped that it may offer scope for further research into the subjective experiences that parents as therapists in training may undergo.

Chapter 6

6.1 Introduction

This research aims to explore the personal changes experienced by trainee therapists who are mothers rearing their children at the same time. Exploring psychotherapy training as an exercise in personal development as-well as professional development sheds some light on the very important personal changes experienced both outside the college and outside the consulting room. Relatively little is known about the more private or relational changes that might have been experienced by the trainee in the family domain. This research aims to reveal and to share an understanding of the emotional impact on family interactions during the training period. The ethos of therapy training courses is one of self-questioning and self-monitoring and this leads the trainee to the kind of change that can impact on future decisions and ways of relating to self and others. Self- reflection can lead to significant personal transformations.

6.2 Research Aims

The specific aims of this research are:

- To Explore the impact of training on female therapists who have children.
- To Investigate how the trainee may experience being a parent during the process.
- To Identify any changes in the parent –child relationship that may be attributed to the training

6.3 Summary of the study

In keeping with the aims of this study, Interpretative Phenomenological Analysis (IPA) was chosen as the methodological approach. IPA research is concerned with the detailed examination of lived experience. All three participants of the study are mothers who are in the final year or reaching the final year of psychotherapy training. The data was collected through in-depth, semi-structured interviews. The data was analysed using IPA procedures as explained by Smith and Flowers (2009). The founding principle of phenomenological inquiry is that experience should be examined in the way that it occurs, and in its own terms (Smith

and Flowers, 2013, p.12). Phenomenological inquiry is from the outset an interpretative process. The time spent with tape recordings and transcriptions is an important part of the immersion phase of heuristic research: noting our feelings and responses can enhance the depth and quality of the research process (Lapadat and Lindsay 1999).

6.4 Ethical Consideration

Ethical considerations were considered in terms of confidentiality, anonymity and handling of audio and transcript materials. The researcher felt that the principle of “sensitivity to context” (Yardley, 2000) was adhered to throughout this research at all times. Initially “sensitivity to context” was demonstrated in showing empathy, putting the participant at ease, recognising interactional difficulties and negotiating the intricacies of the researcher-participant interaction. This “sensitivity to context” continued throughout the analysis process and also in the writing up of the research. Ethical permission was gained from the research ethics committee of the training institution where the participants and researcher were based. Participant information sheets explained the purpose and nature of the research. As part of the informed consent procedure, participants were also reminded that the information they provided was confidential, that they would remain anonymous in the writing up of the research and that they had the right to withdraw at any time

6.5 Findings

The process of Interpretative Phenomenological Analysis from the transcribed recorded interviews elicited three master themes. The themes are as follows;

- Looking back with emotion-Theme 1
- Stepping back with awareness- Theme 2
- Moving Forward with wisdom- Theme 3

In summary, rich data illustrated the intense emotional experiences of the therapists in training and specifically how they related to their children during the process.

6.6 Limitations

Although the sample of three participants may seem small (three participants), this number conforms to the recommended sample size for IPA work (Smith et al., 2009). The sample cannot be viewed as representative of mothers who train as psychotherapists. The aim is to produce an in-depth analysis of the accounts of a small number of participants and any conclusions are specific to that group. Another limitation to the research is the inexperience of the researcher as interviewer. Curiosity and empathy were employed by the researcher at all times which compensated to some degree for the lack of experience in this aspect of the research.

6.7 Further Research

Few studies have attempted to understand the changes experienced by trainees, or identified which aspects of professional training programmes assist them in the process of becoming therapists. There is a scarcity of literature that taps into the “lived” experience of the trainee. There is scope for more IPA research in this area as there is a significant gap in the literature exploring the subjective experiences of trainee therapists.

6.8 Conclusion

In conclusion, this study has provided a descriptive window into the private perceptions of trainee therapists who are mothers and how they relate to their children during the process.

I wish to enable the reader of the study to evaluate its transferability to persons in contexts which are more or less similar and I am interested in what light it might shed within its broader context. IPA as a creative process allowed me as researcher to give the participants a clear voice in the study and it is my pleasure to allow the reader to check the interpretations being made. “Sensitivity to context” requires an immersive and disciplined attention to the unfolding accounts of the participants and what can be taken and processed from it.

“Today, it is becoming increasingly difficult for counsellors and psychotherapists to evade the call to become research-informed, but it is my hope that therapists can be so much more than that: “research inspired”, “research-invigorated”, or “research revitalised”. Research

findings in counselling and psychotherapy can help counsellors and psychotherapists be the best practitioners that they can be for their clients”, (Cooper, 2008, p.161).

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Appendices

Appendix 1- Information Form



INFORMATION FORM

My name is Suzanna O' Reilly and I am currently undertaking an MA in Psychotherapy at Dublin Business School. I am inviting you to take part in my research project. I will be exploring the views of mothers who are training as psychotherapists. I will be looking at changes in the mother-child relationship that may be attributed to the training. The title of my research is "An exploration of how mothers who experience the journey of becoming a psychotherapist relate to their children during the process".

What is Involved?

You are invited to participate in this research along with a number of other people because you have been identified as being suitable, being a mother in the final years of your training as a psychotherapist. If you agree to participate in this research, you will be invited to attend an interview with myself in a setting of your convenience, which should take no longer than an hour to complete. During this I will ask you a series of questions relating to the research question and your own experience. After completion of the interview, I may request to contact you by telephone or email if I have any follow-up questions.

Confidentiality

All information obtained from you during the research will be kept confidential. Notes about the research and any form you may fill in will be coded and stored in a locked file. All data that has been collected will be kept in this confidential manner and in the event that it is used for future research, will be handled in the same way. Audio recordings and transcripts will be made of the interview but again these will be coded by number and kept in a secure location. Your participation in this research is voluntary. You are free to withdraw at any point of the study without any disadvantage.

If you would like to take part in this research or require further information about any aspect of it, please contact me by telephone 0879114226 or by e-mail at oreilly_peter@eircom.net

I will arrange a time and date that suits you to participate in the research.

Thank you for your interest,

Suzanna O'Reilly.

DECLARATION

I have read this consent form and have had time to consider whether to take part in this study. I understand that my participation is voluntary (it is my choice) and that I am free to withdraw from the research at any time without disadvantage. I agree to take part in this research.

I understand that, as part of this research project, notes of my participation in the research will be made. I understand that my name will not be identified in any use of these records. I am voluntarily agreeing that any notes may be studied by the researcher for use in the research project and used in scientific publications.

Name of Participant (in block letters) _____

Signature_____

Date / /

Appendix 2 – Consent Form



CONSENT FORM

Protocol Title:

An Exploration of how mothers who experience the journey of becoming a psychotherapist relate to their children during the process.

Please tick the appropriate answer.

I confirm that I have read and understood the Information Leaflet attached, and that I have had ample opportunity to ask questions all of which have been satisfactorily answered.

Yes
 No

I understand that my participation in this study is entirely **voluntary** and that I may withdraw at any time, without giving reason.

Yes
 No

I understand that my identity will remain confidential at all times.

Yes
 No

I am aware that audio recordings will be made of sessions

Yes **No**

I have been given a copy of the Information Leaflet and this Consent form for my records.

Yes
 No

Participant _____
Signature and date

Name in block capitals

To be completed by the Researcher:

I the undersigned have taken the time to fully explain to the above participant the nature and purpose of this study in a manner that he/she could understand. I have invited him/her to ask questions on any aspect of the study that concerned him/her.

Signature

Name in Block Capitals

Date

Appendix 3 – Semi Structured Interview Questions

Research Questions:

Semi-Structured Interview

- A. Could you tell me a little about your sense of being a parent? How do you experience yourself in the role?
- B. Could you tell me about how you came to the decision to train as a Psychotherapist?
- C. How do you feel about training as a psychotherapist while also being a mother?
- D. Have there been any personal or professional challenges along the way? Can you tell me about them? What was that like for you?
- E. To what extent has the training journey been what you expected it to be? Were there any surprises or insights along the way?
- F. Do you see yourself differently now than before you began your training? If so, in what way exactly? Has it transformed your thinking in any way?
- G. Do you have a sense that you relate differently to your children as you develop as a therapist? In what way?
- H. Have you experienced changes in your home-life while becoming a therapist? How have they impacted on you? How do you think they may have impacted on your children?
- I. How do you think your children see or experience you? Have you a sense this may have changed over the training period? Can you explain more?
- J. Has your training challenged you? In what way? How was that for you?
- K. Do you feel that any of your academic study or experiential learning to date impacts on your parenting? In a positive or a negative sense?

L. As a mother, do you feel the training experience may or may not enhance your relating with your children in future years?

M. As we conclude the interview I'm wondering if you wish to elaborate more on any of the points that have been raised. Also, Is there anything you wish to add that I haven't asked you about?

Appendix 4 – Overview of Participants

An overview of participants – All mothers in final years of training as psychotherapists (two are just about to complete training and one is at the end of year 3 with one year remaining).

Participant #1	Participant #2	Participant #3
Interview 25-03-2014	Interview 8-04-2014	Interview 10-04-2014
Final year student	Final year student	3 rd year student
3 children	3 children	2 children
2 boys age 7 years and baby age 10months. 1 girl age 9	1 boy age 13, 2 girls age 16, 17	1 son age almost 21, one girl age 15
Married	Married	Married
All children living at home	16 year old in Boarding school	All children living at home
28 having first child	27 having first child	27 having first child
4 pregnancies(early stage ectopic pregnancy)	3 pregnancies	2 pregnancies

Table 7: Overview of Participants

This information was taken in the minutes before the semi-structured interview began, with the interviewees jotting down the answers to the preliminary questions written on a sheet as follows:

Appendix 5 – Preliminary Questions

Preliminary Questions:

- What age were you when you became a mother for the first time?
- How many pregnancies did you have?
- Have you experienced any losses around miscarriage or grief for the loss of a child?
- How many children do you have?
- How many boys?
- How many girls?
- What ages are your children?
- Do all of your children live at home with you?
- Are you currently co-parenting or parenting alone?

Appendix 6 – Developing Themes

Themes	Line Reference	Key Words
Sense of Being a Mother	2 / 23 / 47 / 358 / 317	amazing, thrilled, lovely/conflict
Stress	5 / 40 / 41 / 114 / 120 / 144 / 215	Trying to get everything perfect/doing thesis/time away from children
Present to Children	10 / 72 / 151 / 324	I like being with them
Reason to Train	28	To do something more meaningful
Busier Mentally	48 / 215	More busy yet more present
Support	52	My husband is taking most of the slack
Personal Change	81 / 99 / 27 / 347	Older self/easier on self
Relating with Daughter	89 / 90 / 180 / 11	I was just there for her
Big Decisions	137 / 27	Pregnancy/training
Baby Care	159	Always important to me
Using Therapy Skills at Home	192	Letting daughter cry
Dual Role	198 / 370	Mam, I forgot you were a therapist
Juggling Study and Parenting	215	The practicalities
Feeling Resentment	255	There are other things in the child life
Course Focus on The Responsibility of Mother	267 / 283	That was annoying
Motherly Feelings	291	Im very much motherly
Nervous Starting Client work	255	Keeping a secret from them
Relief at Change in Habits	347	Its great not to be like that now
Commitment	370	conflict
Feeling Guilty	311	Finishing client work to have a baby
Old Habits	330	I just had to be busy
Conflict for Mothers to be Good Enough/ also to our Clients	373	Leaving baby to do client work, I did feel a bit guilty
Pregnancy	317	I was very busy

Table 8: Working on Themes – Participant #1

Comments and reflections:

I felt a rapport with this interviewee and there was a warmth about the interview that I noticed at the time. On transcribing the audio- recording, I had a sense that we would possibly have a lot in common. There was definitely a positive transference and ironically, she mentioned her own thesis subject which emerged organically towards the end of the interview. This mother had the experience of pregnancy and motherhood during her training and the emotions that were brought up around finishing client work due to maternity leave were interesting. The practical dilemmas in juggling motherhood and training, studying and being pregnant were the narrative of this interview. The feelings of guilt around taking on client work whilst being pregnant and holding the secret was significant as was the conflict in leaving her baby with a child minder to do client work.

Themes	Line reference	Key words
Awareness of words	7 / 320 / 338	Words are our tools/burden
change	19 / 262 / 221	Gosh!/ I am more conscious..
Relationship with children	25 / 247 / 290 / 227 / 339 / 14 / 233	Closed off/ I asked them../she isn't huggy
Choosing to train as therapist	32	Interest in human aspect
Choosing to stand back	93	Stand back and let it unfold
challenges	112 / 192	Resistance to infant ob
Looking at own childhood	119	My own experience
Looking at experience of becoming a mum	123 / 89	Extremely difficult/gaps in my knowledge
Sense of judgement	138	Judging mother
boundaries	192 / 339	I want to...but I cant
insights	227 / 88	I don't have to.../ I can bring.
Maternal feelings	224	Permission to have them
Hope for future	239	Hope I am more open
reflection	240 / 98	I would think about it quite a bit/ becoming aware
Client work	256 / 264	No eye contact/mother transference

Hectic home life	280 / 285 / 297	High stress household
Diversity of peer group	301-305	Very different life experiences
Holding back	339	I'd love to...
Role of being a mother	2	I never thought really about it until I started this course
Role of being a therapist	345 / 350	Life long learning/way of living
Tears and emotion	308 / 221-228	Who's turn is it to cry this week? I don't have to be tough all the time

Table 9: Working on Themes – Participant #2

Comments and reflections:

I was aware of the interviewees almost reluctance to sign the consent form at the beginning of the interview. I felt that she had a keen interest in participating in the research but her body language at the beginning of the interview showed nervousness and discomfort. I noticed that laughter was used a lot when answering the questions and perhaps as a deflection from the narrative shared. She relaxed into the interview, I felt from line 115 onwards and I experienced her as emotional when she touched on her own experience of being parented but she didn't wish to elaborate on that. Interestingly, I found myself actually wanting to offer her back the script to see if she was ok with it before I proceeded with the research. I was in a peer research class the day after the interview and I was still mildly uncomfortable with the fact that I was holding onto a sense of her reluctance and possibly vulnerability around the content of the research. I wondered about my need to offer her some reassurance in some way? It may have a Bion-esque feel to it. I was definitely aware of my holding a sense of hope for her, possibly that training and working in psychotherapy may impact in a positive way on her relationships with her children. I felt like I was obliged to hold a hope, to have an answer, to have a research paper with evidence of a positive outcome for mothers who train as therapists and how it positively enhances relationships with children. I see my role of researcher on this topic as one of exploration. I didn't expect to feel a blur between my role as researcher and that of a therapist who contains, but that happened for me in this interview. I benefitted from the support of my MA Research Lecturer and peer discussion group on this issue. The regular meetings during the process of doing this research have been invaluable for sharing challenges along the way.

Themes	Line Reference	Key Words
Being a mum/minder/	1-2 / 6 / 223 / 322	I identify strongly/confident as a mother/there in the background
returning to study	18 / 50 / 142 / 65 / 288 / 295	Aware of the time I need to study/age profile/I needed to know it!/ horrendous anxiety
Listening ear/attunement	160 / 205 / 266 / 207	Iv always been attuned..
Exam trauma revisited	297 / 295	I froze and I didn't do it
Relationship with daughter	35-37 / 223 / 334 / 343	We do our study/we treat ourselves/pride/admiration/awe
Relationship with son	190 / 223 / 240	His world is the best, where is?/allowing him to make choices
Emotional awareness	65	Overwhelming at times
challenge	65 / 158 / 264	All this change that's meant to be happening!
Self Understanding	77 / 260 / 325	Understanding how I operate
Looking back at own childhood	87	Parenting in my house was different
Diversity of peer group/difference	93 / 122	Meeting hurdles at different times
tears	99	Tears along the way
Looking back / getting triggered	101 / 107 / 116	I wish I had known../I was triggered about what I did wrong
Commitments of colleagues	122 / 136	Difference of the experience
Anger at question?	136	I feel that is a bit unfair!
Good enough therapist	137	A long time to believe...
change	151 / 158 / 165 / 246 / 156	It's the reality of what I can and cannot do/ meant to

		happen?/ I'm much calmer/changes with son/not overly
Reflecting on change with reluctance?	168 / 349	...but I do have the same friends..
Noticing more	214	Throw away comments
Letting go	235	Inclined to letting them out..
Stepping back	223	Im less likely to react at a very high emotional level
Importance of words	246 / 258 / 349 / 136	They are the words I use now../ owning words/
Response to questions	349	I think the various questions have allowed me to reflect quite well
Self care	41 / 303	A lot of meditation
Mothers juggle schedules	126	How parents juggle the day
Love of training	148	I absolutely love it/ completely at ease
Moving forward	268 / 207	Still on the road/ what I am hearing is different

Table 10: Working on Themes Participant #3

Comments and reflections:

I had a sense that this client was thoroughly enjoying the training course and the skills training. She appeared very at ease in the interview and her speech was clear and measured. She really listened to the questions and I had a sense that wording was something she wanted to be clear about. Her struggle with returning to academic study was clearly described as she had experienced a panic attack as a young student and didn't sit the state exam and left school. Returning to academia after 30 years offered her many challenges and interestingly a parallel process with her 15 year old daughter who is currently studying for her first state exam. Interestingly, this interviewee expressed both a strong conscious awareness of change and a resistance to it. She recounted a poignant conversation with her 15 year old daughter who clearly expressed that she didn't want mam to change.

Master Themes emerging for analysis

- A. Focus on mother- children relating before training and the sense of change coming to the end of training.
- B. Focus on Understanding self in new way/ stepping back
- C. Focus on challenges met whilst training
- D. Focus on impact of potential change on both therapist and child, how is it?
- E. Focus on new awareness of “words”/ expressions/ meaning
- F. Focus on looking back at the past/ emotional aspects and struggles
- G. Focus on moving forward, doing it differently with awareness

With further re-reading of transcripts, it emerged that the following themes were viewed as representative of the responses of the participants in the study. The theme of mother-child relating was implicit in all of the narratives within the resultant themes.

- 1) Looking Back (**F**)- Aspects of interviews that show reflecting on the past (emotional)
- 2) Stepping Back (**B**)-New ways of relating based on reflecting ie, allowing time, letting it emerge, new awareness, increased understanding
- 3) Moving Forward (**G**)- What aspects of transcripts show insights for further awareness, changing and refining perspectives, growth.

Figure 1: Diagram to Show an Overview of Themes and How They Impact on Each Other.

