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MY EXPERIENCE AS A TRAINEE ON AN INTEGRATIVE TRAINING PROGRAMME

Adam Knowles

Abstract

This is a personal and critical reflection on my recent integrative training in psychotherapy. While the overall experience was enthralling and unnerving, I highlight two areas for further consideration while acknowledging the difficulties in so doing. First, the wish that a greater diversity of topics could be incorporated, particularly from non-Western therapeutic traditions. Second, that integrative training could be open to a broader range of trainees, many of whom are prevented primarily by the current costs. The latter problem propagates the first. Left unresolved, our best future therapists may be trained not integratively but in the monoculture of CBT and IAPT. Noting that the integrative mindset is clearer when contrasted with that of pluralism, I conclude with a reflection that this paper itself provides evidence of a successful training programme.

Keywords: Integrative training, Rogers, transpersonal, diversity, placement

I recently completed the taught components of the integrative MA in Psychotherapy and Counselling at Regent's University London. This training comprises three approaches in equal measure: psychodynamic, existential and humanistic/integrative. Here I reflect upon that training critically.

This was my first time in a group whose aim was to facilitate all participants' personal development, including my own. It was enthralling at times, unnerving at others. Three years spent learning the best ideas of the past hundred years in psychotherapy was worthwhile. My course covered this in appropriate depth within a limited time.

There are two things about my training that I want to highlight for further thought. I've reviewed other training providers locally and nationally and think these concerns not unique to Regent's course. I realise that that adding something to a course means leaving something else out because time and resources, personal and institutional, will remain limited. So, no solutions here, but, as in my work as a psychotherapist, I try to ask the right questions.

Non-Western approaches to what we call psychotherapy are overlooked

Shamanism, tarot, Kabbala, Buddhism, Tao, and yoga offer valuable insight into our work as therapists (Leung, 2011). They offer systematic insight into being human, yet seem to have been excluded from the programme more by default than intention. It would seem that one either trains with a school that prioritises a transpersonal approach, such as psychosynthesis, or the insights of such an approach are

barely detectable. There's discussion of linking right with left-brain in terms of the benefit of integrating intuitive and logical aspects of ourselves, but little of East meets West in terms of points of contact and divergence between European psychotherapy and older systems of well-being from elsewhere in the world.

Instructors generally taught transpersonal and transcultural approaches to gender and diversity as an interesting additional perspective rather than an essential underpinning thread. The training made diversity itself into an 'other', covered separately near the end of the term, disclosing its marginal status. I wonder what an integrative training might gain from consistent integration instead. Diversity is not for later, or for others.

Training as an integrative psychotherapist remains a luxury

I am white, European, middle-class (northern roots notwithstanding), cisgender and aged 25 - 40. In 2008, UKCP revealed that 98% of their members are White; in contrast, only 69% of Londoners are White (The Minster Centre, 2017). As professionals, this is a problem we need to address.

My training will cost me £50,000 and five years, excluding earnings lost due to being available only three days a week. Part of this time will be devoted to completing over 450 hours of unpaid placement work. If training as an integrative psychotherapist is only financially viable for people like me, the psychotherapeutic profession will continue to propagate the problem of limited diversity.

The Psychotherapy and Counselling Union (PCU) is currently campaigning for placement providers to pay trainee therapists (Psychotherapy and Counselling Union, 2017). While bringing its own problems, I think this requires urgent consideration. UKCP, under Martin Pollecoff, has also made laudable moves in this direction recently by offering students free memberships and bursaries (UK Council for Psychotherapy, 2017).

I'm lucky to have found a placement offering open-ended work in a pluralistic setting with a genuine interest in my development as a psychotherapist. From what my colleagues tell me, this is the exception rather than the rule. The quality of the placement has a profound effect on the overall training and yet is often left to chance and market forces.

Advanced training in integrative therapy is competing with an offer from the NHS to train High-Intensity Therapists (The Central London CBT Training Centre, 2014). There are no course fees, and the NHS currently pays new trainees £26,000 per annum plus London Weighting and guarantees employment for new graduates. Allow me to characterise the therapists produced by this process as the opposite of integrative. They pursue a single approach, a monoculture. Instructed to direct their clients, they coax PHQ-9 and GAD-7 measures upwards each session via specific, targeted CBT interventions. It is necessary work that helps a lot of people, but if it's the only option for therapists who wish to train without living in poverty, the impoverished approach of High Intensity CBT will remain the default option for clients.

Related to this, my training could have taken a clearer stance on the difference between the integrative approach and the pluralistic. I don't recall a single mention of the latter. For instance, it was Rogers's position that the core conditions are not only necessary but sufficient. His attempt was not to provide a bedrock on which to build other things but a distinct, comprehensive model characterised by what it leaves out (Patterson, 1990). Adding things back, whether psychoeducation, conceptual models or therapist expertise, is inconsistent with Rogers's model. The idea of doing so is an example of what happens when integration and pluralism are confused. Contradictory ideas cannot be integrated.

What I am unable to integrate into my practice can still be valid, but is best left to others. My experience in training has been that integrative too often means credulous when it should mean discerning. I consider myself both integrative and pluralistic. Being clearer about the difference has become essential.

In summary, I have not trained as an integrative therapist. Rather, I am a therapist trained to integrate. I am not a noun but a verb; a process, not a thing. My existential tutors would be proud. I take up what I find useful, leave to others what doesn't fit, and oppose that with which I disagree. In those terms, my training has, as I've hopefully demonstrated in this writing, been remarkably effective.

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